



Your 2020 Formulary

Effective January 1, 2020



For the most current list of covered medications or if you have questions:



Call the number on your member ID card.



Visit your plan's website on your member ID card to:

- Find a participating retail pharmacy by ZIP code.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.

Understanding your formulary

What is a formulary?

A formulary is a list of prescribed medications or other pharmacy care products, services or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

To create the list, OptumRx® is guided by the Pharmacy and Therapeutics Committee. This group of doctors, nurses, and pharmacists reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's website or call the number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or plan sponsor. This is how much you will pay when you fill a prescription.

When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or 1 of each year.

When a medication changes tiers, you may have to pay a different amount for that medication.

Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or similar to another prescription or over-the-counter (OTC) medication.

What if I don't agree with a decision about an excluded medication?

You or your authorized representative and your doctor can ask for a coverage request by calling the number on your member ID card.

About this formulary

Where differences between this formulary and your benefit plan exist, the benefit plan documents rule. This may not be a complete list of medications that are covered by your plan. Please review your benefit plan for full details.

Medication tips

What is the difference between brand-name and generic medications?

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent for a brand-name medication ends, the FDA can approve a generic version with the same active ingredients.

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic or lower-cost option could be right for you. Generic medications are usually your lowest-cost option.

What if I am taking a specialty medication?

Specialty medications are for rare or complex conditions and are usually higher-cost medications. Please note, not all specialty medications are listed in the formulary. Our specialty pharmacy can provide most of your specialty medications along with helpful programs and services. Call **1-855-427-4682** and have your prescriptions delivered right to your home or doctor's office.

Over-the-counter medications

An over-the-counter (OTC) medication may be the right treatment for some conditions. Talk to your doctor about OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

Reading your formulary

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

Tier information

Using lower tier or preferred medications can help you pay your lowest out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high-deductible plan, the tier cost levels will apply once you meet your deductible.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Maintenance Generics	Tier 1 drugs are generic maintenance drugs.
Tier 2	\$\$ Lower-cost generics and some brand name	Use Tier 2 drugs for the lowest out-of-pocket costs.
Tier 3	\$\$\$ Mid-range cost preferred brand name	Use Tier 3 drugs instead of Tier 2 to help reduce your out-of-pocket costs.
Tier 4	\$\$\$\$ Highest-cost non-preferred	Many Tier 4 drugs have lower-cost options in Tier 1, 2 or 3. Ask your doctor if they could work for you.

Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan decides how these medications may be covered.

PA **Prior Authorization** – Your doctor is required to give OptumRx more information to determine coverage.

QL **Quantity Limit** – Medication may be limited to a certain quantity.

SP **Specialty Medication** – Medication is designated as specialty.

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
Analgesics - Drugs for Pain					
7T GUMMY ES ORAL TABLET CHEWABLE	4		ARYMO ER ORAL TABLET EXTENDED RELEASE ABUSE-DETERRENT	4	PA; QL (3 EA per 1 day)
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (4 EA per 1 day)	ascomp-codeine oral capsule	2	
acetaminophen-codeine #2 oral tablet	2	QL (13 EA per 1 day)	BELBUCA BUCCAL FILM	3	PA; QL (2 EA per 1 day)
acetaminophen-codeine #3 oral tablet	2	QL (10 EA per 1 day)	BENZHYDROCODON E-ACETAMINOPHEN ORAL TABLET 4.08-325 MG	4	QL (9 EA per 1 day)
acetaminophen-codeine #4 oral tablet	2	QL (5 EA per 1 day)	BENZHYDROCODON E-ACETAMINOPHEN ORAL TABLET 6.12-325 MG	4	QL (6 EA per 1 day)
acetaminophen-codeine oral solution	2	QL (136 ML per 1 day)	BENZHYDROCODON E-ACETAMINOPHEN ORAL TABLET 8.16-325 MG	4	QL (4 EA per 1 day)
acetaminophen-codeine oral tablet 300-15 mg	2	QL (13 EA per 1 day)	BUPAP ORAL TABLET	4	
acetaminophen-codeine oral tablet 300-30 mg	2	QL (10 EA per 1 day)	BUPRENEX INJECTION SOLUTION	4	
acetaminophen-codeine oral tablet 300-60 mg	2	QL (5 EA per 1 day)	buprenorphine hcl injection solution	2	
ACTIQ BUCCAL LOZENGE ON A HANDLE	4	PA; QL (4 EA per 1 day)	buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr	2	PA; QL (0.15 EA per 1 day)
alfentanil hcl intravenous solution	2		BUPRENORPHINE TRANSDERMAL PATCH WEEKLY 7.5 MCG/HR	4	PA; QL (0.15 EA per 1 day)
ALLZITAL ORAL TABLET	4		BUTALBITAL-ACETAMINOPHEN ORAL CAPSULE	4	
APADAZ ORAL TABLET 4.08-325 MG	4	QL (9 EA per 1 day)	butalbital-acetaminophen oral tablet	2	
APADAZ ORAL TABLET 6.12-325 MG	4	QL (6 EA per 1 day)	butalbital-apap-caff-cod oral capsule	2	
APADAZ ORAL TABLET 8.16-325 MG	4	QL (4 EA per 1 day)			
apap-caff-dihydrocodeine oral capsule	2	QL (12 EA per 1 day)			

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
butalbital-apap-caffeine oral capsule	2		DURAGESIC-100 TRANSDERMAL PATCH 72 HOUR	4	PA; QL (1 EA per 1 day)
butalbital-apap-caffeine oral tablet	2		DURAGESIC-12 TRANSDERMAL PATCH 72 HOUR	4	PA; QL (0.5 EA per 1 day)
butalbital-asa-caff-codeine oral capsule	2		DURAGESIC-25 TRANSDERMAL PATCH 72 HOUR	4	PA; QL (0.5 EA per 1 day)
butalbital-aspirin-caffeine oral capsule	2		DURAGESIC-50 TRANSDERMAL PATCH 72 HOUR	4	PA; QL (0.5 EA per 1 day)
butalbital-aspirin-caffeine oral tablet	2		DURAGESIC-75 TRANSDERMAL PATCH 72 HOUR	4	PA; QL (1 EA per 1 day)
butorphanol tartrate injection solution	2		duramorph injection solution	2	
butorphanol tartrate nasal solution	2	QL (2.5 ML per 1 fill)	duraxin oral capsule	2	
BUTRANS TRANSDERMAL PATCH WEEKLY	4	PA; QL (0.15 EA per 1 day)	DVORAH ORAL TABLET	4	QL (12 EA per 1 day)
carisoprodol-aspirin-codeine oral tablet	2		endocet oral tablet 10-325 mg	2	QL (3 EA per 1 day)
codeine sulfate oral tablet 30 mg	2	QL (10 EA per 1 day)	endocet oral tablet 2.5-325 mg	2	QL (12 EA per 1 day)
codeine sulfate oral tablet 60 mg	2	QL (5 EA per 1 day)	endocet oral tablet 5-325 mg	2	QL (6 EA per 1 day)
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)	endocet oral tablet 7.5-325 mg	2	QL (4 EA per 1 day)
DEMEROL INJECTION SOLUTION	4		ESGIC ORAL CAPSULE	4	
DILAUDID INJECTION SOLUTION	4		ESGIC ORAL TABLET	4	
DILAUDID ORAL LIQUID	4	QL (12.25 ML per 1 day)	fentanyl citrate buccal lozenge on a handle	2	PA; QL (4 EA per 1 day)
DILAUDID ORAL TABLET 2 MG	4	QL (6 EA per 1 day)	FENTANYL CITRATE BUCCAL TABLET	4	PA; QL (4 EA per 1 day)
DILAUDID ORAL TABLET 4 MG	4	QL (3 EA per 1 day)	FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE	4	
DILAUDID ORAL TABLET 8 MG	4	QL (1 EA per 1 day)	FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION	4	
DOLOPHINE ORAL TABLET	4	PA			
DSUVIA SUBLINGUAL TABLET SUBLINGUAL	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 5-0.9 MCG/ML-%, 500-0.9 MCG/50ML-%, 550-0.9 MCG/55ML-%	4		hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg	2	QL (6 EA per 1 day)
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	2	PA; QL (1 EA per 1 day)	hydrocodone-ibuprofen oral tablet 10-200 mg	2	QL (4 EA per 1 day)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	2	PA; QL (0.5 EA per 1 day)	hydrocodone-ibuprofen oral tablet 5-200 mg	2	QL (9 EA per 1 day)
FENTORA Buccal TABLET	4	PA; QL (4 EA per 1 day)	hydromorphone hcl er oral tablet er 24 hour abuse-deterrant	2	PA; QL (2 EA per 1 day)
FIORICET ORAL CAPSULE	4		HYDROMORPHONE HCL INJECTION SOLUTION 0.2 MG/ML	4	
FIORICET/CODEINE ORAL CAPSULE	4		hydromorphone hcl injection solution 2 mg/ml, 4 mg/ml	2	
FIORINAL ORAL CAPSULE	4		hydromorphone hcl oral liquid	2	QL (12.25 ML per 1 day)
FIORINAL/CODEINE #3 ORAL CAPSULE	4		hydromorphone hcl oral tablet 2 mg	2	QL (6 EA per 1 day)
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	2	QL (73.5 ML per 1 day)	hydromorphone hcl oral tablet 4 mg	2	QL (3 EA per 1 day)
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	2	QL (98 ML per 1 day)	hydromorphone hcl oral tablet 8 mg	2	QL (1 EA per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	2	QL (4 EA per 1 day)	hydromorphone hcl pf injection solution	2	
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	2	QL (9 EA per 1 day)	hydromorphone hcl rectal suppository	2	QL (4 EA per 1 day)
			HYDROMORPHONE HCL SOLUTION 1 MG/ML INJECTION	4	
			hydromorphone hcl solution 1 mg/ml injection	2	
			HYDROMORPHONE HCL-NACL INJECTION SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION	4		MEDI-DERM-RX EXTERNAL CREAM	4	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		MEDROX-RX EXTERNAL OINTMENT	4	
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	3	PA; QL (1 EA per 1 day)	meperidine hcl injection solution	2	
INFUMORPH 200 INJECTION SOLUTION	4		meperidine hcl oral solution	2	QL (49 ML per 1 day)
INFUMORPH 500 INJECTION SOLUTION	4		meperidine hcl oral tablet 100 mg	2	QL (4 EA per 1 day)
IONSYS TRANSDERMAL PATCH	4		meperidine hcl oral tablet 50 mg	2	QL (9 EA per 1 day)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (2 EA per 1 day)	methadone hcl injection solution	2	
LAZANDA NASAL SOLUTION 100 MCG/ACT, 400 MCG/ACT	4	PA; QL (1 EA per 1 day)	methadone hcl intensol oral concentrate	2	
LAZANDA NASAL SOLUTION 300 MCG/ACT	4	QL (1 EA per 1 day)	methadone hcl oral concentrate	2	
levorphanol tartrate oral tablet 2 mg	2	QL (3 EA per 1 day)	methadone hcl oral solution	2	
levorphanol tartrate oral tablet 3 mg	2		methadone hcl oral tablet	2	PA
loracet hd oral tablet	2	QL (4 EA per 1 day)	methadone hcl oral tablet soluble	2	
loracet oral tablet	2	QL (9 EA per 1 day)	methadose oral concentrate 10 mg/ml	2	
loracet plus oral tablet	2	QL (6 EA per 1 day)	methadose oral tablet soluble	2	
LORTAB ORAL ELIXIR	4	QL (73.5 ML per 1 day)	methadose sugar-free oral concentrate	2	
			mitigo injection solution	2	
			MORPHABOND ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	4	PA; QL (2 EA per 1 day)
			morphine sulfate (concentrate) oral solution 100 mg/5ml	2	QL (2.4 ML per 1 day)
			morphine sulfate (concentrate) oral solution 20 mg/ml	2	QL (2.4 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
morphine sulfate (pf) injection solution	2		morphine sulfate rectal suppository 20 mg	2	QL (2 EA per 1 day)
morphine sulfate (pf) intravenous solution	2		morphine sulfate rectal suppository 30 mg	2	QL (1 EA per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 120 mg	2	PA; QL (2 EA per 1 day)	morphine sulfate rectal suppository 5 mg	2	QL (9 EA per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	2	PA; QL (1 EA per 1 day)	MORPHINE SULFATE SOLUTION 1 MG/ML INTRAVENOUS	4	
morphine sulfate er oral capsule extended release 24 hour	2	PA; QL (2 EA per 1 day)	morphine sulfate solution 1 mg/ml intravenous	2	
morphine sulfate er oral tablet extended release	2	PA; QL (3 EA per 1 day)	MORPHINE SULFATE-NACL INJECTION SOLUTION PREFILLED SYRINGE	4	
MORPHINE SULFATE IN DEXTROSE INTRAVENOUS SOLUTION	4		MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION	4	
MORPHINE SULFATE INJECTION SOLUTION	4		MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
morphine sulfate intramuscular device	2		MS CONTIN ORAL TABLET EXTENDED RELEASE	4	PA; QL (3 EA per 1 day)
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML	4		nalbuphine hcl injection solution	2	
morphine sulfate intravenous solution 25 mg/ml, 50 mg/ml	2		NALOCET ORAL TABLET	4	QL (13 EA per 1 day)
morphine sulfate oral solution 10 mg/5ml	2	QL (24.5 ML per 1 day)	NORCO ORAL TABLET 10-325 MG	4	QL (4 EA per 1 day)
morphine sulfate oral solution 20 mg/5ml	2	QL (12.25 ML per 1 day)	NORCO ORAL TABLET 5-325 MG	4	QL (9 EA per 1 day)
morphine sulfate oral tablet 15 mg	2	QL (3 EA per 1 day)	NORCO ORAL TABLET 7.5-325 MG	4	QL (6 EA per 1 day)
morphine sulfate oral tablet 30 mg	2	QL (1 EA per 1 day)	NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	4	PA; QL (2 EA per 1 day)
morphine sulfate rectal suppository 10 mg	2	QL (4 EA per 1 day)	NUCYNTA ORAL TABLET 100 MG, 75 MG	4	QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NUCYNTA ORAL TABLET 50 MG	4	QL (2 EA per 1 day)	oxycodone-aspirin oral tablet	2	QL (6 EA per 1 day)
OPANA ORAL TABLET 10 MG	4	QL (1 EA per 1 day)	oxycodone-ibuprofen oral tablet	2	QL (6 EA per 1 day)
OPANA ORAL TABLET 5 MG	4	QL (3 EA per 1 day)	OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	3	PA; QL (4 EA per 1 day)
OXAYDO ORAL TABLET ABUSE-DETERRENT 5 MG	4	QL (6 EA per 1 day)	oxymorphone hcl er oral tablet extended release 12 hour	2	PA; QL (4 EA per 1 day)
OXAYDO ORAL TABLET ABUSE-DETERRENT 7.5 MG	4	QL (4 EA per 1 day)	oxymorphone hcl oral tablet 10 mg	2	QL (1 EA per 1 day)
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	4	PA; QL (4 EA per 1 day)	oxymorphone hcl oral tablet 5 mg	2	QL (3 EA per 1 day)
oxycodone hcl oral capsule	2	QL (6 EA per 1 day)	pentazocine-naloxone hcl oral tablet	2	QL (5 EA per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml	2	QL (1.6 ML per 1 day)	PERCOSET ORAL TABLET 10-325 MG	4	QL (3 EA per 1 day)
oxycodone hcl oral solution	2	QL (32.6 ML per 1 day)	PERCOSET ORAL TABLET 2.5-325 MG	4	QL (12 EA per 1 day)
oxycodone hcl oral tablet 10 mg	2	QL (3 EA per 1 day)	PERCOSET ORAL TABLET 5-325 MG	4	QL (6 EA per 1 day)
oxycodone hcl oral tablet 15 mg	2	QL (2 EA per 1 day)	PERCOSET ORAL TABLET 7.5-325 MG	4	QL (4 EA per 1 day)
oxycodone hcl oral tablet 20 mg, 30 mg	2	QL (1 EA per 1 day)	PRIMLEV ORAL TABLET 10-300 MG	4	QL (3 EA per 1 day)
oxycodone hcl oral tablet 5 mg	2	QL (6 EA per 1 day)	PRIMLEV ORAL TABLET 5-300 MG	4	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	2	QL (3 EA per 1 day)	PRIMLEV ORAL TABLET 7.5-300 MG	4	QL (4 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg	2	QL (12 EA per 1 day)	PROBUPHINE IMPLANT KIT SUBCUTANEOUS IMPLANT	4	
oxycodone-acetaminophen oral tablet 5-325 mg	2	QL (6 EA per 1 day)	remifentanil hcl intravenous solution reconstituted	2	
oxycodone-acetaminophen oral tablet 7.5-325 mg	2	QL (4 EA per 1 day)	ROXICODONE ORAL TABLET 15 MG	4	QL (2 EA per 1 day)
			ROXICODONE ORAL TABLET 30 MG	4	QL (1 EA per 1 day)
			ROXICODONE ORAL TABLET 5 MG	4	QL (6 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SUBSYS SUBLINGUAL LIQUID	4	PA; QL (16 EA per 1 day)	VANATOL S ORAL SOLUTION	4	
SYNAPRYN FUSEPAQ ORAL SUSPENSION RECONSTITUTED	4		vicodin es oral tablet	2	QL (6 EA per 1 day)
tencon oral tablet	2		vicodin hp oral tablet	2	QL (4 EA per 1 day)
tramadol hcl er (biphasic) oral tablet extended release 24 hour	2	QL (1 EA per 1 day)	XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	4	PA; QL (4 EA per 1 day)
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	4	PA; QL (1 EA per 1 day)	ZEBUTAL ORAL CAPSULE	4	
tramadol hcl er oral capsule extended release 24 hour 150 mg	2	PA; QL (1 EA per 1 day)	ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG	4	PA; QL (2 EA per 1 day)
tramadol hcl er oral tablet extended release 24 hour	2	QL (1 EA per 1 day)	ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 50 MG	4	PA; QL (4 EA per 1 day)
tramadol hcl oral tablet	2	QL (8 EA per 1 day)	Analgesics - Drugs for Pain and Inflammation		
tramadol-acetaminophen oral tablet	2	QL (8 EA per 1 day)	ACTIVE INJECTION KET-L INJECTION KIT	4	
TREZIX ORAL CAPSULE	4	QL (12 EA per 1 day)	ACTIVE INJECTION KETMARC-L INJECTION KIT	4	
TYLENOL WITH CODEINE #3 ORAL TABLET	4	QL (10 EA per 1 day)	ACTIVE-KETOPROFEN EXTERNAL CREAM	4	
TYLENOL WITH CODEINE #4 ORAL TABLET	4	QL (5 EA per 1 day)	ACTIVE-PREP KIT I EXTERNAL CREAM	4	
ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED	4		ACTIVE-PREP KIT II EXTERNAL CREAM	4	
ULTRACET ORAL TABLET	4	QL (8 EA per 1 day)	ACTIVE-PREP KIT III EXTERNAL CREAM	4	
ULTRAM ORAL TABLET	4	QL (8 EA per 1 day)	AIF #2 DRUG PREPARATION KIT EXTERNAL CREAM	4	
VANATOL LQ ORAL SOLUTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
AIF #3 DRUG PREPARATION KIT EXTERNAL CREAM	4		diclofenac sodium transdermal solution	2	PA
ARTHROTEC ORAL TABLET DELAYED RELEASE	4		diclofenac-misoprostol oral tablet delayed release	2	
CALDOLOR INTRAVENOUS SOLUTION	4		DICLOFONO TRANSDERMAL GEL	4	
CAMBIA ORAL PACKET	4		DICLOPR EXTERNAL KIT	4	
CELEBREX ORAL CAPSULE	4	QL (2 EA per 1 day)	DICLOVIX COMBINATION KIT	4	
celecoxib oral capsule	2	QL (2 EA per 1 day)	diflunisal oral tablet	2	
choline-mag trisalicylate oral liquid	2		DUAL COMPLEX FORMULA 1 KIT EXTERNAL CREAM	4	
DAYPRO ORAL TABLET	4		DUEXIS ORAL TABLET	4	PA; QL (3 EA per 1 day)
DERMACINRX ANALGESIC COMBOPAK COMBINATION KIT	4		EC-NAPROSYN ORAL TABLET DELAYED RELEASE	4	
DFS DR/MS/MENTH/CAP PAK COMBINATION KIT	4		ec-naproxen oral tablet delayed release	2	
DFS/MS/MENTH/CAP PAK COMBINATION KIT	4		ENOVARX-DICLOFENAC SODIUM TRANSDERMAL CREAM	4	
DICLOFENAC EPOLAMINE TRANSDERMAL PATCH	4	QL (1 EA per 30 days)	ENOVARX-IBUPROFEN EXTERNAL CREAM	4	
diclofenac potassium oral tablet	2		ENOVARX-NAPROXEN EXTERNAL CREAM	4	
diclofenac sodium er oral tablet extended release 24 hour	2		etodolac er oral tablet extended release 24 hour	2	
diclofenac sodium oral tablet delayed release	2		etodolac oral capsule	2	
diclofenac sodium transdermal gel 1 %	2	QL (33.33 GM per 1 day)	etodolac oral tablet	2	
			FBL KIT EXTERNAL CREAM	4	
			FELDENE ORAL CAPSULE	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
fenoprofen calcium oral capsule	2		ketoprofen oral capsule	2	
fenoprofen calcium oral tablet	2		KETOROCaine-L INJECTION KIT	4	
fenortho oral capsule	2		KETOROCaine-LM INJECTION KIT	4	
FLECTOR TRANSDERMAL PATCH	4	QL (1 EA per 30 days)	KETOROLAC TROMETHAMINE EXTERNAL GEL	4	
flurbiprofen oral tablet	2		ketorolac tromethamine injection solution	2	
FROTEK EXTERNAL CREAM	4		ketorolac tromethamine oral tablet	2	QL (5 EA per 30 days)
ibu oral tablet	2		KETOROLAC TROMETHAMINE SOLUTION 60 MG/2ML INTRAMUSCULAR	4	
ibuprofen lysine intravenous solution	2		ketorolac tromethamine solution 60 mg/2ml intramuscular	2	
ibuprofen oral suspension	2		KETOROLAC-BUPIV-KETAMINE INJECTION SOLUTION PREFILLED SYRINGE	4	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	2		KETOROLAC-ROPIV-KETAMINE INJECTION SOLUTION PREFILLED SYRINGE	4	
IC 400 ORAL KIT	4		LIDOPROFEN EXTERNAL CREAM	4	
IC 800 ORAL KIT	4		LODINE ORAL TABLET	4	
INDOCIN ORAL SUSPENSION	4		meclofenamate sodium oral capsule	2	
INDOCIN RECTAL SUPPOSITORY	4		mefenamic acid oral capsule	2	
indomethacin er oral capsule extended release	2		meloxicam oral tablet	2	
indomethacin oral capsule	2		MOBIC ORAL TABLET	4	
indomethacin sodium intravenous solution reconstituted	2		nabumetone oral tablet	2	
K.B.G.L IN TERODERM EXTERNAL CREAM	4		NALFON ORAL CAPSULE	4	
KETOPHENe RAPIDPAQ EXTERNAL CREAM	4				
ketoprofen er oral capsule extended release 24 hour	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NALFON ORAL TABLET	4		oxaprozin oral tablet	2	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR	4		PENNSAID TRANSDERMAL SOLUTION	4	PA
NAPRO EXTERNAL CREAM	4		piroxicam oral capsule	2	
NAPROSYN ORAL SUSPENSION	4		PRASTERA ORAL KIT	4	
NAPROXEN COMFORT PAC COMBINATION KIT	4		QMIIZ ODT ORAL TABLET DISPERSIBLE	4	
naproxen dr oral tablet delayed release	2		READYSHARP ANESTH + KETOROLAC INJECTION KIT	4	
naproxen oral suspension	2		READYSHARP KETOROLAC INJECTION KIT	4	
naproxen oral tablet	2		RELAFEN DS ORAL TABLET	4	
naproxen sodium er oral tablet extended release 24 hour	2		REXAPHENAC TRANSDERMAL CREAM	4	
naproxen sodium oral tablet 275 mg, 550 mg	2		salsalate oral tablet	2	
NEOPROFEN INTRAVENOUS SOLUTION	4		SPRIX NASAL SOLUTION	4	PA; QL (5 EA per 30 days)
NP #2 DRUG PREPARATION KIT EXTERNAL CREAM	4		sulindac oral tablet	2	
NUDROXIPAK DSDR-50 COMBINATION KIT	4		TIVORBEX ORAL CAPSULE	4	
NUDROXIPAK DSDR-75 COMBINATION KIT	4		tolmetin sodium oral capsule	2	
NUDROXIPAK E-400 COMBINATION KIT	4		tolmetin sodium oral tablet	2	
NUDROXIPAK I-800 COMBINATION KIT	4		TORONOVA II SUIK COMBINATION KIT	4	
NUDROXIPAK M-15 COMBINATION KIT	4		TORONOVA SUIK COMBINATION KIT	4	
NUDROXIPAK N-500 COMBINATION KIT	4		TRIPLE COMPLEX FORMULA 3 KIT EXTERNAL CREAM	4	
ORMECA COMBINATION KIT	4		VAROPHEN EXTERNAL KIT	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
VIMOVO ORAL TABLET DELAYED RELEASE	4	PA; QL (2 EA per 1 day)	bd pudendal/local tray/1% lido injection kit	2	
VIVLODEX ORAL CAPSULE	4		BUFFERED LIDOCAINE INJECTION SOLUTION PREFILLED SYRINGE	4	
VOLTAREN TRANSDERMAL GEL	4	QL (33.33 GM per 1 day)	bupivacaine fisiopharma injection solution	2	
VOPAC GB EXTERNAL CREAM	4		bupivacaine hcl (pf) injection solution	2	
VOPAC KT EXTERNAL CREAM	4		bupivacaine hcl injection solution 0.25 %, 0.5 %	2	
VP FC KIT EXTERNAL CREAM	4		BUPIVACAINE HCL INJECTION SOLUTION 312.5 MG/10ML	4	
VP GKL KIT EXTERNAL CREAM	4		BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	4	
ZIPSOR ORAL CAPSULE	4		BUPIVACAINE HCL-NACL INJECTION SOLUTION	4	
ZORVOLEX ORAL CAPSULE	4		BUPIVACAINE HCL-NACL INJECTION SOLUTION PREFILLED SYRINGE	4	
Anesthetics			BUPIVACAINE IN DEXTROSE SOLUTION PREFILLED SYRINGE	4	
1ST MEDX-PATCH/LIDOCAINE EXTERNAL PATCH 4-0.0375-5-20 %	4		bupivacaine-epinephrine (pf) injection solution	2	
7T LIDO EXTERNAL GEL	3		bupivacaine-epinephrine injection solution	2	
ACCUCAINE COMBINATION KIT	4		CADIRAMD EXTERNAL KIT	4	
ACTIVE INJECTION LM-2 INJECTION KIT	4				
AGONEAZE EXTERNAL KIT	4				
ANODYNE LPT EXTERNAL KIT	4				
APRIZIO PAK EXTERNAL KIT	4				
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE	4				
ASTERO EXTERNAL GEL	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CARBOCAINE INJECTION SOLUTION	4		GEBAUERS PAIN EASE EXTERNAL AEROSOL	4	
CARBOCAINE PRESERVATIVE-FREE INJECTION SOLUTION	4		GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	4	
chloroprocaine hcl (pf) injection solution	2		GEN7T EXTERNAL LOTION	4	
CITANEST FORTE DENTAL INJECTION SOLUTION	4		GEN7T EXTERNAL PATCH	4	
CITANEST PLAIN DENTAL INJECTION SOLUTION	4		GEN7T PLUS EXTERNAL LOTION	4	
cocaine hcl external solution 4 %	2		GEN7T PLUS EXTERNAL PATCH	4	
COCAINE HCL NASAL SOLUTION	4		glydo external gel 2 %	2	
D-CARE 100X INJECTION KIT	4		GOPRELTO NASAL SOLUTION	4	
DERMACINRX EMPRICAINE EXTERNAL KIT	4		L.E.T. EXTERNAL GEL	4	
DERMACINRX PRIZOPAK EXTERNAL KIT	4		LDO PLUS EXTERNAL GEL	4	
DURASAFE SPINAL/EPIDURAL TRAY INJECTION KIT	4		LETS KIT	4	
EHA EXTERNAL LOTION	4		LEVATIO EXTERNAL PATCH	4	
ENOVARX-LIDOCAINE HCL EXTERNAL CREAM	4		LIDO BDK EXTERNAL KIT	4	
ethyl chloride external aerosol	2		lidocaine external ointment	2	
EXPAREL INJECTION SUSPENSION	4		lidocaine external patch	2	
FLEXIN EXTERNAL PATCH	4		lidocaine hcl (cardiac) intravenous solution prefilled syringe	2	
			lidocaine hcl (cardiac) pf intravenous solution	2	
			lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	2	
			lidocaine hcl (pf) injection solution	2	
			lidocaine hcl external cream 3 %	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	4		LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE	4	
lidocaine hcl external lotion	2		LIDOCAINE-TETRACAIN EXTERNAL CREAM	4	
lidocaine hcl external solution	2		LIDODERM EXTERNAL PATCH	4	
lidocaine hcl injection solution	2		LIDO-EPINEPHRINE-TETRACAIN EXTERNAL SOLUTION	4	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	4		LIDOPAC EXTERNAL KIT	4	
lidocaine hcl urethral/mucosal external gel	2		lidopin external cream 3 %	2	
LIDOCAINE HCL-SODIUM CHLORIDE INJECTION SOLUTION	4		LIDOPIN EXTERNAL CREAM 3.25 %	4	
LIDOCAINE HCL-SODIUM CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE	4		LIDOPRIL EXTERNAL KIT	4	
LIDOCAINE IN D5W INTRAVENOUS SOLUTION 3-5 MG/ML-%	4		LIDOPRIL XR EXTERNAL KIT	4	
lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%	2		LIDO-PRILO CAINE PACK EXTERNAL KIT	4	
LIDOCAINE IN DEXTROSE SOLUTION	4		LIDOPURE PATCH EXTERNAL KIT	4	
lidocaine-epinephrine injection solution	2		LIDORX EXTERNAL GEL	4	
lidocaine-prilocaine external cream	2		LIDO-SORB EXTERNAL LOTION	4	
lidocaine-prilocaine external kit	2		LIDOSTREAM EXTERNAL KIT	4	
			LIDOTHOL EXTERNAL GEL	4	
			LIDOTHOL EXTERNAL PATCH	4	
			LIDOTRAL EXTERNAL CREAM	4	
			LIDOZION EXTERNAL LOTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LIDTOPIC MAX EXTERNAL CREAM	4		P-CARE 100MX INJECTION KIT	4	
LIVIXIL PAK EXTERNAL KIT	4		P-CARE M INJECTION KIT	4	
LMR PLUS EXTERNAL KIT	4		P-CARE MG COMBINATION KIT	4	
MARCAINE INJECTION SOLUTION	4		P-CARE X INJECTION KIT	4	
MARCAINE PRESERVATIVE FREE INJECTION SOLUTION	4		PLIAGLIS EXTERNAL CREAM	4	
MARCAINE/EPINEPHRINE INJECTION SOLUTION	4		POINT OF CARE LM-2.2 INJECTION KIT	4	
MARCAINE/EPINEPHRINE PF INJECTION SOLUTION	4		POINT OF CARE LM-2.5 INJECTION KIT	4	
marlido injection kit	2		polocaine injection solution	2	
MARLIDO-25 INJECTION KIT	4		polocaine-mpf injection solution	2	
MARVONA SUIK COMBINATION KIT	4		premium lidocaine external ointment	2	
MEDI-DERM/L-RX EXTERNAL CREAM	4		PREMIUM SCAR EXTERNAL PATCH	4	
MEDI-PATCH RX EXTERNAL PATCH	4		PREPIV SUPPLY COMBINATION KIT	4	
NAROPIN INJECTION SOLUTION	4		PRIOLID EXTERNAL KIT	4	
NESACAINE INJECTION SOLUTION	4		PRILOVIX EXTERNAL KIT	4	
NESACAINE-MPF INJECTION SOLUTION	4		PRILOVIX LITE EXTERNAL KIT	4	
NUVAKAAN EXTERNAL KIT	4		PRILOVIX PLUS EXTERNAL KIT	4	
ORABLOC INJECTION SOLUTION CARTRIDGE	4		prilovix ultralite external kit	2	
PAINGO KFT EXTERNAL KIT	4		prilovix ultralite plus external kit	2	
			PRILOXX LP EXTERNAL KIT	4	
			PRIZOTRAL EXTERNAL KIT	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
READYSHARP LIDOCAINE INJECTION KIT	4		sensorcaine-mpf/epinephrine injection solution 0.25% -1:200000, 0.5% -1:200000	2	
READYSHARP-A INJECTION KIT	4		SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.75-1:200000 %	4	
RECK SOLUTION PREFILLED SYRINGE	4		SOOTHEE EXTERNAL PATCH	4	
RELADOR PAK EXTERNAL KIT	4		SX1 MEDICATED POST-OPERATIVE EXTERNAL KIT	4	
RELADOR PAK PLUS EXTERNAL KIT	4		SYNERA EXTERNAL PATCH	4	
RENOVO EXTERNAL PATCH	4		SYNVEXIA TC EXTERNAL CREAM	4	
ropivacaine hcl injection solution 10 mg/ml, 2 mg/ml, 5 mg/ml, 7.5 mg/ml	2		tetracaine hcl injection solution	2	
ROPIVACAINE HCL INJECTION SOLUTION 33.4 MG/ML	4		VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	4	
ROPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	4		VEXATROL EXTERNAL KIT	4	
ROPIVACAINE HCL-NACL INJECTION SOLUTION	4		xylocaine dental injection solution	2	
ROPIVACAINE HCL-NACL INJECTION SOLUTION PREFILLED SYRINGE	4		XYLOCAINE INJECTION SOLUTION	4	
ROPIV-CLONIDINE-KETOROLAC SOLUTION PREFILLED SYRINGE	4		XYLOCAINE/EPINEPHRINE INJECTION SOLUTION	4	
sensorcaine injection solution	2		XYLOCAINE-MPF INJECTION SOLUTION	4	
sensorcaine/epinephrine injection solution	2		XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	4	
sensorcaine-mpf injection solution	2		ZERUVIA EXTERNAL PATCH	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ZTLIDO EXTERNAL PATCH	4	PA	bupropion hcl er (smoking det) oral tablet extended release 12 hour	2	QL (180 EA per 365 days)
Anti-Addiction / Substance Abuse Treatment Agents			CHANTIX CONTINUING MONTH PAK ORAL TABLET	4	QL (180 EA per 365 days)
acamprosate calcium oral tablet delayed release	2		CHANTIX ORAL TABLET	4	QL (180 EA per 365 days)
ANTABUSE ORAL TABLET	4		CHANTIX STARTING MONTH PAK ORAL TABLET	4	QL (180 EA per 365 days)
BUNAVAIL BUCCAL FILM 2.1-0.3 MG	4	QL (6 EA per 1 day)	disulfiram oral tablet	2	
BUNAVAIL BUCCAL FILM 4.2-0.7 MG	4	QL (3 EA per 1 day)	EVZIO INJECTION SOLUTION AUTO-INJECTOR	4	
BUNAVAIL BUCCAL FILM 6.3-1 MG	4	QL (2 EA per 1 day)	LUCEMYRA ORAL TABLET	4	QL (16 EA per 1 day)
buprenorphine hcl sublingual tablet sublingual 2 mg	2	QL (12 EA per 1 day)	naloxone hcl injection solution	2	
buprenorphine hcl sublingual tablet sublingual 8 mg	2	QL (3 EA per 1 day)	naloxone hcl injection solution cartridge	2	
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	2	QL (2 EA per 1 day)	naloxone hcl injection solution prefilled syringe	2	
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	2	QL (12 EA per 1 day)	naltrexone hcl oral tablet	2	
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	2	QL (6 EA per 1 day)	NALTREXONE SUBCUTANEOUS IMPLANT	4	
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	2	QL (3 EA per 1 day)	NARCAN NASAL LIQUID	3	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	2	QL (12 EA per 1 day)	NICOTROL INHALATION INHALER	4	QL (180 EA per 365 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	2	QL (3 EA per 1 day)	NICOTROL NS NASAL SOLUTION	4	QL (180 ML per 365 days)
			SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SUBOXONE SUBLINGUAL FILM 12-3 MG	4	QL (2 EA per 1 day)	amoxicillin oral suspension reconstituted	2	
SUBOXONE SUBLINGUAL FILM 2-0.5 MG	4	QL (12 EA per 1 day)	amoxicillin oral tablet	2	
SUBOXONE SUBLINGUAL FILM 4-1 MG	4	QL (6 EA per 1 day)	amoxicillin oral tablet chewable	2	
SUBOXONE SUBLINGUAL FILM 8-2 MG	4	QL (3 EA per 1 day)	amoxicillin-potassium clavulanate er oral tablet extended release 12 hour	2	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	4		amoxicillin-potassium clavulanate oral suspension reconstituted	2	
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 5.7-1.4 MG	3	QL (3 EA per 1 day)	amoxicillin-potassium clavulanate oral tablet	2	
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG	3	QL (12 EA per 1 day)	amoxicillin-potassium clavulanate oral tablet chewable	2	
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	3	QL (1 EA per 1 day)	ampicillin oral capsule	2	
ZUBSOLV SUBLINGUAL TABLET 2.9-0.71 MG	3	QL (6 EA per 1 day)	ampicillin sodium injection solution reconstituted	2	
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	3	QL (2 EA per 1 day)	ampicillin sodium intravenous solution reconstituted	2	
Antibacterials			ampicillin-sulbactam sodium injection solution reconstituted	2	
ACTICLATE ORAL TABLET	4		ampicillin-sulbactam sodium intravenous solution reconstituted	2	
AEMCOLO ORAL TABLET DELAYED RELEASE	4	PA	ARIKAYCE INHALATION SUSPENSION	4	
ALTABAX EXTERNAL OINTMENT	4		AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	4	
amikacin sulfate injection solution	2		AUGMENTIN ORAL SUSPENSION RECONSTITUTED	4	
amoxicillin oral capsule	2		AUGMENTIN ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
AVELOX INTRAVENOUS SOLUTION	4		benzalkonium chloride external solution	2	
AVIDOXY DK COMBINATION KIT	4		BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	4	
avidoxy oral tablet	2		BICILLIN C-R INTRAMUSCULAR SUSPENSION	4	
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	4		BICILLIN L-A INTRAMUSCULAR SUSPENSION	4	
AZACTAM INJECTION SOLUTION RECONSTITUTED	4		cefaclor er oral tablet extended release 12 hour	2	
azithromycin intravenous solution reconstituted	2		cefaclor oral capsule	2	
azithromycin oral packet	2		cefaclor oral suspension reconstituted	2	
azithromycin oral suspension reconstituted	2		cefadroxil oral capsule	2	
azithromycin oral tablet	2		cefadroxil oral suspension reconstituted	2	
aztreonam injection solution reconstituted	2		cefadroxil oral tablet	2	
baciim intramuscular solution reconstituted	2		CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
bacitracin intramuscular solution reconstituted	2		cefazolin sodium injection solution reconstituted	2	
BACTOCILL IN DEXTROSE INTRAVENOUS SOLUTION 1 GM/50ML, 2 GM/50ML	4		CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
BACTRIM DS ORAL TABLET	4		cefazolin sodium intravenous solution reconstituted	2	
BACTRIM ORAL TABLET	4		cefazolin sodium-dextrose intravenous solution	2	
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	4		cefazolin sodium-dextrose intravenous solution reconstituted	2	
BAXDELA ORAL TABLET	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
cefdinir oral capsule	2		cefpodoxime proxetil oral tablet	2	
cefdinir oral suspension reconstituted	2		cefprozil oral suspension reconstituted	2	
cefditoren pivoxil oral tablet	2		cefprozil oral tablet	2	
cefepime hcl injection solution reconstituted	2		ceftazidime and dextrose intravenous solution reconstituted	2	
cefepime hcl intravenous solution	2		ceftazidime injection solution reconstituted	2	
cefepime-dextrose intravenous solution reconstituted	2		ceftriaxone sodium in dextrose intravenous solution	2	
cefixime oral capsule	2		ceftriaxone sodium injection solution reconstituted	2	
cefixime oral suspension reconstituted	2		ceftriaxone sodium intravenous solution reconstituted	2	
CEFOTAN INJECTION SOLUTION RECONSTITUTED	4		ceftriaxone sodium-dextrose intravenous solution reconstituted	2	
cefotaxime sodium injection solution reconstituted	2		cefuroxime axetil oral tablet	2	
cefotetan disodium injection solution reconstituted	2		cefuroxime sodium injection solution reconstituted	2	
cefotetan disodium-dextrose intravenous solution reconstituted	2		cefuroxime sodium intravenous solution reconstituted	2	
cefoxitin sodium injection solution reconstituted	2		CENTANY AT EXTERNAL KIT	4	
cefoxitin sodium intravenous solution reconstituted	2		CENTANY EXTERNAL OINTMENT	4	
CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED	4		cephalexin oral capsule	2	
cefpodoxime proxetil oral suspension reconstituted	2		cephalexin oral suspension reconstituted	2	
			cephalexin oral tablet	2	
			chloramphenicol sod succinate intravenous solution reconstituted	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CIPRO ORAL SUSPENSION RECONSTITUTED	4		clindamycin phosphate in d5w intravenous solution	2	
CIPRO ORAL TABLET	4		CLINDAMYCIN PHOSPHATE IN NACL INTRAVENOUS SOLUTION	4	
ciprofloxacin hcl oral tablet	2		clindamycin phosphate injection solution	2	
ciprofloxacin in d5w intravenous solution	2		clindamycin phosphate vaginal cream	2	
ciprofloxacin oral suspension reconstituted	2		CLINDESSE VAGINAL CREAM	4	
clarithromycin er oral tablet extended release 24 hour	2		colistimethate sodium (cba) injection solution reconstituted	2	
clarithromycin oral suspension reconstituted	2		COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED	4	
clarithromycin oral tablet	2		coremino oral tablet extended release 24 hour	2	
CLEOCIN ORAL CAPSULE	4		CUBICIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
CLEOCIN ORAL SOLUTION RECONSTITUTED	4		CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED	4	
CLEOCIN PHOSPHATE INJECTION SOLUTION	4		DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	4	
CLEOCIN PHOSPHATE INTRAVENOUS SOLUTION	4		daptomycin intravenous solution reconstituted	2	
CLEOCIN VAGINAL CREAM	4		demeclacycline hcl oral tablet	2	
CLEOCIN VAGINAL SUPPOSITORY	3		dicloxacillin sodium oral capsule	2	
clindamycin hcl oral capsule	2		DIFICID ORAL TABLET	4	
clindamycin palmitate hcl oral solution reconstituted	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
DORYX MPC ORAL TABLET DELAYED RELEASE	4		ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	4	
DORYX ORAL TABLET DELAYED RELEASE	4		ERYTHROCIN STEARATE ORAL TABLET	4	
doxy 100 intravenous solution reconstituted	2		erythromycin base oral capsule delayed release particles	2	
doxycycline hyclate intravenous solution reconstituted	2		erythromycin base oral tablet	2	
doxycycline hyclate oral capsule	2		erythromycin base oral tablet delayed release	2	
doxycycline hyclate oral tablet	2		erythromycin ethylsuccinate oral suspension reconstituted	2	
doxycycline hyclate oral tablet delayed release	2		erythromycin ethylsuccinate oral tablet	2	
doxycycline monohydrate oral capsule	2		FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED	4	
doxycycline monohydrate oral suspension reconstituted	2		FIRST-VANCOMYCIN ORAL SOLUTION	4	
doxycycline monohydrate oral tablet	2		FIRVANQ ORAL SOLUTION RECONSTITUTED	4	
E.E.S. 400 ORAL TABLET	4		FLAGYL ORAL CAPSULE	4	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	4		FLAGYL ORAL TABLET	4	
ertapenem sodium injection solution reconstituted	2		gentamicin in saline intravenous solution	2	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	4		gentamicin sulfate external cream	2	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	4		gentamicin sulfate external ointment	2	
ERY-TAB ORAL TABLET DELAYED RELEASE	4		gentamicin sulfate injection solution	2	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
HIPREX ORAL TABLET	4		mafенide acetate external packet	2	
hydrogen peroxide solution	2		MAXIPIME INJECTION SOLUTION RECONSTITUTED	4	
imipenem-cilastatin intravenous solution reconstituted	2		MAXIPIME INTRAVENOUS SOLUTION RECONSTITUTED	4	
INVANZ INJECTION SOLUTION RECONSTITUTED	4		meropenem intravenous solution reconstituted	2	
KEFLEX ORAL CAPSULE	4		MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 500-0.9 MG-%	4	
LEVAQUIN ORAL TABLET 500 MG, 750 MG	4		MERREM INTRAVENOUS SOLUTION RECONSTITUTED	4	
levofloxacin in d5w intravenous solution	2		methenamine hippurate oral tablet	2	
levofloxacin intravenous solution	2		methenamine mandelate oral tablet	2	
levofloxacin oral solution	2		METRONIDAZOLE BENZO+SYRSPEND ORAL SUSPENSION RECONSTITUTED	4	
levofloxacin oral tablet	2		metronidazole in nacl intravenous solution	2	
LINCOCIN INJECTION SOLUTION	4		metronidazole oral capsule	2	
lincomycin hcl injection solution	2		metronidazole oral tablet	2	
linezolid in sodium chloride intravenous solution	2		metronidazole vaginal gel	2	
linezolid intravenous solution	2		MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
linezolid oral suspension reconstituted	2	QL (32.2 ML per 1 day)			
linezolid oral tablet	2	QL (28 EA per 30 days)			
lugols external solution	2				
MACROBID ORAL CAPSULE	4				
MACRODANTIN ORAL CAPSULE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
MINOCIN ORAL CAPSULE 50 MG	4		neomycin-polymyxin b gu irrigation solution	2	
minocycline hcl er oral tablet extended release 24 hour	2		nitrofurantoin macrocrystal oral capsule	2	
minocycline hcl oral capsule	2		nitrofurantoin monohydrate macrocrystals oral capsule	2	
minocycline hcl oral tablet	2		nitrofurantoin oral suspension	2	
MINOLIRA ORAL TABLET EXTENDED RELEASE 24 HOUR	4		NUTRIDOX ORAL KIT	4	
monodoxine nl oral capsule	2		NUVESSA VAGINAL GEL	4	
MONUROL ORAL PACKET	4		NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	4	
MORGIDOX COMBINATION KIT	4		NUZYRA ORAL TABLET	4	
morgidox oral capsule	2		ofloxacin oral tablet	2	
moxifloxacin hcl in nacl intravenous solution	2		okebo oral capsule	2	
MOXIFLOXACIN HCL INTRAVENOUS SOLUTION	4		ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	4	
moxifloxacin hcl oral tablet	2		oxacillin sodium injection solution reconstituted	2	
mupirocin calcium external cream	2		paromomycin sulfate oral capsule	2	
mupirocin external ointment	2		PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION	4	
NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	4		penicillin g potassium injection solution reconstituted	2	
nafcillin sodium injection solution reconstituted 1 gm, 2 gm	2		penicillin g procaine intramuscular suspension	2	
nafcillin sodium intravenous solution reconstituted	2				
neomycin sulfate oral tablet	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
penicillin g sodium injection solution reconstituted	2		ssd external cream	2	
penicillin v potassium oral solution reconstituted	2		streptomycin sulfate intramuscular solution reconstituted	2	
penicillin v potassium oral tablet	2		sulfadiazine oral tablet	2	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED	4		sulfamethoxazole-trimethoprim intravenous solution	2	
piperacillin sod-tazobactam so intravenous solution reconstituted	2		sulfamethoxazole-trimethoprim oral suspension	2	
polymyxin b sulfate injection solution reconstituted	2		sulfamethoxazole-trimethoprim oral tablet	2	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED	4		SULFAMYLYON EXTERNAL CREAM	4	
PRIMSOL ORAL SOLUTION	4		SULFAMYLYON EXTERNAL PACKET	4	
SEYSARA ORAL TABLET	4		sulfatrim pediatric oral suspension	2	
SILVADENE EXTERNAL CREAM	4		SUPRAX ORAL CAPSULE	4	
silver nitrate external solution	2		SUPRAX ORAL SUSPENSION RECONSTITUTED	4	
silver sulfadiazine external cream	2		SUPRAX ORAL TABLET CHEWABLE	4	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	4	QL (6 EA per 30 days)	SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED	4	
SIVEXTRO ORAL TABLET	4	QL (6 EA per 30 days)	TARGADOX ORAL TABLET	4	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR	4		tazicef injection solution reconstituted	2	
SPECTRACEF ORAL TABLET	4		TAZICEF INTRAVENOUS SOLUTION	4	
			TAZICEF SOLUTION RECONSTITUTED 1 GM INTRAVENOUS	4	
			tazicef solution reconstituted 1 gm intravenous	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TAZICEF SOLUTION RECONSTITUTED 2 GM INTRAVENOUS	4		VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION 1-5 GM/100ML-%, 1-5 GM/250ML-%, 1.25-5 GM/250ML-%, 1.5-5 GM/250ML-%, 1.5-5 GM/300ML-%, 1.5-5 GM/500ML-%, 1.75-5 GM/500ML-%, 2-5 GM/500ML-%	4	
tazicef solution reconstituted 2 gm intravenous	2		vancomycin hcl in dextrose intravenous solution 1-5 gm/200ml-%, 500-5 mg/100ml-%	2	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	4		vancomycin hcl in dextrose solution 750-5 mg/150ml-% intravenous	2	
tetracycline hcl oral capsule	2		VANCOMYCIN HCL IN DEXTROSE SOLUTION 750-5 MG/150ML-% INTRAVENOUS	4	
tigecycline intravenous solution reconstituted	2		vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-%	2	
tinidazole oral tablet	2		VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1-0.9 GM/250ML-%, 1.25-0.9 GM/250ML-%, 1.5-0.9 GM/250ML-%, 1.5-0.9 GM/300ML-%, 1.5-0.9 GM/500ML-%, 1.75-0.9 GM/250ML-%, 1.75-0.9 GM/300ML-%, 1.75-0.9 GM/500ML-%, 2-0.9 GM/250ML-%, 2-0.9 GM/500ML-%, 750-0.9 MG/250ML-%	4	
tobramycin sulfate injection solution	2		VANCOMYCIN HCL IN NACL SOLUTION 750-0.9 MG/150ML-% INTRAVENOUS	4	
tobramycin sulfate injection solution reconstituted	2				
trimethoprim oral tablet	2				
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	4				
UNASYN INJECTION SOLUTION RECONSTITUTED	4				
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	4				
VANCOCIN HCL ORAL CAPSULE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous	2		XENLETA ORAL TABLET	4	
VANCOMYCIN HCL INTRAVENOUS SOLUTION 1000 MG/10ML, 1250 MG/12.5ML, 1500 MG/15ML, 1750 MG/17.5ML, 2000 MG/20ML, 750 MG/7.5ML	4		XEPI EXTERNAL CREAM	4	
vancomycin hcl intravenous solution 1000 mg/200ml, 1500 mg/300ml, 2000 mg/400ml, 500 mg/100ml	2		XERAVA INTRAVENOUS SOLUTION RECONSTITUTED	4	
vancomycin hcl intravenous solution reconstituted	2		XIFAXAN ORAL TABLET	4	PA
vancomycin hcl oral capsule	2		XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
vancomycin hcl oral solution reconstituted	2		ZEMDRI INTRAVENOUS SOLUTION	4	
VANCOMYCIN+SYRS PEND SF ORAL SUSPENSION	4		ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	4	
vandazole vaginal gel	2		ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	4	
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED	4		ZITHROMAX ORAL PACKET	4	
VIBRAMYCIN ORAL CAPSULE	4		ZITHROMAX ORAL SUSPENSION RECONSTITUTED	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	4		ZITHROMAX ORAL TABLET	4	
VIBRAMYCIN ORAL SYRUP	4		ZITHROMAX TRI-PAK ORAL TABLET	4	
XENLETA INTRAVENOUS SOLUTION	4		ZITHROMAX Z-PAK ORAL TABLET	4	
			ZOSYN INTRAVENOUS SOLUTION	4	
			ZOSYN INTRAVENOUS SOLUTION RECONSTITUTED	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ZYVOX INTRAVENOUS SOLUTION	4		CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED	4	
ZYVOX ORAL SUSPENSION RECONSTITUTED	4	QL (32.2 ML per 1 day)	COUMADIN ORAL TABLET	4	
ZYVOX ORAL TABLET	4	QL (28 EA per 30 days)	DEFITELIO INTRAVENOUS SOLUTION	4	
Anticoagulants					
acd formula a in vitro solution	2		ELIQUIS ORAL TABLET 2.5 MG	3	QL (2 EA per 1 day)
acd-a noclot-50 in vitro solution	2		ELIQUIS ORAL TABLET 5 MG	3	QL (3 EA per 1 day)
ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED	4		ELIQUIS STARTER PACK ORAL TABLET	3	QL (3 EA per 1 day)
ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED	4		enoxaparin sodium injection solution	2	QL (35 ML per 180 days)
anticoagulant cit dext soln a in vitro solution	2		enoxaparin sodium subcutaneous solution	2	QL (35 ML per 180 days)
anticoagulant sodium citrate in vitro solution	2		fondaparinux sodium subcutaneous solution	2	QL (35 ML per 180 days)
argatroban in sodium chloride intravenous solution 50 mg/50ml	2		FRAGMIN SUBCUTANEOUS SOLUTION	4	QL (35 ML per 180 days)
argatroban intravenous solution	2		heparin (porcine) in nacl injection solution 100-0.45 unit/ml-%	2	
ARIXTRA SUBCUTANEOUS SOLUTION	4	QL (35 ML per 180 days)	heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%, 12500-0.45 ut/250ml-%, 2000-0.9 unit/l-%, 25000-0.45 ut/250ml-%, 25000-0.45 ut/500ml-%	2	
BEVYXXA ORAL CAPSULE	4	QL (43 EA per 180 days)	HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 30000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%, 5000-0.9 UT/500ML-%	4	
bivalirudin trifluoroacetate intravenous solution reconstituted	2				
BIVALIRUDIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
heparin sod (porcine) in d5w intravenous solution	2		TNKASE INTRAVENOUS KIT	4	
heparin sodium (porcine) injection solution	2		TRICITRASOL IN VITRO CONCENTRATE	4	
heparin sodium (porcine) injection solution prefilled syringe	2		warfarin sodium oral tablet	2	
heparin sodium (porcine) pf injection solution	2		XARELTO ORAL TABLET 10 MG, 20 MG	3	QL (1 EA per 1 day)
jantoven oral tablet	2		XARELTO ORAL TABLET 15 MG, 2.5 MG	3	QL (2 EA per 1 day)
LOVENOX INJECTION SOLUTION	4	QL (35 ML per 180 days)	XARELTO STARTER PACK ORAL TABLET THERAPY PACK	3	QL (1.7 EA per 1 day)
LOVENOX SUBCUTANEOUS SOLUTION	4	QL (35 ML per 180 days)	Anticonvulsants - Drugs for Seizures		
PRADAXA ORAL CAPSULE	3	QL (2 EA per 1 day)	APTIOM ORAL TABLET	4	
RETAVASE HALF-KIT INTRAVENOUS KIT	4		BANZEL ORAL SUSPENSION	4	PA
RETAVASE INTRAVENOUS KIT	4		BANZEL ORAL TABLET	4	PA
SAVAYSA ORAL TABLET	4	QL (1 EA per 1 day)	BRIVIACT INTRAVENOUS SOLUTION	4	
SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE	4		BRIVIACT ORAL SOLUTION	4	
SODIUM CITRATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		BRIVIACT ORAL TABLET	4	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		carbamazepine er oral capsule extended release 12 hour	1	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION	4		carbamazepine er oral tablet extended release 12 hour	1	
			carbamazepine oral suspension	1	
			carbamazepine oral tablet	1	
			carbamazepine oral tablet chewable	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4		divalproex sodium oral tablet delayed release	1	
CELONTIN ORAL CAPSULE	4		EPIDIOLEX ORAL SOLUTION	4	PA
CEREBYX INJECTION SOLUTION	4		epitol oral tablet	1	
clobazam oral suspension	2	PA	EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	
clobazam oral tablet	2	PA	ethosuximide oral capsule	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4		ethosuximide oral solution	1	
DEPAKOTE ORAL TABLET DELAYED RELEASE	4		FANATREX FUSEPAQ ORAL SUSPENSION	4	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	4		felbamate oral suspension	1	
DIACOMIT ORAL CAPSULE	4	PA	felbamate oral tablet	1	
DIACOMIT ORAL PACKET	4	PA	FELBATOL ORAL SUSPENSION	4	
DIASTAT ACUDIAL RECTAL GEL	4	QL (2 EA per 1 fill)	FELBATOL ORAL TABLET	4	
DIASTAT PEDIATRIC RECTAL GEL	4	QL (2 EA per 1 fill)	fosphenytoin sodium injection solution	2	
diazepam rectal gel	2	QL (2 EA per 1 fill)	FYCOMPA ORAL SUSPENSION	4	
DILANTIN INFATABS ORAL TABLET CHEWABLE	4		FYCOMPA ORAL TABLET	4	
DILANTIN ORAL CAPSULE	4		gabapentin oral capsule	1	
DILANTIN ORAL SUSPENSION	4		gabapentin oral solution	1	
divalproex sodium er oral tablet extended release 24 hour	1		gabapentin oral tablet	1	
divalproex sodium oral capsule delayed release sprinkle	1		GABITRIL ORAL TABLET	4	
			KEPPRA INTRAVENOUS SOLUTION	4	
			KEPPRA ORAL SOLUTION	4	
			KEPPRA ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		levetiracetam oral tablet	1	
LAMICTAL ODT ORAL KIT	4		MY SOLINE ORAL TABLET	4	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4		NAYZILAM NASAL SOLUTION	4	
LAMICTAL ORAL TABLET	4		NEMBUTAL INJECTION SOLUTION	4	
LAMICTAL ORAL TABLET CHEWABLE	4		NEURONTIN ORAL CAPSULE	4	
LAMICTAL STARTER ORAL KIT	4		NEURONTIN ORAL SOLUTION	4	
LAMICTAL XR ORAL KIT	4		NEURONTIN ORAL TABLET	4	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		ONFI ORAL SUSPENSION	4	PA
lamotrigine er oral tablet extended release 24 hour	1		ONFI ORAL TABLET	4	PA
lamotrigine oral tablet	1		oxcarbazepine oral suspension	1	
lamotrigine oral tablet chewable	1		oxcarbazepine oral tablet	1	
lamotrigine oral tablet dispersible	1		OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
lamotrigine starter kit-blue oral kit	2		PEGANONE ORAL TABLET	4	
lamotrigine starter kit-green oral kit	2		pentobarbital sodium injection solution	2	
lamotrigine starter kit-orange oral kit	2		phenobarbital oral elixir	1	
levetiracetam er oral tablet extended release 24 hour	1		phenobarbital oral solution	1	
levetiracetam in nacl intravenous solution	2		phenobarbital oral tablet	1	
levetiracetam intravenous solution	2		phenobarbital sodium injection solution	2	
levetiracetam oral solution	1		PHENYTEK ORAL CAPSULE	4	
			phenytoin infatabs oral tablet chewable	1	
			phenytoin oral suspension	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
phenytoin oral tablet chewable	1		TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE	4	
phenytoin sodium extended oral capsule	1		topiramate er oral capsule er 24 hour sprinkle	1	
phenytoin sodium injection solution	2		topiramate oral capsule sprinkle	1	
primidone oral tablet	1		topiramate oral tablet	1	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	4		TRILEPTAL ORAL SUSPENSION	4	
roweepra oral tablet	1		TRILEPTAL ORAL TABLET	4	
roweepra xr oral tablet extended release 24 hour	1		TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
SABRIL ORAL PACKET	4	PA	valproate sodium intravenous solution	2	
SABRIL ORAL TABLET	4	PA	valproic acid oral capsule	1	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	4		valproic acid oral solution	1	
subvenite oral tablet	1		vigabatrin oral packet	2	PA
subvenite starter kit-blue oral kit	2		vigabatrin oral tablet	2	PA
subvenite starter kit-green oral kit	2		vigadronе oral packet	2	PA
subvenite starter kit-orange oral kit	2		VIMPAT INTRAVENOUS SOLUTION	4	
SYMPAZAN ORAL FILM	4	PA	VIMPAT ORAL SOLUTION	4	
TEGRETOL ORAL SUSPENSION	4		VIMPAT ORAL TABLET	4	
TEGRETOL ORAL TABLET	4		ZARONTIN ORAL CAPSULE	4	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR	4		ZARONTIN ORAL SOLUTION	4	
tiagabine hcl oral tablet	1		ZONEGRAN ORAL CAPSULE	4	
TOPAMAX ORAL TABLET	4		zonisamide oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
Antidementia Agents					
- Drugs for Alzheimer's Disease and Dementia					
ARICEPT ORAL TABLET	4		NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	3	QL (56 EA per 365 days)
donepezil hcl oral tablet	1		NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	QL (1 EA per 1 day)
donepezil hcl oral tablet dispersible	1		RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
EXELON TRANSDERMAL PATCH 24 HOUR	4		RAZADYNE ORAL TABLET	4	
galantamine hydrobromide er oral capsule extended release 24 hour	1		rivastigmine tartrate oral capsule	1	
galantamine hydrobromide oral solution	1		rivastigmine transdermal patch 24 hour	1	
galantamine hydrobromide oral tablet	1		Antidepressants		
memantine hcl er oral capsule extended release 24 hour	1	QL (1 EA per 1 day)	amitriptyline hcl oral tablet	2	
memantine hcl oral solution	1		amoxapine oral tablet	2	
memantine hcl oral tablet	1		ANAFRANIL ORAL CAPSULE	4	
NAMENDA ORAL TABLET	4		APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
NAMENDA TITRATION PAK ORAL TABLET	4		BRISDELLE ORAL CAPSULE	4	QL (1 EA per 1 day)
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)	bupropion hcl er (sr) oral tablet extended release 12 hour	1	QL (2 EA per 1 day)
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	1	QL (3 EA per 1 day)
			bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	1	QL (1 EA per 1 day)
			BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	QL (1 EA per 1 day)
			bupropion hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CELEXA ORAL TABLET	4		DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE	4	
chlordiazepoxide-amitriptyline oral tablet	2		duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	1	QL (2 EA per 1 day)
citalopram hydrobromide oral solution	1		duloxetine hcl oral capsule delayed release particles 30 mg	1	QL (3 EA per 1 day)
citalopram hydrobromide oral tablet	1		duloxetine hcl oral capsule delayed release particles 40 mg	2	QL (2 EA per 1 day)
clomipramine hcl oral capsule	2		EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG, 60 MG	4	QL (2 EA per 1 day)	EMSAM TRANSDERMAL PATCH 24 HOUR	4	QL (1 EA per 1 day)
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 30 MG	4	QL (3 EA per 1 day)	escitalopram oxalate oral solution	1	
desipramine hcl oral tablet	2		escitalopram oxalate oral tablet	1	
DESVENLAFAZINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG	4	QL (4 EA per 1 day)	FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
DESVENLAFAZINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 50 MG	4	QL (1 EA per 1 day)	FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	QL (28 EA per 365 days)
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg	1	QL (4 EA per 1 day)	fluoxetine hcl (pmdd) oral tablet	1	
desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg	1	QL (1 EA per 1 day)	fluoxetine hcl oral capsule	1	
doxepin hcl oral capsule	2		fluoxetine hcl oral capsule delayed release	1	QL (0.15 EA per 1 day)
doxepin hcl oral concentrate	2		fluoxetine hcl oral solution	1	
			fluoxetine hcl oral tablet	1	
			fluvoxamine maleate er oral capsule extended release 24 hour	1	QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
fluvoxamine maleate oral tablet	1		PAMELOR ORAL CAPSULE	4	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)	PARNATE ORAL TABLET	4	
imipramine hcl oral tablet	2		paroxetine hcl er oral tablet extended release 24 hour	1	
imipramine pamoate oral capsule	2		paroxetine hcl oral tablet	1	
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG	4	QL (4 EA per 1 day)	paroxetine mesylate oral capsule	1	QL (1 EA per 1 day)
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24 HOUR 50 MG	4	QL (1 EA per 1 day)	PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
LEXAPRO ORAL TABLET	4		PAXIL ORAL SUSPENSION	3	
maprotiline hcl oral tablet	1		PAXIL ORAL TABLET	4	
MARPLAN ORAL TABLET	4		perphenazine-amitriptyline oral tablet	2	
mirtazapine oral tablet	1		PEXEVA ORAL TABLET 10 MG, 20 MG, 40 MG	4	QL (1 EA per 1 day)
mirtazapine oral tablet dispersible	1		PEXEVA ORAL TABLET 30 MG	4	QL (2 EA per 1 day)
NARDIL ORAL TABLET	4		phenelzine sulfate oral tablet	2	
nefazodone hcl oral tablet	1		PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG	4	QL (4 EA per 1 day)
NORPRAMIN ORAL TABLET	4		PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG	4	QL (1 EA per 1 day)
nortriptyline hcl oral capsule	2		protriptyline hcl oral tablet	2	
nortriptyline hcl oral solution	2		PROZAC ORAL CAPSULE	4	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	2	QL (1 EA per 1 day)	REMERON ORAL TABLET	4	
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	2	QL (3 EA per 1 day)	REMERON SOLTAB ORAL TABLET DISPERSIBLE	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SARAFEM ORAL TABLET	4		WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR	4	QL (2 EA per 1 day)
sertraline hcl oral concentrate	1		WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG	4	QL (3 EA per 1 day)
sertraline hcl oral tablet	1		WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG	4	QL (1 EA per 1 day)
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	4	PA	ZOLOFT ORAL TABLET	4	
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	4	PA	ZULRESSO INTRAVENOUS SOLUTION	4	PA
SYMBYAX ORAL CAPSULE 12-50 MG, 6-50 MG	4	QL (1 EA per 1 day)	Antiemetics - Drugs for Nausea and Vomiting		
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	4	QL (3 EA per 1 day)	AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	4	
TOFRANIL ORAL TABLET	4		AKYNZEO ORAL CAPSULE	4	QL (0.07 EA per 1 day)
tranylcypromine sulfate oral tablet	2		ALOXI INTRAVENOUS SOLUTION	4	
trazodone hcl oral tablet	1		ANZEMET ORAL TABLET	4	QL (0.07 EA per 1 day)
trimipramine maleate oral capsule	2		aprepitant oral capsule 125 mg	2	QL (2 EA per 30 days)
TRINTELLIX ORAL TABLET	4	QL (1 EA per 1 day)	aprepitant oral capsule 40 mg	2	QL (1 EA per 30 days)
venlafaxine hcl er oral capsule extended release 24 hour	1		aprepitant oral capsule 80 & 125 mg	2	QL (6 EA per 30 days)
venlafaxine hcl er oral tablet extended release 24 hour	1		aprepitant oral capsule 80 mg	2	QL (4 EA per 30 days)
venlafaxine hcl oral tablet	1		BONJESTA ORAL TABLET EXTENDED RELEASE	4	PA; QL (2 EA per 1 day)
VIIBRYD ORAL TABLET	4	QL (1 EA per 1 day)	CINVANTI INTRAVENOUS EMULSION	4	
VIIBRYD STARTER PACK ORAL KIT	4	QL (30 EA per 1 fill)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
compro rectal suppository	2		metoclopramide hcl oral solution	2	
DICLEGIS ORAL TABLET DELAYED RELEASE	4	PA; QL (4 EA per 1 day)	metoclopramide hcl oral tablet	2	
dimenhydrinate injection solution	2		metoclopramide hcl oral tablet dispersible	2	
doxylamine-pyridoxine oral tablet delayed release	2	PA; QL (4 EA per 1 day)	ondansetron hcl injection solution 40 mg/20ml	2	
dronabinol oral capsule	2	PA; QL (2 EA per 1 day)	ondansetron hcl oral solution	2	QL (4 ML per 1 day)
droperidol injection solution	2		ondansetron hcl oral tablet 24 mg	2	QL (0.07 EA per 1 day)
EMEND INTRAVENOUS SOLUTION RECONSTITUTED	4		ondansetron hcl oral tablet 4 mg, 8 mg	2	
EMEND ORAL CAPSULE 125 MG	4	QL (2 EA per 30 days)	ONDANSETRON HCL SOLUTION 4 MG/2ML INJECTION	4	
EMEND ORAL CAPSULE 40 MG	4	QL (1 EA per 30 days)	ondansetron hcl solution 4 mg/2ml injection	2	
EMEND ORAL CAPSULE 80 MG	4	QL (4 EA per 30 days)	ondansetron odt oral tablet dispersible	2	
EMEND ORAL SUSPENSION RECONSTITUTED	4	QL (0.1 EA per 1 day)	palonosetron hcl intravenous solution	2	
EMEND TRI-PACK ORAL CAPSULE	4	QL (6 EA per 30 days)	palonosetron hcl intravenous solution prefilled syringe	2	
fosaprepitant dimeglumine intravenous solution reconstituted	2		perphenazine oral tablet	2	
gransetron hcl intravenous solution	2		prochlorperazine edisylate injection solution	2	
gransetron hcl oral tablet	2	QL (0.14 EA per 1 day)	prochlorperazine maleate oral tablet	2	
MARINOL ORAL CAPSULE	4	PA; QL (2 EA per 1 day)	prochlorperazine rectal suppository	2	
meclizine hcl oral tablet	2		REGLAN ORAL TABLET	4	
metoclopramide hcl injection solution	2		SANCUSO TRANSDERMAL PATCH	4	QL (0.07 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
scopolamine transdermal patch 72 hour	2		AVC VAGINAL VAGINAL CREAM	4	
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	4	QL (0.04 ML per 1 day)	BIO-STATIN ORAL CAPSULE	4	
SYNDROS ORAL SOLUTION	4	PA; QL (4 ML per 1 day)	bio-statin oral powder	2	
TIGAN INTRAMUSCULAR SOLUTION	4		CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	4	
TIGAN ORAL CAPSULE	4		caspofungin acetate intravenous solution reconstituted	2	
TRANSDERM SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	4		cyclodan external solution	2	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	4		CICLODAN SOLUTION EXTERNAL KIT	4	PA
trimethobenzamide hcl oral capsule	2		ciclopirox external gel	2	
VARUBI ORAL TABLET	4	QL (0.14 EA per 1 day)	ciclopirox external shampoo	2	
ZOFRAN ORAL TABLET	4		ciclopirox external solution	2	
ZUPLENZ ORAL FILM	4	QL (0.34 EA per 1 day)	ciclopirox olamine external cream	2	
Antifungals			ciclopirox olamine external suspension	2	
ABELCET INTRAVENOUS SUSPENSION	4		ciclopirox treatment external kit	2	PA
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	4		clotrimazole external cream	2	
amphotericin b intravenous solution reconstituted	2		clotrimazole external solution	2	
ANCOBON ORAL CAPSULE	4		clotrimazole mouth/throat lozenge	2	
			clotrimazole mouth/throat troche	2	
			CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED	4	
			CRESEMBA ORAL CAPSULE	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	4		itraconazole oral capsule	2	PA
DIFLUCAN ORAL TABLET	4		itraconazole oral solution	2	PA
econazole nitrate external cream	2		JUBLIA EXTERNAL SOLUTION	4	PA
ECOZA EXTERNAL FOAM	4		KERYDIN EXTERNAL SOLUTION	4	PA
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	4		ketoconazole external cream	2	
ERTACZO EXTERNAL CREAM	4		ketoconazole external foam	2	
EXELDERM EXTERNAL CREAM	4		ketoconazole external shampoo	2	
EXELDERM EXTERNAL SOLUTION	4		ketoconazole oral tablet	2	
exoderm external lotion	2		KETODAN EXTERNAL KIT	4	
EXTINA EXTERNAL FOAM	4		LOPROX EXTERNAL CREAM	4	
fluconazole in sodium chloride intravenous solution	2		LOPROX EXTERNAL KIT	4	
fluconazole oral suspension reconstituted	2		LOPROX EXTERNAL SHAMPOO	4	
fluconazole oral tablet	2		LOPROX EXTERNAL SUSPENSION	4	
flucytosine oral capsule	2		LULICONAZOLE EXTERNAL CREAM	4	
FUNGIMEZ EXTERNAL SOLUTION	4		LUZU EXTERNAL CREAM	4	
griseofulvin microsize oral suspension	2		MENTAX EXTERNAL CREAM	4	
griseofulvin microsize oral tablet	2		miconazole 3 vaginal suppository	2	
griseofulvin ultramicrosize oral tablet	2		MICONAZOLE-ZINC OXIDE-PETROLAT EXTERNAL OINTMENT	4	
GYNAZOLE-1 VAGINAL CREAM	4		MYCAMEINE INTRAVENOUS SOLUTION RECONSTITUTED	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
naftifine hcl external cream	2		posaconazole oral tablet delayed release	2	
naftifine hcl external gel	2		RECURA EXTERNAL CREAM	4	
NAFTIN EXTERNAL CREAM	4		SPORANOX ORAL CAPSULE	4	PA
NAFTIN EXTERNAL GEL	4		SPORANOX ORAL SOLUTION	4	PA
NIZORAL EXTERNAL SHAMPOO	4		SPORANOX PULSEPAK ORAL CAPSULE	4	PA
NOXAFL INTRAVENOUS SOLUTION	4		terbinafine hcl oral tablet	2	QL (84 EA per 180 days)
NOXAFL ORAL SUSPENSION	4		terconazole vaginal cream	2	
NOXAFL ORAL TABLET DELAYED RELEASE	4		terconazole vaginal suppository	2	
nyamyc external powder	2		TOLSURA ORAL CAPSULE	4	PA
nystatin external cream	2		VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	4	
nystatin external ointment	2		VFEND ORAL SUSPENSION RECONSTITUTED	4	
nystatin external powder	2		VFEND ORAL TABLET	4	
nystatin mouth/throat suspension	2		voriconazole intravenous solution reconstituted	2	
nystatin oral tablet	2		voriconazole oral suspension reconstituted	2	
nystatin-triamcinolone external cream	2		voriconazole oral tablet	2	
nystatin-triamcinolone external ointment	2		VUSION EXTERNAL OINTMENT	4	
nystop external powder	2		XOLEGEL COREPAK EXTERNAL KIT	4	
ORAVIG BUCCAL TABLET	4		XOLEGEL DUO/HEAD & SHOULDERS EXTERNAL KIT	4	
oxiconazole nitrate external cream	2				
OXISTAT EXTERNAL CREAM	4				
OXISTAT EXTERNAL LOTION	4				
PENLAC EXTERNAL SOLUTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
XOLEGEL DUO/XOLEX EXTERNAL KIT	4		Antimigraine Agents		
XOLEGEL EXTERNAL GEL	4		AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
Antigout Agents			AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
allopurinol oral tablet	1		almotriptan malate oral tablet	1	QL (0.4 EA per 1 day)
allopurinol sodium intravenous solution reconstituted	2		AMERGE ORAL TABLET	4	QL (0.3 EA per 1 day)
ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED	4		CAFERGOT ORAL TABLET	4	
COLCHICINE ORAL CAPSULE	4		D.H.E. 45 INJECTION SOLUTION	4	
COLCHICINE ORAL TABLET	4		dihydroergotamine mesylate injection solution	2	
colchicine-probenecid oral tablet	1		dihydroergotamine mesylate nasal solution	2	QL (0.27 ML per 1 day)
COLCRYS ORAL TABLET	3		eletriptan hydrobromide oral tablet	2	QL (12 EA per 30 days)
febuxostat oral tablet	1		EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
GLOPERBA ORAL SOLUTION	4		EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
KRYSTEXXA INTRAVENOUS SOLUTION	4	PA	EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
MITIGARE ORAL CAPSULE	4		ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	4	
probenecid oral tablet	1		ergotamine-caffeine oral tablet	2	
ULORIC ORAL TABLET	4		FROVA ORAL TABLET	4	QL (0.4 EA per 1 day)
ZYLOPRIM ORAL TABLET	4				
Anti-inflammatory Agents					
EMFLAZA ORAL SUSPENSION	4	PA			
EMFLAZA ORAL TABLET	4	PA			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
frovatriptan succinate oral tablet	2	QL (0.4 EA per 1 day)	sumatriptan succinate refill subcutaneous solution cartridge	2	QL (0.17 ML per 1 day)
IMITREX NASAL SOLUTION	4	QL (0.4 EA per 1 day)	sumatriptan succinate subcutaneous solution	2	QL (0.17 ML per 1 day)
IMITREX ORAL TABLET	4	QL (0.3 EA per 1 day)	sumatriptan succinate subcutaneous solution auto-injector	2	QL (0.17 ML per 1 day)
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	4	QL (0.17 ML per 1 day)	sumatriptan succinate subcutaneous solution prefilled syringe	2	QL (0.17 ML per 1 day)
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	QL (0.17 ML per 1 day)	sumatriptan-naproxen sodium oral tablet	2	QL (0.3 EA per 1 day)
IMITREX SUBCUTANEOUS SOLUTION	4	QL (0.17 ML per 1 day)	TOSYMRA NASAL SOLUTION	4	QL (0.4 EA per 1 day)
MAXALT ORAL TABLET	4	QL (0.6 EA per 1 day)	TREXIMET ORAL TABLET	4	QL (0.3 EA per 1 day)
MAXALT-MLT ORAL TABLET DISPERSIBLE	4	QL (0.6 EA per 1 day)	ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	QL (0.27 ML per 1 day)
MIGERGOT RECTAL SUPPOSITORY	4		zolmitriptan oral tablet	2	QL (0.4 EA per 1 day)
MIGRANAL NASAL SOLUTION	4	QL (0.27 ML per 1 day)	zolmitriptan oral tablet dispersible 2.5 mg	2	QL (0.4 EA per 1 day)
naratriptan hcl oral tablet	2	QL (0.3 EA per 1 day)	zolmitriptan oral tablet dispersible 5 mg	2	QL (0.3 EA per 1 day)
ONZETRA XSAIL NASAL EXHALER POWDER	4	QL (0.54 EA per 1 day)	ZOMIG NASAL SOLUTION	4	QL (0.4 EA per 1 day)
RELPAX ORAL TABLET	4	QL (12 EA per 30 days)	ZOMIG ORAL TABLET	4	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet	2	QL (0.6 EA per 1 day)	ZOMIG ZMT ORAL TABLET DISPERSIBLE 2.5 MG	4	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet dispersible	2	QL (0.6 EA per 1 day)	ZOMIG ZMT ORAL TABLET DISPERSIBLE 5 MG	4	QL (0.3 EA per 1 day)
sumatriptan nasal solution	2	QL (0.4 EA per 1 day)	Antimyasthenic Agents		
sumatriptan succinate oral tablet	2	QL (0.3 EA per 1 day)	BLOXIVERZ INTRAVENOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
GUANIDINE HCL ORAL TABLET	4		isoniazid injection solution	2	
MESTINON ORAL SYRUP 60 MG/5ML	4		isoniazid oral syrup	2	
MESTINON ORAL TABLET	4		isoniazid oral tablet	2	
MESTINON ORAL TABLET EXTENDED RELEASE	4		MYAMBUTOL ORAL TABLET	4	
neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml	2		MYCOBUTIN ORAL CAPSULE	4	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 3 MG/3ML, 5 MG/5ML	4		PASER ORAL PACKET	4	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		pretomanid oral tablet	2	
pyridostigmine bromide er oral tablet extended release	1		PRIFTIN ORAL TABLET	4	
pyridostigmine bromide oral solution	1		pyrazinamide oral tablet	2	
pyridostigmine bromide oral tablet	1		rifabutin oral capsule	2	
REGONOL INTRAVENOUS SOLUTION	4		RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
Antimycobacterials			RIFADIN ORAL CAPSULE	4	
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED	4		RIFAMATE ORAL CAPSULE	4	
cycloserine oral capsule	2		rifampin intravenous solution reconstituted	2	
dapsone oral tablet	2		rifampin oral capsule	2	
ethambutol hcl oral tablet	2		RIFAMPIN+SYRSPEN D SF ORAL SUSPENSION	4	
Antineoplastics - Drugs for Cancer			RIFATER ORAL TABLET	4	
			SIRTURO ORAL TABLET	4	
			TRECATOR ORAL TABLET	4	
			abiraterone acetate oral tablet	2	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	3		ARIMIDEX ORAL TABLET	4	
ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA	AROMASIN ORAL TABLET	4	
adriamycin intravenous solution	2		ARRANON INTRAVENOUS SOLUTION	3	
adriamycin intravenous solution reconstituted	2		arsenic trioxide intravenous solution	2	
adrucil intravenous solution	2		ARZERRA INTRAVENOUS CONCENTRATE	3	PA
AFINITOR DISPERZ ORAL TABLET SOLUBLE	4	PA	ASPARLAS INTRAVENOUS SOLUTION	4	
AFINITOR ORAL TABLET	3	PA; QL (1 EA per 1 day)	AVASTIN INTRAVENOUS SOLUTION	4	PA
ALECensa ORAL CAPSULE	4	PA	azacitidine injection suspension reconstituted	2	
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED	3		AZEDRA DOSIMETRIC INTRAVENOUS SOLUTION	4	
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	AZEDRA THERAPEUTIC INTRAVENOUS SOLUTION	4	
ALKERAN INTRAVENOUS SOLUTION RECONSTITUTED	4		BALVERSA ORAL TABLET	4	PA
ALKERAN ORAL TABLET	4		BAVENCIO INTRAVENOUS SOLUTION	4	PA
ALUNBRIG ORAL TABLET 180 MG, 90 MG	4	PA; QL (1 EA per 1 day)	BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
ALUNBRIG ORAL TABLET 30 MG	4	PA; QL (4 EA per 1 day)	BELRAPZO INTRAVENOUS SOLUTION	4	PA
ALUNBRIG ORAL TABLET THERAPY PACK	4	PA; QL (30 EA per 365 days)	BENDAMUSTINE HCL INTRAVENOUS SOLUTION	4	PA
anastrozole oral tablet	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
BENDEKA INTRAVENOUS SOLUTION	4	PA	capecitabine oral tablet	2	PA
BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	CAPRELSA ORAL TABLET 100 MG	3	PA; QL (2 EA per 1 day)
bexarotene oral capsule	2	PA	CAPRELSA ORAL TABLET 300 MG	3	PA
bicalutamide oral tablet	2		carboplatin intravenous solution	2	
BICNU INTRAVENOUS SOLUTION RECONSTITUTED	4		carmustine intravenous solution reconstituted	2	
bleomycin sulfate injection solution reconstituted	2		CASODEX ORAL TABLET	4	
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	cisplatin intravenous solution	2	
BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
BOSULIF ORAL TABLET	4	PA	cladribine intravenous solution	2	
BRAFTOVI ORAL CAPSULE	4	PA	clofarabine intravenous solution	2	
busulfan intravenous solution	2		CLOLAR INTRAVENOUS SOLUTION	4	
BUSULFEX INTRAVENOUS SOLUTION	4		COMETRIQ (100 MG DAILY DOSE) ORAL KIT	4	PA
CABOMETYX ORAL TABLET	3	PA	COMETRIQ (140 MG DAILY DOSE) ORAL KIT	4	PA
CALQUENCE ORAL CAPSULE	4	PA	COMETRIQ (60 MG DAILY DOSE) ORAL KIT	4	PA
CAMPATH INTRAVENOUS SOLUTION	3		COPIKTRA ORAL CAPSULE	4	PA
CAMPTOSAR INTRAVENOUS SOLUTION	4		COSMEGEN INTRAVENOUS SOLUTION RECONSTITUTED	4	
			COTELLIC ORAL TABLET	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
cyclophosphamide injection solution reconstituted	2		doxorubicin hcl intravenous solution	2	
cyclophosphamide oral capsule	2		doxorubicin hcl liposomal intravenous injectable	2	
CYRAMZA INTRAVENOUS SOLUTION	4	PA	DROXIA ORAL CAPSULE	4	
cytarabine (pf) injection solution	2		ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	4	
cytarabine injection solution	2		ELLENCE INTRAVENOUS SOLUTION	4	
dacarbazine intravenous solution reconstituted	2		ELZONRIS INTRAVENOUS SOLUTION	4	PA
DACOGEN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	EMCYT ORAL CAPSULE	3	
dactinomycin intravenous solution reconstituted	2		EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
DARZALEX INTRAVENOUS SOLUTION	4	PA	epirubicin hcl intravenous solution	2	
daunorubicin hcl intravenous solution	2		ERBITUX INTRAVENOUS SOLUTION	3	PA
DAURISMO ORAL TABLET	4	PA	ERIVEDGE ORAL CAPSULE	3	PA
decitabine intravenous solution reconstituted	2	PA	ERLEADA ORAL TABLET	4	PA
dexrazoxane hcl intravenous solution reconstituted	2		erlotinib hcl oral tablet 100 mg, 150 mg	2	PA
dexrazoxane intravenous solution reconstituted 500 mg	2		erlotinib hcl oral tablet 25 mg	2	PA; QL (3 EA per 1 day)
docetaxel intravenous concentrate	2		ERWINAZE INJECTION SOLUTION RECONSTITUTED	4	
docetaxel intravenous solution	2		ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED	4	
DOXIL INTRAVENOUS INJECTABLE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	4		gemcitabine hcl intravenous solution	2	
etoposide intravenous solution	2		gemcitabine hcl intravenous solution reconstituted	2	
etoposide oral capsule	2		GILOTrif ORAL TABLET	4	PA; QL (1 EA per 1 day)
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	4		GLEEVEC ORAL TABLET	4	PA
exemestane oral tablet	1		GLEOSTINE ORAL CAPSULE	4	
FARESTON ORAL TABLET	4		HALAVEN INTRAVENOUS SOLUTION	3	PA
FARYDAK ORAL CAPSULE	4	PA	HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	4	PA
FASLODEX INTRAMUSCULAR SOLUTION	4		HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
FEMARA ORAL TABLET	4		HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
flouxuridine injection solution reconstituted	2		HYCAMTIN ORAL CAPSULE	4	
fludarabine phosphate intravenous solution	2		HYDREA ORAL CAPSULE	4	
fludarabine phosphate intravenous solution reconstituted	2		hydroxyurea oral capsule	2	
fluorouracil intravenous solution	2		IBRANCE ORAL CAPSULE	4	PA
flutamide oral capsule	2		ICLUSIG ORAL TABLET 15 MG	4	PA; QL (2 EA per 1 day)
FOLOTYN INTRAVENOUS SOLUTION	3	PA	ICLUSIG ORAL TABLET 45 MG	4	PA
fulvestrant intramuscular solution	2		IDAMYCIN PFS INTRAVENOUS SOLUTION	4	
FUSILEV INTRAVENOUS SOLUTION RECONSTITUTED	4		idarubicin hcl intravenous solution	2	
GAZYVA INTRAVENOUS SOLUTION	4	PA			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
IDHIFA ORAL TABLET	4	PA; QL (1 EA per 1 day)	JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG, 5 MG	3	PA
IFEX INTRAVENOUS SOLUTION RECONSTITUTED	4		JEVTANA INTRAVENOUS SOLUTION	3	PA
ifosfamide intravenous solution	2		KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
ifosfamide intravenous solution reconstituted	2		KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
imatinib mesylate oral tablet	2	PA	KEYTRUDA INTRAVENOUS SOLUTION	4	PA
IMBRUVICA ORAL CAPSULE	4	PA	KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED	4	
IMBRUVICA ORAL TABLET	4	PA	KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
IMFINZI INTRAVENOUS SOLUTION	4	PA	KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
IMLYGIC INTRALESIONAL SUSPENSION	4		KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
INFUGEM INTRAVENOUS SOLUTION	4		KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
INLYTA ORAL TABLET	4	PA	KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
INREBIC ORAL CAPSULE	4	PA	KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
IRESSA ORAL TABLET	4	PA			
irinotecan hcl intravenous solution	2				
ISTODAX (OVERFILL) INTRAVENOUS SOLUTION RECONSTITUTED	3	PA			
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED	3				
JAKAFI ORAL TABLET 10 MG	3	PA; QL (2 EA per 1 day)			

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA	leucovorin calcium oral tablet	2	
LARTRUVO INTRAVENOUS SOLUTION	4	PA	LEUKERAN ORAL TABLET	3	
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	levoleucovorin calcium intravenous solution	2	
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	levoleucovorin calcium intravenous solution reconstituted	2	
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	levoleucovorin calcium pf intravenous solution	2	
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	LIBTAYO INTRAVENOUS SOLUTION	4	PA
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	LONSURF ORAL TABLET	4	PA
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	LORBRENA ORAL TABLET	4	PA
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	LUMOXITI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	4	PA	LUTATHERA INTRAVENOUS SOLUTION	4	
letrozole oral tablet	1		LYNPARZA ORAL TABLET	4	PA
leucovorin calcium injection solution	2		LYSODREN ORAL TABLET	3	
leucovorin calcium injection solution reconstituted	2		MARQIBO INTRAVENOUS SUSPENSION	4	
			MATULANE ORAL CAPSULE	3	
			MEKINIST ORAL TABLET	3	PA
			MEKTOVI ORAL TABLET	4	PA
			melphalan hcl intravenous solution reconstituted	2	
			melphalan oral tablet	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
mercaptopurine oral tablet	2		NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	4	
mesna intravenous solution	2		NUBEQA ORAL TABLET	4	PA
MESNEX INTRAVENOUS SOLUTION	4		ODOMZO ORAL CAPSULE	4	PA
MESNEX ORAL TABLET	4		OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED	4	
mitomycin intravenous solution reconstituted	2		ONCASPAR INJECTION SOLUTION	3	
MITOMYCIN INTRAVESICAL SOLUTION PREFILLED SYRINGE	4		ONIVYDE INTRAVENOUS INJECTABLE	4	
mitoxantrone hcl intravenous concentrate	2	PA	OPDIVO INTRAVENOUS SOLUTION	4	PA
mutamycin intravenous solution reconstituted	2		oxaliplatin intravenous solution	2	
MVASI INTRAVENOUS SOLUTION	4	PA	oxaliplatin intravenous solution reconstituted	2	
MYLERAN ORAL TABLET	3		paclitaxel intravenous concentrate	2	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	PANRETIN EXTERNAL GEL	4	
NAVELBINE INTRAVENOUS SOLUTION	4		PERJETA INTRAVENOUS SOLUTION	3	PA
NERLYNX ORAL TABLET	4	PA; QL (6 EA per 1 day)	PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
NEXAVAR ORAL TABLET	3	PA	PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA
NILANDRON ORAL TABLET	4		PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA
nilutamide oral tablet	2				
NINLARO ORAL CAPSULE	4	PA			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA	SIKLOS ORAL TABLET	4	PA
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	SOLTAMOX ORAL SOLUTION	4	
POMALYST ORAL CAPSULE	4	PA	SPRYCEL ORAL TABLET	3	PA
PORTRAZZA INTRAVENOUS SOLUTION	4	PA	STIVARGA ORAL TABLET	4	PA
POTELIGEO INTRAVENOUS SOLUTION	4	PA	SUTENT ORAL CAPSULE	3	PA
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	3		SYLATRON SUBCUTANEOUS KIT	4	PA
PURIXAN ORAL SUSPENSION	4		SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
QUADRAMET INTRAVENOUS SOLUTION	4		SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA
REVLIMID ORAL CAPSULE	3	PA	TABLOID ORAL TABLET	3	
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	4	PA	TAFINLAR ORAL CAPSULE	3	PA
RITUXAN INTRAVENOUS SOLUTION	4	PA	TAGRISSO ORAL TABLET 40 MG	4	PA; QL (1 EA per 1 day)
ROMIDEPSIN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA	TAGRISSO ORAL TABLET 80 MG	4	PA
ROZLYTREK ORAL CAPSULE	4	PA	TALZENNA ORAL CAPSULE	4	PA
RUBRACA ORAL TABLET	4	PA	tamoxifen citrate oral tablet	1	
RYDAPT ORAL CAPSULE	4	PA	TARCEVA ORAL TABLET 100 MG, 150 MG	4	PA
			TARCEVA ORAL TABLET 25 MG	4	PA; QL (3 EA per 1 day)
			TARGETIN EXTERNAL GEL	4	PA
			TARGETIN ORAL CAPSULE	4	PA
			TASIGNA ORAL CAPSULE	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TAXOTERE INTRAVENOUS CONCENTRATE	4		TRISENOX INTRAVENOUS SOLUTION	4	
TECENTRIQ INTRAVENOUS SOLUTION	4	PA	TURALIO ORAL CAPSULE	4	PA
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	3		TYKERB ORAL TABLET	3	PA
TEMODAR ORAL CAPSULE	4	PA	UNITUXIN INTRAVENOUS SOLUTION	4	PA
temozolomide oral capsule	2	PA	VALCHLOR EXTERNAL GEL	4	PA
teniposide intravenous solution	2		valrubicin intravesical solution	2	
TEPADINA INJECTION SOLUTION RECONSTITUTED	4		VALSTAR INTRAVESICAL SOLUTION	4	
THALOMID ORAL CAPSULE	3	PA	VECTIBIX INTRAVENOUS SOLUTION	4	
thiotepa injection solution reconstituted	2		VELCADE INJECTION SOLUTION RECONSTITUTED	3	PA
TIBSOVO ORAL TABLET	4	PA	VENCLEXTA ORAL TABLET	4	PA
toposar intravenous solution	2		VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	4	PA
topotecan hcl intravenous solution	2		VERZENIO ORAL TABLET	4	PA
topotecan hcl intravenous solution reconstituted	2		VIDAZA INJECTION SUSPENSION RECONSTITUTED	4	
toremifene citrate oral tablet	1		vinblastine sulfate intravenous solution	2	
TOTECT INTRAVENOUS SOLUTION RECONSTITUTED	4		vincristine sulfate intravenous solution	2	
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA	vinorelbine tartrate intravenous solution	2	
tretinoin oral capsule	2		VITRAKVI ORAL CAPSULE	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
VITRAKVI ORAL SOLUTION	4	PA	YESCARTA INTRAVENOUS SUSPENSION	4	PA
VIZIMPRO ORAL TABLET	4	PA	YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	4	
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED	4		YONSA ORAL TABLET	4	PA
VOTRIENT ORAL TABLET	4	PA	ZALTRAP INTRAVENOUS SOLUTION	3	PA
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED	4	PA	ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED	3	
XALKORI ORAL CAPSULE	3	PA	ZEJULA ORAL CAPSULE	4	PA
XELODA ORAL TABLET	4	PA	ZELBORAF ORAL TABLET	4	PA
XOFIGO INTRAVENOUS SOLUTION	3		ZEVALIN Y-90 INTRAVENOUS KIT	4	
XOSPATA ORAL TABLET	4	PA	ZINECARD INTRAVENOUS SOLUTION RECONSTITUTED	4	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA	ZOLINZA ORAL CAPSULE	3	PA
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA	ZYDELIG ORAL TABLET	4	PA
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA	ZYKADIA ORAL TABLET	4	PA
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	4	PA	ZYTIGA ORAL TABLET	4	PA
XTANDI ORAL CAPSULE	4	PA	Antiparasitics		
YEROVY INTRAVENOUS SOLUTION	3	PA	albendazole oral tablet	2	PA
			ALBENZA ORAL TABLET	4	PA
			ALINIA ORAL SUSPENSION RECONSTITUTED	3	
			ALINIA ORAL TABLET	3	
			ARAKODA ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits	
atovaquone oral suspension	2		NATROBA EXTERNAL SUSPENSION	4		
atovaquone-proguanil hcl oral tablet	2		NEBUPENT INHALATION SOLUTION RECONSTITUTED	3		
BENZNIDAZOLE ORAL TABLET	4		OVIDE EXTERNAL LOTION	4		
BILTRICIDE ORAL TABLET	4		PENTAM INJECTION SOLUTION RECONSTITUTED	4		
chloroquine phosphate oral tablet	2		pentamidine isethionate injection solution reconstituted	2		
COARTEM ORAL TABLET	4		permethrin external cream	2		
crotan external lotion	2		PLAQUENIL ORAL TABLET	4		
DARAPRIM ORAL TABLET	4	PA	praziquantel oral tablet	2		
EGATEN ORAL TABLET	4		primaquine phosphate oral tablet	2		
ELIMITE EXTERNAL CREAM	4		QUALAQUIN ORAL CAPSULE	4	PA	
EMVERM ORAL TABLET CHEWABLE	3		quinine sulfate oral capsule	2	PA	
EURAX EXTERNAL CREAM	3		SKLICE EXTERNAL LOTION	4		
EURAX EXTERNAL LOTION	4		SOLOSEC ORAL PACKET	4		
hydroxychloroquine sulfate oral tablet	1		spinosad external suspension	2		
IMPAVIDO ORAL CAPSULE	4		STROMECTOL ORAL TABLET	4		
ivermectin oral tablet	2		sulfurated lime external solution	2		
KRINTAFEL ORAL TABLET	4		ULESFIA EXTERNAL LOTION	4		
lindane external shampoo	2		Antiparkinson Agents			
MALARONE ORAL TABLET	4		amantadine hcl oral capsule	1		
malathion external lotion	2		amantadine hcl oral syrup	1		
mefloquine hcl oral tablet	2					
MEPRON ORAL SUSPENSION	4					

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
amantadine hcl oral tablet	1		MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL (3 ML per 1 day)	MIRAPEX ORAL TABLET	4	
AZILECT ORAL TABLET	4		NEUPRO TRANSDERMAL PATCH 24 HOUR	4	
benztropine mesylate injection solution	2		NOURIANZ ORAL TABLET	4	
benztropine mesylate oral tablet	1		OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4	PA
bromocriptine mesylate oral capsule	1		PARLODEL ORAL CAPSULE	4	
bromocriptine mesylate oral tablet	1		PARLODEL ORAL TABLET	4	
carbidopa oral tablet	1		pramipexole dihydrochloride er oral tablet extended release 24 hour	1	
carbidopa-levodopa er oral tablet extended release	1		pramipexole dihydrochloride oral tablet	1	
carbidopa-levodopa oral tablet	1		rasagiline mesylate oral tablet	1	
carbidopa-levodopa oral tablet dispersible	1		REQUIP XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
carbidopa-levodopa-entacapone oral tablet	1		ropinirole hcl er oral tablet extended release 24 hour	1	
COGENTIN INJECTION SOLUTION	4		ropinirole hcl oral tablet	1	
COMTAN ORAL TABLET	4		RYTARY ORAL CAPSULE EXTENDED RELEASE	4	
DUOPA ENTERAL SUSPENSION	4	PA	selegiline hcl oral capsule	1	
entacapone oral tablet	1		selegiline hcl oral tablet	1	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA	SINEMET CR ORAL TABLET EXTENDED RELEASE	4	
INBRIJA INHALATION CAPSULE	4	PA			
LODOSYN ORAL TABLET	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SINEMET ORAL TABLET	4		CABLIVI INJECTION KIT	4	PA; QL (1 EA per 1 day)
STALEVO 100 ORAL TABLET	4		cilostazol oral tablet	1	
STALEVO 125 ORAL TABLET	4		clopidogrel bisulfate oral tablet 300 mg	2	
STALEVO 150 ORAL TABLET	4		clopidogrel bisulfate oral tablet 75 mg	1	
STALEVO 200 ORAL TABLET	4		dipyridamole oral tablet	1	
STALEVO 50 ORAL TABLET	4		DURLAZA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
STALEVO 75 ORAL TABLET	4		EFFIENT ORAL TABLET	4	
TASMAR ORAL TABLET	4		eptifibatide intravenous solution	2	
tolcapone oral tablet	1		INTEGRILIN INTRAVENOUS SOLUTION	4	
trihexyphenidyl hcl oral elixir	1		KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	4	
trihexyphenidyl hcl oral tablet	1		PLAVIX ORAL TABLET	4	
XADAGO ORAL TABLET	4	QL (1 EA per 1 day)	prasugrel hcl oral tablet	1	
ZELAPAR ORAL TABLET DISPERSIBLE	4		ZONTIVITY ORAL TABLET	4	
Antiplatelets			Antipsychotics - Drugs for Mood Disorders		
AGGRASTAT INTRAVENOUS CONCENTRATE	4		ABILITY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	4	
AGGRASTAT INTRAVENOUS SOLUTION	4		ABILITY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	
AGGRENOX ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4		ABILITY MYCITE ORAL TABLET	4	QL (1 EA per 1 day)
aspirin-dipyridamole er oral capsule extended release 12 hour	1		ABILITY ORAL TABLET	4	QL (1 EA per 1 day)
BRILINTA ORAL TABLET	3				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	4	PA	FAZACLO ORAL TABLET DISPERSIBLE 100 MG, 25 MG	4	QL (9 EA per 1 day)
aripiprazole oral solution	2	QL (25 ML per 1 day)	FAZACLO ORAL TABLET DISPERSIBLE 12.5 MG	4	QL (3 EA per 1 day)
aripiprazole oral tablet	2	QL (1 EA per 1 day)	FAZACLO ORAL TABLET DISPERSIBLE 150 MG	4	QL (6 EA per 1 day)
aripiprazole oral tablet dispersible	2	QL (2 EA per 1 day)	FAZACLO ORAL TABLET DISPERSIBLE 200 MG	4	QL (4 EA per 1 day)
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	4		fluphenazine decanoate injection solution	2	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	4		fluphenazine hcl injection solution	2	
chlorpromazine hcl injection solution	2		fluphenazine hcl oral concentrate	2	
chlorpromazine hcl oral tablet	2		fluphenazine hcl oral elixir	2	
clozapine oral tablet 100 mg, 25 mg	2	QL (9 EA per 1 day)	fluphenazine hcl oral tablet	2	
clozapine oral tablet 200 mg	2	QL (4 EA per 1 day)	GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
clozapine oral tablet 50 mg	2	QL (6 EA per 1 day)	GEODON ORAL CAPSULE	4	QL (2 EA per 1 day)
clozapine oral tablet dispersible 100 mg, 25 mg	2	QL (9 EA per 1 day)	HALDOL DECANOATE INTRAMUSCULAR SOLUTION	4	
clozapine oral tablet dispersible 12.5 mg	2	QL (3 EA per 1 day)	HALDOL INJECTION SOLUTION	4	
clozapine oral tablet dispersible 150 mg	2	QL (6 EA per 1 day)	haloperidol decanoate intramuscular solution	2	
clozapine oral tablet dispersible 200 mg	2	QL (4 EA per 1 day)	haloperidol lactate injection solution	2	
CLOZARIL ORAL TABLET	4	QL (9 EA per 1 day)	haloperidol lactate oral concentrate	2	
FANAPT ORAL TABLET	4	QL (2 EA per 1 day)	haloperidol oral tablet	2	
FANAPT TITRATION PACK ORAL TABLET	4	QL (8 EA per 180 days)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 1.5 MG, 3 MG, 9 MG	4	QL (1 EA per 1 day)	PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	4	
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	4	QL (2 EA per 1 day)	pimozide oral tablet	2	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 300 mg, 400 mg, 50 mg	2	QL (2 EA per 1 day)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		quetiapine fumarate er oral tablet extended release 24 hour 200 mg	2	QL (3 EA per 1 day)
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	4	QL (1 EA per 1 day)	quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	2	QL (3 EA per 1 day)
LATUDA ORAL TABLET 80 MG	4	QL (2 EA per 1 day)	quetiapine fumarate oral tablet 300 mg, 400 mg	2	QL (2 EA per 1 day)
loxapine succinate oral capsule	2		REXULTI ORAL TABLET	4	QL (1 EA per 1 day)
molindone hcl oral tablet	2		RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED 12.5 MG, 25 MG, 37.5 MG, 50 MG	4	
NUPLAZID ORAL CAPSULE	4		RISPERDAL ORAL SOLUTION	4	QL (8 ML per 1 day)
NUPLAZID ORAL TABLET	4	PA	RISPERDAL ORAL TABLET	4	QL (2 EA per 1 day)
olanzapine intramuscular solution reconstituted	2		risperidone oral solution	2	QL (8 ML per 1 day)
olanzapine oral tablet	2	QL (1 EA per 1 day)	risperidone oral tablet	2	QL (2 EA per 1 day)
olanzapine oral tablet dispersible	2	QL (1 EA per 1 day)	risperidone oral tablet dispersible	2	QL (2 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	2	QL (1 EA per 1 day)	SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	3	QL (2 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	2	QL (2 EA per 1 day)	SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG	4	QL (3 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SEROQUEL ORAL TABLET 300 MG, 400 MG	4	QL (2 EA per 1 day)	abacavir sulfate oral tablet	2	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 400 MG, 50 MG	4	QL (2 EA per 1 day)	abacavir sulfate-lamivudine oral tablet	2	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 200 MG	4	QL (3 EA per 1 day)	abacavir-lamivudine-zidovudine oral tablet	2	
thioridazine hcl oral tablet	2		acyclovir external cream	2	
thiothixene oral capsule	2		acyclovir external ointment	2	
trifluoperazine hcl oral tablet	2		acyclovir oral capsule	2	
VERSACLOZ ORAL SUSPENSION	4	QL (18 ML per 1 day)	acyclovir oral suspension	2	
VRAYLAR ORAL CAPSULE	4	QL (1 EA per 1 day)	acyclovir oral tablet	2	
VRAYLAR ORAL CAPSULE THERAPY PACK	4	QL (14 EA per 365 days)	acyclovir sodium intravenous solution	2	
ziprasidone hcl oral capsule	2	QL (2 EA per 1 day)	adefovir dipivoxil oral tablet	2	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	4		APTIVUS ORAL CAPSULE	3	
ZYPREXA ORAL TABLET	4	QL (1 EA per 1 day)	APTIVUS ORAL SOLUTION	3	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	4		atazanavir sulfate oral capsule	2	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE	4	QL (1 EA per 1 day)	ATRIPLA ORAL TABLET	4	
Antivirals			BARACLUDE ORAL SOLUTION	4	QL (630 ML per 30 days)
abacavir sulfate oral solution	2		BARACLUDE ORAL TABLET	4	QL (1 EA per 1 day)
			BIKTARVY ORAL TABLET	4	
			cidofovir intravenous solution	2	
			CIMDUO ORAL TABLET	3	
			COMBIVIR ORAL TABLET	4	
			COMPLERA ORAL TABLET	3	
			CRIXIVAN ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CYTOVENE INTRAVENOUS SOLUTION RECONSTITUTED	4		FOSCAVIR INTRAVENOUS SOLUTION	4	
DELSTRIGO ORAL TABLET	4		FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	QL (2 EA per 1 day)
DENAVIR EXTERNAL CREAM	4		GANCICLOVIR INTRAVENOUS SOLUTION	4	
DESCOVY ORAL TABLET	4	PA	ganciclovir sodium intravenous solution	2	
didanosine oral capsule delayed release	2		ganciclovir sodium intravenous solution reconstituted	2	
DOVATO ORAL TABLET	3		GENVOYA ORAL TABLET	4	
EDURANT ORAL TABLET	3		HARVONI ORAL TABLET 45-200 MG	3	PA; QL (2 EA per 1 day)
efavirenz oral capsule	2		HARVONI ORAL TABLET 90-400 MG	3	PA; QL (1 EA per 1 day)
efavirenz oral tablet	2		HEPSERA ORAL TABLET	4	
EMTRIVA ORAL CAPSULE	3		INTELENCE ORAL TABLET	3	
EMTRIVA ORAL SOLUTION	3		INTRON A INJECTION SOLUTION	4	PA
entecavir oral tablet	2	QL (1 EA per 1 day)	INTRON A INJECTION SOLUTION RECONSTITUTED	4	PA
EPCLUSA ORAL TABLET	3	PA; QL (1 EA per 1 day)	INVIRASE ORAL TABLET	3	
EPIVIR HBV ORAL SOLUTION	3		ISENTRESS HD ORAL TABLET	3	
EPIVIR HBV ORAL TABLET	4		ISENTRESS ORAL PACKET	3	
EPIVIR ORAL SOLUTION	4		ISENTRESS ORAL TABLET	3	
EPIVIR ORAL TABLET	4		ISENTRESS ORAL TABLET CHEWABLE	3	
EPZICOM ORAL TABLET	4		JULUCA ORAL TABLET	3	
EVOTAZ ORAL TABLET	3				
famciclovir oral tablet	2				
FLUMADINE ORAL TABLET	4				
fosamprenavir calcium oral tablet	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
KALETRA ORAL SOLUTION	4		PEGASYS PROCLICK SUBCUTANEOUS SOLUTION	3	PA
KALETRA ORAL TABLET	3		PEGASYS SUBCUTANEOUS SOLUTION	3	PA
lamivudine oral solution	2		PEGINTRON SUBCUTANEOUS KIT	4	PA
lamivudine oral tablet	2		PIFELTRO ORAL TABLET	4	
lamivudine-zidovudine oral tablet	2		PREVYMIS INTRAVENOUS SOLUTION	4	
LEDIPASVIR-SOFOSBUVIR ORAL TABLET	4	PA; QL (1 EA per 1 day)	PREVYMIS ORAL TABLET	4	
LEXIVA ORAL SUSPENSION	3		PREZCOBIX ORAL TABLET	3	
LEXIVA ORAL TABLET	4		PREZISTA ORAL SUSPENSION	3	
lopinavir-ritonavir oral solution	2		PREZISTA ORAL TABLET	3	
MAVYRET ORAL TABLET	3	PA; QL (3 EA per 1 day)	RAPIVAB INTRAVENOUS SOLUTION	4	
nevirapine er oral tablet extended release 24 hour	2		RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (40 EA per 365 days)
nevirapine oral suspension	2		SCRIPTOR ORAL TABLET	3	
nevirapine oral tablet	2		RETROVIR INTRAVENOUS SOLUTION	3	
NORVIR ORAL PACKET	3		RETROVIR ORAL CAPSULE	4	
NORVIR ORAL SOLUTION	3		RETROVIR ORAL SYRUP	4	
NORVIR ORAL TABLET	4		REYATAZ ORAL CAPSULE	4	
ODEFSEY ORAL TABLET	4		REYATAZ ORAL PACKET	3	
oseltamivir phosphate oral capsule 30 mg	2	QL (40 EA per 365 days)	ribavirin inhalation solution reconstituted	2	
oseltamivir phosphate oral capsule 45 mg, 75 mg	2	QL (20 EA per 365 days)			
oseltamivir phosphate oral suspension reconstituted	2	QL (360 ML per 365 days)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ribavirin oral capsule	2		TIVICAY ORAL TABLET	3	
ribavirin oral tablet	2		TRIUMEQ ORAL TABLET	3	
rimantadine hcl oral tablet	2		TRIZIVIR ORAL TABLET	4	
ritonavir oral tablet	2		TROGARZO INTRAVENOUS SOLUTION	4	PA
SELZENTRY ORAL SOLUTION	3	PA	TRUVADA ORAL TABLET	3	
SELZENTRY ORAL TABLET	3	PA	TYBOST ORAL TABLET	3	
SITAVIG BUCCAL TABLET	4	QL (2 EA per 30 days)	valacyclovir hcl oral tablet	2	QL (4 EA per 1 day)
SOFOSBUVIR-VELPATASVIR ORAL TABLET	4	PA; QL (1 EA per 1 day)	VALCYTE ORAL SOLUTION RECONSTITUTED	4	
SOVALDI ORAL TABLET 200 MG	4	PA; QL (2 EA per 1 day)	VALCYTE ORAL TABLET	4	
SOVALDI ORAL TABLET 400 MG	4	PA; QL (1 EA per 1 day)	valganciclovir hcl oral solution reconstituted	2	
stavudine oral capsule	2		valganciclovir hcl oral tablet	2	
STRIBILD ORAL TABLET	4		VALTREX ORAL TABLET	4	QL (4 EA per 1 day)
SUSTIVA ORAL CAPSULE	4		VEMLIDY ORAL TABLET	4	
SUSTIVA ORAL TABLET	4		VIDEX EC ORAL CAPSULE DELAYED RELEASE	4	
SYMFY LO ORAL TABLET	3		VIDEX ORAL SOLUTION RECONSTITUTED	3	
SYMFY ORAL TABLET	3		VIEKIRA PAK ORAL TABLET THERAPY PACK	4	PA; QL (4 EA per 1 day)
SYMTUZA ORAL TABLET	4		VIRACEPT ORAL TABLET	3	
TAMIFLU ORAL CAPSULE 30 MG	4	QL (40 EA per 365 days)	VIRAMUNE ORAL SUSPENSION	4	
TAMIFLU ORAL CAPSULE 45 MG, 75 MG	4	QL (20 EA per 365 days)	VIRAMUNE ORAL TABLET	4	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	4	QL (360 ML per 365 days)			
TEMIXYS ORAL TABLET	4				
tenofovir disoproxil fumarate oral tablet	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		Anxiolytics - Drugs for Anxiety		
VIRAZOLE INHALATION SOLUTION RECONSTITUTED	4		alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
VIREAD ORAL POWDER	3		alprazolam er oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3		alprazolam er oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
VIREAD ORAL TABLET 300 MG	4		alprazolam intensol oral concentrate	2	QL (10 ML per 1 day)
VOSEVI ORAL TABLET	3	PA	alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	2	QL (4 EA per 1 day)
XERESE EXTERNAL CREAM	4		alprazolam oral tablet 2 mg	2	QL (5 EA per 1 day)
XOFLUZA ORAL TABLET THERAPY PACK	4	QL (4 EA per 365 days)	alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg	2	QL (4 EA per 1 day)
ZEPATIER ORAL TABLET	4	PA; QL (1 EA per 1 day)	alprazolam oral tablet dispersible 2 mg	2	QL (5 EA per 1 day)
ZIAGEN ORAL SOLUTION	4		alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
ZIAGEN ORAL TABLET	4		alprazolam xr oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)
zidovudine oral capsule	2		alprazolam xr oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
zidovudine oral syrup	2		ATIVAN INJECTION SOLUTION	4	
zidovudine oral tablet	2		ATIVAN ORAL TABLET 0.5 MG, 1 MG	4	QL (3 EA per 1 day)
ZOVIRAX EXTERNAL CREAM	4		ATIVAN ORAL TABLET 2 MG	4	QL (5 EA per 1 day)
ZOVIRAX EXTERNAL OINTMENT	4		buspirone hcl oral tablet	2	
ZOVIRAX ORAL CAPSULE	4		chlordiazepoxide hcl oral capsule 10 mg	2	QL (30 EA per 1 day)
ZOVIRAX ORAL SUSPENSION	4		chlordiazepoxide hcl oral capsule 25 mg	2	QL (12 EA per 1 day)
ZOVIRAX ORAL TABLET	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
chlordiazepoxide hcl oral capsule 5 mg	2	QL (4 EA per 1 day)	hydroxyzine hcl oral syrup	2	
clonazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)	hydroxyzine hcl oral tablet	2	
clonazepam oral tablet 2 mg	1	QL (10 EA per 1 day)	hydroxyzine pamoate oral capsule	2	
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	1	QL (3 EA per 1 day)	KLONOPIN ORAL TABLET 0.5 MG, 1 MG	4	QL (3 EA per 1 day)
clonazepam oral tablet dispersible 2 mg	1	QL (10 EA per 1 day)	KLONOPIN ORAL TABLET 2 MG	4	QL (10 EA per 1 day)
clorazepate dipotassium oral tablet 15 mg	2	QL (6 EA per 1 day)	lorazepam injection solution	2	
clorazepate dipotassium oral tablet 3.75 mg	2	QL (24 EA per 1 day)	lorazepam intensol oral concentrate	2	QL (5 ML per 1 day)
clorazepate dipotassium oral tablet 7.5 mg	2	QL (12 EA per 1 day)	lorazepam oral concentrate 2 mg/ml	2	QL (5 ML per 1 day)
diazepam intensol oral concentrate	2		lorazepam oral tablet 0.5 mg, 1 mg	2	QL (3 EA per 1 day)
diazepam intramuscular solution auto-injector	2		lorazepam oral tablet 2 mg	2	QL (5 EA per 1 day)
diazepam oral concentrate	2		meprobamate oral tablet	2	
diazepam oral solution	2		oxazepam oral capsule	2	QL (4 EA per 1 day)
diazepam oral tablet	2		quazepam oral tablet	2	QL (1 EA per 1 day)
diazepam solution 5 mg/ml injection	2		TRANXENE-T ORAL TABLET	4	QL (12 EA per 1 day)
DIAZEPAM SOLUTION 5 MG/ML INJECTION	4		triazolam oral tablet	2	QL (2 EA per 1 day)
DORAL ORAL TABLET	4	QL (1 EA per 1 day)	VALIUM ORAL TABLET	4	
estazolam oral tablet	2	QL (1 EA per 1 day)	VISTARIL ORAL CAPSULE	4	
HALCION ORAL TABLET	4	QL (2 EA per 1 day)	XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG	4	QL (4 EA per 1 day)
hydroxyzine hcl intramuscular solution	2		XANAX ORAL TABLET 2 MG	4	QL (5 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG	4	QL (1 EA per 1 day)	anagrelide hcl oral capsule	2	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2 MG	4	QL (5 EA per 1 day)	ARANESP (ALBUMIN FREE) INJECTION SOLUTION	3	PA
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG	4	QL (3 EA per 1 day)	ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	3	PA
Bipolar Agents - Drugs for Mood Disorders			CYKLOKAPRON INTRAVENOUS SOLUTION	4	
lithium carbonate er oral tablet extended release	2		DOPTELET ORAL TABLET	4	PA
lithium carbonate oral capsule	2		EPOGEN INJECTION SOLUTION	4	PA
lithium carbonate oral tablet	2		FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
lithium oral solution	2		GRANIX SUBCUTANEOUS SOLUTION	4	PA
LITHOBID ORAL TABLET EXTENDED RELEASE	4		GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
Blood Products / Modifiers / Volume Expanders - Drugs for Bleeding Disorders			HESPA ^N INTRAVENOUS SOLUTION	4	
AGRYLIN ORAL CAPSULE	4		hetastarch-nacl intravenous solution	2	
AMICAR ORAL SOLUTION	4		HEXTEND INTRAVENOUS SOLUTION	4	
AMICAR ORAL TABLET	4		LEUKINE INTRAVENOUS SOLUTION RECONSTITUTED 250 MCG	4	PA
aminocaproic acid intravenous solution	2		Imd in d5w solution 10-5 % intravenous	2	
aminocaproic acid oral solution	2				
aminocaproic acid oral tablet	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LMD IN D5W SOLUTION 10-5 % INTRAVENOUS	4		NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
LMD IN NACL INTRAVENOUS SOLUTION	4		PROCRIT INJECTION SOLUTION	4	PA
LYSTEDA ORAL TABLET	4		PROMACTA ORAL PACKET	4	PA
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	4	PA	PROMACTA ORAL TABLET	4	PA
MONSELS FERRIC SUBSULFATE EXTERNAL SOLUTION	4		protamine sulfate intravenous solution	2	
MOZOBIL SUBCUTANEOUS SOLUTION	3	PA; QL (9.6 ML per 365 days)	RECOTHROM EXTERNAL SOLUTION RECONSTITUTED	4	
MULPLETA ORAL TABLET	3	PA	RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	4	
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	4	PA	RETACRIT INJECTION SOLUTION	3	PA
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	SOLIRIS INTRAVENOUS SOLUTION	4	PA
NEUPOGEN INJECTION SOLUTION	4	PA	TAVALISSE ORAL TABLET	4	PA
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	4	PA	THROMBIN-JMI EPISTAXIS EXTERNAL KIT	4	
NIVESTYM INJECTION SOLUTION	3	PA	THROMBIN-JMI EXTERNAL KIT	4	
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	3	PA	THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	4	
			THROMBOGEN EXTERNAL KIT	4	
			THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	4	
			tranexamic acid intravenous solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
tranexamic acid oral tablet	2		adenosine intravenous solution 12 mg/4ml, 6 mg/2ml	2	
TRANEXAMIC ACID-NACL INTRAVENOUS SOLUTION	4		ADENOSINE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	AKOVAZ INTRAVENOUS SOLUTION	4	
ULTOMIRIS INTRAVENOUS SOLUTION	4	PA	ALDACTAZIDE ORAL TABLET	4	
VOLUVEN INTRAVENOUS SOLUTION	4		ALDACTONE ORAL TABLET	4	
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	3	PA	aliskiren fumarate oral tablet	1	
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4		alprostadil injection solution	2	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions			ALTACE ORAL CAPSULE	4	
ACCUPRIL ORAL TABLET	4		ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
ACCURETIC ORAL TABLET	4		amiloride hcl oral tablet	1	
acebutolol hcl oral capsule	1		amiloride-hydrochlorothiazide oral tablet	1	
acetazolamide oral tablet 125 mg	1		AMIODARONE HCL IN DEXTROSE INTRAVENOUS SOLUTION	4	
acetazolamide sodium injection solution reconstituted	2		amiodarone hcl intravenous solution	2	
ADALAT CC ORAL TABLET EXTENDED RELEASE 24 HOUR	4		amiodarone hcl oral tablet	1	
ADENOCARD INTRAVENOUS SOLUTION	4		AMLODIPINE BES+SYRSPEND SF ORAL SUSPENSION	4	
			amlodipine besylate oral tablet	1	
			amlodipine besylate-benazepril hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
amlodipine besylate-valsartan oral tablet	1		BETAPACE ORAL TABLET	4	
amlodipine-atorvastatin oral tablet	1		betaxolol hcl oral tablet	1	
amlodipine-olmesartan oral tablet	1		BIDIL ORAL TABLET	4	
amlodipine-valsartan-hctz oral tablet	1		BIORPHEN INTRAVENOUS SOLUTION	4	
ANTARA ORAL CAPSULE	4		bisoprolol fumarate oral tablet	1	
ASCLERA INTRAVENOUS SOLUTION	4		bisoprolol-hydrochlorothiazide oral tablet	1	
ATACAND HCT ORAL TABLET	4		BREVIBLOC IN NACL INTRAVENOUS SOLUTION	4	
ATACAND ORAL TABLET	4		BREVIBLOC INTRAVENOUS SOLUTION	4	
atenolol oral tablet	1		BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION	4	
ATENOLOL+SYRSPE ND SF ORAL SUSPENSION	4		BREVIBLOC PREMIXED INTRAVENOUS SOLUTION	4	
atenolol-chlorthalidone oral tablet	1		bumetanide injection solution	2	
atorvastatin calcium oral tablet	1		bumetanide oral tablet	1	
AVALIDE ORAL TABLET	4		BUMEX ORAL TABLET	4	
AVAPRO ORAL TABLET	4		BYSTOLIC ORAL TABLET	3	
AZOR ORAL TABLET	4		CADUET ORAL TABLET	4	
benazepril hcl oral tablet	1		CALAN ORAL TABLET	4	
benazepril-hydrochlorothiazide oral tablet	1		CALAN SR ORAL TABLET EXTENDED RELEASE	4	
BENICAR HCT ORAL TABLET	4		candesartan cilexetil oral tablet	1	
BENICAR ORAL TABLET	4		candesartan cilexetil-hctz oral tablet	1	
BETAPACE AF ORAL TABLET	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
captopril oral tablet	1		chlorthalidone oral tablet	1	
captopril-hydrochlorothiazide oral tablet	1		cholestyramine light oral packet	1	
CARDENE IV INTRAVENOUS SOLUTION	4		cholestyramine light oral powder	1	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		cholestyramine oral packet	1	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	4		cholestyramine oral powder	1	
CARDIZEM ORAL TABLET	4		choline fenofibrate oral capsule delayed release	1	
CARDURA ORAL TABLET	4		CLEVIPREX INTRAVENOUS EMULSION	4	
CAROSPIR ORAL SUSPENSION	4		clonidine hcl oral tablet	1	
cartia xt oral capsule extended release 24 hour	1		clonidine transdermal patch weekly	1	
carvedilol oral tablet	1		colesevelam hcl oral packet	1	
carvedilol phosphate er oral capsule extended release 24 hour	1		colesevelam hcl oral tablet	1	
CATAPRES ORAL TABLET	4		COLESTID FLAVORED ORAL GRANULES	4	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	4		COLESTID FLAVORED ORAL PACKET	4	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	4		COLESTID ORAL GRANULES	4	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	4		COLESTID ORAL PACKET	4	
chlorothiazide oral tablet	1		COLESTID ORAL TABLET	4	
chlorothiazide sodium intravenous solution reconstituted	2		colestipol hcl oral granules	1	
			colestipol hcl oral packet	1	
			colestipol hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		diltiazem hcl er coated beads oral tablet extended release 24 hour	1	
COREG ORAL TABLET	4		diltiazem hcl er oral capsule extended release 12 hour	1	
CORGARD ORAL TABLET	4		diltiazem hcl intravenous solution	2	
CORLANOR ORAL SOLUTION	4	PA; QL (15 ML per 1 day)	diltiazem hcl intravenous solution reconstituted	2	
CORLANOR ORAL TABLET	4	PA; QL (2 EA per 1 day)	diltiazem hcl oral tablet	1	
CORLOPAM INTRAVENOUS SOLUTION	4		DILTIAZEM HCL- DEXTROSE INTRAVENOUS SOLUTION	4	
CORVERT INTRAVENOUS SOLUTION	4		DILTIAZEM HCL- SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
COZAAR ORAL TABLET	4		dilt-xr oral capsule extended release 24 hour	1	
CRESTOR ORAL TABLET	4		DIOVAN HCT ORAL TABLET	4	
DEMSER ORAL CAPSULE	4		DIOVAN ORAL TABLET	4	
DIBENZYLINE ORAL CAPSULE	4		disopyramide phosphate oral capsule	1	
digitek oral tablet	1		DIURIL ORAL SUSPENSION	4	
digox oral tablet	1		dobutamine hcl intravenous solution	2	
digoxin injection solution	2		dobutamine in d5w intravenous solution	2	
digoxin oral solution	1		dofetilide oral capsule	1	
digoxin oral tablet	1		dopamine hcl intravenous solution	2	
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE	4		dopamine in d5w intravenous solution	2	
diltiazem hcl er beads oral capsule extended release 24 hour	1		doxazosin mesylate oral tablet	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	4		EPINEPHRINE HCL- DEXTROSE INTRAVENOUS SOLUTION	4	
DYAZIDE ORAL CAPSULE	4		EPINEPHRINE HCL- NAACL INTRAVENOUS SOLUTION	4	
DYRENium ORAL CAPSULE	4		EPINEPHRINE HCL- NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
EDARBI ORAL TABLET	4		EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE	4	
EDARBYCLOR ORAL TABLET	4		epinephrine pf injection solution	2	
EDECrin ORAL TABLET	4		epinephrine pf injection solution prefilled syringe	2	
enalapril maleate oral tablet	1		EPINEPHRINE- DEXTROSE INTRAVENOUS SOLUTION	4	
enalaprilat intravenous injectable	2		EPINEPHRINE-NAACL INTRAVENOUS SOLUTION	4	
enalapril- hydrochlorothiazide oral tablet	1		EPINEPHRINE-NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
ENTRESTO ORAL TABLET	3	QL (2 EA per 1 day)	eplerenone oral tablet	1	
EPANED ORAL SOLUTION	4		eprosartan mesylate oral tablet	1	
EPHEDRINE SULFATE (PRESSORS) INJECTION SOLUTION PREFILLED SYRINGE	4		esmolol hcl intravenous solution 100 mg/10ml	2	
ephedrine sulfate injection solution	2		ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML	4	
ephedrine sulfate intravenous solution	2		esmolol hcl-sodium chloride intravenous solution	2	
EPHEDRINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4				
EPHEDRINE SULFATE-NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ethacrynat sodium intravenous solution reconstituted	2		FLOLIPID ORAL SUSPENSION	4	
ethacrynic acid oral tablet	1		fluvastatin sodium er oral tablet extended release 24 hour	1	
ETHAMOLIN INTRAVENOUS SOLUTION	4		fluvastatin sodium oral capsule	1	
EXFORGE HCT ORAL TABLET	4		fosinopril sodium oral tablet	1	
EXFORGE ORAL TABLET	4		fosinopril sodium-hctz oral tablet	1	
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	4		FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
ezetimibe oral tablet	1		furosemide injection solution	2	
ezetimibe-simvastatin oral tablet	1		furosemide oral solution	1	
felodipine er oral tablet extended release 24 hour	1		furosemide oral tablet	1	
fenofibrate micronized oral capsule	1		gemfibrozil oral tablet	1	
fenofibrate oral capsule	1		GIAPREZA INTRAVENOUS SOLUTION	4	
fenofibrate oral tablet	1		GONITRO SUBLINGUAL PACKET	4	
fenofibric acid oral capsule delayed release	1		guanfacine hcl oral tablet	1	
fenofibric acid oral tablet	1		HEMANGEOL ORAL SOLUTION	4	
FENOGLIDE ORAL TABLET	4		hydralazine hcl injection solution	2	
FIBRICOR ORAL TABLET	4		hydralazine hcl oral tablet	1	
FIRST - METOPROLOL ORAL SOLUTION	4		hydrochlorothiazide oral capsule	1	
FIRST-ATENOLOL ORAL SOLUTION	4		hydrochlorothiazide oral tablet	1	
flecainide acetate oral tablet	1		HYZAAR ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ibutilide fumarate intravenous solution	2		labetalol hcl intravenous solution	2	
indapamide oral tablet	1		LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		labetalol hcl oral tablet	1	
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		LANOXIN INJECTION SOLUTION	4	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		LANOXIN ORAL TABLET	3	
INSPRA ORAL TABLET	4		LANOXIN PEDIATRIC INJECTION SOLUTION	4	
irbesartan oral tablet	1		LASIX ORAL TABLET	4	
irbesartan-hydrochlorothiazide oral tablet	1		LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
isoproterenol hcl injection solution	2		LEVOPHED INTRAVENOUS SOLUTION	4	
ISORDIL TITRADOSE ORAL TABLET	4		LIPITOR ORAL TABLET	4	
isosorbide dinitrate er oral tablet extended release	1		LIPOFEN ORAL CAPSULE	4	
isosorbide dinitrate oral tablet	1		lisinopril oral tablet	1	
isosorbide mononitrate er oral tablet extended release 24 hour	1		lisinopril-hydrochlorothiazide oral tablet	1	
isosorbide mononitrate oral tablet	1		LIVALO ORAL TABLET	4	
isradipine oral capsule	1		LOPID ORAL TABLET	4	
ISUPREL INJECTION SOLUTION	4		LOPRESSOR HCT ORAL TABLET	4	
JUXTAPID ORAL CAPSULE	4	PA; QL (1 EA per 1 day)	LOPRESSOR ORAL TABLET	4	
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE	4		losartan potassium oral tablet	1	
KATERZIA ORAL SUSPENSION	4		losartan potassium-hctz oral tablet	1	
			LOTENSIN HCT ORAL TABLET	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LOTENSIN ORAL TABLET	4		MICARDIS ORAL TABLET	4	
LOTREL ORAL CAPSULE	4		midodrine hcl oral tablet	2	
lovastatin oral tablet	1		milrinone lactate in dextrose intravenous solution	2	
LOVAZA ORAL CAPSULE	4	PA	milrinone lactate intravenous solution	2	
mannitol intravenous solution	2		MINIPRESS ORAL CAPSULE	4	
matzim la oral tablet extended release 24 hour	1		minitran transdermal patch 24 hour	1	
MAXZIDE ORAL TABLET	4		minoxidil oral tablet	1	
MAXZIDE-25 ORAL TABLET	4		moexipril hcl oral tablet	1	
methyldopa oral tablet	1		MULTAQ ORAL TABLET	4	
methyldopa-hydrochlorothiazide oral tablet	1		nadolol oral tablet	1	
metolazone oral tablet	1		NEXTERONE INTRAVENOUS SOLUTION	4	
metoprolol succinate er oral tablet extended release 24 hour	1		niacin (antihyperlipidemic) oral tablet	1	
metoprolol tartrate intravenous solution	2		niacin er (antihyperlipidemic) oral tablet extended release	1	
metoprolol tartrate intravenous solution cartridge	2		niacor oral tablet	1	
metoprolol tartrate oral tablet	1		NIASPAN ORAL TABLET EXTENDED RELEASE	4	
METOPROLOL-HCTZ ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4		NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION	4	
metoprolol-hydrochlorothiazide oral tablet	1		NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
mexiletine hcl oral capsule	1		nicardipine hcl intravenous solution	2	
MICARDIS HCT ORAL TABLET	4		nicardipine hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
nifedipine er oral tablet extended release 24 hour	1		NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	4	
nifedipine er osmotic release oral tablet extended release 24 hour	1		nitro-time oral capsule extended release	1	
nifedipine oral capsule	1		norepinephrine bitartrate intravenous solution	2	
nimodipine oral capsule	1		NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION	4	
NIPRIDE RTU INTRAVENOUS SOLUTION	4		NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
nisoldipine er oral tablet extended release 24 hour	1		NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
NITRO-BID TRANSDERMAL OINTMENT	4		NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	4		NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
nitroglycerin in d5w intravenous solution	2		NORPACE ORAL CAPSULE	4	
nitroglycerin intravenous solution	2		NORTHERA ORAL CAPSULE	4	PA
nitroglycerin sublingual tablet sublingual	2		NORVASC ORAL TABLET	4	
nitroglycerin transdermal patch 24 hour	1		NYMALIZE ORAL SOLUTION	4	
nitroglycerin translingual solution	2		olmesartan medoxomil oral tablet	1	
NITROLINGUAL TRANSLINGUAL SOLUTION	4		olmesartan medoxomil-hctz oral tablet	1	
NITROMIST TRANSLINGUAL AEROSOL SOLUTION	4		olmesartan-amlodipine-hctz oral tablet	1	
NITROPRESS INTRAVENOUS SOLUTION	4				
nitroprusside sodium intravenous solution	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
OMEGA-3/D-3 WELLNESS PACK ORAL KIT	4		PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION	4	
omega-3-acid ethyl esters oral capsule	1	PA	PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
osmitrol intravenous solution	2		pindolol oral tablet	1	
PACERONE ORAL TABLET 100 MG, 400 MG	4		POLIDOCANOL INTRAVENOUS SOLUTION	4	
pacerone oral tablet 200 mg	1		PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/ML	3	PA; QL (0.08 ML per 1 day)
papaverine hcl injection solution	2		PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 150 MG/ML, 75 MG/ML	3	PA; QL (0.08 ML per 1 day)
pentoxifylline er oral tablet extended release	1		PRAVACHOL ORAL TABLET	4	
perindopril erbumine oral tablet	1		pravastatin sodium oral tablet	1	
phenoxybenzamine hcl oral capsule	1		prazosin hcl oral capsule	1	
phentolamine mesylate injection solution reconstituted	2		PRESTALIA ORAL TABLET	4	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		prevalite oral packet	1	
phenylephrine hcl injection solution 10 mg/ml	2		prevalite oral powder	1	
phenylephrine hcl intravenous solution	2		PRINIVIL ORAL TABLET	4	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		procainamide hcl injection solution	2	
PHENYLEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION	4		PROCARDIA ORAL CAPSULE	4	
			PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
propafenone hcl er oral capsule extended release 12 hour	1		RECTIV RECTAL OINTMENT	4	
propafenone hcl oral tablet	1		REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL (0.13 ML per 1 day)
propranolol hcl er oral capsule extended release 24 hour	1		REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (0.11 ML per 1 day)
propranolol hcl intravenous solution	2		REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (0.11 ML per 1 day)
propranolol hcl oral solution	1		rosuvastatin calcium oral tablet	1	
propranolol hcl oral tablet	1		RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	
propranolol-hctz oral tablet	1		simvastatin oral tablet	1	
PROSTIN VR INJECTION SOLUTION	4		SODIUM DIURIL INTRAVENOUS SOLUTION RECONSTITUTED	4	
QBRELIS ORAL SOLUTION	4		SODIUM EDECIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
QUESTRAN LIGHT ORAL POWDER	4		sorine oral tablet	1	
QUESTRAN ORAL PACKET	4		sotalol hcl (af) oral tablet	1	
QUESTRAN ORAL POWDER	4		SOTALOL HCL INTRAVENOUS SOLUTION	4	
quinapril hcl oral tablet	1		sotalol hcl oral tablet	1	
quinapril-hydrochlorothiazide oral tablet	1		SOTRADECOL INTRAVENOUS SOLUTION	4	
quinidine gluconate er oral tablet extended release	1		SOTYLIZE ORAL SOLUTION	4	
quinidine sulfate oral tablet	1				
ramipril oral capsule	1				
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR	4				
ranolazine er oral tablet extended release 12 hour	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
spironolactone oral tablet	1		torsemide oral tablet	1	
spironolactone-hctz oral tablet	1		trandolapril oral tablet	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		trandolapril-verapamil hcl er oral tablet extended release	1	
SURE RESULT O3D3 SYSTEM ORAL KIT	4		triamterene oral capsule	1	
TARKA ORAL TABLET EXTENDED RELEASE	4		triamterene-hctz oral capsule	1	
taztia xt oral capsule extended release 24 hour	1		triamterene-hctz oral tablet	1	
TEKTURNA HCT ORAL TABLET	3		TRIBENZOR ORAL TABLET	4	
TEKTURNA ORAL TABLET	3		TRICOR ORAL TABLET	4	
telmisartan oral tablet	1		TRILIPIX ORAL CAPSULE DELAYED RELEASE	4	
telmisartan-amlodipine oral tablet	1		TWYNSTA ORAL TABLET	4	
telmisartan-hctz oral tablet	1		valsartan oral tablet	1	
TENORETIC 100 ORAL TABLET	4		valsartan-hydrochlorothiazide oral tablet	1	
TENORETIC 50 ORAL TABLET	4		VARITHENA INTRAVENOUS FOAM	4	
TENORMIN ORAL TABLET	4		VASCEPA ORAL CAPSULE	3	PA
tiadylt er oral capsule extended release 24 hour	1		VASERETIC ORAL TABLET	4	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		VASOTEC ORAL TABLET	4	
TIKOSYN ORAL CAPSULE	4		VAZCULEP INTRAVENOUS SOLUTION	4	
timolol maleate oral tablet	1		VECAMYL ORAL TABLET	4	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4		verapamil hcl er oral capsule extended release 24 hour	1	
			verapamil hcl er oral tablet extended release	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
verapamil hcl intravenous solution	2		ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG	4	PA; QL (4 EA per 1 day)
verapamil hcl oral tablet	1		ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 35 MG, 45 MG, 55 MG, 70 MG, 85 MG	4	PA; QL (1 EA per 1 day)
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		ADZENYS ER ORAL SUSPENSION EXTENDED RELEASE	4	PA; QL (15 ML per 1 day)
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	4	QL (1 EA per 1 day)
VYNDAMAX ORAL CAPSULE	4	PA; QL (1 EA per 1 day)	amphetamine sulfate oral tablet	2	PA; QL (6 EA per 1 day)
VYNDAQEL ORAL CAPSULE	4	PA; QL (4 EA per 1 day)	amphetamine-dextroamphetamine er oral capsule extended release 24 hour	2	PA; QL (1 EA per 1 day)
VYTORIN ORAL TABLET	4		amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	2	PA; QL (3 EA per 1 day)
WELCHOL ORAL PACKET	4		amphetamine-dextroamphetamine oral tablet 30 mg	2	PA; QL (2 EA per 1 day)
WELCHOL ORAL TABLET	4		APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)
ZESTORETIC ORAL TABLET	4		atomoxetine hcl oral capsule 10 mg, 40 mg	2	QL (2 EA per 1 day)
ZESTRIL ORAL TABLET	4		atomoxetine hcl oral capsule 100 mg, 18 mg, 25 mg, 60 mg, 80 mg	2	QL (1 EA per 1 day)
ZETIA ORAL TABLET	4		clonidine hcl er oral tablet extended release 12 hour	2	
ZIAC ORAL TABLET	4				
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	4				
ZYPITAMAG ORAL TABLET	4				
Central Nervous System Agents - Drugs for Attention Deficit Disorder					
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 5 MG, 7.5 MG	4	PA; QL (3 EA per 1 day)			
ADDERALL ORAL TABLET 30 MG	4	PA; QL (2 EA per 1 day)			
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG	4	PA; QL (1 EA per 1 day)	dexamethylphenidate hcl er oral capsule extended release 24 hour 20 mg	2	PA; QL (2 EA per 1 day)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG	4	PA; QL (2 EA per 1 day)	dexamethylphenidate hcl oral tablet	2	PA; QL (2 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG	4	PA; QL (3 EA per 1 day)	dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	2	PA; QL (6 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 25.9 MG	4	PA; QL (2 EA per 1 day)	dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	2	PA; QL (4 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 8.6 MG	4	PA; QL (6 EA per 1 day)	dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	2	PA; QL (3 EA per 1 day)
DAYTRANA TRANSDERMAL PATCH	4	PA; QL (1 EA per 1 day)	dextroamphetamine sulfate oral solution	2	PA; QL (60 ML per 1 day)
DESOXYN ORAL TABLET	4	PA; QL (5 EA per 1 day)	dextroamphetamine sulfate oral tablet 10 mg	2	PA; QL (6 EA per 1 day)
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	4	PA; QL (6 EA per 1 day)	dextroamphetamine sulfate oral tablet 5 mg	2	PA; QL (3 EA per 1 day)
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15 MG	4	PA; QL (4 EA per 1 day)	DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	4	PA; QL (8 ML per 1 day)
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 5 MG	4	PA; QL (3 EA per 1 day)	EVEKEO ODT ORAL TABLET DISPERSIBLE 10 MG, 5 MG	4	PA; QL (3 EA per 1 day)
dexamethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	2	PA; QL (1 EA per 1 day)	EVEKEO ODT ORAL TABLET DISPERSIBLE 15 MG, 20 MG	4	PA; QL (2 EA per 1 day)
			EVEKEO ORAL TABLET	4	PA; QL (6 EA per 1 day)
			FOCALIN ORAL TABLET	4	PA; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG	4	PA; QL (1 EA per 1 day)	methylphenidate hcl er oral tablet extended release 18 mg, 27 mg, 54 mg, 72 mg	2	PA; QL (1 EA per 1 day)
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG	4	PA; QL (2 EA per 1 day)	methylphenidate hcl er oral tablet extended release 20 mg	2	PA; QL (3 EA per 1 day)
guanfacine hcl er oral tablet extended release 24 hour	1		methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg	2	PA; QL (1 EA per 1 day)
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR	4		methylphenidate hcl er oral tablet extended release 24 hour 36 mg	2	PA; QL (2 EA per 1 day)
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)	methylphenidate hcl oral solution 10 mg/5ml	2	PA; QL (30 ML per 1 day)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	4		methylphenidate hcl oral solution 5 mg/5ml	2	PA; QL (60 ML per 1 day)
metadate er oral tablet extended release	2	PA; QL (3 EA per 1 day)	methylphenidate hcl oral tablet	2	PA; QL (3 EA per 1 day)
methamphetamine hcl oral tablet	2	PA; QL (5 EA per 1 day)	methylphenidate hcl oral tablet chewable 10 mg	2	PA; QL (6 EA per 1 day)
METHYLIN ORAL SOLUTION 10 MG/5ML	4	PA; QL (30 ML per 1 day)	methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	2	PA; QL (3 EA per 1 day)
METHYLIN ORAL SOLUTION 5 MG/5ML	4	PA; QL (60 ML per 1 day)	MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)
methylphenidate hcl er (cd) oral capsule extended release	2	PA; QL (1 EA per 1 day)	PROCENTRA ORAL SOLUTION	4	PA; QL (60 ML per 1 day)
methylphenidate hcl er (la) oral capsule extended release 24 hour	2	PA; QL (1 EA per 1 day)	QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 40 MG	4	PA; QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg, 36 mg	2	PA; QL (2 EA per 1 day)	QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG	4	PA; QL (2 EA per 1 day)
			QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	4	PA; QL (12 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
relexxii oral tablet extended release	2	PA; QL (1 EA per 1 day)	COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	3	PA; QL (1 ML per 1 day)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; QL (1 EA per 1 day)	COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	3	PA; QL (0.43 ML per 1 day)
RITALIN ORAL TABLET	4	PA; QL (3 EA per 1 day)	dalfampridine er oral tablet extended release 12 hour	2	PA; QL (2 EA per 1 day)
STRATTERA ORAL CAPSULE 10 MG, 40 MG	4	QL (2 EA per 1 day)	EXTAVIA SUBCUTANEOUS KIT	4	PA; QL (0.5 EA per 1 day)
STRATTERA ORAL CAPSULE 100 MG, 18 MG, 25 MG, 60 MG, 80 MG	4	QL (1 EA per 1 day)	GILENYA ORAL CAPSULE	4	PA; QL (1 EA per 1 day)
VYVANSE ORAL CAPSULE	3	PA; QL (1 EA per 1 day)	glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	2	PA; QL (1 ML per 1 day)
VYVANSE ORAL TABLET CHEWABLE	3	PA; QL (1 EA per 1 day)	glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	2	PA; QL (0.43 ML per 1 day)
ZENZEDI ORAL TABLET 10 MG	4	PA; QL (6 EA per 1 day)	glatopa subcutaneous solution prefilled syringe 20 mg/ml	2	PA; QL (1 ML per 1 day)
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG	4	PA; QL (3 EA per 1 day)	glatopa subcutaneous solution prefilled syringe 40 mg/ml	2	PA; QL (0.43 ML per 1 day)
ZENZEDI ORAL TABLET 30 MG	4	PA; QL (2 EA per 1 day)	LEMTRADA INTRAVENOUS SOLUTION	4	PA
Central Nervous System Agents - Drugs for Multiple Sclerosis			MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	4	PA
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	4	PA; QL (2 EA per 1 day)	MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	4	PA
AUBAGIO ORAL TABLET	4	PA; QL (1 EA per 1 day)	MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	4	PA
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	3	PA; QL (0.04 EA per 1 day)			
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	3	PA; QL (0.04 EA per 1 day)			
BETASERON SUBCUTANEOUS KIT	3	PA; QL (0.5 EA per 1 day)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	4	PA	REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (4.2 ML per 365 days)
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	4	PA	REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (0.22 ML per 1 day)
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	4	PA	REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (4.2 ML per 365 days)
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	4	PA	TECFIDERA STARTER PACK	3	PA; QL (60 EA per 365 days)
MAYZENT ORAL TABLET 0.25 MG	4	PA; QL (4 EA per 1 day)	TECFIDERA ORAL CAPSULE DELAYED RELEASE	3	PA; QL (2 EA per 1 day)
MAYZENT ORAL TABLET 2 MG	4	PA; QL (1 EA per 1 day)	TYSABRI INTRAVENOUS CONCENTRATE	4	PA; QL (0.54 ML per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	4	PA; QL (24 EA per 365 days)	VUMERITY (STARTER) ORAL CAPSULE DELAYED RELEASE	4	
OCREVUS INTRAVENOUS SOLUTION	4	PA; QL (40 ML per 365 days)	VUMERITY ORAL CAPSULE DELAYED RELEASE	4	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (0.04 ML per 1 day)	Central Nervous System Agents - Miscellaneous		
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (0.04 ML per 1 day)	ADDYI ORAL TABLET	4	PA; QL (1 EA per 1 day)
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (0.04 ML per 1 day)	ADIPEX-P ORAL CAPSULE	4	PA
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (0.04 ML per 1 day)	ADIPEX-P ORAL TABLET	4	PA
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (0.22 ML per 1 day)	ANECTINE INJECTION SOLUTION	4	
			atracurium besylate intravenous solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
AUSTEDO ORAL TABLET	4	PA; QL (4 EA per 1 day)	GRALISE STARTER ORAL	4	QL (156 EA per 365 days)
BELVIQ ORAL TABLET	4	PA	HORIZANT ORAL TABLET EXTENDED RELEASE	4	PA; QL (2 EA per 1 day)
BELVIQ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	PA	INGREZZA ORAL CAPSULE 40 MG	4	PA; QL (2 EA per 1 day)
benzphetamine hcl oral tablet	2	PA	INGREZZA ORAL CAPSULE 80 MG	4	PA; QL (1 EA per 1 day)
CAFCIT INTRAVENOUS SOLUTION	4		INGREZZA ORAL CAPSULE THERAPY PACK	4	PA; QL (56 EA per 365 days)
caffeine citrate intravenous solution	2		LOMAIRA ORAL TABLET	4	PA
caffeine citrate oral solution	2		LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 82.5 MG	4	QL (3 EA per 1 day)
CAFFEINE-SODIUM BENZOATE INJECTION SOLUTION	4		LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 330 MG	4	QL (2 EA per 1 day)
cisatracurium besylate (pf) intravenous solution	2		LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 50 MG, 75 MG	4	QL (3 EA per 1 day)
cisatracurium besylate intravenous solution 10 mg/ml, 2 mg/ml, 20 mg/10ml	2		LYRICA ORAL CAPSULE 300 MG	4	QL (2 EA per 1 day)
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA	LYRICA ORAL SOLUTION	4	QL (30 ML per 1 day)
diethylpropion hcl er oral tablet extended release 24 hour	2	PA	NEURAPTINE EXTERNAL CREAM	4	
diethylpropion hcl oral tablet	2	PA	NIMBEX INTRAVENOUS SOLUTION	4	
DOPRAM INTRAVENOUS SOLUTION	4		NUEDEXTA ORAL CAPSULE	4	PA
GRALISE ORAL TABLET 300 MG	4	QL (6 EA per 1 day)	ONPATTRO INTRAVENOUS SOLUTION	4	PA
GRALISE ORAL TABLET 600 MG	4	QL (3 EA per 1 day)	pancuronium bromide intravenous solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
phendimetrazine tartrate er oral capsule extended release 24 hour	2	PA	SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA
phendimetrazine tartrate oral tablet	2	PA	succinylcholine chloride injection solution	2	
phentermine hcl oral capsule	2	PA	SUCCINYLCHOLINE CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE	4	
phentermine hcl oral tablet	2	PA	SUCCINYLCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	1	QL (3 EA per 1 day)	TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
pregabalin oral capsule 300 mg	1	QL (2 EA per 1 day)	tetrabenazine oral tablet	2	PA
pregabalin oral solution	1	QL (30 ML per 1 day)	TIGLUTIK ORAL SUSPENSION	4	PA; QL (20 ML per 1 day)
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA	VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
QUELICIN INJECTION SOLUTION	4		vecuronium bromide intravenous solution reconstituted	2	
RADICAVA INTRAVENOUS SOLUTION	4	PA	VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (0.08 ML per 1 day)
RILUTEK ORAL TABLET	4	PA; QL (2 EA per 1 day)	XENAZINE ORAL TABLET	4	PA
riluzole oral tablet	2	PA; QL (2 EA per 1 day)	XENICAL ORAL CAPSULE	4	PA
rocuronium bromide intravenous solution	2				
ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4				
SAVELLA ORAL TABLET	4	QL (2 EA per 1 day)			
SAVELLA TITRATION PACK ORAL	4	QL (55 EA per 365 days)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
Dental and Oral Agents - Drugs for Mouth and Throat Conditions					
ARESTIN DENTAL	4		MUCOSITISRX MOUTH/THROAT PACKET	4	
BOCASAL MOUTH/THROAT PACKET	4		NAFRINSE DAILY ACIDULATED MOUTH/THROAT SOLUTION RECONSTITUTED	4	
cevimeline hcl oral capsule	1		NEUTRASAL MOUTH/THROAT PACKET	4	
chlorhexidine gluconate mouth/throat solution	2		NUMOISYN MOUTH/THROAT LOZENGE	4	
DEBACTEROL MOUTH/THROAT SOLUTION	4		NUSURGEPAK SURGICAL PREP/CARE EXTERNAL KIT	4	
DERMACINRX CLORHEXACIN EXTERNAL KIT	4		oralone mouth/throat paste	2	
DERMACINRX SURGICAL PHARMAPAK EXTERNAL KIT	4		paroex mouth/throat solution	2	
EVOXAC ORAL CAPSULE	4		PERIDEX MOUTH/THROAT SOLUTION	4	
FIRST-MOUTHWASH BLM MOUTH/THROAT SUSPENSION	4		periogard mouth/throat solution	2	
fluoridex sensitivity relief dental paste	2		pilocarpine hcl oral tablet	1	
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	3		PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE	4	
lidocaine hcl mouth/throat solution	2		PREVIDENT 5000 SENSITIVE DENTAL PASTE	4	
lidocaine viscous mouth/throat solution 2 %	2		REMESENSE DENTAL	4	
MI PASTE DENTAL PASTE	4		SALAGEN ORAL TABLET	4	
MI PASTE PLUS DENTAL PASTE	4		SALIVAMAX MOUTH/THROAT PACKET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TOPEX TOPICAL ANESTHETIC MOUTH/THROAT AEROSOL	4		ADVANCED ALLERGY COLLECTION EXTERNAL KIT	4	
triamcinolone acetonide mouth/throat paste	2		AKLIEF EXTERNAL CREAM	4	
XEROSTOMIA RELIEF SPRAY MOUTH/THROAT SOLUTION	4		AKTIPAK EXTERNAL PACKET	4	
Dermatological Agents - Drugs for Skin Conditions			ALA SCALP EXTERNAL LOTION	4	
A.A.G.C. KIT IN TERODERM EXTERNAL CREAM	4		ala-cort external cream	2	
ABSORICA ORAL CAPSULE	4	PA	alclometasone dipropionate external cream	2	
ACANYA EXTERNAL GEL	4		alclometasone dipropionate external ointment	2	
acitretin oral capsule	2		ALCOHOL PREP PADS EXTERNAL 70 %	4	
ACTIVE-PREP KIT IV EXTERNAL CREAM	4		ALDARA EXTERNAL CREAM	4	
ACTIVE-PREP KIT V EXTERNAL CREAM	4		ALEVAMAX EXTERNAL CREAM	4	
ACTIVE-TRAMADOL EXTERNAL CREAM	4		ALEVICYN ANTIPRURITIC EXTERNAL GEL	4	
ACZONE EXTERNAL GEL 5 %	4		ALEVICYN ANTIPRURITIC SG EXTERNAL GEL	4	
ACZONE EXTERNAL GEL 7.5 %	3		ALTRENO EXTERNAL LOTION	4	PA
adapalene external cream	2	PA	amcinonide external cream	2	
adapalene external gel	2	PA	amcinonide external lotion	2	
ADAPALENE EXTERNAL PAD	4	PA	amcinonide external ointment	2	
ADAPALENE EXTERNAL SOLUTION	4	PA	AMELUZ EXTERNAL GEL	4	
adapalene-benzoyl peroxide external gel	2		ammonium lactate external cream	2	
			ammonium lactate external lotion	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
amnesteem oral capsule	2	PA	BENZACLIN WITH PUMP EXTERNAL GEL	4	
ANACAIN EXTERNAL OINTMENT	4		BENZAMYCIN EXTERNAL GEL	4	
APEXICON E EXTERNAL CREAM	4		benzepro creamy wash external liquid	2	
arzol silver nit applicators external	2		BENZEPRO EXTERNAL	4	
ATOPADERM EXTERNAL CREAM	4		BENZEPRO EXTERNAL FOAM 5.2 %, 9.7 %	4	
ATOPICLAIR EXTERNAL CREAM	4		benzepro external foam 5.3 %	2	
ATRALIN EXTERNAL GEL	4	PA	BENZEPRO EXTERNAL LIQUID	4	
avar cleanser external emulsion	2		benzepro foaming cloths external	2	
AVAR EXTERNAL PAD	4		BENZEPRO SHORT CONTACT EXTERNAL FOAM	4	
AVAR LS CLEANSER EXTERNAL LIQUID	4		BENZIQ EXTERNAL GEL	4	
AVAR LS EXTERNAL PAD	4		BENZIQ LS EXTERNAL GEL	4	
AVAR-E EMOLlient EXTERNAL CREAM	4		BENZIQ WASH EXTERNAL LIQUID	4	
AVAR-E GREEN EXTERNAL CREAM	4		BENZOYL PEROX-HYDROCORTISONE EXTERNAL LOTION	4	
AVAR-E LS EXTERNAL CREAM	4		benzoyl peroxide external foam 9.8 %	2	
avita external cream	2	PA	BENZOYL PEROXIDE EXTERNAL GEL 6.5 %	4	
avita external gel	2	PA	BENZOYL PEROXIDE FORTE- HC EXTERNAL LOTION	4	
azelaic acid external gel	2		benzoyl peroxide-erythromycin external gel	2	
AZELEX EXTERNAL CREAM	4		BESER EXTERNAL KIT	4	
BENSAL HP EXTERNAL OINTMENT	4		beser external lotion	2	
BENZAC AC WASH EXTERNAL LIQUID	4				
BENZAACLIN EXTERNAL GEL	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
betamethasone dipropionate aug external cream	2		calcipotriene external solution	2	
betamethasone dipropionate aug external gel	2		calcipotriene-betameth diprop external ointment	2	QL (13.4 GM per 1 day)
betamethasone dipropionate aug external lotion	2		CALCITRENE EXTERNAL OINTMENT	4	
betamethasone dipropionate aug external ointment	2		calcitriol external ointment	2	
betamethasone dipropionate external cream	2		CANTHARIDIN EXTERNAL SOLUTION	4	
betamethasone dipropionate external lotion	2		CAPEX EXTERNAL SHAMPOO	4	
betamethasone dipropionate external ointment	2		CARAC EXTERNAL CREAM	4	
betamethasone valerate external cream	2		cem-urea external solution	2	
betamethasone valerate external foam	2		CERACADE EXTERNAL EMULSION	4	
betamethasone valerate external lotion	2		ceramax external cream	2	
betamethasone valerate external ointment	2		CERAMAX EXTERNAL LOTION	4	
bp 10-1 external emulsion	2		cerovel external lotion	2	
bp cleansing wash external emulsion	2		claravis oral capsule	2	PA
bp foam external foam	2		CLEOCIN-T EXTERNAL GEL	4	
bp wash external liquid 2.5 %, 7 %	2		CLEOCIN-T EXTERNAL LOTION	4	
BRYHALI EXTERNAL LOTION	4		CLINDACIN ETZ EXTERNAL KIT	4	
calcipotriene external cream	2		clindacin etz external swab	2	
calcipotriene external ointment	2		CLINDACIN PAC EXTERNAL KIT	4	
			clindacin-p external swab	2	
			CLINDAGEL EXTERNAL GEL	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
clindamycin phospho-benzoyl perox external gel	2		clobetasol propionate external solution	2	
clindamycin phosphate external foam	2		CLOBEX EXTERNAL LOTION	4	
clindamycin phosphate external lotion	2		CLOBEX EXTERNAL SHAMPOO	4	
clindamycin phosphate external solution	2		CLOBEX SPRAY EXTERNAL LIQUID	4	
clindamycin phosphate external swab	2		clocortolone pivalate external cream	2	
CLINDAMYCIN PHOSPHATE GEL 1 % EXTERNAL	4		CLODAN EXTERNAL KIT	4	
clindamycin phosphate gel 1 % external	2		clodan external shampoo	2	
clindamycin-tretinoin external gel	2		CLODERM EXTERNAL CREAM	4	
CLINOIN EXTERNAL CREAM	4		clotrimazole-betamethasone external cream	2	
clobetasol prop emollient base external cream	2		clotrimazole-betamethasone external lotion	2	
clobetasol propionate e external cream	2		coal tar external solution	2	
clobetasol propionate emulsion external foam	2		CONDYLOX EXTERNAL GEL	4	
clobetasol propionate external cream	2		CORDRAN EXTERNAL CREAM	4	
clobetasol propionate external foam	2		CORDRAN EXTERNAL LOTION	4	
clobetasol propionate external gel	2		CORDRAN EXTERNAL OINTMENT	4	
clobetasol propionate external liquid	2		CORTISPORIN EXTERNAL CREAM	4	
clobetasol propionate external lotion	2		CORTISPORIN EXTERNAL OINTMENT	4	
clobetasol propionate external ointment	2		CUTIVATE EXTERNAL LOTION	4	
clobetasol propionate external shampoo	2		dapsone external gel	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
DERMACINRX SURGICAL COMBOPAK COMBINATION KIT	4		DIPROLENE EXTERNAL OINTMENT	4	
DERMA-SMOOTH/F/S BODY EXTERNAL OIL	4		DOVONEX EXTERNAL CREAM	4	
DERMA-SMOOTH/F/S SCALP EXTERNAL OIL	4		doxepin hcl external cream	2	
DESONATE EXTERNAL GEL	4		doxycycline oral capsule delayed release	2	
desonide external cream	2		DRITHO-CREME HP EXTERNAL CREAM	4	
desonide external lotion	2		DRYSOL EXTERNAL SOLUTION	4	
desonide external ointment	2		DUAC EXTERNAL GEL	4	
DESOWEN EXTERNAL CREAM	4		DUOBRII EXTERNAL LOTION	4	PA
desoximetasone external cream	2		DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (0.29 ML per 1 day)
desoximetasone external gel	2		EFUDEX EXTERNAL CREAM	4	
desoximetasone external liquid	2		ELETONE EXTERNAL CREAM	4	
desoximetasone external ointment	2		ELETONE TWINPACK EXTERNAL CREAM	4	
DEXERYL EXTERNAL CREAM	4		ELIDEL EXTERNAL CREAM	4	
diclofenac sodium transdermal gel 3 %	2	QL (10 GM per 1 day)	ELOCON EXTERNAL CREAM	4	
DIFFERIN EXTERNAL CREAM	4	PA	EMULSION SB EXTERNAL EMULSION	4	
DIFFERIN EXTERNAL GEL 0.3 %	4	PA	ENOVARX-TRAMADOL EXTERNAL CREAM	4	
DIFFERIN EXTERNAL LOTION	4	PA	ENSTILAR EXTERNAL FOAM	4	QL (15 GM per 1 day)
diflorasone diacetate external cream	2				
diflorasone diacetate external ointment	2				
DIPROLENE AF EXTERNAL CREAM	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ENTTY SPRAY EMULSION EXTERNAL EMULSION	4		fluocinolone acetonide external cream	2	
ENZOCLEAR EXTERNAL FOAM	4		fluocinolone acetonide external ointment	2	
EPICERAM EXTERNAL EMULSION	4		fluocinolone acetonide external solution	2	
EPICYN EXTERNAL SOLUTION	4		fluocinolone acetonide scalp external oil	2	
EPIDUO EXTERNAL GEL	4		fluocinonide emulsified base external cream	2	
EPIDUO FORTE EXTERNAL GEL	4		fluocinonide external cream	2	
EPIFOAM EXTERNAL FOAM	4		fluocinonide external gel	2	
ery external pad	2		fluocinonide external ointment	2	
ERYGEL EXTERNAL GEL	4		fluocinonide external solution	2	
erythromycin external gel	2		FLUOROPLEX EXTERNAL CREAM	4	
erythromycin external solution	2		FLUOROURACIL EXTERNAL CREAM 0.5 %	3	
ESKATA EXTERNAL SOLUTION	4		fluorouracil external cream 5 %	2	
EUCRISA EXTERNAL OINTMENT	3		fluorouracil external solution	2	
EVOCLIN EXTERNAL FOAM	4		flurandrenolide external cream	2	
FABIOR EXTERNAL FOAM	4		flurandrenolide external lotion	2	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA	flurandrenolide external ointment	2	
FINACEA EXTERNAL FOAM	4		fluticasone propionate external cream	2	
FINACEA EXTERNAL GEL	4		fluticasone propionate external lotion	2	
fluocinolone acetonide body external oil	2		fluticasone propionate external ointment	2	
			GENADUR COMBINATION KIT	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
GENADUR EXTERNAL LIQUID	4		hydrocortisone butyrate external cream	2	
glycolic acid solution	2		hydrocortisone butyrate external lotion	2	
GORDOFILM EXTERNAL SOLUTION	4		hydrocortisone butyrate external ointment	2	
grafco silver nit applicator external	2		hydrocortisone butyrate external solution	2	
halcinonide external cream	2		hydrocortisone external cream 1 %, 2.5 %	2	
halobetasol propionate external cream	2		hydrocortisone external lotion 2.5 %	2	
HALOBETASOL PROPIONATE EXTERNAL FOAM	4		hydrocortisone external ointment 1 %, 2.5 %	2	
halobetasol propionate external ointment	2		hydrocortisone valerate external cream	2	
HALOG EXTERNAL CREAM	4		hydrocortisone valerate external ointment	2	
HALOG EXTERNAL OINTMENT	4		HYLATOPIC PLUS EXTERNAL CREAM	4	
HPR EXTERNAL FOAM	4		HYLATOPIC PLUS EXTERNAL FOAM	4	
HPR PLUS EXTERNAL CREAM	4		HYLATOPIC PLUS EXTERNAL LOTION	4	
HPR PLUS EXTERNAL FOAM	4		imiquimod external cream	2	
HPR PLUS HYDROGEL EXTERNAL KIT	4		IMIQUIMOD PUMP EXTERNAL CREAM	4	
HPR PLUS-MB HYDROGEL EXTERNAL KIT	4		IMPOYZ EXTERNAL CREAM	4	
HYALUCIL-4 TRANSDERMAL CREAM	4		INOVA 4/1 ACNE CONTROL THERAPY EXTERNAL KIT	4	
HYDRO 35 EXTERNAL FOAM	4		INOVA 8/2 ACNE CONTROL THERAPY EXTERNAL KIT	4	
HYDRO 40 EXTERNAL FOAM	4		INOVA EXTERNAL KIT	4	
hydrocortisone butyryl lipo base external cream	2		isotretinoin oral capsule	2	PA
			ivermectin external cream	2	
			KAMDOY EXTERNAL EMULSION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
KENALOG EXTERNAL AEROSOL SOLUTION	4		LOUTREX EXTERNAL CREAM	4	
KERALAC EXTERNAL CREAM	4		LOYON EXTERNAL SOLUTION	4	
KERALYT EXTERNAL GEL 6 %	4		LUXIQ EXTERNAL FOAM	4	
KERALYT SCALP EXTERNAL KIT	4		MB HYDROGEL EXTERNAL KIT	4	
KIVIK EXTERNAL EMULSION	4		methoxsalen oral capsule	2	
KLARON EXTERNAL LOTION	4		methoxsalen rapid oral capsule	2	
LAC-HYDRIN EXTERNAL CREAM	4		methyl salicylate external liquid	2	
lactic acid e external cream	2		METROCREAM EXTERNAL CREAM	4	
lactic acid external lotion	2		METROGEL EXTERNAL GEL	4	
latrix xm external emulsion	2		METROLOTION EXTERNAL LOTION	4	
LEVICYN EXTERNAL GEL	4		metronidazole external cream	2	
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED	4		metronidazole external gel	2	
LEXETTE EXTERNAL FOAM	4		metronidazole external lotion	2	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM	4		MICORT-HC EXTERNAL CREAM	4	
LOCOID EXTERNAL CREAM	4		MIMYX EXTERNAL CREAM	4	
LOCOID EXTERNAL LOTION	4		MIRVASO EXTERNAL GEL	3	
LOCOID EXTERNAL SOLUTION	4		mometasone furoate external cream	2	
LOCOID LIPOCREAM EXTERNAL CREAM	4		mometasone furoate external ointment	2	
LOTRISONE EXTERNAL CREAM	4		mometasone furoate external solution	2	
			myorisan oral capsule	2	PA
			NEOCERA EXTERNAL CREAM	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NEOSALUS CP EXTERNAL CREAM	4		ORACEA ORAL CAPSULE DELAYED RELEASE	4	
NEOSALUS EXTERNAL CREAM	4		OVACE PLUS EXTERNAL CREAM	4	
NEOSALUS EXTERNAL FOAM	4		OVACE PLUS EXTERNAL FOAM	4	
NEOSALUS EXTERNAL LOTION	4		OVACE PLUS EXTERNAL LOTION	4	
NEO-SYNALAR EXTERNAL CREAM	4		OVACE PLUS EXTERNAL SHAMPOO	4	
NEO-SYNALAR EXTERNAL KIT	4		OVACE PLUS WASH EXTERNAL GEL	4	
neuac external gel	2		OVACE PLUS WASH EXTERNAL LIQUID	4	
NEUAC EXTERNAL KIT	4		OVACE WASH EXTERNAL LIQUID	4	
NIVATOPIC PLUS EXTERNAL CREAM	4		OXSORALEN ULTRA ORAL CAPSULE	4	
nolix external cream	2		PANDEL EXTERNAL CREAM	4	
nolix external lotion	2		PENLEN EXTERNAL EMULSION	4	
NORITATE EXTERNAL CREAM	4		PHLAG SPRAY EXTERNAL EMULSION	4	
NUCARACLINPAK EXTERNAL KIT	4		PICATO EXTERNAL GEL	4	
NUCARARXPAK EXTERNAL KIT	4		pimecrolimus external cream	2	
NUCORT EXTERNAL LOTION	4		PLEXION CLEANSER EXTERNAL LIQUID	4	
NUTRASEB EXTERNAL CREAM	4		PLEXION CLEANSING CLOTH EXTERNAL PAD	4	
NUTRIARX CREAMPAK EXTERNAL KIT	4		PLEXION EXTERNAL CREAM	4	
NUVAIL EXTERNAL SOLUTION	4		PLEXION EXTERNAL LOTION	4	
OLUX EXTERNAL FOAM	4		podocon external solution	2	
OLUX-E EXTERNAL FOAM	4				
ONEXTON EXTERNAL GEL	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
podofilox external solution	2		RESORCINOL-SULFUR EXTERNAL LOTION	4	
PR BENZOYL PEROXIDE EXTERNAL LIQUID	4		RETIN-A EXTERNAL CREAM	4	PA
pr benzoyl peroxide wash external liquid	2		RETIN-A EXTERNAL GEL	4	PA
PR CREAM EXTERNAL KIT	4		RETIN-A MICRO EXTERNAL GEL	4	PA
pramox external gel	2		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	4	PA
prednicarbate external cream	2		RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	PA
prednicarbate external ointment	2		RHOFADE EXTERNAL CREAM	4	
PRESERA EXTERNAL FOAM	4		RIAX EXTERNAL FOAM	4	
PROMISEB EXTERNAL CREAM	4		rosadan external cream	2	
PROTOPIC EXTERNAL OINTMENT	4		rosadan external gel	2	
PRUCLAIR EXTERNAL CREAM	4		ROSADAN EXTERNAL KIT	4	
PRUDOXIN EXTERNAL CREAM	4		SALEX EXTERNAL SHAMPOO	4	
PRUMYX EXTERNAL CREAM	4		salicylic acid er external solution	2	
PSORCON EXTERNAL CREAM	4		salicylic acid external cream	2	
PYROGALLIC ACID EXTERNAL OINTMENT	4		salicylic acid external foam	2	
QBREXZA EXTERNAL PAD	4	QL (1 EA per 1 day)	salicylic acid external gel	2	
QUTENZA (2 PATCH) EXTERNAL KIT	4	PA; QL (0.05 EA per 1 day)	salicylic acid external liquid	2	
QUTENZA EXTERNAL KIT	4	PA; QL (0.05 EA per 1 day)	salicylic acid external lotion	2	
REMIGEN EXTERNAL CREAM	4		salicylic acid external shampoo	2	
			salicylic acid external solution 26 %	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
salicylic acid wart remover external liquid	2		SODIUM SULFACETAMIDE WASH LIQUID 10 % EXTERNAL	4	
salicylic acid-cleanser external kit	2		SOOLANTRA EXTERNAL CREAM	3	
salimez external cream	2		SORIATANE ORAL CAPSULE	4	
SALIMEZ FORTE EXTERNAL CREAM	4		SORILUX EXTERNAL FOAM	4	
SALVAX DUO PLUS EXTERNAL KIT	4		sss 10-5 external cream	2	
SALVAX EXTERNAL FOAM	4		sss 10-5 external foam	2	
SANADERMRX SKIN REPAIR EXTERNAL KIT	4		sulfacetamide sodium (acne) external lotion	2	
SANTYL EXTERNAL OINTMENT	4		sulfacetamide sodium external gel	2	
SCALACORT DK EXTERNAL KIT	4		sulfacetamide sodium external liquid	2	
SCARZEN SKIN REPAIR EXTERNAL KIT	4		sulfacetamide sodium-sulfur external cream	2	
SEBUDERM EXTERNAL GEL	4		sulfacetamide sodium-sulfur external emulsion	2	
selenium sulfide external lotion	2		sulfacetamide sodium-sulfur external liquid	2	
selenium sulfide external shampoo	2		sulfacetamide sodium-sulfur external lotion	2	
SELRX EXTERNAL SHAMPOO	4		sulfacetamide sodium-sulfur external pad	2	
SERNIVO EXTERNAL EMULSION	4		sulfacetamide sodium-sulfur external suspension	2	
SILIPAC EXTERNAL KIT	4		sulfacetamide sod-sulfur wash external kit	2	
sodium hyaluronate external gel	2		sulfacetamide-sulfur in urea external emulsion	2	
sodium sulfacetamide external shampoo	2		sulfacleanse 8/4 external suspension	2	
sodium sulfacetamide wash liquid 10 % external	2		sulfamez wash external emulsion	2	
			SUMADAN EXTERNAL KIT	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SUMADAN WASH EXTERNAL LIQUID	4		TEMOVATE EXTERNAL CREAM	4	
SUMADAN XLT EXTERNAL KIT	4		TEMOVATE EXTERNAL OINTMENT	4	
SUMAXIN CP EXTERNAL KIT	4		TETRIX EXTERNAL CREAM	4	
SUMAXIN EXTERNAL PAD	4		TEXACORT EXTERNAL SOLUTION	4	
SUMAXIN WASH EXTERNAL LIQUID	4		TOLAK EXTERNAL CREAM	4	
SVVICORT EXTERNAL EMULSION	4		TOPICORT EXTERNAL CREAM	4	
SYNALAR (CREAM) EXTERNAL KIT	4		TOPICORT EXTERNAL GEL	4	
SYNALAR (OINTMENT) EXTERNAL KIT	4		TOPICORT EXTERNAL OINTMENT	4	
SYNALAR EXTERNAL CREAM	4		TOPICORT SPRAY EXTERNAL LIQUID	4	
SYNALAR EXTERNAL OINTMENT	4		tovet external foam	2	
SYNALAR EXTERNAL SOLUTION	4		TOVET EXTERNAL KIT	4	
SYNALAR TS EXTERNAL KIT	4		tretinoin external cream	2	PA
SYNERDERM EXTERNAL EMULSION	4		tretinoin external gel	2	PA
TACLONEX EXTERNAL OINTMENT	4	QL (13.4 GM per 1 day)	tretinoin microsphere external gel	2	PA
TACLONEX EXTERNAL SUSPENSION	4	QL (4 GM per 1 day)	tretinoin microsphere pump external gel	2	PA
tacrolimus external ointment	2		triamcinolone acetonide external aerosol solution	2	
tazarotene external cream	2		triamcinolone acetonide external cream	2	
TAZORAC EXTERNAL CREAM	4		triamcinolone acetonide external lotion	2	
TAZORAC EXTERNAL GEL	4		triamcinolone acetonide external ointment	2	
			TRIANEX EXTERNAL OINTMENT	4	

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TRI-CHLOR EXTERNAL LIQUID	4		VECTICAL EXTERNAL OINTMENT	4	
triderm external cream	2		VELTIN EXTERNAL GEL	4	
TRIDESILON EXTERNAL CREAM	4		VERDESO EXTERNAL FOAM	4	
turpentine external spirit	2		VEREGEN EXTERNAL OINTMENT	4	
ULTRASAL-ER EXTERNAL SOLUTION	4		VIRASAL EXTERNAL LIQUID	4	
ULTRAVATE EXTERNAL LOTION	4		XALIX EXTERNAL SOLUTION	4	
UMECTA MOUSSE EXTERNAL FOAM	4		XERAC AC EXTERNAL SOLUTION	4	
URAMAXIN EXTERNAL GEL	4		XERALUX EXTERNAL CREAM	4	
urea external cream	2		xurea external cream	2	
UREA EXTERNAL FOAM	4		ZACARE EXTERNAL KIT	4	
urea external lotion	2		zaclir cleansing external lotion	2	
urea external suspension	2		zenatane oral capsule	2	PA
urea hydrating external foam	2		ZIANA EXTERNAL GEL	4	
urea in zn undecyl-lactic acid external emulsion	2		ZITHRANOL EXTERNAL SHAMPOO	4	
urea nail external gel	2		ZONALON EXTERNAL CREAM	4	
urea-c40 external lotion	2		ZYCLARA EXTERNAL CREAM	4	
uredeb external cream	2		ZYCLARA PUMP EXTERNAL CREAM	4	
uremez-40 external cream	2		Diabetes - Antidiabetic Agents		
URESOL EXTERNAL CREAM	4		acarbose oral tablet	1	
UTOPIC EXTERNAL CREAM	4		ACTOPLUS MET ORAL TABLET	4	
VANOS EXTERNAL CREAM	4		ACTOS ORAL TABLET	4	
VANOXIDE-HC EXTERNAL LOTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT	4	QL (12 ML per 365 days)	glipizide er oral tablet extended release 24 hour	1	
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	QL (0.22 ML per 1 day)	glipizide oral tablet	1	
ALOGLIPTIN BENZOATE ORAL TABLET	4		glipizide xl oral tablet extended release 24 hour	1	
ALOGLIPTIN-METFORMIN HCL ORAL TABLET	4		glipizide-metformin hcl oral tablet	1	
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET	4		GLUCOPHAGE ORAL TABLET	4	
AMARYL ORAL TABLET	4		GLUCOPHAGE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
AVANDIA ORAL TABLET	4		GLUCOTROL ORAL TABLET	4	
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-Injector	3	QL (0.15 ML per 1 day)	GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
BYDUREON PEN	3	QL (0.15 EA per 1 day)	GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR	4	PA
BYETTA 10 MCG PEN	3	QL (0.16 ML per 1 day)	glyburide micronized oral tablet	1	
BYETTA 5 MCG PEN	3	QL (0.08 ML per 1 day)	glyburide oral tablet	1	
CYCLOSET ORAL TABLET	4		glyburide-metformin oral tablet	1	
DUETACT ORAL TABLET	4		GLYNASE ORAL TABLET	4	
FARXIGA ORAL TABLET	4		GLYSET ORAL TABLET	4	
FORTAMET ORAL TABLET EXTENDED RELEASE 24 HOUR	4		GLYXAMBI ORAL TABLET	3	
glimepiride oral tablet	1		INVOKAMET ORAL TABLET	3	
			INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
			INVOKANA ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
JANUMET ORAL TABLET	3		OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	3	QL (0.06 ML per 1 day)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	3	QL (0.11 ML per 1 day)
JANUVIA ORAL TABLET	3		pioglitazone hcl oral tablet	1	
JARDIANCE ORAL TABLET	3		pioglitazone hcl-glimepiride oral tablet	1	
JENTADUETO ORAL TABLET	3		pioglitazone hcl-metformin hcl oral tablet	1	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		PRECOSE ORAL TABLET	4	
KAZANO ORAL TABLET	4		QTERN ORAL TABLET	4	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		repaglinide oral tablet	1	
metformin hcl er (mod) oral tablet extended release 24 hour	1	PA	repaglinide-metformin hcl oral tablet	1	
metformin hcl er (osm) oral tablet extended release 24 hour	1		RIOMET ORAL SOLUTION	4	
metformin hcl er oral tablet extended release 24 hour	1		RYBELSUS ORAL TABLET 14 MG, 7 MG	4	QL (1 EA per 1 day)
METFORMIN HCL ORAL SOLUTION	4		RYBELSUS ORAL TABLET 3 MG	4	QL (60 EA per 365 days)
metformin hcl oral tablet	1		SEGLUROMET ORAL TABLET	4	
miglitol oral tablet	1		SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	QL (0.6 ML per 1 day)
nateglinide oral tablet	1		STARLIX ORAL TABLET	4	
NESINA ORAL TABLET	4		STEGLATRO ORAL TABLET	4	
ONGLYZA ORAL TABLET	4		STEGLUJAN ORAL TABLET	4	
OSENI ORAL TABLET	4		SYMLINPEN 120	4	PA
			SYMLINPEN 60	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SYNJARDY ORAL TABLET	3		ACCU-CHEK COMPACT PLUS TEST STRIPS IN VITRO STRIP	3	QL (10 EA per 1 day)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		ACCU-CHEK FASTCLIX LANCET KIT KIT	3	
tolbutamide oral tablet	1		ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	4	
TRADJENTA ORAL TABLET	3		ACCU-CHEK GUIDE KIT	3	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	QL (0.08 ML per 1 day)	ACCU-CHEK GUIDE ME KIT	3	
VICTOZA	3	QL (0.3 ML per 1 day)	ACCU-CHEK GUIDE STRIP IN VITRO	4	QL (10 EA per 1 day)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4		ACCU-CHEK GUIDE STRIP IN VITRO	3	QL (10 EA per 1 day)
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	QL (0.5 ML per 1 day)	ACCU-CHEK MULTICLIX LANCET DEVICE KIT KIT	3	
Diabetes - Glucose Monitoring			ACCU-CHEK NANO SMARTVIEW KIT W/DEVICE KIT	3	
ACCU-CHEK AVIVA CONNECT KIT W/DEVICE KIT	3		ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	4	
ACCU-CHEK AVIVA DEVICE	4		ACCU-CHEK SMARTVIEW TEST STRIPS IN VITRO STRIP	3	QL (10 EA per 1 day)
ACCU-CHEK AVIVA IN VITRO SOLUTION	4		ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	3	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	3	QL (10 EA per 1 day)	AUTOLET LANCING DEVICE	4	
ACCU-CHEK AVIVA PLUS KIT	3		BAYER CONTOUR IN VITRO LIQUID HIGH , LOW , NORMAL	4	
ACCU-CHEK COMPACT PLUS CARE KIT KIT	3		BIOTEL CARE BLOOD GLUCOSE SYST KIT	4	
ACCU-CHEK COMPACT PLUS CONTROL IN VITRO SOLUTION	4		CARETOUCH LANCING/EJECTOR	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CEQUR SIMPLICITY DEVICE	4		EASYPLUS BLOOD GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
CHEMSTRIP UGK IN VITRO STRIP	4		EMBRACE TALK BLOOD GLUCOSE DEVICE	4	
CONTOUR NEXT CONTROL IN VITRO SOLUTION	4		EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION	4	
CONTOUR NEXT MONITOR KIT	4		EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
CONTOUR NEXT TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	EMBRACE TALK MONITORING SYSTEM KIT	4	
CONTOUR TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	ENLITE GLUCOSE SENSOR	4	
DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC)	3		EVERSENSE SENSOR/HOLDER	4	
DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC) DEVICE	3		EVERSENSE SMART TRANSMITTER	4	
DIATHRIVE BLOOD GLUCOSE METER DEVICE	4		FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	4	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID	4		FORTISCARE CONTROL IN VITRO SOLUTION	4	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	FREESTYLE FREEDOM LITE KIT	4	
DIATHRIVE LANCING DEVICE	4		FREESTYLE INSULINX SYSTEM KIT	4	
EASymax CONTROL IN VITRO SOLUTION	4		FREESTYLE INSULINX TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
			FREESTYLE LIBRE 14 DAY READER DEVICE	3	
			FREESTYLE LIBRE 14 DAY SENSOR	3	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FREESTYLE LIBRE READER DEVICE	3		HW EMBRACE TALK BLOOD GLUCOSE DEVICE	4	
FREESTYLE LIBRE SENSOR SYSTEM	3		HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
FREESTYLE LITE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	INPEN 100-BLUE-LILLY DEVICE	4	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	INPEN 100-BLUE-NOVO DEVICE	4	
FREESTYLE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	INPEN 100-GRAY-LILLY DEVICE	4	
GENTEEL LANCING KIT (BLUE) KIT	4		INPEN 100-GREY-NOVO DEVICE	4	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP	4	QL (10 EA per 1 day)	INPEN 100-PINK-LILLY DEVICE	4	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	INPEN 100-PINK-NOVO DEVICE	4	
GLUCOCARD SHINE CONNEX KIT	4		KETOCARE IN VITRO STRIP	4	
GLUCOCARD SHINE EXPRESS KIT	4		KETOSTIX IN VITRO STRIP	4	
GLUCOCARD SHINE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	LANCETS	4	
GLUCOCARD VITAL TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	LANCETS	3	
GUARDIAN CONNECT TRANSMITTER	4		LANCETS KIT	4	
GUARDIAN LINK 3 TRANSMITTER	4		MICROLET NEXT LANCING DEVICE	4	
GUARDIAN REAL-TIME SYSTEM KIT	4		MINIMED GUARDIAN SENSOR 3	4	
GUARDIAN SENSOR (3)	4		NOVOPEN ECHO DEVICE	4	
HW EMBRACE PRO GLUCOSE METER DEVICE	4		ONE DROP BLOOD GLUCOSE MONITOR KIT	4	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	ONE DROP TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
			ONETOUCH DELICA LANCING DEV	4	
			ONETOUCH DELICA PLUS LANCING	4	
			ONETOUCH ULTRA 2 KIT	3	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ONETOUCH ULTRA BLUE TEST STRIPS IN VITRO STRIP	3	QL (10 EA per 1 day)	PRECISION XTRA MONITOR DEVICE	4	
ONETOUCH ULTRA MINI KIT	3		PRODIGY NO CODING BLOOD GLUC KIT	4	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE KIT	3		RELION BLOOD GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
ONETOUCH VERIO IN VITRO SOLUTION HIGH	4		RELION PREMIER CLASSIC DEVICE	4	
ONETOUCH VERIO TEST STRIPS	3	QL (10 EA per 1 day)	RELION PREMIER TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
ONETOUCH VERIO IQ SYSTEM KIT	3		RELION ULTIMA TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
ONETOUCH VERIO KIT	3		SOF-SENSOR	4	
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE KIT	3		SURESTEP PRO HIGH GLUCOSE IN VITRO LIQUID	4	
PARADIGM REAL-TIME STARTER KIT	4		SURESTEP PRO LOW GLUCOSE IN VITRO LIQUID	4	
PRECISION LINK KIT	4		SURESTEP PRO NORMAL GLUCOSE IN VITRO LIQUID	4	
PRECISION PCX PLUS TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	TRUE FOCUS BLOOD GLUCOSE METER DEVICE	4	
PRECISION QID MONITOR DEVICE	4		TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
PRECISION QID TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	TRUE METRIX LEVEL 1 IN VITRO SOLUTION	4	
PRECISION SOF-TACT MONITOR DEVICE	4		TRUE METRIX LEVEL 2 IN VITRO SOLUTION	4	
PRECISION SOF-TACT TEST IN VITRO STRIP	4	QL (10 EA per 1 day)	TRUE METRIX LEVEL 3 IN VITRO SOLUTION	4	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	4	QL (10 EA per 1 day)	TRUETRACK TEST IN VITRO STRIP	4	QL (10 EA per 1 day)
PRECISION XTRA DEVICE	4		UNISTRIP CONTROL IN VITRO SOLUTION LOW	4	
PRECISION XTRA KIT	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	4		APIDRA VIAL INJECTION SOLUTION	4	
VIVAGUARD INO GLUCOSE METER DEVICE	4		BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	4	QL (10 EA per 1 day)	BD AUTOSHIELD DUO PEN NEEDLES	3	
VIVAGUARD LANCING DEVICE	4		BD ULTRA-FINE INSULIN SYRINGES	3	
Diabetes - Glycemic Agents			BD ULTRA-FINE PEN NEEDLES	3	
BAQSIMI ONE PACK NASAL POWDER	4		FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	
BAQSIMI TWO PACK NASAL POWDER	4		FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	4	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	3		FIASP SUBCUTANEOUS SOLUTION	4	
GLUCAGON EMERGENCY INJECTION KIT	3		HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4		HUMALOG MIX 50/50 KWIKPEN	3	
PROGLYCEM ORAL SUSPENSION	3		HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION	3	
Diabetes - Insulins			HUMALOG MIX 75/25 KWIKPEN	3	
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	4		HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION	3	
ADMELOG SUBCUTANEOUS SOLUTION	4		HUMALOG SUBCUTANEOUS SOLUTION	3	
AFREZZA INHALATION POWDER	4	PA			
APIDRA SOLOSTAR	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	3		LEVEMIR U-100 FLEXTOUCH SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	3		LEVEMIR U-100 VIAL SUBCUTANEOUS SOLUTION	3	
HUMULIN 70/30 KWIKPEN	3		MAXICOMFORT SYR 27G X 1/2"	3	
HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	3		MYXREDLIN INTRAVENOUS SOLUTION	4	
HUMULIN N KWIKPEN	3		NOVOFINE AUTOCOVER PEN NEEDLE	3	
HUMULIN N VIAL SUBCUTANEOUS SUSPENSION	3		NOVOFINE PEN NEEDLE	3	
HUMULIN R U-500 KWIKPEN	3		NOVOFINE PLUS PEN NEEDLE	3	
HUMULIN R U-500 VIAL (CONCENTRATED) SUBCUTANEOUS SOLUTION	3		NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN- INJECTOR	3	
HUMULIN R VIAL INJECTION SOLUTION	3		NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	3	
INSULIN LISPRO SUBCUTANEOUS SOLUTION	3		NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	3	
INSULIN LISPRO SUBCUTANEOUS SOLUTION PEN- INJECTOR 100 UNIT/ML	3		NOVOLIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	3	
INSULIN PEN NEEDLES	3		NOVOLIN N RELION SUBCUTANEOUS SUSPENSION	3	
INSULIN SYRINGES	3		NOVOLIN N VIAL SUBCUTANEOUS SUSPENSION	3	
LANTUS U-100 SOLOSTAR	3				
LANTUS U-100 VIAL SUBCUTANEOUS SOLUTION	3				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NOVOLIN R RELION INJECTION SOLUTION	3		AMINO ACID INTRAVENOUS SOLUTION	4	
NOVOLIN R VIAL INJECTION SOLUTION	3		aminoamrms oral capsule	2	
NOVOLOG U-100 FLEXPEN	3		AMINOPROTECT INTRAVENOUS SOLUTION	4	
NOVOLOG MIX 70/30 FLEXPEN	3		aminoreliefrms oral capsule	2	
NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION	3		AMINOSYN II INTRAVENOUS SOLUTION	4	
NOVOLOG U-100 PENFILL	3		AMINOSYN-PF INTRAVENOUS SOLUTION	4	
NOVOLOG U-100 VIAL SUBCUTANEOUS SOLUTION	3		AQUASOL A INTRAMUSCULAR SOLUTION	4	
NOVOTWIST PEN NEEDLE	3		ARGININE HCL INJECTION SOLUTION	4	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3		argyle sterile saline irrigation solution	2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3		argyle sterile water irrigation solution	2	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3		ASCOR INTRAVENOUS SOLUTION	4	
TRESIBA SUBCUTANEOUS SOLUTION	3		ascorbic acid injection solution	2	
Electrolytes / Minerals / Metals / Vitamins			ASCORBIC ACID INTRAVENOUS SOLUTION	4	
alcohol injection solution	2		AXIFOL ORAL CAPSULE	4	
			B-12 COMPLIANCE INJECTION INJECTION KIT	4	
			BCAA INJECTION SOLUTION	4	
			BCAA INTRAVENOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
bd posiflush intravenous solution	2		CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	4	
CALCIFOL ORAL WAFER	4		CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	
CALCIUM CHLORIDE SOLUTION 10 % INTRAVENOUS	4		CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	
calcium chloride solution 10 % intravenous	2		CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	
calcium gluconate intravenous solution	2		CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	
CALCIUM GLUCONATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		CLINIMIX N14G30E INTRAVENOUS SOLUTION	4	
CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION	4		CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	
calcium-folic acid plus d oral wafer	2		CLINIMIX/DEXTROSE (4.25/25) INTRAVENOUS SOLUTION	4	
CARBAGLU ORAL TABLET	3		CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	
CARNITOR INTRAVENOUS SOLUTION	4		CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	
CARNITOR ORAL SOLUTION	4		CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	
CARNITOR ORAL TABLET	4		CLINIMIX/DEXTROSE (5/25) INTRAVENOUS SOLUTION	4	
CARNITOR SF ORAL SOLUTION	4				
CHEMET ORAL CAPSULE	4				
chromic chloride intravenous solution	2				
CIFEREX ORAL CAPSULE	4				
CIFRAZOL ORAL CAPSULE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CLINISOL SF INTRAVENOUS SOLUTION	4		dextrose solution 50 % intravenous	2	
CLINOLIPID INTRAVENOUS EMULSION	4		DRISDOL ORAL CAPSULE	4	
clovique oral capsule	2	PA	DURACHOL ORAL CAPSULE	4	
COPPER CHLORIDE INTRAVENOUS SOLUTION	4		EDETATE DISODIUM INTRAVENOUS SOLUTION	4	
curity sterile saline irrigation solution	2		EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	4	
cyanocobalamin injection solution 1000 mcg/ml	2		effer-k oral tablet effervescent 25 meq	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	4		ERGOCAL ORAL CAPSULE	4	
cytra k crystals oral packet	2		ergocalciferol oral capsule	1	
deferasirox oral tablet soluble	2	PA	EXJADE ORAL TABLET SOLUBLE	4	PA
dehydrated alcohol injection solution	2		FERAHEME INTRAVENOUS SOLUTION	4	
DERMACINRX PUREFOLIX ORAL TABLET	4		FERRIPROX ORAL SOLUTION	4	PA
DEXPANTHENOL INJECTION SOLUTION	4		FERRIPROX ORAL TABLET	4	PA
dextrose intravenous solution 10 %, 20 %, 30 %, 40 %, 5 %, 70 %	2		FERRLECIT INTRAVENOUS SOLUTION	4	
DEXTROSE SOLUTION 250 MG/ML INTRAVENOUS	4		folic acid injection solution	2	
dextrose solution 250 mg/ml intravenous	2		folic acid oral tablet 1 mg	1	
DEXTROSE SOLUTION 50 % INTRAVENOUS	4		FOLI-D ORAL TABLET	4	
			FOLIKA-D ORAL TABLET	4	
			FOLITE ORAL TABLET	4	
			FOLVITE-D ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FREAMINE HBC INTRAVENOUS SOLUTION	4		JADENU ORAL TABLET	4	PA
FREAMINE III INTRAVENOUS SOLUTION	4		JADENU SPRINKLE ORAL PACKET	4	PA
FUSION SPRINKLES ORAL PACKET	4		JYNARQUE ORAL TABLET	4	QL (2 EA per 1 day)
GALZIN ORAL CAPSULE	4		JYNARQUE ORAL TABLET THERAPY PACK	4	QL (2 EA per 1 day)
GENICIN VITA-D ORAL TABLET	4		KABIVEN INTRAVENOUS EMULSION	4	
glucose intravenous solution	2		kionex oral suspension	2	
GLUTATHIONE INJECTION SOLUTION	4		klor-con 10 oral tablet extended release	1	
GLUTATHIONE INTRAVENOUS SOLUTION	4		klor-con m10 oral tablet extended release	1	
GLYCINE INJECTION SOLUTION	4		KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	4	
GLYCOPHOS INTRAVENOUS SOLUTION	4		klor-con m20 oral tablet extended release	1	
hematinic/folic acid oral tablet	2		klor-con oral packet	1	
hemocyte-f oral tablet	2		klor-con oral tablet extended release	1	
hepatamine intravenous solution	2		klor-con sprinkle oral capsule extended release	1	
hydroxocobalamin acetate intramuscular solution	2		klor-con/ef oral tablet effervescent	1	
INJECTAFER INTRAVENOUS SOLUTION	4		K-PHOS NO 2 ORAL TABLET	4	
intralipid intravenous emulsion 20 %	2		K-PHOS ORAL TABLET	4	
INTRALIPID INTRAVENOUS EMULSION 30 %	4		K-PHOS-NEUTRAL ORAL TABLET	4	
iodine strong oral solution	2		k-prime oral tablet effervescent	1	
			K-TAB ORAL TABLET EXTENDED RELEASE	4	
			lactated ringers irrigation solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LEVOCARNITINE INJECTION SOLUTION	4		MAGNESIUM SULFATE INTRAVENOUS SOLUTION 1000 MG/1.6ML, 2000 MG/3.2ML, 3000 MG/4.8ML, 4000 MG/6.4ML	4	
levocarnitine oral solution	2		magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	2	
levocarnitine oral tablet	2		MAGNESIUM SULFATE SOLUTION 50 % INJECTION	4	
LIPO INTRAMUSCULAR SOLUTION	4		magnesium sulfate solution 50 % injection	2	
LIPO-C INTRAMUSCULAR SOLUTION	4		MAGNESIUM SULFATE-LACT RINGERS INTRAVENOUS SOLUTION	4	
LIQUIVIDA HYDRATION INTRAVENOUS KIT	4		MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION	4	
LOKELMA ORAL PACKET	4		MANGANESE CHLORIDE INTRAVENOUS SOLUTION	4	
LYSINE HCL INJECTION SOLUTION	4		manganese sulfate intravenous solution	2	
MAGNEBIND 400 ORAL TABLET	4		MEPHYTON ORAL TABLET	4	
magnesium chloride injection solution	2		METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	4	
magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%	2		MIFEPREX ORAL TABLET	4	
MAGNESIUM SULFATE IN D5W INTRAVENOUS SOLUTION 1-5 GM/50ML-%, 10-5 GM/250ML-%, 2-5 GM/100ML-%, 2-5 GM/50ML-%, 3-5 GM/50ML-%, 4-5 GM/50ML-%, 50-5 GM/500ML-%, 6-5 GM/100ML-%, 6-5 GM/50ML-%	4		mifepristone oral tablet	2	
			monoject flush syringe intravenous solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
monoject sodium chloride flush intravenous solution	2		ORACIT ORAL SOLUTION	4	
multitrace-4 concentrate intravenous solution	2		ORTHO DF ORAL CAPSULE	4	
multitrace-4 intravenous solution	2		PERIKABIVEN INTRAVENOUS EMULSION	4	
multitrace-4 neonatal intravenous solution	2		phospha 250 neutral oral tablet	1	
MULTITRACE-4 PEDIATRIC INTRAVENOUS SOLUTION	4		phosphorous oral tablet	1	
multitrace-5 concentrate intravenous solution	2		phospho-trin 250 neutral oral tablet	1	
multitrace-5 intravenous solution	2		PHYSICIANS EZ USE B-12 INJECTION KIT	4	
na ferric gluc cplx in sucrose intravenous solution	2		PHYSIOLYTE IRRIGATION SOLUTION	4	
n-acetyl-l-cysteine oral capsule	2		PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	4	
NASCOBAL NASAL SOLUTION	4		phytonadione injection solution	2	
NEOKE ALCAR ORAL POWDER	4		phytonadione oral tablet	2	
NEPHRAMINE INTRAVENOUS SOLUTION	4		PLENAMINE INTRAVENOUS SOLUTION	4	
NEUT INTRAVENOUS SOLUTION	4		pot bicarb-pot chloride oral tablet effervescent	1	
NICOMIDE ORAL TABLET	4		potassium acetate intravenous solution	2	
normal saline flush intravenous solution	2		potassium bicarbonate oral tablet effervescent	1	
nutrilipid intravenous emulsion	2		potassium chloride crys er oral tablet extended release	1	
OMEGAVEN INTRAVENOUS EMULSION	4		potassium chloride er oral capsule extended release	1	
			potassium chloride er oral tablet extended release	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
potassium chloride intravenous solution	2		PROSOL INTRAVENOUS SOLUTION	4	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION	4	
potassium chloride oral packet	1		pyridoxine hcl solution 100 mg/ml injection	2	
potassium chloride oral solution	1		REVESTA ORAL CAPSULE	4	
potassium citrate er oral tablet extended release	2		ringers irrigation irrigation solution	2	
potassium citrate-citric acid oral solution	2		saline flush intravenous solution	2	
potassium phosphates intravenous solution	2		saline flush zr intravenous solution	2	
PREMASOL INTRAVENOUS SOLUTION	4		SAMSCA ORAL TABLET	3	QL (2 EA per 1 day)
PRISMASOL B22GK 4/0 INTRAVENOUS SOLUTION	4		SELENIOUS ACID INTRAVENOUS SOLUTION	4	
PRISMASOL BGK 0/2.5 INTRAVENOUS SOLUTION	4		SELENIUM INTRAVENOUS SOLUTION	4	
PRISMASOL BGK 2/0 INTRAVENOUS SOLUTION	4		SMOFLIPID INTRAVENOUS EMULSION	4	
PRISMASOL BGK 2/3.5 INTRAVENOUS SOLUTION	4		sod citrate-citric acid oral solution	2	
PRISMASOL BGK 4/2.5 INTRAVENOUS SOLUTION	4		sodium acetate intravenous solution	2	
PRISMASOL BK 0/0/1.2 INTRAVENOUS SOLUTION	4		sodium bicarbonate intravenous solution 4.2 %, 7.5 %	2	
PROCALAMINE INTRAVENOUS SOLUTION	4		SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	4	
			sodium bicarbonate solution 8.4 % intravenous	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SODIUM BICARBONATE- DEXTROSE INTRAVENOUS SOLUTION	4		SYPRINE ORAL CAPSULE	4	PA
sodium chloride flush intravenous solution	2		taron-crystals oral packet	2	
sodium chloride injection solution	2		TAURINE INJECTION SOLUTION	4	
sodium chloride intravenous solution	2		THE LIQUILIFT TRACE INTRAVENOUS KIT	4	
sodium chloride irrigation solution	2		thiamine hcl injection solution	2	
sodium lactate intravenous solution	2		tis-u-sol irrigation solution	2	
SODIUM PHOSPHATE-NACL INTRAVENOUS SOLUTION	4		TRACE ELEMENTS 4/PEDIATRIC INTRAVENOUS SOLUTION	4	
sodium phosphates intravenous solution	2		TRAVASOL INTRAVENOUS SOLUTION	4	
SODIUM PHOSPHATES- DEXTROSE INTRAVENOUS SOLUTION	4		TRI-AMINO INJECTION SOLUTION	4	
sodium polystyrene sulfonate oral powder	2		tricitrates oral solution	2	
sodium polystyrene sulfonate oral suspension	2		trientine hcl oral capsule	2	PA
sodium polystyrene sulfonate rectal suspension	2		TRIFERIC HEMODIALYSIS PACKET	4	
sps oral suspension	2		TRISODIUM CITRATE/CRRT INTRAVENOUS SOLUTION	4	
sterile water for irrigation irrigation solution	2		TROPHAMINE INTRAVENOUS SOLUTION	4	
swabflush saline flush intravenous solution	2		tryptophan oral capsule	2	
SYNTHAMIN 17 INTRAVENOUS SOLUTION	4		UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	4	
			UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	4		cimetidine hcl oral solution	1	
VELTASSA ORAL PACKET	4		cimetidine oral tablet	1	
VENOFER INTRAVENOUS SOLUTION	4		CYTOTEC ORAL TABLET	4	
virt-phos 250 neutral oral tablet	1		DEPRIZINE FUSEPAQ ORAL SUSPENSION RECONSTITUTED	4	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1		DEXILANT ORAL CAPSULE DELAYED RELEASE	3	QL (1 EA per 1 day)
VITAMIN DEFICIENCY SYSTEM-B12 INJECTION KIT	4		ESOMEPEZS ORAL KIT	4	
vitamin k1 injection solution	2		esomeprazole magnesium oral capsule delayed release	1	QL (1 EA per 1 day)
wheat germ oil oral oil	2		esomeprazole sodium intravenous solution reconstituted	2	
ZINC SULFATE INTRAVENOUS SOLUTION	4		FAMOTIDINE IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
ZINC TRACE METAL INTRAVENOUS SOLUTION	4		famotidine intravenous solution	2	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer			famotidine oral suspension reconstituted	1	
ACIPHEX ORAL TABLET DELAYED RELEASE	4	QL (1 EA per 1 day)	famotidine oral tablet 20 mg, 40 mg	1	
ACIPHEX SPRINKLE ORAL CAPSULE SPRINKLE	4	QL (1 EA per 1 day)	famotidine premixed intravenous solution	2	
ASPIRIN-OMEПRAZOLE ORAL TABLET DELAYED RELEASE	4	QL (1 EA per 1 day)	FIRST-LANSOPRAZOLE ORAL SUSPENSION	4	
CARAFATE ORAL SUSPENSION	4		FIRST-OMEПRAZOLE ORAL SUSPENSION	4	
CARAFATE ORAL TABLET	4		lansoprazole oral capsule delayed release	1	QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
lansoprazole oral tablet dispersible 15 mg, 30 mg	1	QL (1 EA per 1 day)	PREVACID ORAL CAPSULE DELAYED RELEASE	4	QL (1 EA per 1 day)
misoprostol oral tablet	1		PREVACID SOLUTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	4	QL (1 EA per 1 day)
NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED	4		PRILOSEC ORAL PACKET	4	QL (2 EA per 1 day)
NEXIUM ORAL CAPSULE DELAYED RELEASE	4	QL (1 EA per 1 day)	PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	4	QL (1 EA per 1 day)
NEXIUM ORAL PACKET	4	QL (1 EA per 1 day)	PROTONIX ORAL PACKET	4	QL (1 EA per 1 day)
nizatidine oral capsule	1		PROTONIX ORAL TABLET DELAYED RELEASE	4	QL (1 EA per 1 day)
nizatidine oral solution	1		RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	4	QL (1 EA per 1 day)
omeppi oral capsule 20-1100 mg	2	QL (2 EA per 1 day)	rabeprazole sodium oral tablet delayed release	1	QL (1 EA per 1 day)
omeppi oral capsule 40-1100 mg	1	QL (2 EA per 1 day)	ranitidine hcl injection solution	2	
omeprazole oral capsule delayed release	1	QL (1 EA per 1 day)	ranitidine hcl oral capsule	1	
OMEPRAZOLE+SYRS PEND SF ALKA ORAL SUSPENSION	4		ranitidine hcl oral syrup	1	
omeprazole-sodium bicarbonate oral capsule 20-1100 mg	2	QL (2 EA per 1 day)	ranitidine hcl oral tablet 150 mg	2	
omeprazole-sodium bicarbonate oral capsule 40-1100 mg	1	QL (2 EA per 1 day)	ranitidine hcl oral tablet 300 mg	1	
omeprazole-sodium bicarbonate oral packet	1	QL (2 EA per 1 day)	sucralfate oral tablet	1	
pantoprazole sodium intravenous solution reconstituted	2	QL (1 EA per 1 day)	YOSPRALA ORAL TABLET DELAYED RELEASE	4	QL (1 EA per 1 day)
pantoprazole sodium oral tablet delayed release	1	QL (1 EA per 1 day)	ZANTAC INJECTION SOLUTION	4	
PEPCID ORAL TABLET	4		ZEGERID ORAL CAPSULE	4	QL (2 EA per 1 day)
			ZEGERID ORAL PACKET	4	QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions					
ACTIGALL ORAL CAPSULE	4		COLYTE WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED	4	
alosetron hcl oral tablet	1	PA	constulose oral solution	2	
AMITIZA ORAL CAPSULE	4	QL (2 EA per 1 day)	cromolyn sodium oral concentrate	2	
amoxicill-clarithro-lansopraz oral	2		CUVPOSA ORAL SOLUTION	4	
ANASPAZ ORAL TABLET DISPERSIBLE	4		dicyclomine hcl intramuscular solution	2	
ATROOPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR	4		dicyclomine hcl oral capsule	2	
atropine sulfate injection solution	2		dicyclomine hcl oral solution	2	
atropine sulfate injection solution prefilled syringe	2		diphenoxylate-atropine oral liquid	2	
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		diphenoxylate-atropine oral tablet	2	
belladonna alkaloids-opium rectal suppository	2		ed-spaz oral tablet dispersible	2	
BENTYL INTRAMUSCULAR SOLUTION	4		ENTEREG ORAL CAPSULE	4	
cascara sagrada oral fluid extract	2		enulose oral solution	2	
CHEMODAL ORAL TABLET	4		GASTROCROM ORAL CONCENTRATE	4	
chlordiazepoxide-clidinium oral capsule	2		GATTEX SUBCUTANEOUS KIT	4	PA
CHOLBAM ORAL CAPSULE	4	PA	gavilyte-c oral solution reconstituted	2	
CLENPIQ ORAL SOLUTION	4		gavilyte-h oral kit	2	
			gavilyte-n with flavor pack oral solution reconstituted	2	
			generlac oral solution	2	
			GIALAX ORAL KIT	4	
			GLYCATE ORAL TABLET	4	
			glycopyrrolate injection solution	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE	4		lactulose encephalopathy oral solution	2	
GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4		lactulose oral packet	2	
glycopyrrolate oral tablet 1 mg, 2 mg	2		lactulose oral solution	2	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	4		LEVIBID ORAL TABLET EXTENDED RELEASE 12 HOUR	4	
glycopyrrolate pf injection solution prefilled syringe	2		LEVSIN INJECTION SOLUTION	4	
GLYRX-PF INJECTION SOLUTION	4		LEVSIN ORAL TABLET	4	
GOLYTELY ORAL SOLUTION RECONSTITUTED	4		LEVSIN/SL SUBLINGUAL TABLET SUBLINGUAL	4	
hyoscyamine sulfate er oral tablet extended release 12 hour	1		LIBRAX ORAL CAPSULE	4	
hyoscyamine sulfate injection solution	2		LINZESS ORAL CAPSULE	3	QL (1 EA per 1 day)
hyoscyamine sulfate oral elixir	2		LOMOTIL ORAL TABLET	4	
hyoscyamine sulfate oral solution	2		loperamide hcl oral capsule	2	
hyoscyamine sulfate oral tablet	2		LOTRONEX ORAL TABLET	4	PA
hyoscyamine sulfate oral tablet dispersible	2		methscopolamine bromide oral tablet	2	
hyoscyamine sulfate sl sublingual tablet sublingual	2		mineral oil heavy oral oil	2	
hyoscyamine sulfate sublingual tablet sublingual	2		MOTEGRITY ORAL TABLET	4	
KRISTALOSE ORAL PACKET	4		MOTOFEN ORAL TABLET	4	
			MOVANTIK ORAL TABLET	3	QL (1 EA per 1 day)
			MOVIPREP ORAL SOLUTION RECONSTITUTED	4	
			MYTESI ORAL TABLET DELAYED RELEASE	4	QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
nulev oral tablet dispersible	2		PYLERA ORAL CAPSULE	3	
NULYTELY WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED	4		RELISTOR ORAL TABLET	4	QL (3 EA per 1 day)
OMECLAMOX-PAK ORAL	3		RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML	4	QL (0.6 ML per 1 day)
oscimin oral tablet	2		RELISTOR SUBCUTANEOUS SOLUTION 8 MG/0.4ML	4	QL (0.4 ML per 1 day)
oscimin oral tablet dispersible	2		RESTORA RX ORAL CAPSULE	4	
oscimin sr oral tablet extended release 12 hour	1		SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA
oscimin sublingual tablet sublingual	2		sodium bicarbonate oral powder	2	
OSMOPREP ORAL TABLET	4		SUPREP BOWEL PREP KIT ORAL SOLUTION	4	
PCP 100 COMBINATION KIT	4		SYMAX DUOTAB ORAL TABLET EXTENDED RELEASE	4	
peg 3350/electrolytes oral solution reconstituted	2		symax-sr oral tablet extended release 12 hour	1	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	2		SYMPROIC ORAL TABLET	3	QL (1 EA per 1 day)
peg-3350/electrolytes oral solution reconstituted	2		trilyte oral solution reconstituted	2	
peg-prep oral kit	2		TRULANCE ORAL TABLET	4	QL (1 EA per 1 day)
phenobarbital-belladonna alk oral elixir	2		URSO 250 ORAL TABLET	4	
PLENUV ORAL SOLUTION RECONSTITUTED	4		URSO FORTE ORAL TABLET	4	
PREPOPIK ORAL PACKET	4		ursodiol oral capsule	2	
PRODIGEN ORAL CAPSULE	4		ursodiol oral tablet	2	
propantheline bromide oral tablet	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
URSODIOL+SYRSPE ND SF ORAL SUSPENSION	4		CRYSVITA SUBCUTANEOUS SOLUTION	4	PA
VIBERZI ORAL TABLET	4	PA; QL (2 EA per 1 day)	CYSTADANE ORAL POWDER	4	
VSL#3 DS ORAL PACKET	4		CYSTAGON ORAL CAPSULE	4	
XERMELO ORAL TABLET	4	PA; QL (3 EA per 1 day)	ELAPRASE INTRAVENOUS SOLUTION	3	PA
ZELAC ORAL CAPSULE	4		ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
ZELNORM ORAL TABLET	4	QL (2 EA per 1 day)	ENZADYNE ORAL CAPSULE	4	
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA	EXONDYS 51 INTRAVENOUS SOLUTION	4	PA
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment			FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ALDURAZYME INTRAVENOUS SOLUTION	3	PA	GALAFOLD ORAL CAPSULE	4	PA; QL (0.5 EA per 1 day)
AMMONUL INTRAVENOUS SOLUTION	4		KANUMA INTRAVENOUS SOLUTION	4	PA
BRINEURA KIT	4	PA	KUVAN ORAL PACKET	3	PA
BUPHENYL ORAL POWDER	4		KUVAN ORAL TABLET SOLUBLE	3	PA
BUPHENYL ORAL TABLET	4		LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
CERDELGA ORAL CAPSULE	4	PA	MEPSEVII INTRAVENOUS SOLUTION	4	PA
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA	miglustat oral capsule	2	PA
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	3		MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NAGLAZYME INTRAVENOUS SOLUTION	3	PA	sodium phenylbutyrate oral tablet	2	
nitisinone oral capsule	2	PA	STRENSIQ SUBCUTANEOUS SOLUTION	3	PA
NITYR ORAL TABLET	4	PA	SUCRAID ORAL SOLUTION	4	
OCALIVA ORAL TABLET	4	PA; QL (1 EA per 1 day)	VIMIZIM INTRAVENOUS SOLUTION	4	PA
ORFADIN ORAL CAPSULE	4	PA	VIOKACE ORAL TABLET	4	
ORFADIN ORAL SUSPENSION	4	PA	VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	4	PA; QL (0.5 ML per 1 day)	XURIDEN ORAL PACKET	4	PA; QL (4 EA per 1 day)
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2.5 MG/0.5ML	4	PA; QL (0.15 ML per 1 day)	ZAVESCA ORAL CAPSULE	4	PA
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	4	PA; QL (2 ML per 1 day)	ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	4		Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	4		acetic acid irrigation solution	2	
PROSYSBI ORAL CAPSULE DELAYED RELEASE	4	PA	aminoacetic acid irrigation solution	2	
RAVICTI ORAL LIQUID	4	PA	AURYXIA ORAL TABLET	4	
REVCovi INTRAMUSCULAR SOLUTION	4	PA	bethanechol chloride oral tablet	2	
sod benz-sod phenylacet intravenous solution	2		calcium acetate (phos binder) oral capsule	1	
sodium phenylbutyrate oral powder	2		calcium acetate (phos binder) oral tablet	1	
			CIALIS ORAL TABLET 10 MG	4	PA; QL (6 EA per 30 days)
			CIALIS ORAL TABLET 2.5 MG, 5 MG	4	PA; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CIALIS ORAL TABLET 20 MG	4	PA; QL (0.2 EA per 1 day)	INTRAROSA VAGINAL INSERT	4	
CUPRIMINE ORAL CAPSULE	4	PA	lanthanum carbonate oral tablet chewable	1	
darifenacin hydrobromide er oral tablet extended release 24 hour	1		LEVITRA ORAL TABLET	4	PA; QL (0.2 EA per 1 day)
DEPEN TITRATABS ORAL TABLET	3		LITHOSTAT ORAL TABLET	4	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		me/naphos(mb/hyo1 oral tablet	2	
DETROL ORAL TABLET	4		MUSE URETHRAL PELLET	4	PA; QL (0.2 EA per 1 day)
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4		MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
D-PENAMINE ORAL TABLET	4		oxybutynin chloride er oral tablet extended release 24 hour	1	
ELMIRON ORAL CAPSULE	3		oxybutynin chloride oral syrup	1	
ENABLEX ORAL TABLET EXTENDED RELEASE 24 HOUR	4		oxybutynin chloride oral tablet	1	
FEM PH VAGINAL GEL	4		OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	4	QL (0.29 EA per 1 day)
flavoxate hcl oral tablet	1		penicillamine oral capsule	2	PA
FOSRENOL ORAL PACKET	4		phenazo oral tablet 200 mg	2	
FOSRENOL ORAL TABLET CHEWABLE	4		phenazopyridine hcl oral tablet 100 mg, 200 mg	2	
GELNIQUE PUMP TRANSDERMAL GEL	4		PHOSLYRA ORAL SOLUTION	4	
GELNIQUE TRANSDERMAL GEL	4		phosphasal oral tablet	2	
glycine irrigation solution	2		PYRIDIUM ORAL TABLET	4	
glycine urologic irrigation solution	2		RENACIDIN IRRIGATION SOLUTION	4	
hyophen oral tablet	2		RENAGEL ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
RENVELA ORAL PACKET	4		trospium chloride er oral capsule extended release 24 hour	1	
RENVELA ORAL TABLET	4		trospium chloride oral tablet	1	
RIMSO-50 INTRAVESICAL SOLUTION	4		URECHOLINE ORAL TABLET	4	
sevelamer carbonate oral packet	1		uretron d/s oral tablet	2	
sevelamer carbonate oral tablet	1		uribel oral capsule	2	
sevelamer hcl oral tablet	1		URIMAR-T ORAL TABLET	4	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	PA; QL (0.2 EA per 1 day)	urin ds oral tablet	2	
solifenacain succinate oral tablet	1		URO-458 ORAL TABLET	4	
STAXYN ORAL TABLET DISPERSIBLE	4	PA; QL (0.2 EA per 1 day)	UROGESIC-BLUE ORAL TABLET	4	
STENDRA ORAL TABLET	4	PA; QL (0.2 EA per 1 day)	uro-mp oral capsule	2	
tadalafil oral tablet 10 mg	2	PA; QL (6 EA per 30 days)	URYL ORAL TABLET	4	
tadalafil oral tablet 2.5 mg, 5 mg	2	PA; QL (1 EA per 1 day)	ustell oral capsule	2	
tadalafil oral tablet 20 mg	2	PA; QL (0.2 EA per 1 day)	uticap oral capsule	2	
THIOLA EC ORAL TABLET DELAYED RELEASE	4		utira-c oral tablet	2	
THIOLA ORAL TABLET	4		utrona-c oral tablet	2	
tolterodine tartrate er oral capsule extended release 24 hour	1		vardenafil hcl oral tablet	2	PA; QL (0.2 EA per 1 day)
tolterodine tartrate oral tablet	1		vardenafil hcl oral tablet dispersible	2	PA; QL (0.2 EA per 1 day)
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	4		VELPHORO ORAL TABLET CHEWABLE	4	
Genitourinary Agents - Drugs for Prostate Conditions					
alfuzosin hcl er oral tablet extended release 24 hour	1				

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
AVODART ORAL CAPSULE	4		ACTIVE INJECTION KL-3 COMBINATION KIT	4	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4		ACTIVE INJECTION KM INJECTION KIT	4	
dutasteride oral capsule	1		ACTIVE INJECTION LM-DEP-2 INJECTION KIT	4	
dutasteride-tamsulosin hcl oral capsule	1		ACTIVE INJECTION M-1 INJECTION KIT	4	
finasteride oral tablet 5 mg	1		BETA 1 KIT INJECTION KIT	4	
FLOMAX ORAL CAPSULE	4		BETALIDO INJECTION KIT	4	
JALYN ORAL CAPSULE	4		BETALOAN SUIK COMBINATION KIT	4	
PROSCAR ORAL TABLET	4		BETAMETHASONE COMBO INJECTION SUSPENSION	4	
RAPAFLO ORAL CAPSULE	4		BETAMETHASONE SOD PHOS & ACET INJECTION SUSPENSION 7 (4-3) MG/ML	4	
silodosin oral capsule	1		BETAMETHASONE SOD PHOS & ACET SUSPENSION 6 (3-3) MG/ML INJECTION	4	
tamsulosin hcl oral capsule	1		betamethasone sod phos & acet suspension 6 (3-3) mg/ml injection	2	
terazosin hcl oral capsule	1		BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION	4	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR	4		BUPIVILOG INJECTION KIT	4	
Hormonal Agents - Adrenal			CELESTONE SOLUSPAN INJECTION SUSPENSION	4	
ACTIVE INJECTION BLM-1 INJECTION KIT	4				
ACTIVE INJECTION BM INJECTION KIT	4				
ACTIVE INJECTION D INJECTION KIT	4				
ACTIVE INJECTION DL INJECTION KIT	4				
ACTIVE INJECTION DLM INJECTION KIT	4				
ACTIVE INJECTION KIT L INJECTION KIT	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CONTRAST ALLERGY PREMED PACK ORAL KIT	4		dexamethasone sod phosphate pf injection solution	2	
CORTEF ORAL TABLET	4		dexamethasone sod phosphate pf injection solution prefilled syringe	2	
cortisone acetate oral tablet	2		dexamethasone sodium phosphate injection solution	2	
DECADRON ORAL TABLET	4		DEXAMETHASONE SODIUM PHOSPHATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
DEPO-MEDROL INJECTION SUSPENSION	4		DEXLIDO INJECTION KIT	4	
DEXAMETHASONE (LA) INJECTION SUSPENSION	4		DEXLIDO-M INJECTION KIT	4	
DEXAMETHASONE ACE & SOD PHOS INJECTION SUSPENSION	4		DEXONTO 0.4% IONTOPHORESIS SOLUTION	4	
dexamethasone intensol oral concentrate	2		DEXOPIN INJECTION KIT	4	
dexamethasone oral elixir	2		DEXPAK 10 DAY ORAL TABLET THERAPY PACK	4	
dexamethasone oral solution	2		DEXPAK 13 DAY ORAL TABLET THERAPY PACK	4	
dexamethasone oral tablet	2		DEXPAK 6 DAY ORAL TABLET THERAPY PACK	4	
dexamethasone oral tablet therapy pack	2		DMT SUIK COMBINATION KIT	4	
DEXAMETHASONE SOD PHOS IN D5W INTRAVENOUS SOLUTION	4		DOUBLEDEX INJECTION KIT	4	
DEXAMETHASONE SOD PHOS-BUPIV INJECTION SOLUTION PREFILLED SYRINGE	4		DXEVO 11-DAY ORAL TABLET THERAPY PACK	4	
DEXAMETHASONE SOD PHOS-NACL INTRAVENOUS SOLUTION	4		DYURAL-40 INJECTION KIT	4	
			DYURAL-80 INJECTION KIT	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
DYURAL-L INJECTION KIT	4		MEDROLOAN SUIK COMBINATION KIT	4	
DYURAL-LM INJECTION KIT	4		METHYLSPREDNISOL ONE ACE-LIDO INJECTION SUSPENSION	4	
fludrocortisone acetate oral tablet	2		METHYLSPREDNISOL ONE ACETATE INJECTION SUSPENSION 50 MG/ML	4	
HIDEX 6-DAY ORAL TABLET THERAPY PACK	4		METHYLSPREDNISOL ONE ACETATE SUSPENSION 40 MG/ML INJECTION	4	
hydrocortisone oral tablet	2		methylprednisolone acetate suspension 40 mg/ml injection	2	
JTT PHYSICIANS COMBINATION KIT	4		METHYLSPREDNISOL ONE ACETATE SUSPENSION 80 MG/ML INJECTION	4	
KENALOG INJECTION SUSPENSION	4		methylprednisolone acetate suspension 80 mg/ml injection	2	
KENALOG-80 INJECTION SUSPENSION	4		methylprednisolone oral tablet	2	
LIDOCIDEX I INJECTION SOLUTION	4		methylprednisolone oral tablet therapy pack	2	
lidolog injection kit	2		methylprednisolone sodium succ injection solution reconstituted	2	
LT INJECTION KIT INJECTION KIT	4		METHYLSPREDNISOL ONE-BUPIVACAINE INJECTION SUSPENSION	4	
MARBETA-25 INJECTION KIT	4		MILLIPRED DP 12-DAY ORAL TABLET THERAPY PACK	4	
MARBETA-L INJECTION KIT	4		MILLIPRED DP ORAL TABLET THERAPY PACK	4	
MARDEX-25 INJECTION KIT	4		MILLIPRED ORAL TABLET	3	
MAS CARE-PAK INJECTION KIT	4				
MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	4				
MEDROL ORAL TABLET 2 MG	3				
MEDROL ORAL TABLET THERAPY PACK	4				
MEDROLOAN II SUIK COMBINATION KIT	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
MULTI-SPECIALTY INJECTION KIT	4		POINT OF CARE L.2 INJECTION KIT	4	
ORAPRED ODT ORAL TABLET DISPERSIBLE	4		POINT OF CARE L.5 INJECTION KIT	4	
P-CARE D40 INJECTION KIT	4		POINT OF CARE LM DEP 2 INJECTION KIT	4	
P-CARE D40G COMBINATION KIT	4		prednisolone oral solution	2	
P-CARE D40MX INJECTION KIT	4		prednisolone sodium phosphate oral solution	2	
P-CARE D80 INJECTION KIT	4		prednisolone sodium phosphate oral tablet dispersible	2	
P-CARE D80G COMBINATION KIT	4		prednisone intensol oral concentrate	2	
P-CARE D80MX INJECTION KIT	4		prednisone oral solution	2	
P-CARE K40 INJECTION KIT	4		prednisone oral tablet	2	
P-CARE K40G COMBINATION KIT	4		prednisone oral tablet therapy pack	2	
P-CARE K40MX INJECTION KIT	4		PRO-C-DURE 5 INJECTION KIT	4	
P-CARE K80 INJECTION KIT	4		PRO-C-DURE 6 INJECTION KIT	4	
P-CARE K80G COMBINATION KIT	4		RAYOS ORAL TABLET DELAYED RELEASE	4	
P-CARE K80MX INJECTION KIT	4		READYSHARP ANESTH + BETAMETH INJECTION KIT	4	
PEDIAPRED ORAL SOLUTION	4		READYSHARP ANESTH + DEXAMETH INJECTION KIT	4	
PHYSICIANS EZ USE JOINT/TUNNEL COMBINATION KIT	4		READYSHARP ANESTH + METHYLPRED INJECTION KIT	4	
PHYSICIANS EZ USE M-PRED INJECTION KIT	4		READYSHARP BETAMETHASONE INJECTION KIT	4	
POD-CARE 100K INJECTION KIT	4				
POINT OF CARE KM INJECTION KIT	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
READYSHARP DEXAMETHASONE INJECTION KIT	4		TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION	4	
ROPIDEX INJECTION KIT	4		TRILOAN II SUIK COMBINATION KIT	4	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED	4		TRILOAN SUIK COMBINATION KIT	4	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED	4		ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER	4	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK	4		Hormonal Agents - Men's Health		
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK	4		ANADROL-50 ORAL TABLET	4	PA
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK	4		ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	PA
TOPIDEX INJECTION KIT	4		ANDROGEL PUMP TRANSDERMAL GEL	4	PA
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	4		ANDROGEL TRANSDERMAL GEL	4	PA
triamcinolone acetonide suspension 40 mg/ml injection	2		AVEED INTRAMUSCULAR SOLUTION	4	PA
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	4		danazol oral capsule	2	
TRIAMCINOLONE DIACETATE INJECTION SUSPENSION	4		DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	4	PA
TRIAMCINOLONE DIACETATE PF INJECTION SUSPENSION 80 MG/2ML	4		EC-RX TESTOSTERONE TRANSDERMAL CREAM	4	
			FORTESTA TRANSDERMAL GEL	4	PA
			METHITEST ORAL TABLET	4	PA
			methyltestosterone oral capsule	1	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NANDROLONE-TESTOSTERONE CYP&EN INJECTION OIL	4		XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA
NATESTO NASAL GEL	4	PA	Hormonal Agents - Osteoporosis		
oxandrolone oral tablet 10 mg	2	PA; QL (2 EA per 1 day)	EVISTA ORAL TABLET	4	
oxandrolone oral tablet 2.5 mg	2	PA; QL (8 EA per 1 day)	OSPHENA ORAL TABLET	4	
STRIANT BUCCAL	4	PA	raloxifene hcl oral tablet	1	
TESTIM TRANSDERMAL GEL	4	PA	Hormonal Agents - Parathyroid		
TESTONE CIK INTRAMUSCULAR KIT	4	PA	cinacalcet hcl oral tablet	2	PA
TESTOSTERONE COMPOUNDING KIT TRANSDERMAL CREAM	4		SENSIPAR ORAL TABLET	4	PA
TESTOSTERONE CYPIONATE INJECTION SOLUTION	4	PA	Hormonal Agents - Pituitary		
testosterone cypionate intramuscular solution	2	PA	ACTHAR INJECTION GEL	3	PA
testosterone enanthate intramuscular solution	2	PA	cabergoline oral tablet	2	
testosterone transdermal gel 10 mg/act (2%), 50 mg/5gm (1%)	2	PA	DDAVP INJECTION SOLUTION	4	
testosterone transdermal gel 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%)	1	PA	DDAVP NASAL SOLUTION	4	
testosterone transdermal solution	2	PA	DDAVP ORAL TABLET	4	
VOGELXO PUMP TRANSDERMAL GEL	4	PA	DDAVP RHINAL TUBE NASAL SOLUTION	3	
VOGELXO TRANSDERMAL GEL	4	PA	desmopressin ace spray refrig nasal solution	2	
			desmopressin acetate injection solution	2	
			desmopressin acetate oral tablet	2	
			desmopressin acetate spray nasal solution	2	
			EGRIFTA SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG	4	PA; QL (0.01 EA per 1 day)	LUPANETA PACK COMBINATION KIT 3.75 & 5 MG	4	PA; QL (0.04 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 7.5 MG	4	PA; QL (0.04 EA per 1 day)	LUPRON DEPOT (1- MONTH) INTRAMUSCULAR KIT 3.75 MG	4	PA
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG	4	PA; QL (0.01 EA per 1 day)	LUPRON DEPOT (1- MONTH) INTRAMUSCULAR KIT 7.5 MG	3	PA
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	4	PA; QL (0.04 EA per 1 day)	LUPRON DEPOT (3- MONTH) INTRAMUSCULAR KIT 11.25 MG	4	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA	LUPRON DEPOT (3- MONTH) INTRAMUSCULAR KIT 22.5 MG	3	PA
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA	LUPRON DEPOT (4- MONTH) INTRAMUSCULAR KIT 30MG INTRAMUSCULAR KIT	3	PA
HUMATROPE INJECTION SOLUTION RECONSTITUTED	4	PA	LUPRON DEPOT (6- MONTH) INTRAMUSCULAR KIT 45MG INTRAMUSCULAR KIT	3	PA
INCRELEX SUBCUTANEOUS SOLUTION	3	PA	LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	4	PA
leuprolide acetate injection kit	2	PA	LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 15 MG, 7.5 MG	3	PA
LEUPROLIDE ACETATE- BUPIVACAINE INTRAMUSCULAR SOLUTION	4		LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED)	4	PA
LUPANETA PACK COMBINATION KIT 11.25 & 5 MG	4	PA; QL (0.01 EA per 1 day)	LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED)	3	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL	4		OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
NOCTIVA NASAL EMULSION	4		PITOCIN INJECTION SOLUTION	4	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION	3	PA	SAIZEN INJECTION SOLUTION RECONSTITUTED	4	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	3	PA	SAIZENPREP INJECTION SOLUTION RECONSTITUTED	4	PA
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	3	PA	SANDOSTATIN INJECTION SOLUTION	4	PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	3	PA	SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	4	PA
octreotide acetate injection solution	2	PA	SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	PA; QL (0.04 EA per 1 day)
OMNITROPE SUBCUTANEOUS SOLUTION	3	PA	SIGNIFOR SUBCUTANEOUS SOLUTION	4	PA; QL (2 ML per 1 day)
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA	SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	4	PA
ORILISSA ORAL TABLET 150 MG	3	PA; QL (1 EA per 1 day)	SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA
ORILISSA ORAL TABLET 200 MG	3	PA; QL (2 EA per 1 day)	STIMATE NASAL SOLUTION	4	
oxytocin injection solution	2		SUPPRELIN LA SUBCUTANEOUS KIT	3	PA; QL (1 EA per 250 days)
OXYTOCIN- DEXTROSE INTRAVENOUS SOLUTION	4		SYNAREL NASAL SOLUTION	3	
OXYTOCIN- LACTATED RINGERS INTRAVENOUS SOLUTION	4		TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG, 22.5 MG	4	PA; QL (0.01 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG	4	PA; QL (0.04 EA per 1 day)	PREPIDIL VAGINAL GEL	4	
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	PA; QL (0.01 EA per 1 day)	PROSTIN E2 VAGINAL SUPPOSITORY	4	
VANTAS SUBCUTANEOUS KIT	4	PA; QL (0 EA per 1 day)	Hormonal Agents - Sex Hormones and Birth Control		
VAPRISOL INTRAVENOUS SOLUTION	4		ACTIVELLA ORAL TABLET	4	
VASOPRESSIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4		afirmelle oral tablet	1	
VASOSTRICT INTRAVENOUS SOLUTION	4		ALORA TRANSDERMAL PATCH TWICE WEEKLY	4	
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	4	QL (0.01 EA per 1 day)	altavera oral tablet	1	
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	3	QL (0.04 EA per 1 day)	alyacen 1/35 oral tablet	1	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA	alyacen 7/7/7 oral tablet	1	
Hormonal Agents - Prostaglandins			amabelz oral tablet	1	
carboprost tromethamine intramuscular solution	2		amethia lo oral tablet	1	QL (1 EA per 1 day)
CERVIDIL VAGINAL INSERT	4		amethia oral tablet	1	QL (1 EA per 1 day)
HEMABATE INTRAMUSCULAR SOLUTION	4		amethyst oral tablet	1	
KORLYM ORAL TABLET	4	PA; QL (4 EA per 1 day)	ANGELIQ ORAL TABLET	4	
			ANNOVERA VAGINAL RING	4	
			apri oral tablet	1	
			aranelle oral tablet	1	
			ashlyna oral tablet	1	QL (1 EA per 1 day)
			aubra eq oral tablet	1	
			aubra oral tablet	1	
			aurovela 1.5/30 oral tablet	1	
			aurovela 1/20 oral tablet	1	
			aurovela 24 fe oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
aurovela fe 1.5/30 oral tablet	1		CLIMARA TRANSDERMAL PATCH WEEKLY	4	
aurovela fe 1/20 oral tablet	1		COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	4	
aviane oral tablet	1		CRINONE VAGINAL GEL	4	QL (0.6 GM per 1 day)
AYGESTIN ORAL TABLET	4		cryselle-28 oral tablet	1	
ayuna oral tablet	1		cyclafem 1/35 oral tablet	1	
azurette oral tablet	1		cyclafem 7/7/7 oral tablet	1	
BALCOLTRA ORAL TABLET	4		cyred eq oral tablet	1	
balziva oral tablet	1		cyred oral tablet	1	
bekyree oral tablet	1		dasetta 1/35 oral tablet	1	
BEYAZ ORAL TABLET	4		dasetta 7/7/7 oral tablet	1	
BI-EST 80:20 PROGESTERONE TRANSDERMAL CREAM	4		daysee oral tablet	1	QL (1 EA per 1 day)
BIEST/PROGESTERONE TRANSDERMAL CREAM	4		deblitane oral tablet	1	
BIJUVA ORAL CAPSULE	4		DELESTROGEN INTRAMUSCULAR OIL	4	
blisovi 24 fe oral tablet	1		delyla oral tablet	1	
blisovi fe 1.5/30 oral tablet	1		DEPO-ESTRADIOL INTRAMUSCULAR OIL	4	
blisovi fe 1/20 oral tablet	1		DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	QL (0.02 ML per 1 day)
briellyn oral tablet	1		DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	4	
camila oral tablet	1		DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	QL (0.02 ML per 1 day)
camrese lo oral tablet	1	QL (1 EA per 1 day)	DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	4	QL (0.02 ML per 1 day)
camrese oral tablet	1	QL (1 EA per 1 day)			
caziant oral tablet	1				
chateal eq oral tablet	1				
chateal oral tablet	1				
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	3				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
desogestrel-ethinyl estradiol oral tablet	1		estradiol valerate intramuscular oil	2	
DIVIGEL TRANSDERMAL GEL	4		estradiol-norethindrone acet oral tablet	1	
dotti transdermal patch twice weekly	1		ESTRING VAGINAL RING	4	QL (0.01 EA per 1 day)
drospirene-eth estrad-levomefol oral tablet	1		ESTROGEL TRANSDERMAL GEL	4	
drospirenone-ethinyl estradiol oral tablet	1		ESTROSTEP FE ORAL TABLET	4	
DUAVEE ORAL TABLET	3		ethynodiol diac-eth estradiol oral tablet	1	
EC-RX ESTRADIOL TRANSDERMAL CREAM	4		EVAMIST TRANSDERMAL SOLUTION	4	
EC-RX PROGESTERONE TRANSDERMAL CREAM	4		FALESSA ORAL KIT	4	
ELESTRIN TRANSDERMAL GEL	4		falmina oral tablet	1	
elinest oral tablet	1		fayosim oral tablet	1	QL (1 EA per 1 day)
ELLA ORAL TABLET	4		FEMHRT LOW DOSE ORAL TABLET	4	
emoquette oral tablet	1		FEMRING VAGINAL RING	4	QL (0.01 EA per 1 day)
ENDOMETRIN VAGINAL INSERT	3		femynor oral tablet	1	
enpresse-28 oral tablet	1		FIRST-PROGESTERONE VGS VAGINAL SUPPOSITORY	4	
enskyce oral tablet	1		fyavolv oral tablet	1	
errin oral tablet	1		GENERESS FE ORAL TABLET CHEWABLE	4	
estarrylla oral tablet	1		gianvi oral tablet	1	
ESTRACE ORAL TABLET	4		hailey 1.5/30 oral tablet	1	
ESTRACE VAGINAL CREAM	4		hailey 24 fe oral tablet	1	
estradiol oral tablet	1		heather oral tablet	1	
estradiol transdermal patch twice weekly	1		hydroxyprogesterone caproate intramuscular oil	2	PA
estradiol transdermal patch weekly	1		hydroxyprogesterone caproate intramuscular solution	2	PA
estradiol vaginal cream	1				
estradiol vaginal tablet	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	4		layolis fe oral tablet chewable	1	
IMVEXXY STARTER PACK VAGINAL INSERT	4		leena oral tablet	1	
incassia oral tablet	1		lessina oral tablet	1	
introvale oral tablet	1	QL (1 EA per 1 day)	levonest oral tablet	1	
isibloom oral tablet	1		levonorgest-eth est & eth est oral tablet	1	QL (1 EA per 1 day)
jasmiel oral tablet	1		levonorgest-eth estrad 91-day oral tablet	1	QL (1 EA per 1 day)
jencycla oral tablet	1		levonorgestrel-ethinyl estrad oral tablet	1	
jinteli oral tablet	1		levonorg-eth estrad triphasic oral tablet	1	
jolessa oral tablet	1	QL (1 EA per 1 day)	levora 0.15/30 (28) oral tablet	1	
juleber oral tablet	1		LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	4	
junel 1.5/30 oral tablet	1		lillow oral tablet	1	
junel 1/20 oral tablet	1		LO LOESTRIN FE ORAL TABLET	4	
junel fe 1.5/30 oral tablet	1		LOESTRIN 1.5/30 (21) ORAL TABLET	4	
junel fe 1/20 oral tablet	1		LOESTRIN 1/20 (21) ORAL TABLET	4	
junel fe 24 oral tablet	1		LOESTRIN FE 1.5/30 ORAL TABLET	4	
kaitlib fe oral tablet chewable	1		LOESTRIN FE 1/20 ORAL TABLET	4	
kalliga oral tablet	1		lopreeza oral tablet	1	
kariva oral tablet	1		loryna oral tablet	1	
kelnor 1/35 oral tablet	1		LOSEASONIQUE ORAL TABLET	4	QL (1 EA per 1 day)
kelnor 1/50 oral tablet	1		low-ogestrel oral tablet	1	
kurvelo oral tablet	1		lo-zumandimine oral tablet	1	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	4		lulera oral tablet	1	
larin 1.5/30 oral tablet	1		lyza oral tablet	1	
larin 1/20 oral tablet	1		MAKENA INTRAMUSCULAR OIL	3	PA
larin 24 fe oral tablet	1				
larin fe 1.5/30 oral tablet	1				
larin fe 1/20 oral tablet	1				
larissia oral tablet	1				

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document

Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
MAKENA SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA	MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY	4	
marlissa oral tablet	1		MIRCETTE ORAL TABLET	4	
medroxyprogesterone acetate intramuscular suspension	2	QL (0.02 ML per 1 day)	MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	4	
medroxyprogesterone acetate intramuscular suspension prefilled syringe	2	QL (0.02 ML per 1 day)	mono-linyah oral tablet	1	
medroxyprogesterone acetate oral tablet	1		NATAZIA ORAL TABLET	3	
MEGACE ES ORAL SUSPENSION	4		necon 0.5/35 (28) oral tablet	1	
megestrol acetate oral suspension	2		NEXPLANON SUBCUTANEOUS IMPLANT	4	
megestrol acetate oral tablet	2		nikki oral tablet	1	
melodetta 24 fe oral tablet chewable	1		nora-be oral tablet	1	
MENEST ORAL TABLET	3		norethin ace-eth estradiol oral tablet	1	
MENOSTAR TRANSDERMAL PATCH WEEKLY	4		norethin ace-eth estradiol oral tablet chewable	1	
mibelas 24 fe oral tablet chewable	1		norethindrone acetate oral tablet	1	
microgestin 1.5/30 oral tablet	1		norethindrone acet- ethinodiol oral tablet	1	
microgestin 1/20 oral tablet	1		norethindrone oral tablet	1	
microgestin fe 1.5/30 oral tablet	1		norethindrone-eth estradiol oral tablet	1	
microgestin fe 1/20 oral tablet	1		norethin-eth estradiol-fe oral tablet chewable	1	
mili oral tablet	1		norgestimate-eth estradiol oral tablet	1	
mimvey oral tablet	1		norgestimate-ethinyl estradiol triphasic oral tablet	1	
MINASTRIN 24 FE ORAL TABLET CHEWABLE	4		norlyda oral tablet	1	
			norlyroc oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
nortrel 0.5/35 (28) oral tablet	1		PREMPHASE ORAL TABLET	3	
nortrel 1/35 (21) oral tablet	1		PREMPRO ORAL TABLET	3	
nortrel 1/35 (28) oral tablet	1		previfem oral tablet	1	
nortrel 7/7/7 oral tablet	1		PROGESTERONE COMPOUNDING KIT TRANSDERMAL CREAM	4	
NUVARING VAGINAL RING	3		progesterone intramuscular oil	2	
ocella oral tablet	1		progesterone micronized oral capsule	1	
ogestrel oral tablet	1		progesterone micronized transdermal cream	2	
orsythia oral tablet	1		PROMETRIUM ORAL CAPSULE	4	
ORTHO MICRONOR ORAL TABLET	4		PROVERA ORAL TABLET	4	
ORTHO TRI-CYCLEN LO ORAL TABLET	4		QUARTETTE ORAL TABLET	4	QL (1 EA per 1 day)
ORTHO-NOVUM 1/35 (28) ORAL TABLET	4		reclipsen oral tablet	1	
ORTHO-NOVUM 7/7/7 (28) ORAL TABLET	4		rivelsa oral tablet	1	QL (1 EA per 1 day)
PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE	4		SAFYRAL ORAL TABLET	4	
philith oral tablet	1		SEASONIQUE ORAL TABLET	4	QL (1 EA per 1 day)
pimtrea oral tablet	1		setlakin oral tablet	1	QL (1 EA per 1 day)
pirmella 1/35 oral tablet	1		sharobel oral tablet	1	
pirmella 7/7/7 oral tablet	1		simliya oral tablet	1	
portia-28 oral tablet	1		simpesse oral tablet	1	QL (1 EA per 1 day)
PREFEST ORAL TABLET	4		SKYLA INTRAUTERINE INTRAUTERINE DEVICE	4	
PREMARIN INJECTION SOLUTION RECONSTITUTED	4		SLYND ORAL TABLET	4	
PREMARIN ORAL TABLET	3		sprintec 28 oral tablet	1	
PREMARIN VAGINAL CREAM	3		sronyx oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
syeda oral tablet	1		xulane transdermal patch weekly	1	
tarina 24 fe oral tablet	1		YASMIN 28 ORAL TABLET	4	
tarina fe 1/20 eq oral tablet	1		YAZ ORAL TABLET	4	
tarina fe 1/20 oral tablet	1		yuvafem vaginal tablet	1	
TAYTULLA ORAL CAPSULE	4		zarah oral tablet	1	
tilia fe oral tablet	1		zovia 1/35e (28) oral tablet	1	
tri femynor oral tablet	1		zumandimine oral tablet	1	
tri-estarrylla oral tablet	1		Hormonal Agents - Thyroid		
tri-legest fe oral tablet	1		ARMOUR THYROID ORAL TABLET	4	
tri-linyah oral tablet	1		CYTOMEL ORAL TABLET	4	
tri-lo-estarrylla oral tablet	1		euthyrox oral tablet	1	
tri-lo-marzia oral tablet	1		levo-t oral tablet	1	
tri-lo-mili oral tablet	1		levothyroxine sodium intravenous solution	1	
tri-lo-sprintec oral tablet	1		levothyroxine sodium intravenous solution reconstituted	2	
tri-mili oral tablet	1		levothyroxine sodium oral tablet	1	
tri-previfem oral tablet	1		levothyroxine- liothyronine oral tablet 30 mg, 60 mg, 90 mg	1	
tri-sprintec oral tablet	1		levoxyl oral tablet	1	
trivora (28) oral tablet	1		liothyronine sodium intravenous solution	2	
tri-vylibra lo oral tablet	1		liothyronine sodium oral tablet	1	
tri-vylibra oral tablet	1		methimazole oral tablet	1	
tulana oral tablet	1		NATURE-THROID ORAL TABLET	4	
tydemy oral tablet	1		np thyroid oral tablet	1	
VAGIFEM VAGINAL TABLET	4		PARSABIV INTRAVENOUS SOLUTION	4	
velivet oral tablet	1				
vienva oral tablet	1				
viorele oral tablet	1				
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY	4				
vyfemla oral tablet	1				
vylibra oral tablet	1				
wera oral tablet	1				
wymzya fe oral tablet chewable	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
propylthiouracil oral tablet	1		ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA
SYNTHROID ORAL TABLET	4		ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
TAPAZOLE ORAL TABLET	4		ATGAM INTRAVENOUS INJECTABLE	3	
thyroid oral tablet 120 mg, 15 mg	1		AZASAN ORAL TABLET	4	
TIROSINT ORAL CAPSULE	4		azathioprine oral tablet	2	
TIROSINT-SOL ORAL SOLUTION	4		azathioprine sodium injection solution reconstituted	2	
TRIOSTAT INTRAVENOUS SOLUTION	4		BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
unithroid oral tablet	1		BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA
WESTHROID ORAL TABLET	4		BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
WP THYROID ORAL TABLET	4		BIVIGAM INTRAVENOUS SOLUTION	4	PA
Immunological Agents - Drugs for Immune System Stimulation or Suppression			CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA	CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED	4	
ACTEMRA INTRAVENOUS SOLUTION	4	PA	CELLCEPT ORAL CAPSULE	4	
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA			
ACTIMMUNE SUBCUTANEOUS SOLUTION	3	PA			
ALFERON N INJECTION SOLUTION	3				
ARAVA ORAL TABLET	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CELLCEPT ORAL SUSPENSION RECONSTITUTED	4		cyclosporine oral capsule	2	
CELLCEPT ORAL TABLET	4		CYTOGAM INTRAVENOUS INJECTABLE	3	PA
CIMZIA PREFILLED KIT SUBCUTANEOUS KIT	3	PA	ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	4	PA
CIMZIA STARTER KIT SUBCUTANEOUS KIT	3	PA	ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
CIMZIA SUBCUTANEOUS KIT	3	PA	ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA	ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA	FIRAZYR SUBCUTANEOUS SOLUTION	4	PA
CUTAQUIG SUBCUTANEOUS SOLUTION	4	PA	FLEBOGAMMA DIF INTRAVENOUS SOLUTION	4	PA
CUVITRU SUBCUTANEOUS SOLUTION	4	PA	GAMASTAN INTRAMUSCULAR INJECTABLE	3	PA
cyclosporine intravenous solution	2		GAMASTAN S/D INTRAMUSCULAR INJECTABLE	3	PA
cyclosporine modified oral capsule	2		GAMIFANT INTRAVENOUS SOLUTION	4	PA
cyclosporine modified oral solution	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
GAMMAGARD INJECTION SOLUTION	4	PA	HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	HYPERHEP B S/D INTRAMUSCULAR SOLUTION	4	
GAMMAKED INJECTION SOLUTION	4	PA	HYPERRAB INJECTION SOLUTION	3	
GAMMAPLEX INTRAVENOUS SOLUTION	4	PA	HYPERRAB S/D INJECTION SOLUTION	3	
GAMUNEX-C INJECTION SOLUTION	4	PA	HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
gengraf oral capsule	2		HYPERTET S/D INTRAMUSCULAR INJECTABLE	4	
gengraf oral solution	2		HYQVIA SUBCUTANEOUS KIT	4	PA
HEPAGAM B INJECTION SOLUTION	4		icatibant acetate subcutaneous solution	2	PA
HIZENTRA SUBCUTANEOUS SOLUTION	4	PA	ILARIS SUBCUTANEOUS SOLUTION	4	PA; QL (0.08 ML per 1 day)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA	ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	3	PA	IMOgam RABIES-HT INJECTION SOLUTION	3	
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	3	PA	IMURAN ORAL TABLET	4	
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	3	PA	INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
			KEDRAB INJECTION SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
KEVZARA SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA	MYFORTIC ORAL TABLET DELAYED RELEASE	4	
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	NABI-HB INTRAMUSCULAR SOLUTION	4	
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	NEORAL ORAL CAPSULE	4	
KYMRIAH INTRAVENOUS SUSPENSION	4	PA	NEORAL ORAL SOLUTION	4	
leflunomide oral tablet	1		NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
methotrexate oral tablet	2		OCTAGAM INTRAVENOUS SOLUTION	4	PA
methotrexate sodium (pf) injection solution	2		OLUMIANT ORAL TABLET	4	PA
methotrexate sodium injection solution	2		ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA
methotrexate sodium injection solution reconstituted	2		ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
methotrexate sodium oral tablet	2		ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
MICRHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3		OTEZLA ORAL TABLET	3	PA
mycophenolate mofetil hcl intravenous solution reconstituted	2		OTEZLA ORAL TABLET THERAPY PACK	3	PA
mycophenolate mofetil oral capsule	2		OTREXUP SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA; QL (1.68 ML per 28 days)
mycophenolate mofetil oral suspension reconstituted	2		PANZYGA INTRAVENOUS SOLUTION	4	PA
mycophenolate mofetil oral tablet	2				
mycophenolate sodium oral tablet delayed release	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
PRIVIGEN INTRAVENOUS SOLUTION	4	PA	RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 25 MG/0.5ML	3	PA; QL (2.24 ML per 28 days)
PROGRAF INTRAVENOUS SOLUTION	4		RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 30 MG/0.6ML	3	PA; QL (2.52 ML per 28 days)
PROGRAF ORAL CAPSULE	4		REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
PROGRAF ORAL PACKET	4		RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
PROVENGE INTRAVENOUS SUSPENSION	3	PA	RHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
RAPAMUNE ORAL SOLUTION	4		RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	3	
RAPAMUNE ORAL TABLET	4		RIDAURA ORAL CAPSULE	4	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.2ML, 7.5 MG/0.15ML	3	PA; QL (0.84 ML per 28 days)	RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 12.5 MG/0.25ML	3	PA; QL (1.12 ML per 28 days)	SANDIMMUNE INTRAVENOUS SOLUTION	3	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 15 MG/0.3ML, 17.5 MG/0.35ML	3	PA; QL (1.4 ML per 28 days)	SANDIMMUNE ORAL CAPSULE	4	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 20 MG/0.4ML	3	PA; QL (1.68 ML per 28 days)	SANDIMMUNE ORAL SOLUTION	3	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 22.5 MG/0.45ML	3	PA; QL (1.96 ML per 28 days)	SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SIMPONI ARIA INTRAVENOUS SOLUTION	3	PA	temsirolimus intravenous solution	2	
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA	THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA	TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	3	
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	4		TORISEL INTRAVENOUS SOLUTION	4	
sirolimus oral solution	2		TREMFYA SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA
sirolimus oral tablet	2		TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA	TREXALL ORAL TABLET	4	
STELARA INTRAVENOUS SOLUTION	3	PA	VARIZIG INTRAMUSCULAR SOLUTION	4	PA
STELARA SUBCUTANEOUS SOLUTION	3	PA	WINRHO SDF INJECTION SOLUTION	3	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA	XATMEP ORAL SOLUTION	4	
SYNAGIS INTRAMUSCULAR SOLUTION	3	PA	XELJANZ ORAL TABLET	3	PA
tacrolimus oral capsule	2		XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
TALTZ SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA	XEMBIFY SUBCUTANEOUS SOLUTION	4	PA
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA	ZINPLAVA INTRAVENOUS SOLUTION	4	
			ZORTRESS ORAL TABLET	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
Immunological Agents - Drugs for Vaccination					
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	4		FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
ADACEL INTRAMUSCULAR SUSPENSION	4		FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	4		FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	
BCG VACCINE INJECTION INJECTABLE	4		FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	
BIOTHRAX INTRAMUSCULAR SUSPENSION	4		FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
BOOSTRIX INTRAMUSCULAR SUSPENSION	4		FLUMIST QUADRIVALENT NASAL SUSPENSION	4	
DAPTACEL INTRAMUSCULAR SUSPENSION	4		FLUZONE HIGH-DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
DIPHTHERIA-TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION	4		FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	
ENGERIX-B INJECTION SUSPENSION	4				
ENGERIX-B INTRAMUSCULAR INJECTABLE	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		M-M-R II SUBCUTANEOUS INJECTABLE	4	
GARDASIL 9 INTRAMUSCULAR SUSPENSION	4		PEDIARIX INTRAMUSCULAR SUSPENSION	4	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		PEDVAX HIB INTRAMUSCULAR SUSPENSION	4	
HAVRIX INTRAMUSCULAR SUSPENSION	4		PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4		PNEUMOVAX 23 INJECTION INJECTABLE	4	
HIBERIX INJECTION SOLUTION RECONSTITUTED	4		PREVNAR 13 INTRAMUSCULAR SUSPENSION	4	
IMOVAX RABIES INTRAMUSCULAR INJECTABLE	4		PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	4	
INFANRIX INTRAMUSCULAR SUSPENSION	4		QUADRACEL INTRAMUSCULAR SUSPENSION	4	
IPOV INJECTION INJECTABLE	4		RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
IXIARO INTRAMUSCULAR SUSPENSION	4		RECOMBIVAX HB INJECTION SUSPENSION	4	
KINRIX INTRAMUSCULAR SUSPENSION	4		ROTARIX ORAL SUSPENSION RECONSTITUTED	4	
MENACTRA INTRAMUSCULAR INJECTABLE	4		ROTATEQ ORAL SOLUTION	4	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	4		SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
STAMARIL INJECTION SUSPENSION RECONSTITUTED	4		APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
TDVAX INTRAMUSCULAR SUSPENSION	4		ASACOL HD ORAL TABLET DELAYED RELEASE	4	
TENIVAC INTRAMUSCULAR INJECTABLE	4		AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	4	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		AZULFIDINE ORAL TABLET	4	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		balsalazide disodium oral capsule	1	
TYPHIM VI INTRAMUSCULAR SOLUTION	4		budesonide er oral tablet extended release 24 hour	2	
VAQTA INTRAMUSCULAR SUSPENSION	4		budesonide oral capsule delayed release particles	2	
VARIVAX SUBCUTANEOUS INJECTABLE	4		CANASA RECTAL SUPPOSITORY	4	
VAXCHORA ORAL SUSPENSION RECONSTITUTED	4		COLAZAL ORAL CAPSULE	4	
VIVOTIF ORAL CAPSULE DELAYED RELEASE	4		colocort rectal enema	2	
YF-VAX SUBCUTANEOUS INJECTABLE	4		CORTENEMA RECTAL ENEMA	4	
ZOSTAVAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	4		CORTIFOAM RECTAL FOAM	4	
Inflammatory Bowel Disease Agents			DELZICOL ORAL CAPSULE DELAYED RELEASE	4	
ana-lex rectal kit	2		DIPENTUM ORAL CAPSULE	4	
ANUSOL-HC RECTAL CREAM	4		ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES	4	
			hydrocortisone ace-pramoxine rectal cream 1-1 %	2	
			hydrocortisone rectal cream	2	
			hydrocortisone rectal enema	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
LIALDA ORAL TABLET DELAYED RELEASE	4		sulfasalazine oral tablet delayed release	1	
lidocaine-hydrocortisone ace rectal cream	2		UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	4		UCERIS RECTAL FOAM	4	
lidocaine-hydrocortisone ace rectal kit	2		Metabolic Bone Disease Agents - Drugs for Osteoporosis		
mesalamine oral capsule delayed release	1		ACTONEL ORAL TABLET 150 MG	4	QL (0.04 EA per 1 day)
mesalamine oral tablet delayed release	1		ACTONEL ORAL TABLET 30 MG, 5 MG	4	
mesalamine rectal enema	1		ACTONEL ORAL TABLET 35 MG	4	QL (0.15 EA per 1 day)
mesalamine rectal suppository	1		alendronate sodium oral solution	1	
mesalamine-cleanser rectal kit	1		alendronate sodium oral tablet 10 mg, 40 mg, 5 mg	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE	4		alendronate sodium oral tablet 35 mg, 70 mg	1	QL (0.15 EA per 1 day)
PROCORT RECTAL CREAM	4		ATELVIA ORAL TABLET DELAYED RELEASE	4	QL (0.15 EA per 1 day)
PROCTOCORT RECTAL CREAM	4		BINOSTO ORAL TABLET EFFERVESCENT	4	QL (0.15 EA per 1 day)
PROCTOFOAM HC RECTAL FOAM	3		BONIVA INTRAVENOUS SOLUTION	4	QL (0.04 ML per 1 day)
procto-med hc rectal cream	2		BONIVA ORAL TABLET	4	QL (0.04 EA per 1 day)
procto-pak rectal cream	2		calcitonin (salmon) nasal solution	2	QL (0.13 ML per 1 day)
proctosol hc rectal cream	2		doxercalciferol intravenous solution	2	
proctozone-hc rectal cream	2				
ROWASA RECTAL KIT	4				
SFROWASA RECTAL ENEMA	3				
sulfasalazine oral tablet	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (0.09 ML per 1 day)	risedronate sodium oral tablet 35 mg	1	QL (0.15 EA per 1 day)
FORTEO SUBCUTANEOUS SOLUTION	3	PA	risedronate sodium oral tablet delayed release	1	QL (0.15 EA per 1 day)
FOSAMAX ORAL TABLET	4	QL (0.15 EA per 1 day)	TYMLOS SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA
FOSAMAX PLUS D ORAL TABLET	4	QL (0.15 EA per 1 day)	ZEMPLAR INTRAVENOUS SOLUTION	4	
HECTOROL INTRAVENOUS SOLUTION	4		zoledronic acid intravenous concentrate	2	
ibandronate sodium intravenous solution	2	QL (0.04 ML per 1 day)	zoledronic acid intravenous solution	2	
ibandronate sodium oral tablet	1	QL (0.04 EA per 1 day)	Metabolic Bone Disease Agents - Other		
MIACALCIN INJECTION SOLUTION	4		calcitriol intravenous solution	2	
pamidronate disodium intravenous solution	2		calcitriol oral capsule	1	
pamidronate disodium intravenous solution reconstituted	2		calcitriol oral solution	1	
paricalcitol intravenous solution	2		doxercalciferol oral capsule	2	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (1 ML per 250 days)	etidronate disodium oral tablet	1	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	4		NATPARA SUBCUTANEOUS CARTRIDGE	4	PA; QL (0.08 EA per 1 day)
RECLAST INTRAVENOUS SOLUTION	4		paricalcitol oral capsule	2	
risedronate sodium oral tablet 150 mg	1	QL (0.04 EA per 1 day)	ROCALTROL ORAL CAPSULE	4	
risedronate sodium oral tablet 30 mg, 5 mg	1		ROCALTROL ORAL SOLUTION	4	
Miscellaneous Therapeutic Agents			ZEMPLAR ORAL CAPSULE	4	
			ACACIA SUBCUTANEOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ACETADOTE INTRAVENOUS SOLUTION	4		ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED	4	
acetylcysteine intravenous solution	2		ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED	4	
ACREMONIUM SUBCUTANEOUS SOLUTION	4		ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED	4	
ALCOHOL PREP PADS PAD , 70 %	4		ANTIVENIN LATRODECTUS MACTANS INJECTION KIT	4	
ALDER SUBCUTANEOUS SOLUTION	4		ANTIVENIN MICRURUS FULVIUS INTRAVENOUS SOLUTION RECONSTITUTED	4	
ALPHA-LIPOIC ACID INJECTION SOLUTION	4		ARIZONA CYPRESS SUBCUTANEOUS SOLUTION	4	
ALTERNARIA SUBCUTANEOUS SOLUTION	4		ARTISS EXTERNAL SOLUTION	4	
AMD FOAM DRESSING PAD	4		AUREOBASIDIUM SUBCUTANEOUS SOLUTION	4	
AMD FOAM DRESSING TOPSHEET PAD	4		AUSTRALIAN PINE SUBCUTANEOUS SOLUTION	4	
AMERICAN BEECH SUBCUTANEOUS SOLUTION	4		BAHIA SUBCUTANEOUS SOLUTION	4	
AMERICAN COCKROACH SUBCUTANEOUS SOLUTION	4		bal in oil intramuscular solution	2	
AMERICAN ELM SUBCUTANEOUS SOLUTION	4		BALD CYPRESS SUBCUTANEOUS SOLUTION	4	
AMERICAN SYCAMORE SUBCUTANEOUS SOLUTION	4		BAYBERRY (WAX MYRTLE) SUBCUTANEOUS SOLUTION	4	
AMPHADASE INJECTION SOLUTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
BERMUDA GRASS SUBCUTANEOUS SOLUTION	4		CANDIDA ALBICANS EXTRACT SUBCUTANEOUS SOLUTION	4	
BIOFREQUENCY INSOLES	4		CARDIOVID PLUS ORAL CAPSULE	4	
BIOGUARD GAUZE SPONGES PAD 4"X4"	4		CARTICEL INTRA- ARTICULAR IMPLANT	4	
BIOGUARD ISLAND DRESSINGS PAD	4		CAT HAIR EXTRACT SUBCUTANEOUS SOLUTION	4	
BIOGUARD NON- ADHERENT DRESSING PAD	4		CATTLE EPITHELIUM SUBCUTANEOUS SOLUTION	4	
BLACK WALNUT POLLEN SUBCUTANEOUS SOLUTION	4		CAYA VAGINAL DIAPHRAGM	4	
BLACK WILLOW SUBCUTANEOUS SOLUTION	4		CEDAR ELM SUBCUTANEOUS SOLUTION	4	
BOTOX INJECTION SOLUTION RECONSTITUTED	3	PA	CEQUR SIMPLICITY STARTER KIT	4	
BOTRYTIS SUBCUTANEOUS SOLUTION	4		CHLORHEXIDINE GLUCONATE SOLUTION 20 %	4	
BOX ELDER SUBCUTANEOUS SOLUTION	4		CLADOSPORIUM CLADOSPORIOIDES SUBCUTANEOUS SOLUTION	4	
BRIDION INTRAVENOUS SOLUTION	4		CLADOSPORIUM SPAEROSPERMUM SUBCUTANEOUS SOLUTION	4	
BROME SUBCUTANEOUS SOLUTION	4		COCKLEBUR SUBCUTANEOUS SOLUTION	4	
CALCIUM DISODIUM VERSENATE INJECTION SOLUTION	4		COENZYME Q-10 INJECTION SOLUTION	4	
CALIFORNIA PEPPER TREE SUBCUTANEOUS SOLUTION	4		CORN POLLEN SUBCUTANEOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CROFAB INTRAVENOUS SOLUTION RECONSTITUTED	4		DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	4	
CURITY AMD ANTIMICROBIAL SPNGE PAD 4"X4"	4		DOG EPITHELIUM SUBCUTANEOUS SOLUTION	4	
CURITY AMD ANTIMICROBIAL STRIP	4		DOG FENNEL SUBCUTANEOUS SOLUTION	4	
CURITY IODOFORM PACKING STRIP	4		DRECHSLERA SUBCUTANEOUS SOLUTION	4	
CURVULARIA SUBCUTANEOUS SOLUTION	4		DUODOTE INTRAMUSCULAR SOLUTION AUTO-INJECTOR	4	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED	4		DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE	3	PA
DANDELION SUBCUTANEOUS SOLUTION	4		DUST MITE MIXED ALLERGEN EXT SUBCUTANEOUS SOLUTION	4	
deferoxamine mesylate injection solution reconstituted	2		DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	4	PA
DESFERAL INJECTION SOLUTION RECONSTITUTED	4		EASTERN COTTONWOOD SUBCUTANEOUS SOLUTION	4	
dexmedetomidine hcl in nacl intravenous solution	2		EC-RX DHEA EXTERNAL CREAM	4	
DEXMEDETOMIDINE HCL INTRAVENOUS SOLUTION 1000 MCG/10ML, 400 MCG/4ML	4		ELCYS INTRAVENOUS SOLUTION	4	
dexmedetomidine hcl intravenous solution 200 mcg/2ml	2		ENDARI ORAL PACKET	4	PA
DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION	4		ENGLISH PLANTAIN SUBCUTANEOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
EPICOCCUM SUBCUTANEOUS SOLUTION	4		GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE	4	PA
ergoloid mesylates oral tablet	2		GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	PA
EROS-CTD DEVICE	4		GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	PA	GERMAN COCKROACH SUBCUTANEOUS SOLUTION	4	
EXCILON AMD DRAIN SPONGES PAD	4		glutaraldehyde external solution	2	
FEMCAP VAGINAL DEVICE	4		GOLDENROD SUBCUTANEOUS SOLUTION	4	
FIRDAPSE ORAL TABLET	4	PA	GRASTEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
FIRE ANT SUBCUTANEOUS SOLUTION	4		HACKBERRY SUBCUTANEOUS SOLUTION	4	
flumazenil intravenous solution	2		heparin lock flush intravenous solution	2	
fomepizole intravenous solution	2		heparin sodium flush intravenous kit	2	
FORA D40D GLUCOSE/PRESSURE DEVICE	4		heparin sodium lock flush intravenous solution	2	
formaldehyde external solution	2		HEPMED COMBINATION KIT	4	
FUSARIUM SUBCUTANEOUS SOLUTION	4		HONEY BEE VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED	4	
GELCLAIR MOUTH/THROAT GEL	4		HONEY BEE VENOM SUBCUTANEOUS SOLUTION RECONSTITUTED	4	
GEL-FLOW EXTERNAL KIT	4				
GELFOAM-JMI POWDER EXTERNAL KIT	4				
GELFOAM-JMI SPONGE EXTERNAL KIT	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
HORSE EPITHELIUM SUBCUTANEOUS SOLUTION	4		l-cysteine hcl intravenous solution	2	
HYALGAN INTRA-ARTICULAR SOLUTION	4	PA	LENSCALE SUBCUTANEOUS SOLUTION	4	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA	MACI INTRA-ARTICULAR SHEET	4	
HYLENEX INJECTION SOLUTION	4		MEADOW FESCUE GRASS POLLEN SUBCUTANEOUS SOLUTION	4	
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA	MELALEUCA SUBCUTANEOUS SOLUTION	4	
INFED INJECTION SOLUTION	4		MESQUITE SUBCUTANEOUS SOLUTION	4	
JOHNSON GRASS SUBCUTANEOUS SOLUTION	4		methergine oral tablet	2	
J-TIP KIT W/VIAL ADAPTERS KIT	4		methylene blue injection solution	2	
JUNE GRASS POLLEN STANDARDIZED SUBCUTANEOUS SOLUTION	4		methylergonovine maleate injection solution	2	
KALBITOR SUBCUTANEOUS SOLUTION	4	PA	methylergonovine maleate oral tablet	2	
KAPOK SUBCUTANEOUS SOLUTION	4		MITE (D. FARINAE) SUBCUTANEOUS SOLUTION	4	
KERLIX AMD ANTIMICROBIAL	4		MITE (D. PTERONYSSINUS) SUBCUTANEOUS SOLUTION	4	
KERLIX AMD SUPER SPONGES PAD	4		MIXED ASPERGILLUS SUBCUTANEOUS SOLUTION	4	
KOCHIA SUBCUTANEOUS SOLUTION	4		MIXED FEATHERS SUBCUTANEOUS SOLUTION	4	
LAMBS QUARTERS SUBCUTANEOUS SOLUTION	4		MIXED RAGWEED SUBCUTANEOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
MIXED VESPID VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED	4		OLIVE TREE SUBCUTANEOUS SOLUTION	4	
MIXED VESPID VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4		ORAFATE MOUTH/THROAT PASTE	4	
mlk f1 injection kit	2		ORALAIR ADULT SAMPLE KIT SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
mlk f2 injection kit	2		ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
mlk f3 injection kit	2		ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (6 EA per 365 days)
MLK F4 INJECTION KIT	4		ORALAIR SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA	ORCHARD GRASS POLLEN SUBCUTANEOUS SOLUTION	4	
MOUNTAIN CEDAR SUBCUTANEOUS SOLUTION	4		ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA
MOUSE EPITHELIUM SUBCUTANEOUS SOLUTION	4		PECAN POLLEN SUBCUTANEOUS SOLUTION	4	
MUCOR SUBCUTANEOUS SOLUTION	4		PENICILLIUM NOTATUM SUBCUTANEOUS SOLUTION	4	
MUGWORT SUBCUTANEOUS SOLUTION	4		PENTETATE CALCIUM TRISODIUM COMBINATION SOLUTION	4	
MYOBLOC INTRAMUSCULAR SOLUTION	4	PA	PENTETATE ZINC TRISODIUM COMBINATION SOLUTION	4	
NEOKE RA LIPOIC ORAL POWDER	4				
NEXAVIR INJECTION SOLUTION	4				
NITHIODOTE INTRAVENOUS KIT	4				
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
PERENNIAL RYE GRASS POLLEN SUBCUTANEOUS SOLUTION	4		RADIOGARDASE ORAL CAPSULE	4	
PHOMA EXIGUA SUBCUTANEOUS SOLUTION	4		RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
PHOTREXA VISCOS OPHTHALMIC SOLUTION PREFILLED SYRINGE	4		RAPPORT RLS KIT	4	
PHOTREXA- PHOTREXA VISCOS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE	4		RAPPORT VTD KIT	4	
pralidoxime chloride intramuscular solution auto-injector	2		RED BIRCH SUBCUTANEOUS SOLUTION	4	
PRAXBIND INTRAVENOUS SOLUTION	4		RED CEDAR SUBCUTANEOUS SOLUTION	4	
PRECEDEX INTRAVENOUS SOLUTION	4		RED MAPLE SUBCUTANEOUS SOLUTION	4	
PRIVET SUBCUTANEOUS SOLUTION	4		RED MULBERRY SUBCUTANEOUS SOLUTION	4	
PROTHELIAL MOUTH/THROAT PASTE	4		RED TOP GRASS POLLEN SUBCUTANEOUS SOLUTION	4	
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	4		RESET FOR ANDROID APP	4	
PROVAYBLUE INTRAVENOUS SOLUTION	4		RESET FOR IOS APP	4	
QUEEN PALM SUBCUTANEOUS SOLUTION	4		RESET FOR IOS OR ANDROID APP	4	
RABBIT EPITHELIUM SUBCUTANEOUS SOLUTION	4		RESET-O FOR ANDROID APP	4	
			RESET-O FOR IOS APP	4	
			RESET-O FOR IOS OR ANDROID APP	4	
			RHIZOPUS SUBCUTANEOUS SOLUTION	4	
			ROUGH MARSH ELDER SUBCUTANEOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ROUGH PIGWEED SUBCUTANEOUS SOLUTION	4		SORBITOL IRRIGATION SOLUTION 3 %	4	
RUSSIAN THISTLE SUBCUTANEOUS SOLUTION	4		sorbitol irrigation solution 3.3 %	2	
RUZURGI ORAL TABLET	4	PA	sorbitol-mannitol irrigation solution	2	
SACCHAROMYCES CERESIAE SUBCUTANEOUS SOLUTION	4		SORREL/DOCK MIX SUBCUTANEOUS SOLUTION	4	
SAGEBRUSH SUBCUTANEOUS SOLUTION	4		SPINY PIGWEED SUBCUTANEOUS SOLUTION	4	
sash kit intravenous kit	2		STEMPHYLIUM SUBCUTANEOUS SOLUTION	4	
SHAGBARK HICKORY SUBCUTANEOUS SOLUTION	4		SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA
SHEEP SORREL SUBCUTANEOUS SOLUTION	4		SWEET GUM SUBCUTANEOUS SOLUTION	4	
SHORT RAGWEED POLLEN EXT SUBCUTANEOUS SOLUTION	4		SWEET VERNAL GRASS POLLEN SUBCUTANEOUS SOLUTION	4	
SODIUM HYALURONATE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA	SYNvisc INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA
sodium nitrite intravenous solution	2		SYNvisc ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA
sodium saccharin powder	2		TAKHZYRO SUBCUTANEOUS SOLUTION	4	PA
SODIUM THIOSULFATE SOLUTION 25 % INTRAVENOUS	4		TALL RAGWEED SUBCUTANEOUS SOLUTION	4	
sodium thiosulfate solution 25 % intravenous	2		TELFA AMD ISLAND DRESSING PAD	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TELFA AMD NON-ADHERENT PAD	4		VISTOGARD ORAL PACKET	4	
TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION	4		VITRASE INJECTION SOLUTION	4	
TISSEEL EXTERNAL KIT	4		WASP VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED	4	
TISSEEL EXTERNAL SOLUTION	4		WASP VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4	
TRICHOPHYTON SUBCUTANEOUS SOLUTION	4		WESTERN JUNIPER SUBCUTANEOUS SOLUTION	4	
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA	WHITE ASH SUBCUTANEOUS SOLUTION	4	
VENOMIL HONEY BEE VENOM INJECTION KIT	4		WHITE BIRCH SUBCUTANEOUS SOLUTION	4	
VENOMIL MIXED VESPID VENOM INJECTION SOLUTION RECONSTITUTED	4		WHITE FACED HORNET VENOM SUBCUTANEOUS SOLUTION RECONSTITUTED	4	
VENOMIL WASP VENOM INJECTION KIT	4		WHITE MULBERRY SUBCUTANEOUS SOLUTION	4	
VENOMIL WHITE FACED HORNET INJECTION KIT	4		WHITE OAK SUBCUTANEOUS SOLUTION	4	
VENOMIL YELLOW HORNET VENOM INJECTION KIT	4		WHITE PINE SUBCUTANEOUS SOLUTION	4	
VENOMIL YELLOW JACKET VENOM INJECTION KIT	4		WHITE-FACED HORNET VENOM INJECTION SOLUTION RECONSTITUTED	4	
VIRGINIA LIVE OAK SUBCUTANEOUS SOLUTION	4		WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	4	
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	4	PA			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 200 UNIT	4	PA	ZOLGENSMA 12.1- 12.5 KG INTRAVENOUS KIT	4	PA
XIAFLEX INJECTION SOLUTION RECONSTITUTED	3	PA	ZOLGENSMA 12.6- 13.0 KG INTRAVENOUS KIT	4	PA
YELLOW DOCK SUBCUTANEOUS SOLUTION	4		ZOLGENSMA 13.1- 13.5 KG INTRAVENOUS KIT	4	PA
YELLOW HORNET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED	4		ZOLGENSMA 2.6-3.0 KG INTRAVENOUS KIT	4	PA
YELLOW HORNET VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4		ZOLGENSMA 3.1-3.5 KG INTRAVENOUS KIT	4	PA
YELLOW HORNET VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4		ZOLGENSMA 3.6-4.0 KG INTRAVENOUS KIT	4	PA
YELLOW JACKET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED	4		ZOLGENSMA 4.1-4.5 KG INTRAVENOUS KIT	4	PA
YELLOW JACKET VENOM PROTEIN SUBCUTANEOUS SOLUTION RECONSTITUTED	4		ZOLGENSMA 4.6-5.0 KG INTRAVENOUS KIT	4	PA
ZOLGENSMA 10.1- 10.5 KG INTRAVENOUS KIT	4	PA	ZOLGENSMA 5.1-5.5 KG INTRAVENOUS KIT	4	PA
ZOLGENSMA 10.6- 11.0 KG INTRAVENOUS KIT	4	PA	ZOLGENSMA 5.6-6.0 KG INTRAVENOUS KIT	4	PA
ZOLGENSMA 11.1- 11.5 KG INTRAVENOUS KIT	4	PA	ZOLGENSMA 6.1-6.5 KG INTRAVENOUS KIT	4	PA
ZOLGENSMA 11.6- 12.0 KG INTRAVENOUS KIT	4	PA	ZOLGENSMA 6.6-7.0 KG INTRAVENOUS KIT	4	PA
			ZOLGENSMA 7.1-7.5 KG INTRAVENOUS KIT	4	PA
			ZOLGENSMA 7.6-8.0 KG INTRAVENOUS KIT	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ZOLGENSMA 8.1-8.5 KG INTRAVENOUS KIT	4	PA	BESIVANCE OPHTHALMIC SUSPENSION	4	
ZOLGENSMA 8.6-9.0 KG INTRAVENOUS KIT	4	PA	BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION	4	
ZOLGENSMA 9.1-9.5 KG INTRAVENOUS KIT	4	PA	BLEPH-10 OPHTHALMIC SOLUTION	4	
ZOLGENSMA 9.6-10.0 KG INTRAVENOUS KIT	4	PA	bromfenac sodium (once-daily) ophthalmic solution	2	QL (6.8 ML per 365 days)
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation			BROMSITE OPHTHALMIC SOLUTION	4	QL (20 ML per 365 days)
ACULAR LS OPHTHALMIC SOLUTION	4		CEFUROXIME SODIUM-NACL INTRAVITREAL SOLUTION	4	
ACULAR OPHTHALMIC SOLUTION	4		CILOXAN OPHTHALMIC OINTMENT	4	
ACUVAIL OPHTHALMIC SOLUTION	4		CILOXAN OPHTHALMIC SOLUTION	4	
ALOCRIL OPHTHALMIC SOLUTION	4		ciprofloxacin hcl ophthalmic solution	2	
ALOMIDE OPHTHALMIC SOLUTION	4		cromolyn sodium ophthalmic solution	2	
ALREX OPHTHALMIC SUSPENSION	4		dexamethasone sodium phosphate ophthalmic solution	2	
AZASITE OPHTHALMIC SOLUTION	4		DEXTENZA OPHTHALMIC INSERT	4	
azelastine hcl ophthalmic solution	2		diclofenac sodium ophthalmic solution	2	
bacitracin ophthalmic ointment	2		DUREZOL OPHTHALMIC EMULSION	4	
BEPREVE OPHTHALMIC SOLUTION	4		epinastine hcl ophthalmic solution	2	
			erythromycin ophthalmic ointment	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
FLAREX OPHTHALMIC SUSPENSION	4		LOTEMAX OPHTHALMIC GEL	4	QL (20 GM per 365 days)
fluorometholone ophthalmic suspension	2		LOTEMAX OPHTHALMIC OINTMENT	4	QL (14 GM per 365 days)
flurbiprofen sodium ophthalmic solution	2		LOTEMAX OPHTHALMIC SUSPENSION	4	
FML FORTE OPHTHALMIC SUSPENSION	4		LOTEMAX SM OPHTHALMIC GEL	4	
FML LIQUIFILM OPHTHALMIC SUSPENSION	4		loteprednol etabonate ophthalmic suspension	2	
FML OPHTHALMIC OINTMENT	3		MAXIDEX OPHTHALMIC SUSPENSION	4	
gatifloxacin ophthalmic solution	2		MITOSOL OPHTHALMIC KIT	4	
gentak ophthalmic ointment	2		MOXEZA OPHTHALMIC SOLUTION	3	
gentamicin sulfate ophthalmic solution	2		moxifloxacin hcl ophthalmic solution	2	
ILEVRO OPHTHALMIC SUSPENSION	4	QL (0.2 ML per 1 day)	NATACYN OPHTHALMIC SUSPENSION	3	
ILUVIEN INTRAVITREAL IMPLANT	4		NEVANAC OPHTHALMIC SUSPENSION	4	QL (0.2 ML per 1 day)
INVELTYS OPHTHALMIC SUSPENSION	4		OCUFLOX OPHTHALMIC SOLUTION	4	
ketorolac tromethamine ophthalmic solution	2		ofloxacin ophthalmic solution	2	
KLARITY-A OPHTHALMIC SOLUTION	4		olopatadine hcl ophthalmic solution	2	
KLARITY-B OPHTHALMIC SOLUTION	4		OZURDEX INTRAVITREAL IMPLANT	4	
KLARITY-L OPHTHALMIC EMULSION	4		PATADAY OPHTHALMIC SOLUTION	4	
levofloxacin ophthalmic solution	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
PATANOL OPHTHALMIC SOLUTION	4		TOBREX OPHTHALMIC OINTMENT	4	
PAZEO OPHTHALMIC SOLUTION	3		TOBREX OPHTHALMIC SOLUTION	4	
POVIDONE-IODINE OPHTHALMIC SOLUTION	4		trifluridine ophthalmic solution	2	
PRED FORTE OPHTHALMIC SUSPENSION	4		TRIPLE PMB OPHTHALMIC SOLUTION RECONSTITUTED	4	
PRED MILD OPHTHALMIC SUSPENSION	4		TRIPLE PMK OPHTHALMIC SOLUTION RECONSTITUTED	4	
PREDNISOL ACE- MOXIFLOX-BROMFEN OPHTHALMIC SUSPENSION	4		VIGAMOX OPHTHALMIC SOLUTION	4	
prednisolone acetate ophthalmic suspension	2		YUTIQ INTRAVITREAL IMPLANT	4	
prednisolone acetate p- f ophthalmic suspension	2		ZIRGAN OPHTHALMIC GEL	4	
prednisolone sodium phosphate ophthalmic solution	2		ZYMAXID OPHTHALMIC SOLUTION	4	
PREDNISOLON- MOXIFLOX- NEPAFENAC OPHTHALMIC SUSPENSION	4		Ophthalmic Agents - Drugs for Glaucoma		
PROLENSA OPHTHALMIC SOLUTION	3	QL (12 ML per 365 days)	acetazolamide er oral capsule extended release 12 hour	1	
RETISERT INTRAVITREAL IMPLANT	4		acetazolamide oral tablet 250 mg	1	
sulfacetamide sodium ophthalmic ointment	2		ALPHAGAN P OPHTHALMIC SOLUTION	3	
sulfacetamide sodium ophthalmic solution	2		apraclonidine hcl ophthalmic solution	1	
tobramycin ophthalmic solution	2		AZOPT OPHTHALMIC SUSPENSION	3	
			betaxolol hcl ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
BETIMOL OPHTHALMIC SOLUTION	4		ISTALOL OPHTHALMIC SOLUTION	4	
BETOPTIC-S OPHTHALMIC SUSPENSION	4		KEVEYIS ORAL TABLET	4	PA; QL (4 EA per 1 day)
bimatoprost ophthalmic solution	1	QL (0.1 ML per 1 day)	latanoprost ophthalmic solution	1	
brimonidine tartrate ophthalmic solution	1		LATANOPROST-TIMOLOL MALEATE OPHTHALMIC SOLUTION	4	
BRIMONIDINE-DORZOLAMIDE OPHTHALMIC SOLUTION	4		levobunolol hcl ophthalmic solution	1	
carteolol hcl ophthalmic solution	1		LUMIGAN OPHTHALMIC SOLUTION	3	QL (0.1 ML per 1 day)
COMBIGAN OPHTHALMIC SOLUTION	3		methazolamide oral tablet	1	
COSOPT OPHTHALMIC SOLUTION	4		PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	3	
COSOPT PF OPHTHALMIC SOLUTION 22.3-6.8 MG/ML	4		pilocarpine hcl ophthalmic solution	1	
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4		RHOPRESSA OPHTHALMIC SOLUTION	3	
dorzolamide hcl solution 2 % ophthalmic	1		ROCKLATAN OPHTHALMIC SOLUTION	3	QL (0.1 ML per 1 day)
dorzolamide hcl-timolol mal ophthalmic solution	1		SIMBRINZA OPHTHALMIC SUSPENSION	3	
dorzolamide hcl-timolol mal pf ophthalmic solution 22.3-6.8 mg/ml	1		timolol maleate ophthalmic gel forming solution	1	
IOPIDINE OPHTHALMIC SOLUTION	4		timolol maleate ophthalmic solution	1	
ISOPTO CARPINE OPHTHALMIC SOLUTION	4		TIMOLOL-BRIMON-DORZOL-LATANOPR OPHTHALMIC SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
TIMOLOL-BRIMONIDINE-DORZOLAMID OPHTHALMIC SOLUTION	4		ak-poly-bac ophthalmic ointment	2	
TIMOLOL-DORZOLAMID-LATANOPROST OPHTHALMIC SOLUTION	4		AKTEN OPHTHALMIC GEL	4	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	4		ALCAINE OPHTHALMIC SOLUTION	4	
TIMOPTIC OPHTHALMIC SOLUTION	4		altacaine ophthalmic solution	2	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION	4		altafrin ophthalmic solution	2	
TRAVATAN Z OPHTHALMIC SOLUTION	3	QL (0.1 ML per 1 day)	ATROPINE SULFATE OPHTHALMIC EMULSION	4	
TRUSOPT OPHTHALMIC SOLUTION	4		atropine sulfate ophthalmic ointment	2	
VYZULTA OPHTHALMIC SOLUTION	4	QL (0.2 ML per 1 day)	atropine sulfate ophthalmic solution	2	
XALATAN OPHTHALMIC SOLUTION	4		AVENOVA EXTERNAL SOLUTION	4	
XELPROS OPHTHALMIC EMULSION	4	QL (0.1 ML per 1 day)	bacitracin-polymyxin b ophthalmic ointment	2	
ZIOPTAN OPHTHALMIC SOLUTION	4	QL (1 EA per 1 day)	bacitra-neomycin-polymyxin-hc ophthalmic ointment	2	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions			BEOVU INTRAVITREAL SOLUTION	4	
ACUICYN EXTERNAL LIQUID , 0.01 %	4		BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE	4	
			BLEPHAMIDE OPHTHALMIC SUSPENSION	4	
			BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	4	
			CEQUA OPHTHALMIC SOLUTION	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
CHONDROITIN SULFATE OPHTHALMIC SOLUTION	4		LACRISERT OPHTHALMIC INSERT	4	
CYCLOGYL OPHTHALMIC SOLUTION	4		LASTACAFT OPHTHALMIC SOLUTION	4	
CYCLOMYDRIL OPHTHALMIC SOLUTION	4		LUCENTIS INTRAVITREAL SOLUTION	3	
cyclopentolate hcl ophthalmic solution	2		LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	
CYCLOSPORINE IN KLARITY OPHTHALMIC EMULSION	4		MAXITROL OPHTHALMIC OINTMENT	4	
CYSTARAN OPHTHALMIC SOLUTION	4	PA; QL (2.2 ML per 1 day)	MAXITROL OPHTHALMIC SUSPENSION	4	
DOUBLE PM OPHTHALMIC SOLUTION RECONSTITUTED	4		MOXIFLOXACIN HCL-BSS INTRAVITREAL SOLUTION	4	
EYLEA INTRAVITREAL SOLUTION	4		neomycin-bacitracin zn-polymyx ophthalmic ointment	2	
GATIFLOXACIN-DEXAMETHASONE OPHTHALMIC SOLUTION	4		neomycin-polymyxin-dexameth ophthalmic ointment	2	
GELFILM OPHTHALMIC FILM	4		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	2	
homatropaire ophthalmic solution	2		neomycin-polymyxin-gramicidin ophthalmic solution	2	
homatropine hbr ophthalmic solution	2		neomycin-polymyxin-hc ophthalmic suspension	2	
HYPOCYN EXTERNAL LIQUID	4		neo-polycin hc ophthalmic ointment	2	
ISOPTO ATROPINE OPHTHALMIC SOLUTION	4		neo-polycin ophthalmic ointment	2	
JETREA INTRAVITREAL SOLUTION	4		OXERVATE OPHTHALMIC SOLUTION	4	PA; QL (2 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
phenylephrine hcl ophthalmic solution	2		PREDNISOLON-GATIFLOX-BROMFENAC OPHTHALMIC SOLUTION	4	
polycin ophthalmic ointment	2		PREDNISOLON-GATIFLOX-BROMFENAC OPHTHALMIC SUSPENSION	4	
polymyxin b-trimethoprim ophthalmic solution	2		PREDNISOLON-MOXIFLOX-BROMFENAC OPHTHALMIC SOLUTION	4	
POLYTRIM OPHTHALMIC SOLUTION	4		proparacaine hcl ophthalmic solution	2	
PRED-G OPHTHALMIC SUSPENSION	4		RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	3	PA
PRED-G S.O.P. OPHTHALMIC OINTMENT	4		RESTASIS OPHTHALMIC EMULSION	3	PA
PREDNISOLONE ACETATE-NEPAFENAC OPHTHALMIC SUSPENSION	4		sulfacetamide-prednisolone ophthalmic solution	2	
PREDNISOLONE ACET-MOXIFLOXACIN OPHTHALMIC SUSPENSION	4		tetcaine ophthalmic solution	2	
PREDNISOLONE-BROMFENAC OPHTHALMIC SOLUTION	4		tetracaine hcl ophthalmic solution	2	
PREDNISOLONE-BROMFENAC OPHTHALMIC SUSPENSION	4		tetravisc forte ophthalmic solution	2	
PREDNISOLONE-GATIFLOXACIN OPHTHALMIC SOLUTION	4		tetravisc ophthalmic solution	2	
PREDNISOLONE-GATIFLOXACIN OPHTHALMIC SUSPENSION	4		TOBRADEX OPHTHALMIC OINTMENT	4	
PREDNISOLONE-MOXIFLOXACIN OPHTHALMIC SOLUTION	4		TOBRADEX OPHTHALMIC SUSPENSION	4	
			TOBRADEX ST OPHTHALMIC SUSPENSION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
tobramycin-dexamethasone ophthalmic suspension	2		FLOXIN OTIC OTIC SOLUTION	4	
TROPICAMIDE-CYCLOPENTOLATE-PE OPHTHALMIC SOLUTION	4		fluocinolone acetonide otic oil	2	
TROPICAMIDE-PHENYLEPHRINE OPHTHALMIC SOLUTION	4		hydrocortisone-acetic acid otic solution	2	
TROPIC-PROPARACA-PE-KETOROLAC OPHTHALMIC SOLUTION	4		neomycin-polymyxin-hc otic solution	2	
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED	4		neomycin-polymyxin-hc otic suspension	2	
XIIDRA OPHTHALMIC SOLUTION	3	PA	ofloxacin otic solution	2	
ZYLET OPHTHALMIC SUSPENSION	4		OTIPRIO INTRATYMPANIC SUSPENSION	4	
Otic Agents - Drugs for Ear Conditions			OTOVEL OTIC SOLUTION	4	
acetic acid otic solution	2		PRAMOTIC OTIC LIQUID	4	
CETRAXAL OTIC SOLUTION	4		Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
CIPRO HC OTIC SUSPENSION	4		ADRENALIN NASAL SOLUTION	4	
CIPRODEX OTIC SUSPENSION	3		ALZAIR ALLERGY NASAL SPRAY NASAL POWDER	4	
ciprofloxacin hcl otic solution	2		ASTEPRO NASAL SOLUTION	4	QL (2 ML per 1 day)
CIPROFLOXACIN-FLUOCINOLONE PF OTIC SOLUTION	4		azelastine hcl nasal solution	2	QL (2 ML per 1 day)
COLY-MYCIN S OTIC SUSPENSION	4		BECONASE AQ NASAL SUSPENSION	4	QL (1 GM per 1 day)
DERMOTIC OTIC OIL	4		benzonatate oral capsule	2	
flac otic oil	2		bromfed dm oral syrup	2	
			BROMPHENIRAMINE MALEATE INTRAMUSCULAR SOLUTION	4	
			brompheniramine tannate oral tablet chewable	2	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
carbinoxamine maleate oral solution	2		DYMISTA NASAL SUSPENSION	3	QL (0.77 GM per 1 day)
carbinoxamine maleate oral tablet	2		FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
cetirizine hcl oral solution	2		flunisolide nasal solution	2	QL (0.84 ML per 1 day)
CINQAIR INTRAVENOUS SOLUTION	4	PA	fluticasone propionate nasal suspension	2	
CLARINEX ORAL TABLET	4		GILPHEX TR ORAL TABLET	4	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	4		GILTUSS TR ORAL TABLET	4	
clemastine fumarate oral tablet 2.68 mg	2		guaiatussin ac oral syrup	2	PA; QL (240 ML per 1 fill)
CUROSURF INTRATRACHEAL SUSPENSION	4		guaifenesin ac oral syrup	2	PA; QL (240 ML per 1 fill)
cyproheptadine hcl oral syrup	2		hydrocodone polst-cpm polst er oral suspension extended release	2	PA; QL (240 ML per 1 fill)
cyproheptadine hcl oral tablet	2		hydrocodone-homatropine oral syrup	2	PA; QL (240 ML per 1 fill)
desloratadine oral tablet	2		hydrocodone-homatropine oral tablet	2	PA; QL (6 EA per 1 day)
desloratadine oral tablet dispersible	2		hydromet oral syrup	2	PA; QL (240 ML per 1 fill)
dexchlorpheniramine maleate oral solution	2		HYPERSAL INHALATION NEBULIZATION SOLUTION	4	
DICOPANOL FUSEPAQ ORAL SUSPENSION RECONSTITUTED	4		INFASURF INTRATRACHEAL SUSPENSION	4	
DICOPANOL RAPIDPAQ ORAL SUSPENSION RECONSTITUTED	4		ipratropium bromide nasal solution	2	
diphen oral elixir	2		KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	4	
diphenhydramine hcl injection solution	2		levocetirizine dihydrochloride oral solution	2	
diphenhydramine hcl oral elixir	2				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
levocetirizine dihydrochloride oral tablet	2		promethazine hcl oral syrup	2	
mometasone furoate nasal suspension	2	QL (1.14 GM per 1 day)	promethazine hcl oral tablet	2	
NASONEX NASAL SUSPENSION	3	QL (1.14 GM per 1 day)	promethazine hcl rectal suppository	2	
nebusal inhalation nebulization solution 3 %	2		promethazine-codeine oral solution	2	PA; QL (240 ML per 1 fill)
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	4		promethazine-codeine oral syrup	2	PA; QL (240 ML per 1 fill)
NEOTUSS PLUS ORAL LIQUID	4		promethazine-dm oral syrup	2	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (0.11 ML per 1 day)	promethazine-phenyleph-codeine oral syrup	2	PA; QL (240 ML per 1 fill)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (0.11 ML per 1 day)	promethazine-phenylephrine oral syrup	2	
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; QL (0.11 EA per 1 day)	promethegan rectal suppository	2	
olopatadine hcl nasal solution	2	QL (1.02 GM per 1 day)	pseudoephedrine-bromphen-dm oral syrup	2	
OMNARIS NASAL SUSPENSION	4	QL (0.42 GM per 1 day)	pulmosal inhalation nebulization solution	2	
PATANASE NASAL SOLUTION	4	QL (1.02 GM per 1 day)	QNASL CHILDRENS NASAL AEROSOL SOLUTION	4	QL (0.23 GM per 1 day)
phenadoxz rectal suppository	2		QNASL NASAL AEROSOL SOLUTION	4	QL (0.36 GM per 1 day)
PHENERGAN INJECTION SOLUTION	4		RYCLORA ORAL SOLUTION	4	
phenylephrine-guaifenesin oral liquid	2		ryvent oral tablet	2	
promethazine hcl injection solution	2		SEMPREX-D ORAL CAPSULE	4	
			SINUVA NASAL IMPLANT	4	
			sodium chloride inhalation nebulization solution	2	
			SSKI ORAL SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SURVANTA INTRATRACHEAL SUSPENSION	4		ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
TESSALON PERLES ORAL CAPSULE	4		ADVAIR HFA INHALATION AEROSOL	3	QL (0.4 GM per 1 day)
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	PA; QL (2 EA per 1 day)	ADYPHREN AMP II INJECTION KIT	4	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR	4	PA; QL (2 EA per 1 day)	ADYPHREN AMP INJECTION KIT	4	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	4	PA; QL (240 ML per 1 fill)	ADYPHREN II INJECTION KIT	4	
virtussin ac w/alc oral liquid	2	PA; QL (240 ML per 1 fill)	ADYPHREN INJECTION KIT	4	
XHANCE NASAL EXHALER SUSPENSION	4	QL (1.1 ML per 1 day)	AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA	AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA	AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
ZETONNA NASAL AEROSOL SOLUTION	4	QL (0.21 GM per 1 day)	albuterol sulfate er oral tablet extended release 12 hour	2	
Z-TUSS AC ORAL LIQUID	4	PA; QL (240 ML per 1 fill)	ALBUTEROL SULFATE HFA INHALATION AEROSOL SOLUTION	4	QL (1.2 GM per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions			albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	2	QL (18 ML per 1 day)
ACCOLATE ORAL TABLET	4		albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%	2	QL (3.34 EA per 1 day)
acetylcysteine inhalation solution	2				
ADRENALIN INJECTION SOLUTION	4				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	2	QL (12.5 ML per 1 day)	ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
albuterol sulfate oral syrup	2		ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
albuterol sulfate oral tablet	2		ALVESCO INHALATION AEROSOL SOLUTION	4	QL (0.41 GM per 1 day)
aminophylline intravenous solution	2		ASMANEX HFA INHALATION AEROSOL	4	QL (0.44 GM per 1 day)
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)	ATROVENT HFA INHALATION AEROSOL SOLUTION	4	QL (0.86 GM per 1 day)
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	4	QL (0.07 EA per 1 day)
ARCAPTA NEOHALER INHALATION CAPSULE	4	QL (4 EA per 1 day)	AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	4	
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (1 EA per 1 day)	BEVESPI AEROSPHERE INHALATION AEROSOL	4	QL (0.36 GM per 1 day)
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)	BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)	BROVANA INHALATION NEBULIZATION SOLUTION	4	QL (4 ML per 1 day)
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)	budesonide inhalation suspension	1	QL (4 ML per 1 day)
			COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.27 GM per 1 day)

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
cromolyn sodium inhalation nebulization solution	2		FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BILST, 50 MCG/BILST	3	QL (2 EA per 1 day)
DALIRESP ORAL TABLET	4	PA	FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/BILST	3	QL (8 EA per 1 day)
difil-g forte oral liquid	2		FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	3	QL (0.8 GM per 1 day)
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	4		FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	3	QL (0.71 GM per 1 day)
DULERA INHALATION AEROSOL	4	QL (0.44 GM per 1 day)	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	QL (2 EA per 1 day)
ELIXOPHYLLIN ORAL ELIXIR	3		FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	2	QL (0.04 EA per 1 day)
epinephrine injection solution 0.3 mg/0.3ml	2		GLASSIA INTRAVENOUS SOLUTION	4	PA
epinephrine injection solution auto-injector	2		INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (1 EA per 1 day)
EPINEPHRINE PROFESSIONAL INJECTION KIT	4		ipratropium bromide inhalation solution	1	QL (10.42 ML per 1 day)
EPINEPHRINESNAP-EMS INJECTION KIT	4		ipratropium-albuterol inhalation solution	1	QL (18 ML per 1 day)
EPINEPHRINESNAP-V INJECTION KIT	4				
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	4				
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	4				
EPISNAP INJECTION KIT	4				
ESBRIET ORAL CAPSULE	4	PA			
ESBRIET ORAL TABLET	4	PA			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	2	QL (18 ML per 1 day)	PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (0.07 EA per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	2	QL (3 EA per 1 day)	PROLASTIN-C INTRAVENOUS SOLUTION	4	PA
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	2	QL (9 ML per 1 day)	PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	4	QL (1 GM per 1 day)	PROVENTIL HFA INHALATION AEROSOL SOLUTION	4	QL (1.2 GM per 1 day)
LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION	4	QL (2 ML per 1 day)	PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (0.07 EA per 1 day)
LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION	4	QL (2 ML per 1 day)	PULMICORT SUSPENSION INHALATION SUSPENSION	4	QL (4 ML per 1 day)
metaproterenol sulfate oral syrup	2		QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	3	QL (0.71 GM per 1 day)
montelukast sodium oral packet	1		SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER	4	
montelukast sodium oral tablet	1		SEEBRI NEOHALER INHALATION CAPSULE	4	QL (2 EA per 1 day)
montelukast sodium oral tablet chewable	1		SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
OFEV ORAL CAPSULE	4	PA	SINGULAIR ORAL PACKET	4	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	4	QL (4 ML per 1 day)	SINGULAIR ORAL TABLET	4	
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.07 EA per 1 day)	SINGULAIR ORAL TABLET CHEWABLE	4	
PROAIR HFA INHALATION AEROSOL SOLUTION	3	QL (1.2 GM per 1 day)			

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
SPIRIVA HANDIHALER INHALATION CAPSULE	3	QL (1 EA per 1 day)	theophylline in d5w intravenous solution	2	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.14 GM per 1 day)	theophylline oral solution	2	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED	4		TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
STERITALC INTRAPLEURAL POWDER	4		TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (0.04 EA per 1 day)
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.14 GM per 1 day)	UTIBRON NEOHALER INHALATION CAPSULE	4	QL (2 EA per 1 day)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	4	QL (4.2 GM per 30 days)	VENTOLIN HFA INHALATION AEROSOL SOLUTION	3	QL (1.2 GM per 1 day)
SYMBICORT INHALATION AEROSOL	3	QL (0.34 GM per 1 day)	wixela inhub inhalation aerosol powder breath activated	1	QL (2 EA per 1 day)
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	4		XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION	4	QL (3 EA per 1 day)
terbutaline sulfate injection solution	2		XOPENEX HFA INHALATION AEROSOL	4	QL (1 GM per 1 day)
terbutaline sulfate oral tablet	2		XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML	4	QL (18 ML per 1 day)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4		XOPENEX INHALATION NEBULIZATION SOLUTION 1.25 MG/3ML	4	QL (9 ML per 1 day)
theochron oral tablet extended release 12 hour	1		YUPELRI INHALATION SOLUTION	4	QL (3 ML per 1 day)
theophylline er oral tablet extended release 12 hour	1		zafirlukast oral tablet	1	
theophylline er oral tablet extended release 24 hour	1				

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	tobramycin nebulization solution 300 mg/5ml inhalation	2	
zileuton er oral tablet extended release 12 hour	1		TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	4	
ZYFLO ORAL TABLET	4		TRIKAFTA ORAL TABLET THERAPY PACK	4	PA; QL (3 EA per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis			Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
BETHKIS INHALATION NEBULIZATION SOLUTION	3		ADCIRCA ORAL TABLET	4	PA; QL (2 EA per 1 day)
CAYSTON INHALATION SOLUTION RECONSTITUTED	4	PA	ADEMPAS ORAL TABLET	3	PA; QL (90 EA per 30 days)
KALYDECO ORAL PACKET	4	PA	alyq oral tablet	2	PA; QL (2 EA per 1 day)
KALYDECO ORAL TABLET	4	PA	ambrisentan oral tablet	2	PA; QL (1 EA per 1 day)
KITABIS PAK INHALATION NEBULIZATION SOLUTION	4		bosentan oral tablet	2	PA; QL (2 EA per 1 day)
ORKAMBI ORAL PACKET	4	PA; QL (2 EA per 1 day)	epoprostenol sodium intravenous solution reconstituted	2	PA
ORKAMBI ORAL TABLET	4	PA; QL (4 EA per 1 day)	FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
PULMOZYME INHALATION SOLUTION	3	PA	LETAIRIS ORAL TABLET	4	PA; QL (1 EA per 1 day)
SYMDEKO ORAL TABLET THERAPY PACK	4	PA; QL (2 EA per 1 day)	OPSUMIT ORAL TABLET	3	PA; QL (1 EA per 1 day)
TOBI NEBULIZER INHALATION NEBULIZATION SOLUTION	4		ORENITRAM ORAL TABLET EXTENDED RELEASE	4	PA
TOBI PODHALER INHALATION CAPSULE	4	QL (224 EA per 40 days)	REMODULIN INJECTION SOLUTION	4	PA; QL (2.9 ML per 1 day)
			REVATIO INTRAVENOUS SOLUTION	4	PA

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
REVATIO ORAL SUSPENSION RECONSTITUTED	4	PA; QL (7.5 ML per 1 day)	Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
REVATIO ORAL TABLET	4	PA; QL (3 EA per 1 day)	ACTIVE-CYCLOBENZAPRINE TRANSDERMAL CREAM	4	
sildenafil citrate intravenous solution	2	PA	AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
sildenafil citrate oral suspension reconstituted	2	PA; QL (7.5 ML per 1 day)	baclofen external cream	2	
sildenafil citrate oral tablet 20 mg	2	PA; QL (3 EA per 1 day)	baclofen oral tablet	2	
tadalafil (pah) oral tablet	2	PA; QL (2 EA per 1 day)	carisoprodol oral tablet	2	
TRACLEER 62.5 MG, 125 MG	4	PA; QL (2 EA per 1 day)	carisoprodol-aspirin oral tablet	2	
TRACLEER 32 MG	3	PA; QL (4 EA per 1 day)	chlorzoxazone oral tablet	2	
treprostinil injection solution	2	PA; QL (2.9 ML per 1 day)	cyclobenzaprine hcl er oral capsule extended release 24 hour	2	
TYVASO INHALATION SOLUTION	4	PA; QL (2.9 ML per 1 day)	cyclobenzaprine hcl oral tablet	2	
TYVASO REFILL INHALATION SOLUTION	4	PA; QL (2.9 ML per 1 day)	CYCLOPHENE RAPIDPAQ TRANSDERMAL CREAM	4	
TYVASO STARTER INHALATION SOLUTION	4	PA; QL (2.9 ML per 1 day)	DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED	4	
UPTRAVI ORAL TABLET	4	PA; QL (2 EA per 1 day)	DANTRIUM ORAL CAPSULE	4	
UPTRAVI ORAL TABLET THERAPY PACK	4	PA; QL (400 EA per 365 days)	dantrolene sodium intravenous solution reconstituted	2	
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA	dantrolene sodium oral capsule	2	
VENTAVIS INHALATION SOLUTION	4	PA; QL (9 ML per 1 day)	ENOVARX-BACLOFEN EXTERNAL CREAM	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
enovarx-cyclobenzaprine hcl cream 20 mg/gm transdermal	2		RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED	4	
ENOVARX-CYCLOBENZAPRINE HCL CREAM 20 MG/GM TRANSDERMAL	4		SKELAXIN ORAL TABLET	4	
FEXMID ORAL TABLET	4		SOMA ORAL TABLET	4	
FIRST-BACLOFEN ORAL SUSPENSION	4		TABRADOL FUSEPAQ ORAL SUSPENSION	4	
LORZONE ORAL TABLET	4		TABRADOL RAPIDPAQ ORAL SUSPENSION	4	
METAXALL CP COMBINATION KIT	4		TIZANIDINE COMFORT PAC COMBINATION	4	
metaxalone oral tablet	2		tizanidine hcl oral capsule	2	
methocarbamol injection solution	2		tizanidine hcl oral tablet	2	
methocarbamol oral tablet	2		ZANAFLEX ORAL CAPSULE	4	
NORGESIC FORTE ORAL TABLET	4		ZANAFLEX ORAL TABLET	4	
orphenadrine citrate er oral tablet extended release 12 hour	2		Sleep Disorder Agents		
orphenadrine citrate injection solution	2		AMBIEN CR ORAL TABLET EXTENDED RELEASE	4	QL (1 EA per 1 day)
orphenadrine-aspirin-caffeine oral tablet	2		AMBIEN ORAL TABLET	4	QL (1 EA per 1 day)
ORPHENGESIC FORTE ORAL TABLET	4		AMYTAL SODIUM INJECTION SOLUTION RECONSTITUTED	4	
OZOBAX ORAL SOLUTION	4		armodafinil oral tablet 150 mg, 200 mg, 250 mg	2	PA; QL (1 EA per 1 day)
revonto intravenous solution reconstituted	2		armodafinil oral tablet 50 mg	2	PA; QL (2 EA per 1 day)
ROBAXIN INJECTION SOLUTION	4		BELSOMRA ORAL TABLET	4	QL (1 EA per 1 day)
ROBAXIN-750 ORAL TABLET	4		BUTISOL SODIUM ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits	Drug Name	Drug Tier	Requirements /Limits
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	4	QL (1 EA per 1 day)	zaleplon oral capsule 5 mg	2	QL (1 EA per 1 day)
eszopiclone oral tablet	2	QL (1 EA per 1 day)	zolpidem tartrate er oral tablet extended release	2	QL (1 EA per 1 day)
flurazepam hcl oral capsule	2	PA; QL (1 EA per 1 day)	zolpidem tartrate oral tablet	2	QL (1 EA per 1 day)
HETLIOZ ORAL CAPSULE	4	PA; QL (1 EA per 1 day)	zolpidem tartrate sublingual tablet sublingual	2	QL (1 EA per 1 day)
INTERMEZZO SUBLINGUAL TABLET SUBLINGUAL	4	QL (1 EA per 1 day)			
LUNESTA ORAL TABLET	4	QL (1 EA per 1 day)			
modafinil oral tablet	2	PA; QL (1 EA per 1 day)			
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG	4	PA; QL (1 EA per 1 day)			
NUVIGIL ORAL TABLET 50 MG	4	PA; QL (2 EA per 1 day)			
PROVIGIL ORAL TABLET	4	PA; QL (1 EA per 1 day)			
ramelteon oral tablet	2	QL (1 EA per 1 day)			
RESTORIL ORAL CAPSULE	4	QL (1 EA per 1 day)			
ROZEREM ORAL TABLET	4	QL (1 EA per 1 day)			
SECONAL ORAL CAPSULE	4				
SILENOR ORAL TABLET	4	QL (1 EA per 1 day)			
SUNOSI ORAL TABLET	4	PA; QL (1 EA per 1 day)			
temazepam oral capsule	2	QL (1 EA per 1 day)			
WAKIX ORAL TABLET	4				
XYREM ORAL SOLUTION	4	PA; QL (18 ML per 1 day)			
zaleplon oral capsule 10 mg	2	QL (2 EA per 1 day)			

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KALYDECO	181	KISQALI (200 MG DOSE)	53	LAMICTAL XR	36
KAMDOY	98	KISQALI (400 MG DOSE)	53	lamivudine	66
KANJINTI	53	KISQALI (600 MG DOSE)	53	lamivudine-zidovudine	66
KANUMA	126	KISQALI FEMARA (400 MG DOSE)	53	lamotrigine	36
KAPOK	160	KISQALI FEMARA (600 MG DOSE)	53	lamotrigine er	36
KAPSPARGO SPRINKLE	78	KISQALI FEMARA(200 MG DOSE)	53	lamotrigine starter kit-blue	36
KAPVAY	86	KITABIS PAK	181	lamotrigine starter kit-green	36
KARBINAL ER	174	KIVIK	99	lamotrigine starter kit-orange	36
kariva	141	KLARITY-A	167	LANCETS	109
KATERZIA	78	KLARITY-B	167	LANOXIN	78
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KEPPRA XR	36	KOCHIA	160	larissia	141
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ketoconazole	44	K-TAB	116	LAZANDA	10
KETODAN	44	kurvelo	141	I-cysteine hcl	160
KETOPHENONE RAPIDPAQ	15	KUVAN	126	LDO PLUS	18
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KETOROLAC		labetalol hcl	78	LENSCALE	160
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		LINCOCIN	28	lorcet hd	10
		lincomycin hcl	28	lorcet plus	10
		lindane	59	LORTAB	10
		linezolid	28	loryna	141

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LOTRONEX	124	MAGNESIUM SULFATE-		MEDI-DERM/L-RX	20
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LYRICA	89	MAVENCLAD (7 TABS)	88	meropenem	28
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Nondiscrimination notice and access to communication services

OptumRx and its family of affiliated Optum companies does not discriminate on the basis of race, color, national origin, age, disability, or sex in its health programs or activities.

We provide assistance free of charge to people with disabilities or whose primary language is not English. To request a document in another format such as large print or to get language assistance such as a qualified interpreter, please call the number located on the back of your prescription ID card, TTY 711. Representatives are available 24 hours a day, seven days a week.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can send a complaint to:

OptumRx Civil Rights Coordinator
11000 Optum Circle
Eden Prairie, MN 55344

Phone: **1-800-562-6223, TTY 711**
Fax: 855-351-5495
Email: **Optum_Civil_Rights@Optum.com**

If you need help filing a complaint, please call the number located on the back of your prescription ID card, TTY 711. Representatives are available 24 hours a day, seven days a week. You can also file a complaint directly with the U.S. Dept. of Health and Human Services online, by phone, or by mail:

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>

Phone: Toll-free **1-800-368-1019**, 800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

This information is available in other formats like large print. To ask for another format, please call the telephone number listed on your health plan ID card.

Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說**中文 (Chinese)**，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: **한국어(Korean)**를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث **العربية (Arabic)**، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisyè sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasiyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia **l'italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語(**Japanese**)を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما **فارسی (Farsi)** است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नाशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर काल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អាមេរិក៖ បានសំនួរកិច្ចយោងខ្មែរ(Khmer)សាធារណៈសាធារណៈតាមភាគភ័ព្យល់ គីមានសំរាប់អុទក់
ឃុំមុនសំនួរកិច្ចយោងខ្មែរ ដែលមានទីតាំងនៃភូមិភូមិនេះអាជីវកម្មស្ថិតនៅក្នុងភូមិភូមិនេះ។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahé nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániłti'go, saad bee áka'anída>awo>ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqodí ninaaltsoos nit'lizí bee nééhozinígíí bine'dééjé, t'áá jíík'ehgo béeésh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.



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