AlaskaCare

Retiree Medicare Prescription Drug Plan (PDP) Part D
2020 Comprehensive Formulary (list of covered drugs)

Administered by OptumRx
Effective January 1, 2020

Please read: this document contains information about the drugs we cover in this plan.

This formulary was updated on January 1, 2020, and is a complete list of Part D drugs covered by our plan. For more recent information or if you have questions, please contact:

OptumRx Member Services
Phone: 1-855-409-6999
TTY users call: 711
Hour of operation: 24 hours a day, 7 days a week
Website: optumrx.com

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we”, “us” or “our”, it means OptumRx. When it refers to “plan” or “our plan”, it means AlaskaCare.

You can maximize your pharmacy benefits by using network pharmacies.

Formulary ID 18092 Version <Version>

Optum Insurance of Ohio, Inc. is a Medicare approved Part D sponsor and administers this plan through its pharmacy benefit manager, OptumRx, on behalf of your employer, union or trustees of a fund. If you need this information in another language or alternate format (Braille, large print, audio), please contact OptumRx Member Services at the number located on the back of your ID card.

DB & Dual plans | S8841_19_MC-DS11_AKC

Can the formulary (drug list) change?
Yes. If you are taking a drug on our 2020 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2020 coverage year except new adverse information about the safety or effectiveness of a drug is released.

If the Food and Drug Administration deems a drug on our formulary to be unsafe, or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.

The enclosed formulary is current as of January 1, 2020. To get updated information about the drugs covered, please contact OptumRx Member Services. You may also visit our website at **optumrx.com**, where you will find the most up-to-date information about our list of covered drugs (formulary) by using the "Drug Information" tool (found under the "Member Tools" tab.)

Our contact information appears on the front and back cover pages.

How do I use the formulary?
There are two ways to find your drug within the formulary:

- **Medical Condition**
  The formulary begins on page 3. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category "Cardiovascular Agents." If you know what your drug is used for, look for the category name in the list that begins on page 3. Then, look under the category name for your drug.
- **Alphabetical Listing**
  If you are not sure what category to look under, you should look for your drug in the Index that begins after the drug list. The Index provides an alphabetical list of all drugs included in this document. Both brand name drugs and generic drugs are listed in the Index.

Formulary design
The formulary structure features generic drugs and preferred brand-name drugs.

Drug Tier	Helpful Tips
Tier 1	Most generic drugs listed under Tier 1 have the lowest copayments.
Tier 2	Drugs listed under Tier 2 generally include preferred brand-name.

Please refer to your Evidence of Coverage for more information.

What are generic drugs?
Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?
Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

Prior Authorization (PA)	A prior authorization requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from OptumRx before you fill your prescriptions. If you do not get approval, the drug may not be covered.
Quantity Limits (QL)	For certain drugs, there is a limit on the amount of the drug that will be covered.

To find out if your drug has any additional requirements or limits, look in the formulary that begins on page 3. You can also get more information about the restrictions applied to specific covered drugs by visiting our website or by calling OptumRx Member Services. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask OptumRx to make an exception to these restrictions or limits, or for a list of other similar drugs that may treat your health condition. See the section “How do I request an exception to the formulary?” on page c for information about how to request an exception.

What if my drug is not on the formulary?
If your drug is not included in this formulary (list of covered drugs), you should first contact OptumRx Member Services and ask if your drug is covered. Our contact information, along with the date we last updated the formulary, is shown on the front and back cover pages.

If your drug is not covered, you have two options:

- You can ask Member Services for a list of similar drugs that are covered. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered.
- You can ask OptumRx to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the formulary?
You can ask OptumRx to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make:

- You can ask us to cover a drug even if it is not on our formulary. If approved, the drug will be covered at a predetermined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level. If approved, this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, we may limit the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Please Note: If we grant your request to cover a drug that is not on our formulary, you may not ask us to provide a higher level of coverage for the drug.

Generally, we will only approve your request for an exception if the drug is included on the plan's formulary, or would cause you to have adverse medical effects.

You should contact OptumRx for an initial coverage decision for a formulary, tiering, or utilization restriction exception. **When you request an exception, you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan, you may be taking drugs that are not on our formulary; or you may be taking a drug that is on our formulary, but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary, or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with 31-day transition supply, written for as many pills as necessary, unless you have a prescription written for fewer days. We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary, or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

If you are a current enrollee with a level-of-care change and you need a drug that is not on our formulary, or if your ability to get your drugs is limited, we will cover a temporary 31-day transition supply (unless you have a prescription written for fewer days) while you seek to obtain a formulary exception. If you are in the process of seeking an exception, we will consider allowing continued coverage until a decision is made.

For more information

For more detailed information about your prescription drug coverage, please review your other plan materials. If you have questions about the plan, please call OptumRx Member Services. Our contact information, along with the date we last updated the formulary, is shown on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)** 24 hours a day/7 days a week. TTY users should call **1-877-486-2048.** Or visit medicare.gov.

Formulary
The formulary below provides information about covered drugs. If you have trouble finding your drug in the list, turn to the Index on page 135.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., COZAAR), and generic drugs are listed in lower-case italics (e.g., atenolol). The abbreviations in the Requirements/Limits column let you know if there are any special requirements for coverage of your drug.

Programs/ Limits	Helpful Tips
B/D	This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.
NDS	Non-Extended Days' Supply. This prescription drugs is not available for an extended days' supply.
QL	Quantity Limit. For certain drugs, our plan limits the amount of the drug that will be covered.
SP	Specialty Medication. Medication is designated as specialty.

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Drug Name	Drug Tier	Requirements /Limits
Analgesics		
Analgesics		
ALLZITAL ORAL TABLET	2	
BUPAP ORAL TABLET	2	
butalbital-acetaminophen oral capsule	1	
butalbital-acetaminophen oral tablet	1	
butalbital-apap oral tablet	1	
butalbital-apap-caffeine oral capsule	1	
butalbital-aspirin-caffeine oral tablet	1	
ESGIC ORAL CAPSULE	1	
FIORICET ORAL CAPSULE	2	
TENCON ORAL TABLET	1	
ZEBUTAL ORAL CAPSULE	1	
Nonsteroidal Anti-inflammatory Drugs		
ARTHROTEC ORAL TABLET DELAYED RELEASE	2	
CALDOLOR INTRAVENOUS SOLUTION	2	
CAMBIA ORAL PACKET	2	
CELEBREX ORAL CAPSULE	2	
celecoxib oral capsule	1	
DAYPRO ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
diclofenac epolamine transdermal patch	1	PA
diclofenac potassium oral tablet	2	
diclofenac sodium er oral tablet extended release 24 hour	2	
diclofenac sodium oral tablet delayed release	2	
diclofenac sodium transdermal gel 1 %	1	
diclofenac sodium transdermal gel 3 %	2	
diclofenac-misoprostol oral tablet delayed release	2	
diflunisal oral tablet	1	
DUEXIS ORAL TABLET	2	
ec-naproxen oral tablet delayed release	1	
etodolac er oral tablet extended release 24 hour	1	
etodolac oral capsule	1	
etodolac oral tablet	1	
FELDENE ORAL CAPSULE	2	
fenoprofen calcium oral capsule 400 mg	1	
fenoprofen calcium oral tablet	1	
FLECTOR TRANSDERMAL PATCH	2	PA
flurbiprofen oral tablet 100 mg	1	
IBU ORAL TABLET	1	
ibuprofen oral suspension	1	

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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
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
INDOCIN ORAL SUSPENSION	2	
INDOCIN RECTAL SUPPOSITORY	2	
indomethacin er oral capsule extended release	1	
indomethacin oral capsule	1	
indomethacin sodium intravenous solution reconstituted	1	
ketoprofen er oral capsule extended release 24 hour	1	
ketoprofen oral capsule	1	
ketorolac tromethamine injection solution	1	
ketorolac tromethamine intramuscular solution	1	
ketorolac tromethamine oral tablet	1	
LODINE ORAL TABLET	2	
meclofenamate sodium oral capsule	1	
mefenamic acid oral capsule	1	
meloxicam oral tablet	1	
MOBIC ORAL TABLET	2	
nabumetone oral tablet	1	
NALFON ORAL CAPSULE	2	
NALFON ORAL TABLET	2	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

Drug Name	Drug Tier	Requirements /Limits
naproxen dr oral tablet delayed release	1	
naproxen oral suspension	1	
naproxen oral tablet	1	
naproxen sodium er oral tablet extended release 24 hour	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral capsule	1	
QMIIZ ODT ORAL TABLET DISPERSIBLE	2	
salsalate oral tablet	1	
SPRIX NASAL SOLUTION	2	
sulindac oral tablet	1	
TIVORBEX ORAL CAPSULE	2	
tolmetin sodium oral capsule	1	
tolmetin sodium oral tablet	1	
VIMOVO ORAL TABLET DELAYED RELEASE	2	
VIVLODEX ORAL CAPSULE	2	
VOLTAREN TRANSDERMAL GEL	2	
ZIPSOR ORAL CAPSULE	2	
ZORVOLEX ORAL CAPSULE	2	

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Drug Name	Drug Tier	Requirements /Limits
Opioid Analgesics, Long-acting		
ARYMO ER ORAL TABLET EXTENDED RELEASE ABUSE-DETERRENT	2	NDS
BELBUCA BUCCAL FILM	2	NDS
BUPRENEX INJECTION SOLUTION	2	NDS
buprenorphine hcl injection solution	2	NDS
buprenorphine transdermal patch weekly	1	NDS
BUTRANS TRANSDERMAL PATCH WEEKLY	2	NDS
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	NDS
DOLOPHINE ORAL TABLET	2	NDS
DURAGESIC-100 TRANSDERMAL PATCH 72 HOUR	2	NDS
DURAGESIC-12 TRANSDERMAL PATCH 72 HOUR	2	NDS
DURAGESIC-25 TRANSDERMAL PATCH 72 HOUR	2	NDS
DURAGESIC-50 TRANSDERMAL PATCH 72 HOUR	2	NDS
DURAGESIC-75 TRANSDERMAL PATCH 72 HOUR	2	NDS
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr	1	NDS
fentanyl transdermal patch 72 hour 87.5 mcg/hr	2	NDS
hydromorphone hcl er oral tablet er 24 hour abuse-deterrent 12 mg, 16 mg, 8 mg	1	NDS
hydromorphone hcl er oral tablet er 24 hour abuse-deterrent 32 mg	2	NDS
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	2	NDS
INFUMORPH 200 INJECTION SOLUTION	2	NDS
INFUMORPH 500 INJECTION SOLUTION	2	NDS
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 20 MG, 200 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG	2	NDS
levorphanol tartrate oral tablet	1	NDS
methadone hcl injection solution	2	NDS
METHADONE HCL INTENSOL ORAL CONCENTRATE	1	NDS
methadone hcl oral concentrate	1	NDS
methadone hcl oral solution	1	NDS

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Drug Name	Drug Tier	Requirements /Limits
methadone hcl oral tablet	1	NDS
METHADOSE ORAL CONCENTRATE 10 MG/ML	1	NDS
METHADOSE SUGAR-FREE ORAL CONCENTRATE	1	NDS
MITIGO INJECTION SOLUTION	1	NDS
MORPHABOND ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	2	NDS
morphine sulfate er beads oral capsule extended release 24 hour	1	NDS
morphine sulfate er oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 80 mg	1	NDS
morphine sulfate er oral capsule extended release 24 hour 100 mg	2	NDS
morphine sulfate er oral tablet extended release	1	NDS
MS CONTIN ORAL TABLET EXTENDED RELEASE	2	NDS
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	2	NDS
oxycodone hcl er oral tablet er 12 hour abuse-deterrent	2	NDS
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	2	NDS
oxymorphone hcl er oral tablet extended release 12 hour	1	NDS
tramadol hcl er (biphasic) oral tablet extended release 24 hour	1	NDS
tramadol hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	2	NDS
tramadol hcl er oral tablet extended release 24 hour	1	NDS
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	2	NDS
ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	2	NDS
Opioid Analgesics, Short-acting		
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL	2	PA; NDS
acetaminophen-codeine #2 oral tablet	1	NDS
acetaminophen-codeine #3 oral tablet	1	NDS
acetaminophen-codeine #4 oral tablet	1	NDS
acetaminophen-codeine oral solution	1	NDS
acetaminophen-codeine oral tablet	1	NDS
ACTIQ BUCCAL LOZENGE ON A HANDLE	2	PA; NDS
apap-caff-dihydrocodeine oral capsule	1	NDS
ASCOMP-CODEINE ORAL CAPSULE	1	NDS

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Drug Name	Drug Tier	Requirements /Limits
butalbital-apap-caff-cod oral capsule	1	NDS
butalbital-asa-caff-codeine oral capsule	1	NDS
butorphanol tartrate injection solution	1	NDS
butorphanol tartrate nasal solution	1	NDS
carisoprodol-aspirin-codeine oral tablet	1	PA; NDS
codeine sulfate oral tablet	1	NDS
DEMEROL INJECTION SOLUTION	2	NDS
DILAUDID INJECTION SOLUTION	2	NDS
DILAUDID ORAL LIQUID	2	NDS
DILAUDID ORAL TABLET	2	NDS
duramorph injection solution	1	NDS
DVORAH ORAL TABLET	2	NDS
ENDOCET ORAL TABLET	1	NDS
fentanyl citrate (pf) injection solution	1	B/D; NDS
fentanyl citrate (pf) injection solution cartridge	1	B/D; NDS
fentanyl citrate buccal lozenge on a handle	2	PA; NDS
fentanyl citrate buccal tablet	2	PA; NDS
FENTORA BUCCAL TABLET	2	PA; NDS
FIORICET/CODEINE ORAL CAPSULE	2	NDS
FIORINAL/CODEINE #3 ORAL CAPSULE	2	NDS

Drug Name	Drug Tier	Requirements /Limits
hydrocodone-acetaminophen oral solution	1	NDS
hydrocodone-acetaminophen oral tablet	1	NDS
hydrocodone-ibuprofen oral tablet	1	NDS
hydromorphone hcl injection solution 1 mg/ml, 2 mg/ml, 4 mg/ml	1	NDS
hydromorphone hcl oral liquid	1	NDS
hydromorphone hcl oral tablet	1	NDS
hydromorphone hcl pf injection solution	1	NDS
LAZANDA NASAL SOLUTION	2	PA; NDS
LORCET HD ORAL TABLET	1	NDS
LORCET ORAL TABLET	1	NDS
LORCET PLUS ORAL TABLET	1	NDS
LORTAB ORAL ELIXIR	2	NDS
meperidine hcl injection solution	1	NDS
meperidine hcl oral solution	1	NDS
meperidine hcl oral tablet	1	NDS
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	NDS
morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml, 2 mg/ml	1	NDS

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Drug Name	Drug Tier	Requirements /Limits
morphine sulfate (pf) injection solution 10 mg/ml, 4 mg/ml, 5 mg/ml, 8 mg/ml	1	B/D; NDS
morphine sulfate (pf) intravenous solution	1	NDS
morphine sulfate intravenous solution 1 mg/ml	1	B/D; NDS
morphine sulfate oral solution	1	NDS
morphine sulfate oral tablet	1	NDS
nalbuphine hcl injection solution	1	NDS
nalocet oral tablet	1	NDS
NORCO ORAL TABLET	2	NDS
NUCYNTA ORAL TABLET	2	NDS
OXAYDO ORAL TABLET ABUSE-DETERRENT	2	NDS
oxycodone hcl oral capsule	1	NDS
oxycodone hcl oral concentrate 100 mg/5ml	1	NDS
oxycodone hcl oral solution	1	NDS
oxycodone hcl oral tablet	1	NDS
oxycodone-acetaminophen oral tablet	1	NDS
oxycodone-aspirin oral tablet	1	NDS
oxycodone-ibuprofen oral tablet	1	NDS
oxymorphone hcl oral tablet	1	NDS
pentazocine-naloxone hcl oral tablet	1	NDS
PERCOCET ORAL TABLET	2	NDS
PRIMLEV ORAL TABLET	2	NDS
ROXICODONE ORAL TABLET	2	NDS
SUBSYS SUBLINGUAL LIQUID	2	PA; NDS
tramadol hcl oral tablet	1	NDS
tramadol-acetaminophen oral tablet	1	NDS
TREZIX ORAL CAPSULE	2	NDS
TYLENOL WITH CODEINE #3 ORAL TABLET	2	NDS
ULTRACET ORAL TABLET	2	NDS
ULTRAM ORAL TABLET	2	NDS
Anesthetics		
Local Anesthetics		
7T LIDO EXTERNAL GEL	1	PA
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE	2	
bupivacaine fisiopharma injection solution	1	
bupivacaine hcl (pf) injection solution	1	
bupivacaine hcl injection solution 0.5 %	1	
bupivacaine in dextrose intrathecal solution	1	

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Drug Name	Drug Tier	Requirements /Limits
bupivacaine spinal intrathecal solution	1	
bupivacaine-epinephrine (pf) injection solution	1	
bupivacaine-epinephrine injection solution	1	
CARBOCAINE INJECTION SOLUTION	2	
CARBOCAINE PRESERVATIVE-FREE INJECTION SOLUTION	2	
chloroprocaine hcl (pf) injection solution	1	
GLYDO EXTERNAL GEL 2 %	1	PA
lidocaine external ointment	1	PA
lidocaine external patch	1	PA
lidocaine hcl (pf) injection solution	1	
lidocaine hcl external solution	1	PA
lidocaine hcl injection solution	1	
lidocaine hcl urethral/mucosal external gel	1	PA
lidocaine in dextrose solution	1	
lidocaine-epinephrine injection solution 0.5 %-1:200000, 1 %-1:100000, 1.5 %-1:200000, 2 %-1:100000, 2 %-1:200000	1	
lidocaine-prilocaine external cream	1	PA

Drug Name	Drug Tier	Requirements /Limits
LIDODERM EXTERNAL PATCH	2	PA
MARCAINE INJECTION SOLUTION 0.5 %, 0.75 %	2	
MARCAINE PRESERVATIVE FREE INJECTION SOLUTION	2	
MARCAINE SPINAL INTRATHECAL SOLUTION	2	
MARCAINE/EPINEPHRINE INJECTION SOLUTION	2	
MARCAINE/EPINEPHRINE PF INJECTION SOLUTION	2	
NAROPIN INJECTION SOLUTION	2	
NESACAINE INJECTION SOLUTION	2	
NESACAINE-MPF INJECTION SOLUTION	2	
PLIAGLIS EXTERNAL CREAM	2	PA
POLOCAINE INJECTION SOLUTION	1	
POLOCAINE-MPF INJECTION SOLUTION	1	
ropivacaine hcl injection solution 10 mg/ml, 2 mg/ml, 5 mg/ml, 7.5 mg/ml	1	
SENSORCAINE INJECTION SOLUTION 0.5 %	1	

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Drug Name	Drug Tier	Requirements /Limits
SENSORCAINE/EPINEPHRINE INJECTION SOLUTION	1	
SENSORCAINE-MPF INJECTION SOLUTION	1	
SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.5% - 1:200000	1	
SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.75-1:200000 %	2	
SYNERA EXTERNAL PATCH	2	
XYLOCAINE DENTAL INJECTION SOLUTION	1	
XYLOCAINE INJECTION SOLUTION	2	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION	2	
XYLOCAINE-MPF INJECTION SOLUTION	2	
XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	2	
ZTLIDO EXTERNAL PATCH	2	PA

Drug Name	Drug Tier	Requirements /Limits
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium oral tablet delayed release	1	
ANTABUSE ORAL TABLET	2	
disulfiram oral tablet	1	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
Opioid Dependence Treatments		
BUNAVAIL BUCCAL FILM	2	
buprenorphine hcl sublingual tablet sublingual	1	
buprenorphine hcl-naloxone hcl sublingual film	1	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	
LUCEMYRA ORAL TABLET	2	
naltrexone hcl oral tablet	1	
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
SUBOXONE SUBLINGUAL FILM	2	
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL	2	

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Drug Name	Drug Tier	Requirements /Limits
Opioid Reversal Agents		
EVZIO INJECTION SOLUTION AUTO-INJECTOR	2	
naloxone hcl injection solution	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
NARCAN NASAL LIQUID	2	
Smoking Cessation Agents		
bupropion hcl er (smoking det) oral tablet extended release 12 hour	1	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	2	
CHANTIX ORAL TABLET	2	
CHANTIX STARTING MONTH PAK ORAL TABLET	2	
NICOTROL INHALATION INHALER	2	
NICOTROL NS NASAL SOLUTION	2	
Antibacterials		
Aminoglycosides		
amikacin sulfate injection solution	1	
ARIKAYCE INHALATION SUSPENSION	2	
GENTAK OPHTHALMIC OINTMENT	1	
gentamicin in saline intravenous solution	1	
gentamicin sulfate external cream	1	
gentamicin sulfate external ointment	1	
gentamicin sulfate injection solution	1	
gentamicin sulfate ophthalmic solution	1	
neomycin sulfate oral tablet	1	
neomycin-polymyxin b gu irrigation solution	1	
paromomycin sulfate oral capsule	1	
streptomycin sulfate intramuscular solution reconstituted	1	
tobramycin ophthalmic solution	1	
tobramycin sulfate injection solution	1	
tobramycin sulfate injection solution reconstituted	1	
TOBREX OPHTHALMIC OINTMENT	2	
TOBREX OPHTHALMIC SOLUTION	2	
ZEMDRI INTRAVENOUS SOLUTION	2	
Antibacterials, Other		
bacitracin intramuscular solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
bacitracin ophthalmic ointment	1	
CENTANY EXTERNAL OINTMENT	2	
chloramphenicol sod succinate intravenous solution reconstituted	1	
CLEOCIN ORAL CAPSULE	2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	2	
CLEOCIN PHOSPHATE INJECTION SOLUTION	2	
CLEOCIN PHOSPHATE INTRAVENOUS SOLUTION	2	
CLEOCIN VAGINAL CREAM	2	
CLEOCIN VAGINAL SUPPOSITORY	2	
CLEOCIN-T EXTERNAL GEL	2	
CLEOCIN-T EXTERNAL LOTION	2	
CLINDACIN ETZ EXTERNAL SWAB	1	
CLINDACIN-P EXTERNAL SWAB	1	
CLINDAGEL EXTERNAL GEL	2	
clindamycin hcl oral capsule	1	
clindamycin palmitate hcl oral solution reconstituted	1	
clindamycin phosphate external foam	1	

Drug Name	Drug Tier	Requirements /Limits
clindamycin phosphate external gel	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin phosphate in d5w intravenous solution	1	
clindamycin phosphate in nacl intravenous solution	1	
clindamycin phosphate injection solution	1	
clindamycin phosphate vaginal cream	1	
CLINDESSE VAGINAL CREAM	2	
colistimethate sodium (cba) injection solution reconstituted	1	
COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED	2	
CORTISPORIN EXTERNAL CREAM	2	
CORTISPORIN EXTERNAL OINTMENT	2	
CUBICIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	2	
daptomycin intravenous solution reconstituted	2	
EVOCLIN EXTERNAL FOAM	2	
FIRVANQ ORAL SOLUTION RECONSTITUTED	2	
FLAGYL ORAL CAPSULE	2	
FLAGYL ORAL TABLET	2	
FURADANTIN ORAL SUSPENSION	2	
HIPREX ORAL TABLET	2	
IMPAVIDO ORAL CAPSULE	2	
LINCOCIN INJECTION SOLUTION	2	
lincomycin hcl injection solution	1	
linezolid in sodium chloride intravenous solution	2	
linezolid intravenous solution	2	
linezolid oral suspension reconstituted	2	
linezolid oral tablet	1	
MACROBID ORAL CAPSULE	2	
MACRODANTIN ORAL CAPSULE	2	
mafenide acetate external packet	1	
methenamine hippurate oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
methenamine mandelate oral tablet	1	
metronidazole in nacl intravenous solution	1	
metronidazole intravenous solution	1	
metronidazole oral capsule	1	
metronidazole oral tablet	1	
metronidazole vaginal gel	1	
MONUROL ORAL PACKET	2	
mupirocin calcium external cream	1	
mupirocin external ointment	1	
NEO-SYNALAR EXTERNAL CREAM	2	
nitrofurantoin macrocrystal oral capsule	1	
nitrofurantoin monohyd macro oral capsule	1	
nitrofurantoin oral suspension	1	
NUVESSA VAGINAL GEL	2	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	2	
polymyxin b sulfate injection solution reconstituted	1	
SILVADENE EXTERNAL CREAM	2	
silver sulfadiazine external cream	1	

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Drug Name	Drug Tier	Requirements /Limits
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	2	
SIVEXTRO ORAL TABLET	2	
SSD EXTERNAL CREAM	1	
SULFAMYLON EXTERNAL CREAM	2	
SULFAMYLON EXTERNAL PACKET	2	
SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED	2	
tigecycline intravenous solution reconstituted	2	
trimethoprim oral tablet	1	
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	2	
VANCOCIN HCL ORAL CAPSULE	2	
vancomycin hcl in dextrose intravenous solution 1-5 gm/200ml-%, 500-5 mg/100ml-%, 750-5 mg/150ml-%	1	
vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-%, 750-0.9 mg/150ml-%	1	
vancomycin hcl intravenous solution reconstituted	1	
vancomycin hcl oral capsule 125 mg	1	
vancomycin hcl oral capsule 250 mg	2	

Drug Name	Drug Tier	Requirements /Limits
vancomycin hcl oral solution reconstituted	1	
VANDAZOLE VAGINAL GEL	1	
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED	2	
XIFAXAN ORAL TABLET	2	
ZYVOX INTRAVENOUS SOLUTION	2	
ZYVOX ORAL SUSPENSION RECONSTITUTED	2	
ZYVOX ORAL TABLET	2	
Beta-lactam, Cephalosporins		
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	2	
cefaclor er oral tablet extended release 12 hour	2	
cefaclor oral capsule	2	
cefaclor oral suspension reconstituted	2	
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
cefadroxil oral tablet	1	
cefazolin sodium injection solution reconstituted	1	
cefazolin sodium intravenous solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
cefazolin sodium-dextrose intravenous solution	1	
cefazolin sodium-dextrose intravenous solution reconstituted	1	
cefdinir oral capsule	1	
cefdinir oral suspension reconstituted	1	
cefepime hcl injection solution reconstituted	1	
cefepime hcl intravenous solution	1	
cefepime-dextrose intravenous solution reconstituted	1	
cefixime oral capsule	1	
cefixime oral suspension reconstituted	1	
CEFOTAN INJECTION SOLUTION RECONSTITUTED	2	
cefotaxime sodium injection solution reconstituted 1 gm, 500 mg	1	
cefotetan disodium injection solution reconstituted	1	
cefotetan disodium-dextrose intravenous solution reconstituted	1	
cefoxitin sodium injection solution reconstituted	1	
cefoxitin sodium intravenous solution reconstituted	1	
cefoxitin sodium-dextrose intravenous solution reconstituted	1	
cefpodoxime proxetil oral suspension reconstituted	1	
cefpodoxime proxetil oral tablet	1	
cefprozil oral suspension reconstituted	1	
cefprozil oral tablet	1	
ceftazidime and dextrose intravenous solution reconstituted	1	
ceftazidime injection solution reconstituted	1	
ceftriaxone sodium in dextrose intravenous solution	1	
ceftriaxone sodium injection solution reconstituted	1	
ceftriaxone sodium intravenous solution reconstituted	1	
ceftriaxone sodium-dextrose intravenous solution reconstituted	1	
cefuroxime axetil oral tablet	1	
cefuroxime sodium injection solution reconstituted	1	
cefuroxime sodium intravenous solution reconstituted	1	
cephalexin oral capsule	1	
cephalexin oral suspension reconstituted	1	
cephalexin oral tablet	1	
MAXIPIME INJECTION SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
MAXIPIME INTRAVENOUS SOLUTION RECONSTITUTED	2	
SUPRAX ORAL CAPSULE	2	
SUPRAX ORAL SUSPENSION RECONSTITUTED	2	
SUPRAX ORAL TABLET CHEWABLE	2	
TAZICEF INJECTION SOLUTION RECONSTITUTED	1	
TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED	1	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	2	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	2	
Beta-lactam, Other		
AZACTAM INJECTION SOLUTION RECONSTITUTED	2	
aztreonam injection solution reconstituted	1	
ertapenem sodium injection solution reconstituted	1	
imipenem-cilastatin intravenous solution reconstituted	1	
INVANZ INJECTION SOLUTION RECONSTITUTED	2	
meropenem intravenous solution reconstituted	1	
meropenem-sodium chloride intravenous solution reconstituted 1 gm/50ml, 500-0.9 mg-%	1	
MERREM INTRAVENOUS SOLUTION RECONSTITUTED	2	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED	2	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	2	
Beta-lactam, Penicillins		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet chewable	1	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	1	
amoxicillin-pot clavulanate oral suspension reconstituted	1	
amoxicillin-pot clavulanate oral tablet	1	
amoxicillin-pot clavulanate oral tablet chewable	1	
ampicillin oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
ampicillin sodium injection solution reconstituted	1	
ampicillin sodium intravenous solution reconstituted	1	
ampicillin-sulbactam sodium injection solution reconstituted	1	
ampicillin-sulbactam sodium intravenous solution reconstituted	1	
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	2	
AUGMENTIN ORAL TABLET	2	
BACTOCILL IN DEXTROSE INTRAVENOUS SOLUTION 1 GM/50ML, 2 GM/50ML	2	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	2	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	2	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	2	
dicloxacillin sodium oral capsule	1	
nafcillin sodium in dextrose intravenous solution	1	
nafcillin sodium injection solution reconstituted 1 gm, 2 gm	1	

Drug Name	Drug Tier	Requirements /Limits
nafcillin sodium intravenous solution reconstituted 1 gm, 10 gm	1	
nafcillin sodium intravenous solution reconstituted 2 gm	2	
oxacillin sodium injection solution reconstituted 1 gm, 2 gm	1	
oxacillin sodium injection solution reconstituted 10 gm	2	
penicillin g pot in dextrose intravenous solution	2	
penicillin g potassium injection solution reconstituted	1	
penicillin g procaine intramuscular suspension	1	
penicillin g sodium injection solution reconstituted	2	
penicillin v potassium oral solution reconstituted	1	
penicillin v potassium oral tablet	1	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED	1	
piperacillin sod-tazobactam so intravenous solution reconstituted	1	
UNASYN INJECTION SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
ZOSYN INTRAVENOUS SOLUTION	2	
ZOSYN INTRAVENOUS SOLUTION RECONSTITUTED	2	
Macrolides		
AZASITE OPHTHALMIC SOLUTION	2	
azithromycin intravenous solution reconstituted	1	
azithromycin oral packet	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	1	
clarithromycin er oral tablet extended release 24 hour	1	
clarithromycin oral suspension reconstituted	1	
clarithromycin oral tablet	1	
DIFICID ORAL TABLET	2	
E.E.S. 400 ORAL TABLET	1	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	2	
ery external pad	1	
ERYGEL EXTERNAL GEL	2	

Drug Name	Drug Tier	Requirements /Limits
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	2	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	2	
ERY-TAB ORAL TABLET DELAYED RELEASE	2	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	1	
ERYTHROCIN STEARATE ORAL TABLET	2	
erythromycin base oral capsule delayed release particles	1	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
erythromycin ethylsuccinate oral tablet	1	
erythromycin external gel	1	
erythromycin external pad	1	
erythromycin external solution	1	
erythromycin ophthalmic ointment	1	
ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
ZITHROMAX ORAL PACKET	2	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	2	
ZITHROMAX ORAL TABLET	2	
ZITHROMAX TRI-PAK ORAL TABLET	2	
ZITHROMAX Z-PAK ORAL TABLET	2	
Quinolones		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	2	
BAXDELA ORAL TABLET	2	
BESIVANCE OPHTHALMIC SUSPENSION	2	
CETRAXAL OTIC SOLUTION	2	
CILOXAN OPHTHALMIC OINTMENT	2	
CILOXAN OPHTHALMIC SOLUTION	2	
CIPRO ORAL SUSPENSION RECONSTITUTED	2	
CIPRO ORAL TABLET	2	
ciprofloxacin hcl ophthalmic solution	1	
ciprofloxacin hcl oral tablet	1	
ciprofloxacin hcl otic solution	1	
ciprofloxacin in d5w intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
ciprofloxacin oral suspension reconstituted	1	
FLOXIN OTIC OTIC SOLUTION	2	
gatifloxacin ophthalmic solution	1	
levofloxacin in d5w intravenous solution	1	
levofloxacin intravenous solution	1	
levofloxacin ophthalmic solution	1	
levofloxacin oral solution	1	
levofloxacin oral tablet	1	
MOXEZA OPHTHALMIC SOLUTION	2	
moxifloxacin hcl in nacl intravenous solution	1	
moxifloxacin hcl intravenous solution	1	
moxifloxacin hcl ophthalmic solution	1	
moxifloxacin hcl oral tablet	1	
OCUFLOX OPHTHALMIC SOLUTION	2	
ofloxacin ophthalmic solution	1	
ofloxacin oral tablet	1	
ofloxacin otic solution	1	
OTOVEL OTIC SOLUTION	2	
VIGAMOX OPHTHALMIC SOLUTION	2	
XEPI EXTERNAL CREAM	2	

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Drug Name	Drug Tier	Requirements /Limits
ZYMAXID OPHTHALMIC SOLUTION	2	
Sulfonamides		
AVC VAGINAL VAGINAL CREAM	2	
BACTRIM DS ORAL TABLET	2	
BACTRIM ORAL TABLET	2	
BLEPH-10 OPHTHALMIC SOLUTION	2	
KLARON EXTERNAL LOTION	2	
sulfacetamide sodium (acne) external lotion	2	
sulfacetamide sodium ophthalmic ointment	1	
sulfacetamide sodium ophthalmic solution	1	
sulfadiazine oral tablet	1	
sulfamethoxazole-trimethoprim intravenous solution	1	
sulfamethoxazole-trimethoprim oral suspension	1	
sulfamethoxazole-trimethoprim oral tablet	1	
Tetracyclines		
demeclocycline hcl oral tablet	1	
DORYX MPC ORAL TABLET DELAYED RELEASE	2	
DORYX ORAL TABLET DELAYED RELEASE	2	

Drug Name	Drug Tier	Requirements /Limits
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	1	
doxycycline hyclate intravenous solution reconstituted	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
doxycycline hyclate oral tablet delayed release	1	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
MINOCIN ORAL CAPSULE 50 MG	2	
minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 65 mg, 80 mg, 90 mg	1	
minocycline hcl er oral tablet extended release 24 hour 55 mg	2	
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	1	
MONDOXYNE NL ORAL CAPSULE	1	

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Drug Name	Drug Tier	Requirements /Limits
MORGIDOX COMBINATION KIT 1 X 50 MG	2	
MORGIDOX ORAL CAPSULE	1	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	2	
NUZYRA ORAL TABLET 150 MG	2	
OKEBO ORAL CAPSULE	1	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
TARGADOX ORAL TABLET	2	
tetracycline hcl oral capsule	1	
VIBRAMYCIN ORAL CAPSULE	2	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	2	
VIBRAMYCIN ORAL SYRUP	2	
XERAVA INTRAVENOUS SOLUTION RECONSTITUTED	2	
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
Anticonvulsants		
Anticonvulsants, Other		
APTIOM ORAL TABLET	2	
BRIVIACT INTRAVENOUS SOLUTION	2	
BRIVIACT ORAL SOLUTION	2	
BRIVIACT ORAL TABLET	2	
EPIDIOLEX ORAL SOLUTION	2	PA
FYCOMPA ORAL SUSPENSION	2	
FYCOMPA ORAL TABLET	2	
KEPPRA INTRAVENOUS SOLUTION	2	
KEPPRA ORAL SOLUTION	2	
KEPPRA ORAL TABLET	2	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
levetiracetam er oral tablet extended release 24 hour	1	
levetiracetam in nacl intravenous solution	1	
levetiracetam intravenous solution	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
phenobarbital oral elixir	1	
phenobarbital oral solution	1	
ROWEEPRA ORAL TABLET	1	
ROWEEPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	1	

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Drug Name	Drug Tier	Requirements /Limits
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	2	
Calcium Channel Modifying Agents		
CELONTIN ORAL CAPSULE	2	
ethosuximide oral capsule	1	
ethosuximide oral solution	1	
LYRICA ORAL CAPSULE	2	
LYRICA ORAL SOLUTION	2	
pregabalin oral capsule	1	
pregabalin oral solution	1	
ZARONTIN ORAL CAPSULE	2	
ZARONTIN ORAL SOLUTION	2	
ZONEGRAN ORAL CAPSULE	2	
zonisamide oral capsule	1	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
clobazam oral suspension	1	
clobazam oral tablet	1	
clonazepam oral tablet	1	
clonazepam oral tablet dispersible	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
DEPAKOTE ORAL TABLET DELAYED RELEASE	2	

Drug Name	Drug Tier	Requirements /Limits
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	2	
DIASTAT ACUDIAL RECTAL GEL	2	
DIASTAT PEDIATRIC RECTAL GEL	2	
diazepam rectal gel	1	
divalproex sodium er oral tablet extended release 24 hour	1	
divalproex sodium oral capsule delayed release sprinkle	1	
divalproex sodium oral tablet delayed release	1	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet	1	
GABITRIL ORAL TABLET	2	
KLONOPIN ORAL TABLET	2	
MYSOLINE ORAL TABLET	2	
NEURONTIN ORAL CAPSULE	2	
NEURONTIN ORAL SOLUTION	2	
NEURONTIN ORAL TABLET	2	
ONFI ORAL SUSPENSION	2	
ONFI ORAL TABLET	2	
phenobarbital oral tablet	1	
primidone oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
SABRIL ORAL PACKET	2	
SABRIL ORAL TABLET	2	
SYMPAZAN ORAL FILM	2	
tiagabine hcl oral tablet	1	
valproate sodium intravenous solution	1	
valproic acid oral capsule	1	
valproic acid oral solution	1	
vigabatrin oral packet	2	
vigabatrin oral tablet	1	
VIGADRONE ORAL PACKET	2	
Glutamate Reducing Agents		
felbamate oral suspension	2	
felbamate oral tablet	1	
LAMICTAL ODT ORAL KIT	2	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	2	
LAMICTAL ORAL TABLET	2	
LAMICTAL ORAL TABLET CHEWABLE	2	
LAMICTAL STARTER ORAL KIT	2	
LAMICTAL XR ORAL KIT	2	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
lamotrigine er oral tablet extended release 24 hour	1	

Drug Name	Drug Tier	Requirements /Limits
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
lamotrigine starter kit-blue oral kit	1	
lamotrigine starter kit-green oral kit	1	
lamotrigine starter kit-orange oral kit	1	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	2	
SUBVENITE ORAL TABLET	1	
SUBVENITE STARTER KIT-BLUE ORAL KIT	1	
SUBVENITE STARTER KIT-GREEN ORAL KIT	1	
SUBVENITE STARTER KIT-ORANGE ORAL KIT	1	
TOPAMAX ORAL TABLET	2	
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE	2	
topiramate er oral capsule er 24 hour sprinkle	1	
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	

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Drug Name	Drug Tier	Requirements /Limits
Sodium Channel Agents		
BANZEL ORAL SUSPENSION	2	
BANZEL ORAL TABLET	2	
carbamazepine er oral capsule extended release 12 hour	1	
carbamazepine er oral tablet extended release 12 hour	1	
carbamazepine oral suspension	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
CEREBYX INJECTION SOLUTION	2	
DILANTIN INFATABS ORAL TABLET CHEWABLE	2	
DILANTIN ORAL CAPSULE	2	
DILANTIN ORAL SUSPENSION	2	
EPITOL ORAL TABLET	1	
fosphenytoin sodium injection solution	1	
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

Drug Name	Drug Tier	Requirements /Limits
PEGANONE ORAL TABLET	2	
PHENYTEK ORAL CAPSULE	2	
PHENYTOIN INFATABS ORAL TABLET CHEWABLE	1	
phenytoin oral suspension	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended oral capsule	1	
phenytoin sodium injection solution	1	
TEGRETOL ORAL SUSPENSION	2	
TEGRETOL ORAL TABLET	2	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
TRILEPTAL ORAL SUSPENSION	2	
TRILEPTAL ORAL TABLET	2	
VIMPAT INTRAVENOUS SOLUTION	2	
VIMPAT ORAL SOLUTION	2	
VIMPAT ORAL TABLET	2	
Antidementia Agents		
Antidementia Agents, Other		
ergoloid mesylates oral tablet	2	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	2	

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Drug Name	Drug Tier	Requirements /Limits
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
Cholinesterase Inhibitors		
ARICEPT ORAL TABLET	2	
donepezil hcl oral tablet	1	
donepezil hcl oral tablet dispersible	1	
EXELON TRANSDERMAL PATCH 24 HOUR	2	
galantamine hydrobromide er oral capsule extended release 24 hour	1	
galantamine hydrobromide oral solution	1	
galantamine hydrobromide oral tablet	1	
RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
rivastigmine tartrate oral capsule	1	
rivastigmine transdermal patch 24 hour	1	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
memantine hcl er oral capsule extended release 24 hour	1	
memantine hcl oral solution	1	
memantine hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
NAMENDA ORAL TABLET	2	
NAMENDA TITRATION PAK ORAL TABLET	2	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
Antidepressants		
Antidepressants, Other		
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
bupropion hcl er (sr) oral tablet extended release 12 hour	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg	2	
bupropion hcl oral tablet	1	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
mirtazapine oral tablet	1	
mirtazapine oral tablet dispersible	1	
REMERON ORAL TABLET	2	
REMERON SOLTAB ORAL TABLET DISPERSIBLE	2	

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Drug Name	Drug Tier	Requirements /Limits
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	2	
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	2	
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR	2	
MARPLAN ORAL TABLET	2	
NARDIL ORAL TABLET	2	
PARNATE ORAL TABLET	2	
phenelzine sulfate oral tablet	1	
tranylcypromine sulfate oral tablet	1	
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
BRISDELLE ORAL CAPSULE	2	
CELEXA ORAL TABLET	2	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
desvenlafaxine er oral tablet extended release 24 hour	2	
desvenlafaxine succinate er oral tablet extended release 24 hour	1	
duloxetine hcl oral capsule delayed release particles	1	
EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	2	
fluoxetine hcl (pmdd) oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate er oral capsule extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
fluvoxamine maleate oral tablet	1	
LEXAPRO ORAL TABLET	2	
maprotiline hcl oral tablet	1	
nefazodone hcl oral tablet	2	
olanzapine-fluoxetine hcl oral capsule	1	
paroxetine hcl er oral tablet extended release 24 hour	1	
paroxetine hcl oral tablet	1	
paroxetine mesylate oral capsule	1	
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
PAXIL ORAL SUSPENSION	2	
PAXIL ORAL TABLET	2	
PEXEVA ORAL TABLET	2	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
PROZAC ORAL CAPSULE	2	
SARAFEM ORAL TABLET	2	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SYMBYAX ORAL CAPSULE	2	
trazodone hcl oral tablet	1	
TRINTELLIX ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	1	
venlafaxine hcl oral tablet	1	
VIIBRYD ORAL TABLET	2	
VIIBRYD STARTER PACK ORAL KIT	2	
ZOLOFT ORAL TABLET	2	
Tricyclics		
amitriptyline hcl oral tablet	1	
amoxapine oral tablet	1	
ANAFRANIL ORAL CAPSULE	2	
chlordiazepoxide-amitriptyline oral tablet	1	
clomipramine hcl oral capsule	1	
desipramine hcl oral tablet	1	
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
imipramine hcl oral tablet	1	
imipramine pamoate oral capsule	1	
NORPRAMIN ORAL TABLET	2	
nortriptyline hcl oral capsule	1	
nortriptyline hcl oral solution	1	

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Drug Name	Drug Tier	Requirements /Limits
PAMELOR ORAL CAPSULE	2	
perphenazine-amitriptyline oral tablet	1	
protriptyline hcl oral tablet	1	
TOFRANIL ORAL TABLET	2	
trimipramine maleate oral capsule	1	
Antiemetics		
Antiemetics, Other		
AKYNZEO ORAL CAPSULE	2	B/D
BONJESTA ORAL TABLET EXTENDED RELEASE	2	
COMPRO RECTAL SUPPOSITORY	1	
DICLEGIS ORAL TABLET DELAYED RELEASE	2	
dimenhydrinate injection solution	1	
doxylamine-pyridoxine oral tablet delayed release	1	
droperidol injection solution	1	
meclizine hcl oral tablet	1	
PHENADOZ RECTAL SUPPOSITORY	1	
PHENERGAN INJECTION SOLUTION	2	
prochlorperazine edisylate injection solution	1	
prochlorperazine maleate oral tablet	1	
prochlorperazine rectal suppository	1	
promethazine hcl injection solution	1	
promethazine hcl oral syrup	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal suppository	1	
PROMETHEGAN RECTAL SUPPOSITORY	1	
scopolamine transdermal patch 72 hour	1	
TIGAN INTRAMUSCULAR SOLUTION	2	
TIGAN ORAL CAPSULE	2	B/D
TRANSDERM SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	2	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	2	
trimethobenzamide hcl oral capsule	1	B/D
Emetogenic Therapy Adjuncts		
ALOXI INTRAVENOUS SOLUTION	2	
ANZEMET ORAL TABLET	2	B/D
aprepitant oral capsule	1	B/D
CINVANTI INTRAVENOUS EMULSION	2	
dronabinol oral capsule	1	PA

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Drug Name	Drug Tier	Requirements /Limits
EMEND INTRAVENOUS SOLUTION RECONSTITUTED	2	
EMEND ORAL CAPSULE	2	B/D
EMEND ORAL SUSPENSION RECONSTITUTED	2	B/D
EMEND TRI-PACK ORAL CAPSULE	2	B/D
fosaprepitant dimeglumine intravenous solution reconstituted	1	
granisetron hcl intravenous solution	1	
granisetron hcl oral tablet	1	B/D
MARINOL ORAL CAPSULE	2	PA
ondansetron hcl injection solution	1	
ondansetron hcl oral solution	1	B/D
ondansetron hcl oral tablet	1	B/D
ondansetron oral tablet dispersible	1	B/D
palonosetron hcl intravenous solution	1	
palonosetron hcl intravenous solution prefilled syringe	1	
SANCUSO TRANSDERMAL PATCH	2	
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	2	
SYNDROS ORAL SOLUTION	2	PA
ZOFRAN ORAL TABLET	2	B/D
ZUPLENZ ORAL FILM	2	B/D
Antifungals		
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	2	B/D
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	2	B/D
amphotericin b intravenous solution reconstituted	1	B/D
ANCOBON ORAL CAPSULE	2	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	2	
caspofungin acetate intravenous solution reconstituted	2	
CICLODAN EXTERNAL SOLUTION	1	
ciclopirox external gel	1	
ciclopirox external shampoo	1	
ciclopirox external solution	1	
ciclopirox olamine external cream	1	
ciclopirox olamine external suspension	1	
clotrimazole external cream	1	
clotrimazole external solution	1	
clotrimazole mouth/throat lozenge	1	

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Drug Name	Drug Tier	Requirements /Limits
clotrimazole mouth/throat troche	1	
clotrimazole-betamethasone external cream	1	
clotrimazole-betamethasone external lotion	1	
CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED	2	
CRESEMBA ORAL CAPSULE	2	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	2	
DIFLUCAN ORAL TABLET	2	
econazole nitrate external cream	1	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	2	
ERTACZO EXTERNAL CREAM	2	
EXELDERM EXTERNAL CREAM	2	
EXELDERM EXTERNAL SOLUTION	2	
EXTINA EXTERNAL FOAM	2	
fluconazole in sodium chloride intravenous solution	1	
fluconazole oral suspension reconstituted	1	
fluconazole oral tablet	1	
flucytosine oral capsule	2	
griseofulvin microsize oral suspension	1	
griseofulvin microsize oral tablet	1	
griseofulvin ultramicrosize oral tablet	1	
GYNAZOLE-1 VAGINAL CREAM	2	
itraconazole oral capsule	1	
itraconazole oral solution	1	
JUBLIA EXTERNAL SOLUTION	2	
KERYDIN EXTERNAL SOLUTION	2	
ketoconazole external cream	1	
ketoconazole external foam	1	
ketoconazole external shampoo	1	
ketoconazole oral tablet	1	
LOPROX EXTERNAL CREAM	2	
LOPROX EXTERNAL SHAMPOO	2	
LOPROX EXTERNAL SUSPENSION	2	
LOTRISONE EXTERNAL CREAM	2	
luliconazole external cream	2	
LUZU EXTERNAL CREAM	2	
MENTAX EXTERNAL CREAM	2	
miconazole 3 vaginal suppository	1	

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Drug Name	Drug Tier	Requirements /Limits
miconazole-zinc oxide-petrolat external ointment	1	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	2	
naftifine hcl external cream	1	
naftifine hcl external gel	1	
NAFTIN EXTERNAL CREAM	2	
NAFTIN EXTERNAL GEL	2	
NATACYN OPHTHALMIC SUSPENSION	2	
NIZORAL EXTERNAL SHAMPOO	2	
NOXAFIL INTRAVENOUS SOLUTION	2	
NOXAFIL ORAL SUSPENSION	2	
NOXAFIL ORAL TABLET DELAYED RELEASE	2	
NYAMYC EXTERNAL POWDER	1	
nystatin external cream	1	
nystatin external ointment	1	
nystatin external powder	1	
nystatin mouth/throat suspension	1	
nystatin oral tablet	1	
nystatin-triamcinolone external cream	1	
nystatin-triamcinolone external ointment	1	

Drug Name	Drug Tier	Requirements /Limits
NYSTOP EXTERNAL POWDER	1	
ORAVIG BUCCAL TABLET	2	
oxiconazole nitrate external cream	1	
OXISTAT EXTERNAL CREAM	2	
OXISTAT EXTERNAL LOTION	2	
PENLAC EXTERNAL SOLUTION	2	
posaconazole oral tablet delayed release	1	
SPORANOX ORAL CAPSULE	2	
SPORANOX ORAL SOLUTION	2	
SPORANOX PULSEPAK ORAL CAPSULE	2	
terbinafine hcl oral tablet	1	
terconazole vaginal cream	1	
terconazole vaginal suppository	1	
tolsura oral capsule	2	
VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	2	
VFEND ORAL SUSPENSION RECONSTITUTED	2	
VFEND ORAL TABLET	2	
voriconazole intravenous solution reconstituted	1	
voriconazole oral suspension reconstituted	2	

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Drug Name	Drug Tier	Requirements /Limits
voriconazole oral tablet	1	
VUSION EXTERNAL OINTMENT	2	
Antigout Agents		
Antigout Agents		
allopurinol oral tablet	1	
allopurinol sodium intravenous solution reconstituted	1	
ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED	2	
colchicine oral capsule	2	
colchicine oral tablet	2	
colchicine-probenecid oral tablet	1	
COLCRYS ORAL TABLET	2	
febuxostat oral tablet	1	
KRYSTEXXA INTRAVENOUS SOLUTION	2	
MITIGARE ORAL CAPSULE	2	
probenecid oral tablet	1	
ULORIC ORAL TABLET	2	
ZYLOPRIM ORAL TABLET	2	
Anti-inflammatory Agents		
Glucocorticoids		
ANUSOL-HC RECTAL CREAM	2	
BRYHALI EXTERNAL LOTION	2	
EPIFOAM EXTERNAL FOAM	2	
hydrocortisone rectal cream	1	
KENALOG EXTERNAL AEROSOL SOLUTION	2	
LEXETTE EXTERNAL FOAM	2	
PROCTOCORT RECTAL CREAM	2	
PROCTO-MED HC RECTAL CREAM	1	
PROCTO-PAK RECTAL CREAM	1	
PROCTOSOL HC RECTAL CREAM	1	
PROCTOZONE-HC RECTAL CREAM	1	
triamcinolone acetonide external aerosol solution	1	
ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER	2	
Antimigraine Agents		
Ergot Alkaloids		
CAFERGOT ORAL TABLET	2	
D.H.E. 45 INJECTION SOLUTION	2	
dihydroergotamine mesylate injection solution	2	
dihydroergotamine mesylate nasal solution	2	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	2	
ergotamine-caffeine oral tablet	1	
MIGERGOT RECTAL SUPPOSITORY	2	

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Drug Name	Drug Tier	Requirements /Limits
MIGRANAL NASAL SOLUTION	2	
Prophylactic		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
Serotonin (5-HT) 1b/1d Receptor Agonists		
almotriptan malate oral tablet	1	
AMERGE ORAL TABLET	2	
eletriptan hydrobromide oral tablet	1	
FROVA ORAL TABLET	2	
frovatriptan succinate oral tablet	1	
IMITREX NASAL SOLUTION	2	
IMITREX ORAL TABLET	2	
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	2	
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
IMITREX SUBCUTANEOUS SOLUTION	2	
MAXALT ORAL TABLET	2	
MAXALT-MLT ORAL TABLET DISPERSIBLE	2	
naratriptan hcl oral tablet	1	
ONZETRA XSAIL NASAL EXHALER POWDER	2	
RELPAX ORAL TABLET	2	
rizatriptan benzoate oral tablet	1	
rizatriptan benzoate oral tablet dispersible	1	
sumatriptan nasal solution	1	
sumatriptan succinate oral tablet	1	
sumatriptan succinate refill subcutaneous solution cartridge	1	
sumatriptan succinate subcutaneous solution	1	
sumatriptan succinate subcutaneous solution auto-injector	1	

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Drug Name	Drug Tier	Requirements /Limits
sumatriptan succinate subcutaneous solution prefilled syringe	1	
sumatriptan-naproxen sodium oral tablet	2	
TREXIMET ORAL TABLET	2	
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
zolmitriptan oral tablet	1	
zolmitriptan oral tablet dispersible	1	
ZOMIG NASAL SOLUTION	2	
ZOMIG ORAL TABLET	2	
ZOMIG ZMT ORAL TABLET DISPERSIBLE	2	
Antimyasthenic Agents		
Parasympathomimetics		
guanidine hcl oral tablet	2	
MESTINON ORAL SYRUP 60 MG/5ML	2	
MESTINON ORAL TABLET	2	
MESTINON ORAL TABLET EXTENDED RELEASE	2	
pyridostigmine bromide er oral tablet extended release	1	
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
REGONOL INTRAVENOUS SOLUTION	2	
Antimycobacterials		
Antimycobacterials, Other		
dapsone oral tablet	1	
MYCOBUTIN ORAL CAPSULE	2	
rifabutin oral capsule	1	
Antituberculars		
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED	2	
cycloserine oral capsule	1	
ethambutol hcl oral tablet	1	
isoniazid injection solution	1	
isoniazid oral syrup	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET	2	
PASER ORAL PACKET	2	
PRIFTIN ORAL TABLET	2	
pyrazinamide oral tablet	1	
RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
RIFADIN ORAL CAPSULE	2	
RIFAMATE ORAL CAPSULE	2	
rifampin intravenous solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
rifampin oral capsule	1	
RIFATER ORAL TABLET	2	
SIRTURO ORAL TABLET	2	
TRECATOR ORAL TABLET	2	
Antineoplastics		
Alkylating Agents		
ALKERAN INTRAVENOUS SOLUTION RECONSTITUTED	2	
BENDEKA INTRAVENOUS SOLUTION	2	
BICNU INTRAVENOUS SOLUTION RECONSTITUTED	2	
busulfan intravenous solution	2	
BUSULFEX INTRAVENOUS SOLUTION	2	
carboplatin intravenous solution	1	
carmustine intravenous solution reconstituted	1	
cisplatin intravenous solution	1	
cyclophosphamide injection solution reconstituted	2	
cyclophosphamide oral capsule	1	B/D
dacarbazine intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	2	
GLEOSTINE ORAL CAPSULE	2	
IFEX INTRAVENOUS SOLUTION RECONSTITUTED	2	
ifosfamide intravenous solution	1	
ifosfamide intravenous solution reconstituted	1	
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	2	
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	2	
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	2	
LEUKERAN ORAL TABLET	2	
MATULANE ORAL CAPSULE	2	
melphalan hcl intravenous solution reconstituted	2	
oxaliplatin intravenous solution	1	
oxaliplatin intravenous solution reconstituted 100 mg	1	
oxaliplatin intravenous solution reconstituted 50 mg	2	

Drug Name	Drug Tier	Requirements /Limits
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	2	
thiotepa injection solution reconstituted	2	
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	2	
VALCHLOR EXTERNAL GEL	2	
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	2	
ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED	2	
Antiandrogens		
abiraterone acetate oral tablet	1	
bicalutamide oral tablet	1	
CASODEX ORAL TABLET	2	
ERLEADA ORAL TABLET	2	
flutamide oral capsule	1	
NILANDRON ORAL TABLET	2	
nilutamide oral tablet	2	
XTANDI ORAL CAPSULE	2	
YONSA ORAL TABLET	2	
ZYTIGA ORAL TABLET	2	
Antiangiogenic Agents		
POMALYST ORAL CAPSULE	2	
REVLIMID ORAL CAPSULE	2	
THALOMID ORAL CAPSULE	2	
Antiestrogens/Modifiers		
EMCYT ORAL CAPSULE	2	
FARESTON ORAL TABLET	2	
FASLODEX INTRAMUSCULAR SOLUTION	2	
fulvestrant intramuscular solution	1	
SOLTAMOX ORAL SOLUTION	2	
tamoxifen citrate oral tablet	1	
toremifene citrate oral tablet	1	
Antimetabolites		
ADRUCIL INTRAVENOUS SOLUTION	1	B/D
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED	2	
ARRANON INTRAVENOUS SOLUTION	2	
CARAC EXTERNAL CREAM	2	
cladribine intravenous solution	2	B/D
clofarabine intravenous solution	1	
CLOLAR INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
cytarabine (pf) injection solution	1	B/D
cytarabine injection solution	1	B/D
DROXIA ORAL CAPSULE	2	
EFUDEX EXTERNAL CREAM	2	
floxuridine injection solution reconstituted	1	B/D
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
fluorouracil intravenous solution	1	B/D
FOLOTYN INTRAVENOUS SOLUTION	2	
gemcitabine hcl intravenous solution 1 gm/10ml, 2 gm/20ml, 200 mg/2ml	2	
gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml	1	
gemcitabine hcl intravenous solution reconstituted	1	
HYDREA ORAL CAPSULE	2	
hydroxyurea oral capsule	1	
INFUGEM INTRAVENOUS SOLUTION	2	
LONSURF ORAL TABLET	2	
mercaptopurine oral tablet	1	
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	2	
PURIXAN ORAL SUSPENSION	2	
SIKLOS ORAL TABLET	2	
TABLOID ORAL TABLET	2	
TOLAK EXTERNAL CREAM	2	
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED	2	
Antineoplastics		
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	2	
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	2	
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	2	
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	2	
Antineoplastics, Other		
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	2	
ADRIAMYCIN INTRAVENOUS SOLUTION	1	B/D

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Drug Name	Drug Tier	Requirements /Limits
adriamycin intravenous solution reconstituted 10 mg	1	B/D
ADRIAMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 50 MG	1	B/D
arsenic trioxide intravenous solution	1	
azacitidine injection suspension reconstituted	2	
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	2	
bleomycin sulfate injection solution reconstituted	1	B/D
bortezomib intravenous solution reconstituted	2	
BRAFTOVI ORAL CAPSULE	2	
COPIKTRA ORAL CAPSULE	2	
COSMEGEN INTRAVENOUS SOLUTION RECONSTITUTED	2	
COTELLIC ORAL TABLET	2	
DACOGEN INTRAVENOUS SOLUTION RECONSTITUTED	2	
dactinomycin intravenous solution reconstituted	2	
daunorubicin hcl intravenous solution	1	
DAURISMO ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
decitabine intravenous solution reconstituted	2	
docetaxel intravenous concentrate	2	
docetaxel intravenous solution	2	
DOXIL INTRAVENOUS INJECTABLE	2	
doxorubicin hcl intravenous solution	1	B/D
doxorubicin hcl liposomal intravenous injectable	1	
ELLENCE INTRAVENOUS SOLUTION	2	
epirubicin hcl intravenous solution	1	
ERWINAZE INJECTION SOLUTION RECONSTITUTED	2	
ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED	2	
FARYDAK ORAL CAPSULE	2	
fludarabine phosphate intravenous solution	1	
fludarabine phosphate intravenous solution reconstituted	1	
FUSILEV INTRAVENOUS SOLUTION RECONSTITUTED	2	
HALAVEN INTRAVENOUS SOLUTION	2	
IBRANCE ORAL CAPSULE	2	

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Drug Name	Drug Tier	Requirements /Limits
IDAMYCIN PFS INTRAVENOUS SOLUTION	2	
idarubicin hcl intravenous solution	2	
ISTODAX (OVERFILL) INTRAVENOUS SOLUTION RECONSTITUTED	2	
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED	2	
JEVTANA INTRAVENOUS SOLUTION	2	
KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED	2	
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	2	
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	2	
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	2	
leucovorin calcium injection solution 100 mg/10ml	1	B/D
leucovorin calcium injection solution 500 mg/50ml	1	
leucovorin calcium injection solution reconstituted	1	
leucovorin calcium oral tablet	1	
levoleucovorin calcium intravenous solution	2	
levoleucovorin calcium intravenous solution reconstituted	2	
levoleucovorin calcium pf intravenous solution	2	
LORBRENA ORAL TABLET	2	
LYNPARZA ORAL TABLET	2	
MARQIBO INTRAVENOUS SUSPENSION	2	
MEKTOVI ORAL TABLET	2	
mitomycin intravenous solution reconstituted	2	
mitoxantrone hcl intravenous concentrate	1	
MUTAMYCIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
NERLYNX ORAL TABLET	2	
NINLARO ORAL CAPSULE	2	
ONCASPAR INJECTION SOLUTION	2	
paclitaxel intravenous concentrate	1	
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	2	
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	2	

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Drug Name	Drug Tier	Requirements /Limits
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	2	
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
romidepsin intravenous solution reconstituted	2	
RYDAPT ORAL CAPSULE	2	
SYLATRON SUBCUTANEOUS KIT	2	
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
TALZENNA ORAL CAPSULE	2	
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	2	
TRISENOX INTRAVENOUS SOLUTION	2	
valrubicin intravesical solution	1	
VALSTAR INTRAVESICAL SOLUTION	2	
VELCADE INJECTION SOLUTION RECONSTITUTED	2	
VERZENIO ORAL TABLET	2	
VIDAZA INJECTION SUSPENSION RECONSTITUTED	2	
vinblastine sulfate intravenous solution	1	B/D
vincristine sulfate intravenous solution	1	B/D
vinorelbine tartrate intravenous solution	1	
VITRAKVI ORAL CAPSULE	2	
VITRAKVI ORAL SOLUTION	2	
ZALTRAP INTRAVENOUS SOLUTION	2	
ZOLINZA ORAL CAPSULE	2	
ZYKADIA ORAL TABLET	2	
Aromatase Inhibitors, 3rd Generation		
anastrozole oral tablet	1	
ARIMIDEX ORAL TABLET	2	
AROMASIN ORAL TABLET	2	
exemestane oral tablet	1	
FEMARA ORAL TABLET	2	
letrozole oral tablet	1	
Enzyme Inhibitors		
BALVERSA ORAL TABLET	2	
CAMPTOSAR INTRAVENOUS SOLUTION	2	
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	2	
etoposide intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
irinotecan hcl intravenous solution	1	
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	2	
ONIVYDE INTRAVENOUS INJECTABLE	2	
TOPOSAR INTRAVENOUS SOLUTION	1	
topotecan hcl intravenous solution reconstituted	2	
topotecan hcl solution 4 mg/4ml intravenous	1	
topotecan hcl solution 4 mg/4ml intravenous	2	
ZYDELIG ORAL TABLET	2	
Molecular Target Inhibitors		
AFINITOR DISPERZ ORAL TABLET SOLUBLE	2	
AFINITOR ORAL TABLET	2	
ALECENSA ORAL CAPSULE	2	
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALUNBRIG ORAL TABLET	2	
ALUNBRIG ORAL TABLET THERAPY PACK	2	

Drug Name	Drug Tier	Requirements /Limits
BOSULIF ORAL TABLET	2	
CABOMETYX ORAL TABLET	2	
CALQUENCE ORAL CAPSULE	2	
CAPRELSA ORAL TABLET	2	
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	2	
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	2	
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	2	
ERIVEDGE ORAL CAPSULE	2	
erlotinib hcl oral tablet	1	
GILOTRIF ORAL TABLET	2	
GLEEVEC ORAL TABLET	2	
ICLUSIG ORAL TABLET	2	
IDHIFA ORAL TABLET	2	
imatinib mesylate oral tablet	2	
IMBRUVICA ORAL CAPSULE	2	
IMBRUVICA ORAL TABLET	2	
INLYTA ORAL TABLET	2	
IRESSA ORAL TABLET	2	
JAKAFI ORAL TABLET	2	
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	

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Drug Name	Drug Tier	Requirements /Limits
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	
MEKINIST ORAL TABLET	2	
NEXAVAR ORAL TABLET	2	
ODOMZO ORAL CAPSULE	2	
RUBRACA ORAL TABLET	2	
SPRYCEL ORAL TABLET	2	
STIVARGA ORAL TABLET	2	
SUTENT ORAL CAPSULE	2	
TAFINLAR ORAL CAPSULE	2	
TAGRISSO ORAL TABLET	2	
TARCEVA ORAL TABLET	2	
TASIGNA ORAL CAPSULE	2	
temsirolimus intravenous solution	1	
TIBSOVO ORAL TABLET	2	
TORISEL INTRAVENOUS SOLUTION	2	
TYKERB ORAL TABLET	2	
VENCLEXTA ORAL TABLET	2	
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	2	
VIZIMPRO ORAL TABLET	2	
VOTRIENT ORAL TABLET	2	
XALKORI ORAL CAPSULE	2	
XOSPATA ORAL TABLET	2	
ZEJULA ORAL CAPSULE	2	
ZELBORAF ORAL TABLET	2	
Monoclonal Antibody/Antibody-Drug Conjugate		
ARZERRA INTRAVENOUS CONCENTRATE	2	

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Drug Name	Drug Tier	Requirements /Limits
AVASTIN INTRAVENOUS SOLUTION	2	
BAVENCIO INTRAVENOUS SOLUTION	2	
BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED	2	
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED	2	PA
CYRAMZA INTRAVENOUS SOLUTION	2	
DARZALEX INTRAVENOUS SOLUTION	2	
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	2	
ERBITUX INTRAVENOUS SOLUTION	2	
GAZYVA INTRAVENOUS SOLUTION	2	
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	2	
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
IMFINZI INTRAVENOUS SOLUTION	2	
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	2	
KEYTRUDA INTRAVENOUS SOLUTION	2	
LARTRUVO INTRAVENOUS SOLUTION	2	
LIBTAYO INTRAVENOUS SOLUTION	2	
LUMOXITI INTRAVENOUS SOLUTION RECONSTITUTED	2	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED	2	
OPDIVO INTRAVENOUS SOLUTION	2	
PERJETA INTRAVENOUS SOLUTION	2	
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	2	
PORTRAZZA INTRAVENOUS SOLUTION	2	
POTELIGEO INTRAVENOUS SOLUTION	2	
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	2	
RITUXAN INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
TECENTRIQ INTRAVENOUS SOLUTION	2	
UNITUXIN INTRAVENOUS SOLUTION	2	
VECTIBIX INTRAVENOUS SOLUTION	2	
YERVOY INTRAVENOUS SOLUTION	2	
ZEVALIN Y-90 INTRAVENOUS KIT	2	
Retinoids		
bexarotene oral capsule	2	
TARGRETIN EXTERNAL GEL	2	
TARGRETIN ORAL CAPSULE	2	
tretinoin oral capsule	2	
Treatment Adjuncts		
dexrazoxane hcl intravenous solution reconstituted	2	
dexrazoxane intravenous solution reconstituted 500 mg	2	
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	2	
mesna intravenous solution	1	
MESNEX INTRAVENOUS SOLUTION	2	
MESNEX ORAL TABLET	2	
TOTECT INTRAVENOUS SOLUTION RECONSTITUTED	2	
ZINECARD INTRAVENOUS SOLUTION RECONSTITUTED	2	
Antiparasitics		
Anthelmintics		
albendazole oral tablet	1	
benznidazole oral tablet	2	
BILTRICIDE ORAL TABLET	2	
EMVERM ORAL TABLET CHEWABLE	2	
ivermectin oral tablet	1	
praziquantel oral tablet	1	
STROMECTOL ORAL TABLET	2	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED	2	
ALINIA ORAL TABLET	2	
atovaquone oral suspension	2	
atovaquone-proguanil hcl oral tablet	1	
chloroquine phosphate oral tablet	1	
COARTEM ORAL TABLET	2	
DARAPRIM ORAL TABLET	2	
hydroxychloroquine sulfate oral tablet	1	
KRINTAFEL ORAL TABLET	2	
MALARONE ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
mefloquine hcl oral tablet	1	
MEPRON ORAL SUSPENSION	2	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	2	B/D
PENTAM INJECTION SOLUTION RECONSTITUTED	2	
pentamidine isethionate injection solution reconstituted	1	
PLAQUENIL ORAL TABLET	2	
primaquine phosphate oral tablet	1	
QUALAQUIN ORAL CAPSULE	2	PA
quinine sulfate oral capsule	1	PA
SOLOSEC ORAL PACKET	2	
tinidazole oral tablet	1	
Pediculicides/Scabicides		
CROTAN EXTERNAL LOTION	1	
ELIMITE EXTERNAL CREAM	2	
EURAX EXTERNAL CREAM	2	
EURAX EXTERNAL LOTION	2	
lindane external shampoo	2	
malathion external lotion	1	
NATROBA EXTERNAL SUSPENSION	2	
OVIDE EXTERNAL LOTION	2	
permethrin external cream	1	
SKLICE EXTERNAL LOTION	2	
Antiparkinson Agents		
Anticholinergics		
benztropine mesylate injection solution	1	
benztropine mesylate oral tablet	1	
COGENTIN INJECTION SOLUTION	2	
trihexyphenidyl hcl oral elixir	1	
trihexyphenidyl hcl oral tablet	1	
Antiparkinson Agents, Other		
COMTAN ORAL TABLET	2	
entacapone oral tablet	1	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
TASMAR ORAL TABLET	2	
tolcapone oral tablet	2	
Dopamine Agonists		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	2	
bromocriptine mesylate oral capsule	2	

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Drug Name	Drug Tier	Requirements /Limits
bromocriptine mesylate oral tablet	2	
INBRIJA INHALATION CAPSULE	2	
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
MIRAPEX ORAL TABLET	2	
NEUPRO TRANSDERMAL PATCH 24 HOUR	2	
PARLODEL ORAL CAPSULE	2	
PARLODEL ORAL TABLET	2	
pramipexole dihydrochloride er oral tablet extended release 24 hour	1	
pramipexole dihydrochloride oral tablet	1	
ropinirole hcl er oral tablet extended release 24 hour	1	
ropinirole hcl oral tablet	1	
Dopamine Precursors/L- Amino Acid Decarboxylase Inhibitors		
carbidopa oral tablet	2	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
carbidopa-levodopa oral tablet dispersible	1	
carbidopa-levodopa-entacapone oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
DUOPA ENTERAL SUSPENSION	2	PA
LODOSYN ORAL TABLET	2	
RYTARY ORAL CAPSULE EXTENDED RELEASE	2	
SINEMET CR ORAL TABLET EXTENDED RELEASE	2	
SINEMET ORAL TABLET	2	
STALEVO 100 ORAL TABLET	2	
STALEVO 125 ORAL TABLET	2	
STALEVO 150 ORAL TABLET	2	
STALEVO 200 ORAL TABLET	2	
STALEVO 50 ORAL TABLET	2	
STALEVO 75 ORAL TABLET	2	
Monoamine Oxidase B (MAO-B) Inhibitors		
AZILECT ORAL TABLET	2	
rasagiline mesylate oral tablet	1	
selegiline hcl oral capsule	1	
selegiline hcl oral tablet	1	
XADAGO ORAL TABLET	2	
ZELAPAR ORAL TABLET DISPERSIBLE	2	

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Drug Name	Drug Tier	Requirements /Limits
Antipsychotics		
1st Generation/Typical		
chlorpromazine hcl injection solution	1	
chlorpromazine hcl oral tablet	1	
fluphenazine decanoate injection solution	1	
fluphenazine hcl injection solution	1	
fluphenazine hcl oral concentrate	1	
fluphenazine hcl oral elixir	1	
fluphenazine hcl oral tablet	1	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION	2	
HALDOL INJECTION SOLUTION	2	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1	
haloperidol lactate injection solution 5 mg/ml	1	
haloperidol lactate oral concentrate	1	
haloperidol oral tablet	1	
loxapine succinate oral capsule	1	
molindone hcl oral tablet	1	
perphenazine oral tablet	1	
pimozide oral tablet	1	
thioridazine hcl oral tablet	1	
thiothixene oral capsule	1	
trifluoperazine hcl oral tablet	1	
2nd Generation/Atypical		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	2	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	2	
ABILIFY MYCITE ORAL TABLET	2	
ABILIFY ORAL TABLET	2	
aripiprazole oral solution	1	
aripiprazole oral tablet	1	
aripiprazole oral tablet dispersible	2	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	2	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	2	
FANAPT ORAL TABLET	2	
FANAPT TITRATION PACK ORAL TABLET	2	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
GEODON ORAL CAPSULE	2	
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

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Drug Name	Drug Tier	Requirements /Limits
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	
LATUDA ORAL TABLET	2	
NUPLAZID ORAL CAPSULE	2	
NUPLAZID ORAL TABLET	2	
olanzapine intramuscular solution reconstituted	1	
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	1	
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg	1	
paliperidone er oral tablet extended release 24 hour 9 mg	2	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	2	
quetiapine fumarate er oral tablet extended release 24 hour	1	
quetiapine fumarate oral tablet	1	
REXULTI ORAL TABLET	2	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED 12.5 MG, 25 MG, 37.5 MG, 50 MG	2	
RISPERDAL ORAL SOLUTION	2	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	2	
risperidone oral solution	1	
risperidone oral tablet	1	
risperidone oral tablet dispersible	1	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	2	
SEROQUEL ORAL TABLET	2	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
VRAYLAR ORAL CAPSULE	2	
VRAYLAR ORAL CAPSULE THERAPY PACK	2	
ziprasidone hcl oral capsule	1	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
ZYPREXA ORAL TABLET	2	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE	2	
Treatment-Resistant		
clozapine oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 25 mg	1	
clozapine oral tablet dispersible 200 mg	2	
CLOZARIL ORAL TABLET	2	
FAZACLO ORAL TABLET DISPERSIBLE	2	
VERSACLOZ ORAL SUSPENSION	2	
Antispasticity Agents		
Antispasticity Agents		
baclofen intrathecal solution	1	B/D
baclofen oral tablet	1	
BOTOX INJECTION SOLUTION RECONSTITUTED	2	PA
DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED	2	
DANTRIUM ORAL CAPSULE	2	
dantrolene sodium oral capsule	1	
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PA
LIORESAL INTRATHECAL INTRATHECAL SOLUTION 2000 MCG/ML, 40 MG/20ML, 500 MCG/ML	2	B/D
LIORESAL INTRATHECAL SOLUTION 0.05 MG/ML, 10 MG/20ML, 40 MG/20ML	2	B/D
MYOBLOC INTRAMUSCULAR SOLUTION	2	PA
REVONTO INTRAVENOUS SOLUTION RECONSTITUTED	1	
tizanidine hcl oral capsule	1	
tizanidine hcl oral tablet	1	
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 200 UNIT	2	
ZANAFLEX ORAL CAPSULE	2	
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
cidofovir intravenous solution	2	
ganciclovir sodium intravenous solution	1	B/D
ganciclovir sodium intravenous solution reconstituted	1	B/D
PREVYMIS INTRAVENOUS SOLUTION	2	
PREVYMIS ORAL TABLET	2	
VALCYTE ORAL SOLUTION RECONSTITUTED	2	
VALCYTE ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
valganciclovir hcl oral solution reconstituted	1	
valganciclovir hcl oral tablet	2	
ZIRGAN OPHTHALMIC GEL	2	
Anti-hepatitis B (HBV) Agents		
adefovir dipivoxil oral tablet	2	
BARACLUDE ORAL SOLUTION	2	
BARACLUDE ORAL TABLET	2	
entecavir oral tablet	1	
EPIVIR HBV ORAL SOLUTION	2	
EPIVIR HBV ORAL TABLET	2	
HEPSERA ORAL TABLET	2	
INTRON A INJECTION SOLUTION	2	
INTRON A INJECTION SOLUTION RECONSTITUTED	2	
lamivudine oral tablet 100 mg	1	
VEMLIDY ORAL TABLET	2	
Anti-hepatitis C (HCV) Agents, Direct Acting Agents		
EPCLUSA ORAL TABLET	2	
HARVONI ORAL TABLET 90-400 MG	2	
ledipasvir-sofosbuvir oral tablet	2	
MAVYRET ORAL TABLET	2	
sofosbuvir-velpatasvir oral tablet	2	
SOVALDI ORAL TABLET 400 MG	2	
VIEKIRA PAK ORAL TABLET THERAPY PACK	2	
VOSEVI ORAL TABLET	2	
ZEPATIER ORAL TABLET	2	
Anti-hepatitis C (HCV) Agents, Other		
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION	2	
PEGASYS SUBCUTANEOUS SOLUTION	2	
PEGINTRON SUBCUTANEOUS KIT	2	
ribavirin oral capsule	1	
ribavirin oral tablet	1	
Antiherpetic Agents		
acyclovir external cream	1	
acyclovir external ointment	1	
acyclovir oral capsule	1	
acyclovir oral suspension	1	
acyclovir oral tablet	1	
acyclovir sodium intravenous solution	1	B/D
DENAVIR EXTERNAL CREAM	2	
famciclovir oral tablet	1	
trifluridine ophthalmic solution	1	
valacyclovir hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
VALTREX ORAL TABLET	2	
XERESE EXTERNAL CREAM	2	
ZOVIRAX EXTERNAL CREAM	2	
ZOVIRAX EXTERNAL OINTMENT	2	
ZOVIRAX ORAL SUSPENSION	2	
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY ORAL TABLET	2	
DELSTRIGO ORAL TABLET	2	
DOVATO ORAL TABLET	2	
GENVOYA ORAL TABLET	2	
ISENTRESS ORAL PACKET	2	
ISENTRESS ORAL TABLET CHEWABLE	2	
JULUCA ORAL TABLET	2	
STRIBILD ORAL TABLET	2	
TIVICAY ORAL TABLET	2	
TRIUMEQ ORAL TABLET	2	
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
ATRIPLA ORAL TABLET	2	
COMPLERA ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
EDURANT ORAL TABLET	2	
efavirenz oral capsule	1	
efavirenz oral tablet	2	
INTELENCE ORAL TABLET	2	
nevirapine er oral tablet extended release 24 hour	1	
nevirapine oral suspension	1	
nevirapine oral tablet	1	
ODEFSEY ORAL TABLET	2	
PIFELTRO ORAL TABLET	2	
RESCRIPTOR ORAL TABLET	2	
SUSTIVA ORAL CAPSULE	2	
SUSTIVA ORAL TABLET	2	
SYMFI LO ORAL TABLET	2	
SYMFI ORAL TABLET	2	
VIRAMUNE ORAL SUSPENSION	2	
VIRAMUNE ORAL TABLET	2	
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
abacavir sulfate oral solution	1	
abacavir sulfate oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
abacavir sulfate-lamivudine oral tablet	1	
abacavir-lamivudine-zidovudine oral tablet	2	
CIMDUO ORAL TABLET	2	
COMBIVIR ORAL TABLET	2	
DESCOVY ORAL TABLET	2	
didanosine oral capsule delayed release	1	
EMTRIVA ORAL CAPSULE	2	
EMTRIVA ORAL SOLUTION	2	
EPIVIR ORAL SOLUTION	2	
EPIVIR ORAL TABLET	2	
EPZICOM ORAL TABLET	2	
lamivudine oral solution	1	
lamivudine oral tablet 150 mg, 300 mg	1	
lamivudine-zidovudine oral tablet	1	
RETROVIR INTRAVENOUS SOLUTION	2	
RETROVIR ORAL CAPSULE	2	
RETROVIR ORAL SYRUP	2	
stavudine oral capsule	1	
TEMIXYS ORAL TABLET	2	
tenofovir disoproxil fumarate oral tablet	1	
TRIZIVIR ORAL TABLET	2	
TRUVADA ORAL TABLET	2	
VIDEX EC ORAL CAPSULE DELAYED RELEASE	2	
VIDEX ORAL SOLUTION RECONSTITUTED	2	
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET	2	
ZIAGEN ORAL SOLUTION	2	
ZIAGEN ORAL TABLET	2	
zidovudine oral capsule	1	
zidovudine oral syrup	1	
zidovudine oral tablet	1	
Anti-HIV Agents, Other		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
ISENTRESS HD ORAL TABLET	2	
ISENTRESS ORAL TABLET	2	
SELZENTRY ORAL SOLUTION	2	
SELZENTRY ORAL TABLET	2	
TROGARZO INTRAVENOUS SOLUTION	2	
TYBOST ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
Anti-HIV Agents, Protease Inhibitors		
APTIVUS ORAL CAPSULE	2	
APTIVUS ORAL SOLUTION	2	
atazanavir sulfate oral capsule	2	
CRIXIVAN ORAL CAPSULE	2	
EVOTAZ ORAL TABLET	2	
fosamprenavir calcium oral tablet	2	
INVIRASE ORAL TABLET	2	
KALETRA ORAL SOLUTION	2	
KALETRA ORAL TABLET	2	
LEXIVA ORAL SUSPENSION	2	
LEXIVA ORAL TABLET	2	
lopinavir-ritonavir oral solution	1	
NORVIR ORAL PACKET	2	
NORVIR ORAL SOLUTION	2	
NORVIR ORAL TABLET	2	
PREZCOBIX ORAL TABLET	2	
PREZISTA ORAL SUSPENSION	2	
PREZISTA ORAL TABLET	2	
REYATAZ ORAL CAPSULE	2	
REYATAZ ORAL PACKET	2	
ritonavir oral tablet	1	
SYMTUZA ORAL TABLET	2	
VIRACEPT ORAL TABLET	2	
Anti-influenza Agents		
amantadine hcl oral capsule	1	
amantadine hcl oral syrup	1	
amantadine hcl oral tablet	1	
FLUMADINE ORAL TABLET	2	
oseltamivir phosphate oral capsule	1	
oseltamivir phosphate oral suspension reconstituted	1	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
rimantadine hcl oral tablet	1	
TAMIFLU ORAL CAPSULE	2	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	2	
XOFLUZA ORAL TABLET THERAPY PACK	2	
Anxiolytics		
Anxiolytics, Other		
buspirone hcl oral tablet	1	
meprobamate oral tablet	2	

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Drug Name	Drug Tier	Requirements /Limits
Benzodiazepines		
alprazolam er oral tablet extended release 24 hour	1	
ALPRAZOLAM INTENSOL ORAL CONCENTRATE	1	
alprazolam oral tablet	1	
alprazolam oral tablet dispersible	1	
alprazolam xr oral tablet extended release 24 hour	1	
ATIVAN INJECTION SOLUTION	2	
ATIVAN ORAL TABLET	2	
chlordiazepoxide hcl oral capsule	1	
clorazepate dipotassium oral tablet	1	
diazepam injection solution	1	
DIAZEPAM INTENSOL ORAL CONCENTRATE	1	
diazepam oral concentrate	1	
diazepam oral solution	1	
diazepam oral tablet	1	
estazolam oral tablet	1	
HALCION ORAL TABLET	2	
lorazepam injection solution	1	
LORAZEPAM INTENSOL ORAL CONCENTRATE	1	
lorazepam oral concentrate	1	
lorazepam oral tablet	1	
midazolam hcl injection solution	1	
midazolam hcl oral syrup	1	
oxazepam oral capsule	1	
RESTORIL ORAL CAPSULE	2	
temazepam oral capsule	1	
TRANXENE-T ORAL TABLET	2	
triazolam oral tablet	1	
VALIUM ORAL TABLET	2	
XANAX ORAL TABLET	2	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Bipolar Agents		
Mood Stabilizers		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
lithium carbonate er oral tablet extended release	1	
lithium carbonate oral capsule	1	
lithium carbonate oral tablet	1	
lithium oral solution	1	
LITHOBID ORAL TABLET EXTENDED RELEASE	2	
Blood Glucose Regulators		
Antidiabetic Agents		
acarbose oral tablet	1	
ACTOPLUS MET ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
ACTOS ORAL TABLET	2	
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT	2	
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
alogliptin benzoate oral tablet	2	
alogliptin-metformin hcl oral tablet	2	
alogliptin-pioglitazone oral tablet	2	
AMARYL ORAL TABLET	2	
AVANDIA ORAL TABLET	2	
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	2	
BYDUREON SUBCUTANEOUS PEN-INJECTOR	2	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
CYCLOSET ORAL TABLET	2	
DUETACT ORAL TABLET	2	
FARXIGA ORAL TABLET	2	
FORTAMET ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

Drug Name	Drug Tier	Requirements /Limits
glimepiride oral tablet	1	
glipizide er oral tablet extended release 24 hour	1	
glipizide oral tablet	1	
glipizide xl oral tablet extended release 24 hour	1	
glipizide-metformin hcl oral tablet	1	
GLUCOPHAGE ORAL TABLET	2	
GLUCOPHAGE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
GLUCOTROL ORAL TABLET	2	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
glyburide micronized oral tablet	1	
glyburide oral tablet	1	
glyburide-metformin oral tablet	1	
GLYNASE ORAL TABLET	2	
GLYSET ORAL TABLET	2	
GLYXAMBI ORAL TABLET	2	
INVOKAMET ORAL TABLET	2	
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

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Drug Name	Drug Tier	Requirements /Limits
INVOKANA ORAL TABLET	2	
JANUMET ORAL TABLET	2	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
JANUVIA ORAL TABLET	2	
JARDIANCE ORAL TABLET	2	
JENTADUETO ORAL TABLET	2	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
KAZANO ORAL TABLET	2	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
metformin hcl er (mod) oral tablet extended release 24 hour	1	
metformin hcl er (osm) oral tablet extended release 24 hour	1	
metformin hcl er oral tablet extended release 24 hour	1	
metformin hcl oral tablet	1	
miglitol oral tablet	1	
nateglinide oral tablet	1	
NESINA ORAL TABLET	2	
ONGLYZA ORAL TABLET	2	
OSENI ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
pioglitazone hcl oral tablet	1	
pioglitazone hcl-glimepiride oral tablet	1	
pioglitazone hcl-metformin hcl oral tablet	1	
PRECOSE ORAL TABLET	2	
QTERN ORAL TABLET	2	
repaglinide oral tablet	1	
repaglinide-metformin hcl oral tablet	1	
RIOMET ORAL SOLUTION	2	
SEGLUROMET ORAL TABLET	2	
STARLIX ORAL TABLET	2	
STEGLATRO ORAL TABLET	2	
STEGLUJAN ORAL TABLET	2	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	

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Drug Name	Drug Tier	Requirements /Limits
SYNJARDY ORAL TABLET	2	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
TRADJENTA ORAL TABLET	2	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Glycemic Agents		
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	2	
GLUCAGON EMERGENCY INJECTION KIT	2	
PROGLYCEM ORAL SUSPENSION	2	
Insulins		
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
ADMELOG SUBCUTANEOUS SOLUTION	2	
AFREZZA INHALATION POWDER	2	
APIDRA INJECTION SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
FIASP SUBCUTANEOUS SOLUTION	2	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	2	
HUMALOG SUBCUTANEOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	2	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMULIN N SUBCUTANEOUS SUSPENSION	2	
HUMULIN R INJECTION SOLUTION	2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
insulin lispro subcutaneous solution	2	
insulin lispro subcutaneous solution pen-injector 100 unit/ml	2	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LANTUS SUBCUTANEOUS SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LEVEMIR SUBCUTANEOUS SOLUTION	2	
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	2	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION	2	
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION	2	
NOVOLIN N SUBCUTANEOUS SUSPENSION	2	
NOVOLIN R INJECTION SOLUTION	2	
NOVOLIN R RELION INJECTION SOLUTION	2	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	

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Drug Name	Drug Tier	Requirements /Limits
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION	2	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	2	
NOVOLOG SUBCUTANEOUS SOLUTION	2	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TRESIBA SUBCUTANEOUS SOLUTION	2	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	

Drug Name	Drug Tier	Requirements /Limits
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
argatroban intravenous solution 125 mg/125ml	1	
argatroban intravenous solution 250 mg/2.5ml, 50 mg/50ml	2	
ARIXTRA SUBCUTANEOUS SOLUTION	2	
BEVYXXA ORAL CAPSULE	2	
CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT	2	
COUMADIN ORAL TABLET	2	
ELIQUIS ORAL TABLET	2	
ELIQUIS STARTER PACK ORAL TABLET	2	
enoxaparin sodium injection solution	1	
enoxaparin sodium subcutaneous solution	1	
fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml	2	
fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml	1	
FRAGMIN SUBCUTANEOUS SOLUTION	2	
heparin (porcine) in nacl injection solution 100-0.45 unit/ml-%	1	

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Drug Name	Drug Tier	Requirements /Limits
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/500ml-%	1	
heparin sod (porcine) in d5w intravenous solution	1	
heparin sodium (porcine) injection solution	1	
heparin sodium (porcine) pf injection solution 5000 unit/0.5ml	1	
JANTOVEN ORAL TABLET	1	
LOVENOX INJECTION SOLUTION	2	
LOVENOX SUBCUTANEOUS SOLUTION	2	
PRADAXA ORAL CAPSULE	2	
SAVAYSA ORAL TABLET	2	
warfarin sodium oral tablet	1	
XARELTO ORAL TABLET	2	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	2	
Blood Formation Modifiers		
AGRYLIN ORAL CAPSULE	2	
anagrelide hcl oral capsule	1	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	2	
DOPTELET ORAL TABLET 20 MG	2	
EPOGEN INJECTION SOLUTION	2	
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
GRANIX SUBCUTANEOUS SOLUTION	2	
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
MOZOBIL SUBCUTANEOUS SOLUTION	2	
MULPLETA ORAL TABLET	2	
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	2	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
NEUPOGEN INJECTION SOLUTION	2	
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	2	
NIVESTYM INJECTION SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	2	
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
PROCRIT INJECTION SOLUTION	2	
PROMACTA ORAL PACKET	2	
PROMACTA ORAL TABLET	2	
RETACRIT INJECTION SOLUTION	2	
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	2	
Blood Products/Modifiers/Volume Expanders		
SOLIRIS INTRAVENOUS SOLUTION	2	
ULTOMIRIS INTRAVENOUS SOLUTION	2	
Hemostasis Agents		
AMICAR ORAL SOLUTION	2	
AMICAR ORAL TABLET	2	
aminocaproic acid intravenous solution	1	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	
CYKLOKAPRON INTRAVENOUS SOLUTION	2	
LYSTEDA ORAL TABLET	2	
TAVALISSE ORAL TABLET	2	
tranexamic acid intravenous solution	1	
tranexamic acid oral tablet	1	
Platelet Modifying Agents		
AGGRENOX ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
aspirin-dipyridamole er oral capsule extended release 12 hour	1	
BRILINTA ORAL TABLET	2	
CABLIVI INJECTION KIT	2	
cilostazol oral tablet	1	
clopidogrel bisulfate oral tablet	1	
dipyridamole oral tablet	1	
EFFIENT ORAL TABLET	2	
eptifibatide intravenous solution	1	
INTEGRILIN INTRAVENOUS SOLUTION	2	
KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	2	
PLAVIX ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
prasugrel hcl oral tablet	1	
ZONTIVITY ORAL TABLET	2	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
CATAPRES ORAL TABLET	2	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	2	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	2	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	2	
clonidine hcl oral tablet	1	
clonidine transdermal patch weekly	1	
guanfacine hcl oral tablet	1	
methyldopa oral tablet	1	
methyldopa-hydrochlorothiazide oral tablet	1	
midodrine hcl oral tablet	1	
phenylephrine hcl injection solution 10 mg/ml	1	
phenylephrine hcl intravenous solution	1	
VAZCULEP INTRAVENOUS SOLUTION	2	
Alpha-adrenergic Blocking Agents		
DIBENZYLINE ORAL CAPSULE	2	
MINIPRESS ORAL CAPSULE	2	
phenoxybenzamine hcl oral capsule	2	
phentolamine mesylate injection solution reconstituted	1	
prazosin hcl oral capsule	1	
Angiotensin II Receptor Antagonists		
ATACAND HCT ORAL TABLET	2	
ATACAND ORAL TABLET	2	
AVALIDE ORAL TABLET	2	
AVAPRO ORAL TABLET	2	
BENICAR HCT ORAL TABLET	2	
BENICAR ORAL TABLET	2	
candesartan cilexetil oral tablet	1	
candesartan cilexetil-hctz oral tablet	1	
COZAAR ORAL TABLET	2	
DIOVAN HCT ORAL TABLET	2	
DIOVAN ORAL TABLET	2	
EDARBI ORAL TABLET	2	
EDARBYCLOR ORAL TABLET	2	
eprosartan mesylate oral tablet	1	
HYZAAR ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
irbesartan oral tablet	1	
irbesartan-hydrochlorothiazide oral tablet	1	
losartan potassium oral tablet	1	
losartan potassium-hctz oral tablet	1	
MICARDIS HCT ORAL TABLET	2	
MICARDIS ORAL TABLET	2	
olmesartan medoxomil oral tablet	1	
olmesartan medoxomil-hctz oral tablet	1	
telmisartan oral tablet	1	
telmisartan-hctz oral tablet	1	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide oral tablet	1	
Angiotensin-converting Enzyme (ACE) Inhibitors		
ACCUPRIL ORAL TABLET	2	
ACCURETIC ORAL TABLET	2	
ALTACE ORAL CAPSULE	2	
benazepril hcl oral tablet	1	
benazepril-hydrochlorothiazide oral tablet	1	
captopril oral tablet	1	
captopril-hydrochlorothiazide oral tablet	1	
enalapril maleate oral tablet	1	
enalaprilat intravenous injectable	1	
enalapril-hydrochlorothiazide oral tablet	1	
EPANED ORAL SOLUTION	2	
fosinopril sodium oral tablet	1	
fosinopril sodium-hctz oral tablet	1	
lisinopril oral tablet	1	
lisinopril-hydrochlorothiazide oral tablet	1	
LOTENSIN HCT ORAL TABLET	2	
LOTENSIN ORAL TABLET	2	
moexipril hcl oral tablet	1	
perindopril erbumine oral tablet	1	
PRINIVIL ORAL TABLET	2	
QBRELIS ORAL SOLUTION	2	
quinapril hcl oral tablet	1	
quinapril-hydrochlorothiazide oral tablet	1	
ramipril oral capsule	1	
trandolapril oral tablet	1	
trandolapril-verapamil hcl er oral tablet extended release	1	
VASERETIC ORAL TABLET	2	
VASOTEC ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
ZESTORETIC ORAL TABLET	2	
ZESTRIL ORAL TABLET	2	
Antiarrhythmics		
ADENOCARD INTRAVENOUS SOLUTION	2	
adenosine intravenous solution 12 mg/4ml, 6 mg/2ml	1	
amiodarone hcl intravenous solution	1	
amiodarone hcl oral tablet	1	
BETAPACE AF ORAL TABLET	2	
BETAPACE ORAL TABLET	2	
CORVERT INTRAVENOUS SOLUTION	2	
disopyramide phosphate oral capsule	1	
dofetilide oral capsule	1	
flecainide acetate oral tablet	1	
ibutilide fumarate intravenous solution	1	
lidocaine hcl (cardiac) intravenous solution prefilled syringe	1	
lidocaine hcl (cardiac) pf intravenous solution	1	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	1	
lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%	1	
mexiletine hcl oral capsule	1	
MULTAQ ORAL TABLET	2	
NEXTERONE INTRAVENOUS SOLUTION	2	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
NORPACE ORAL CAPSULE	2	
PACERONE ORAL TABLET	1	
procainamide hcl injection solution	1	
propafenone hcl er oral capsule extended release 12 hour	1	
propafenone hcl oral tablet	1	
quinidine gluconate er oral tablet extended release	1	
quinidine sulfate oral tablet	1	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
SORINE ORAL TABLET	1	
sotalol hcl (af) oral tablet	1	
sotalol hcl oral tablet	1	
SOTYLIZE ORAL SOLUTION	2	
TIKOSYN ORAL CAPSULE	2	
Beta-adrenergic Blocking Agents		
acebutolol hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
atenolol oral tablet	1	
atenolol-chlorthalidone oral tablet	1	
betaxolol hcl oral tablet	1	
bisoprolol fumarate oral tablet	1	
bisoprolol-hydrochlorothiazide oral tablet	1	
BREVIBLOC IN NACL INTRAVENOUS SOLUTION	2	
BREVIBLOC INTRAVENOUS SOLUTION	2	
BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION	2	
BREVIBLOC PREMIXED INTRAVENOUS SOLUTION	2	
BYSTOLIC ORAL TABLET	2	
carvedilol oral tablet	1	
carvedilol phosphate er oral capsule extended release 24 hour	1	
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
COREG ORAL TABLET	2	
CORGARD ORAL TABLET	2	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
esmolol hcl intravenous solution 100 mg/10ml	1	

Drug Name	Drug Tier	Requirements /Limits
esmolol hcl-sodium chloride intravenous solution	1	
HEMANGEOL ORAL SOLUTION	2	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE	2	
labetalol hcl intravenous solution	1	
labetalol hcl oral tablet	1	
LOPRESSOR HCT ORAL TABLET	2	
LOPRESSOR ORAL TABLET	2	
metoprolol succinate er oral tablet extended release 24 hour	1	
metoprolol tartrate intravenous solution	1	
metoprolol tartrate intravenous solution cartridge	1	
metoprolol tartrate oral tablet	1	
metoprolol-hydrochlorothiazide oral tablet	1	
nadolol oral tablet	1	
pindolol oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
propranolol hcl er oral capsule extended release 24 hour	1	
propranolol hcl intravenous solution	1	
propranolol hcl oral solution	1	
propranolol hcl oral tablet	1	
propranolol-hctz oral tablet	1	
TENORETIC 100 ORAL TABLET	2	
TENORETIC 50 ORAL TABLET	2	
TENORMIN ORAL TABLET	2	
timolol maleate oral tablet	1	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
ZIAC ORAL TABLET	2	
Calcium Channel Blocking Agents		
amlodipine besy-benazepril hcl oral capsule	1	
amlodipine besylate oral tablet	1	
amlodipine besylate-valsartan oral tablet	1	
amlodipine-atorvastatin oral tablet	1	
amlodipine-olmesartan oral tablet	1	
amlodipine-valsartan-hctz oral tablet	1	
AZOR ORAL TABLET	2	
CADUET ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
CALAN ORAL TABLET	2	
CALAN SR ORAL TABLET EXTENDED RELEASE	2	
CARDENE IV INTRAVENOUS SOLUTION	2	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
CARDIZEM ORAL TABLET	2	
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	1	
diltiazem hcl er beads oral capsule extended release 24 hour	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	1	
diltiazem hcl er coated beads oral tablet extended release 24 hour	1	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl intravenous solution	1	
diltiazem hcl intravenous solution reconstituted	1	
diltiazem hcl oral tablet	1	
dilt-xr oral capsule extended release 24 hour	1	
EXFORGE HCT ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
EXFORGE ORAL TABLET	2	
felodipine er oral tablet extended release 24 hour	1	
isradipine oral capsule	2	
LOTREL ORAL CAPSULE	2	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	1	
nicardipine hcl intravenous solution	2	
nicardipine hcl oral capsule	2	
nifedipine er oral tablet extended release 24 hour	1	
nifedipine er osmotic release oral tablet extended release 24 hour	1	
nifedipine oral capsule	2	
nimodipine oral capsule	2	
nisoldipine er oral tablet extended release 24 hour	1	
NORVASC ORAL TABLET	2	
NYMALIZE ORAL SOLUTION	2	
olmesartan-amlodipine-hctz oral tablet	1	
PROCARDIA ORAL CAPSULE	2	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

Drug Name	Drug Tier	Requirements /Limits
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	1	
telmisartan-amlodipine oral tablet	1	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
TRIBENZOR ORAL TABLET	2	
TWYNSTA ORAL TABLET	2	
verapamil hcl er oral capsule extended release 24 hour	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl intravenous solution	1	
verapamil hcl oral tablet	1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
Cardiovascular Agents, Other		
ADRENALIN INJECTION SOLUTION	2	
aliskiren fumarate oral tablet	1	
atropine sulfate injection solution 8 mg/20ml	1	
atropine sulfate injection solution prefilled syringe	1	
CORLANOR ORAL TABLET	2	

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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
DEFITELIO INTRAVENOUS SOLUTION	2	
DEMSER ORAL CAPSULE	2	
DIGITEK ORAL TABLET	1	
DIGOX ORAL TABLET	1	
digoxin injection solution	1	
digoxin oral solution	1	
digoxin oral tablet	1	
dobutamine hcl intravenous solution	1	B/D
dobutamine in d5w intravenous solution	1	B/D
dopamine hcl intravenous solution	1	B/D
dopamine in d5w intravenous solution	1	B/D
ENTRESTO ORAL TABLET	2	
ibuprofen lysine intravenous solution	1	
LANOXIN INJECTION SOLUTION	2	
LANOXIN ORAL TABLET	2	
LANOXIN PEDIATRIC INJECTION SOLUTION	2	
LEVOPHED INTRAVENOUS SOLUTION	2	
mannitol intravenous solution	1	
milrinone lactate in dextrose intravenous solution	1	B/D
milrinone lactate intravenous solution	1	B/D

Drug Name	Drug Tier	Requirements /Limits
NEOPROFEN INTRAVENOUS SOLUTION	2	
norepinephrine bitartrate intravenous solution	1	
NORTHERA ORAL CAPSULE	2	
OSMITROL INTRAVENOUS SOLUTION	1	
pentoxifylline er oral tablet extended release	2	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/ML	2	
PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 150 MG/ML, 75 MG/ML	2	
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
ranolazine er oral tablet extended release 12 hour	1	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	2	
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	

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Drug Name	Drug Tier	Requirements /Limits
TEKTURNA HCT ORAL TABLET	2	
TEKTURNA ORAL TABLET	2	
VECAMYL ORAL TABLET	2	
VYNDAQEL ORAL CAPSULE	2	
Diuretics, Carbonic Anhydrase Inhibitors		
acetazolamide sodium injection solution reconstituted	2	
Diuretics, Loop		
bumetanide injection solution	1	
bumetanide oral tablet	1	
BUMEX ORAL TABLET	2	
EDECRIN ORAL TABLET	2	
ethacrynate sodium intravenous solution reconstituted	1	
ethacrynic acid oral tablet	2	
furosemide injection solution 10 mg/ml	1	
furosemide oral solution	1	
furosemide oral tablet	1	
LASIX ORAL TABLET	2	
SODIUM EDECRIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
torsemide oral tablet	1	
Diuretics, Potassium-sparing		
ALDACTAZIDE ORAL TABLET	2	
ALDACTONE ORAL TABLET	2	
amiloride hcl oral tablet	1	
amiloride-hydrochlorothiazide oral tablet	1	
CAROSPIR ORAL SUSPENSION	2	
DYAZIDE ORAL CAPSULE	2	
DYRENIUM ORAL CAPSULE	2	
eplerenone oral tablet	1	
INSPRA ORAL TABLET	2	
MAXZIDE ORAL TABLET	2	
MAXZIDE-25 ORAL TABLET	2	
spironolactone oral tablet	1	
spironolactone-hctz oral tablet	1	
triamterene oral capsule	1	
triamterene-hctz oral capsule	1	
triamterene-hctz oral tablet	1	
Diuretics, Thiazide		
chlorothiazide sodium intravenous solution reconstituted	1	
chlorthalidone oral tablet	1	
DIURIL ORAL SUSPENSION	2	
hydrochlorothiazide oral capsule	1	
hydrochlorothiazide oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
indapamide oral tablet	1	
metolazone oral tablet	1	
SODIUM DIURIL INTRAVENOUS SOLUTION RECONSTITUTED	2	
Dyslipidemics, Fibric Acid Derivatives		
ANTARA ORAL CAPSULE	2	
choline fenofibrate oral capsule delayed release	1	
fenofibrate micronized oral capsule	1	
fenofibrate oral capsule	1	
fenofibrate oral tablet	1	
fenofibric acid oral capsule delayed release	1	
FENOGLIDE ORAL TABLET	2	
gemfibrozil oral tablet	1	
LIPOFEN ORAL CAPSULE	2	
LOPID ORAL TABLET	2	
TRICOR ORAL TABLET	2	
TRILIPIX ORAL CAPSULE DELAYED RELEASE	2	
Dyslipidemics, HMG CoA Reductase Inhibitors		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
atorvastatin calcium oral tablet	1	
CRESTOR ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	2	
flolipid oral suspension	2	
fluvastatin sodium er oral tablet extended release 24 hour	1	
fluvastatin sodium oral capsule	1	
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
LIPITOR ORAL TABLET	2	
LIVALO ORAL TABLET	2	
lovastatin oral tablet	1	
PRAVACHOL ORAL TABLET	2	
pravastatin sodium oral tablet	1	
rosuvastatin calcium oral tablet	1	
simvastatin oral tablet	1	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	2	
ZYPITAMAG ORAL TABLET	2	
Dyslipidemics, Other		
cholestyramine light oral packet	1	
cholestyramine light oral powder	1	
cholestyramine oral packet	1	
cholestyramine oral powder	1	
colesevelam hcl oral packet	1	
colesevelam hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
COLESTID FLAVORED ORAL GRANULES	2	
COLESTID FLAVORED ORAL PACKET	2	
COLESTID ORAL GRANULES	2	
COLESTID ORAL PACKET	2	
COLESTID ORAL TABLET	2	
colestipol hcl oral granules	1	
colestipol hcl oral packet	1	
colestipol hcl oral tablet	1	
ezetimibe oral tablet	1	
ezetimibe-simvastatin oral tablet	1	
JUXTAPID ORAL CAPSULE	2	PA
LOVAZA ORAL CAPSULE	2	
niacin (antihyperlipidemic) oral tablet	1	
niacin er (antihyperlipidemic) oral tablet extended release	1	
NIACOR ORAL TABLET	1	
NIASPAN ORAL TABLET EXTENDED RELEASE	2	
omega-3-acid ethyl esters oral capsule	1	
PREVALITE ORAL PACKET	1	
PREVALITE ORAL POWDER	1	
QUESTRAN LIGHT ORAL POWDER	2	
QUESTRAN ORAL PACKET	2	
QUESTRAN ORAL POWDER	2	
VASCEPA ORAL CAPSULE	2	
VYTORIN ORAL TABLET	2	
WELCHOL ORAL PACKET	2	
WELCHOL ORAL TABLET	2	
ZETIA ORAL TABLET	2	
Vasodilators, Direct-acting Arterial		
CORLOPAM INTRAVENOUS SOLUTION	2	
hydralazine hcl injection solution	1	
hydralazine hcl oral tablet	1	
minoxidil oral tablet	2	
Vasodilators, Direct-acting Arterial/Venous		
BIDIL ORAL TABLET	2	
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE	2	
GONITRO SUBLINGUAL PACKET	2	
ISORDIL TITRADOSE ORAL TABLET	2	
isosorbide dinitrate er oral tablet extended release	1	

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Drug Name	Drug Tier	Requirements /Limits
isosorbide dinitrate oral tablet	1	
isosorbide mononitrate er oral tablet extended release 24 hour	1	
isosorbide mononitrate oral tablet	1	
MINITRAN TRANSDERMAL PATCH 24 HOUR	1	
NITRO-BID TRANSDERMAL OINTMENT	2	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	2	
nitroglycerin in d5w intravenous solution	1	
nitroglycerin intravenous solution	1	
nitroglycerin sublingual tablet sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	1	
NITROLINGUAL TRANSLINGUAL SOLUTION	2	
NITROPRESS INTRAVENOUS SOLUTION	2	
nitroprusside sodium intravenous solution	1	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	2	

Drug Name	Drug Tier	Requirements /Limits
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
ADDERALL ORAL TABLET	2	
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
ADZENYS ER ORAL SUSPENSION EXTENDED RELEASE	2	
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	2	
amphetamine sulfate oral tablet	1	
amphetamine-dextroamphet er oral capsule extended release 24 hour	1	
amphetamine-dextroamphetamine oral tablet	1	
DESOXYN ORAL TABLET	2	PA
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
dextroamphetamine sulfate er oral capsule extended release 24 hour	1	
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet	1	
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	2	

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Drug Name	Drug Tier	Requirements /Limits
EVEKEO ODT ORAL TABLET DISPERSIBLE	2	
EVEKEO ORAL TABLET	2	
methamphetamine hcl oral tablet	1	PA
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
PROCENTRA ORAL SOLUTION	2	
VYVANSE ORAL CAPSULE	2	
VYVANSE ORAL TABLET CHEWABLE	2	
ZENZEDI ORAL TABLET 10 MG, 5 MG	1	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	2	
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
atomoxetine hcl oral capsule	1	
clonidine hcl er oral tablet extended release 12 hour	1	
CONCERTA ORAL TABLET EXTENDED RELEASE	2	
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	2	

Drug Name	Drug Tier	Requirements /Limits
DAYTRANA TRANSDERMAL PATCH	2	
dexmethylphenidate hcl er oral capsule extended release 24 hour	1	
dexmethylphenidate hcl oral tablet	1	
FOCALIN ORAL TABLET	2	
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
guanfacine hcl er oral tablet extended release 24 hour	1	
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
METADATE ER ORAL TABLET EXTENDED RELEASE	1	
METHYLIN ORAL SOLUTION	2	
methylphenidate hcl er (cd) oral capsule extended release	1	
methylphenidate hcl er (la) oral capsule extended release 24 hour	1	
methylphenidate hcl er oral tablet extended release	1	
methylphenidate hcl er oral tablet extended release 24 hour	1	
methylphenidate hcl oral solution	1	

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Drug Name	Drug Tier	Requirements /Limits
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet chewable	1	
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE	2	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	2	
RELEXXII ORAL TABLET EXTENDED RELEASE	1	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
RITALIN ORAL TABLET	2	
STRATTERA ORAL CAPSULE	2	
Central Nervous System, Other		
AUSTEDO ORAL TABLET	2	
butalbital-apap-caffeine oral tablet	1	
butalbital-aspirin-caffeine oral capsule	1	
CAFCIT INTRAVENOUS SOLUTION	2	
caffeine citrate intravenous solution	1	
caffeine citrate oral solution	1	
clonidine hcl (analgesia) epidural solution	1	B/D
DURACLON EPIDURAL SOLUTION	2	B/D
ESGIC ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
FIORINAL ORAL CAPSULE	2	
flumazenil intravenous solution	1	
GRALISE ORAL TABLET	2	
GRALISE STARTER ORAL	2	
HORIZANT ORAL TABLET EXTENDED RELEASE	2	
INGREZZA ORAL CAPSULE	2	
INGREZZA ORAL CAPSULE THERAPY PACK	2	
NUEDEXTA ORAL CAPSULE	2	PA
PRIALT INTRATHECAL SOLUTION 500 MCG/20ML	2	B/D
RADICAVA INTRAVENOUS SOLUTION	2	
RILUTEK ORAL TABLET	2	
riluzole oral tablet	1	
tetrabenazine oral tablet	2	
TIGLUTIK ORAL SUSPENSION	2	
VANATOL LQ ORAL SOLUTION	2	
VANATOL S ORAL SOLUTION	2	
XENAZINE ORAL TABLET	2	
Fibromyalgia Agents		
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

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Drug Name	Drug Tier	Requirements /Limits
SAVELLA ORAL TABLET	2	
SAVELLA TITRATION PACK ORAL	2	
Multiple Sclerosis Agents		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
AUBAGIO ORAL TABLET	2	
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	2	
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	2	
BETASERON SUBCUTANEOUS KIT	2	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
dalfampridine er oral tablet extended release 12 hour	1	
EXTAVIA SUBCUTANEOUS KIT	2	
GILENYA ORAL CAPSULE 0.5 MG	2	
glatiramer acetate subcutaneous solution prefilled syringe	2	
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	2	

Drug Name	Drug Tier	Requirements /Limits
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	2	
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	2	
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	2	
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	2	
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	2	
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	2	
MAYZENT ORAL TABLET	2	
OCREVUS INTRAVENOUS SOLUTION	2	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
TECFIDERA ORAL	2	
TECFIDERA ORAL CAPSULE DELAYED RELEASE	2	
TYSABRI INTRAVENOUS CONCENTRATE	2	
Dental and Oral Agents		
Dental and Oral Agents		
ARESTIN DENTAL	2	
cevimeline hcl oral capsule	1	
chlorhexidine gluconate mouth/throat solution	1	
CITANEST PLAIN DENTAL INJECTION SOLUTION	2	
EVOXAC ORAL CAPSULE	2	
FLUORIDEX DAILY RENEWAL MOUTH/THROAT CONCENTRATE	1	
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	2	
lidocaine hcl mouth/throat solution	1	
lidocaine viscous mouth/throat solution 2 %	1	
ORALONE MOUTH/THROAT PASTE	1	
PAROEX MOUTH/THROAT SOLUTION	1	
PERIOGARD MOUTH/THROAT SOLUTION	1	
pilocarpine hcl oral tablet	1	
triamcinolone acetonide mouth/throat paste	1	
Dermatological Agents		
Dermatological Agents		
ABSORICA ORAL CAPSULE	2	
ACANYA EXTERNAL GEL	2	
acitretin oral capsule 10 mg, 25 mg	1	
acitretin oral capsule 17.5 mg	2	
ACZONE EXTERNAL GEL	2	
adapalene external cream	1	
adapalene external gel	1	
adapalene external pad	1	
adapalene external solution	1	

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Drug Name	Drug Tier	Requirements /Limits
adapalene-benzoyl peroxide external gel	1	
AKTIPAK EXTERNAL PACKET	2	
ALDARA EXTERNAL CREAM	2	
ALTRENO EXTERNAL LOTION	2	
ammonium lactate external cream	1	
ammonium lactate external lotion	1	
AMNESTEEM ORAL CAPSULE	1	
ATRALIN EXTERNAL GEL	2	
AVITA EXTERNAL CREAM	1	
AVITA EXTERNAL GEL	1	
azelaic acid external gel	1	
AZELEX EXTERNAL CREAM	2	
BENZACLIN EXTERNAL GEL	2	
BENZACLIN WITH PUMP EXTERNAL GEL	2	
BENZAMYCIN EXTERNAL GEL	2	
benzoyl peroxide-erythromycin external gel	1	
bp wash external liquid 7 %	1	
calcipotriene external cream	1	
calcipotriene external ointment	1	
calcipotriene external solution	1	
calcipotriene-betameth diprop external ointment	2	
CALCITRENE EXTERNAL OINTMENT	1	
calcitriol external ointment	1	
CLARAVIS ORAL CAPSULE	1	
CLINDACIN ETZ EXTERNAL KIT	1	
CLINDACIN PAC EXTERNAL KIT	1	
clindamycin phos-benzoyl perox external gel	1	
clindamycin-tretinoin external gel	1	
CONDYLOX EXTERNAL GEL	2	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
dapsone external gel	1	

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Drug Name	Drug Tier	Requirements /Limits
diclofenac sodium transdermal solution	1	
DIFFERIN EXTERNAL CREAM	2	
DIFFERIN EXTERNAL GEL 0.3 %	2	
DIFFERIN EXTERNAL LOTION	2	
DOVONEX EXTERNAL CREAM	2	
doxepin hcl external cream	1	
doxycycline oral capsule delayed release	1	
DUAC EXTERNAL GEL	2	
DUOBRII EXTERNAL LOTION	2	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	2	
ELIDEL EXTERNAL CREAM	2	
ENSTILAR EXTERNAL FOAM	2	
EPIDUO EXTERNAL GEL	2	
EPIDUO FORTE EXTERNAL GEL	2	
EUCRISA EXTERNAL OINTMENT	2	
FABIOR EXTERNAL FOAM	2	
FINACEA EXTERNAL FOAM	2	
FINACEA EXTERNAL GEL	2	

Drug Name	Drug Tier	Requirements /Limits
hydrocortisone ace-pramoxine rectal cream 1-1 %	1	
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
imiquimod external cream	1	
imiquimod pump external cream	1	
isotretinoin oral capsule	1	
ivermectin external cream	1	
LAC-HYDRIN EXTERNAL CREAM	2	
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED	2	
methoxsalen oral capsule	2	
methoxsalen rapid oral capsule	2	
METROCREAM EXTERNAL CREAM	2	
METROGEL EXTERNAL GEL	2	
METROLOTION EXTERNAL LOTION	2	
metronidazole external cream	1	
metronidazole external gel	1	
metronidazole external lotion	1	
MIRVASO EXTERNAL GEL	2	
MYORISAN ORAL CAPSULE	1	
NEUAC EXTERNAL GEL	1	

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Drug Name	Drug Tier	Requirements /Limits
NORITATE EXTERNAL CREAM	2	
ONEXTON EXTERNAL GEL	2	
ORACEA ORAL CAPSULE DELAYED RELEASE	2	
OXSORALEN ULTRA ORAL CAPSULE	2	
PENNSAID TRANSDERMAL SOLUTION	2	
PICATO EXTERNAL GEL	2	
pimecrolimus external cream	1	
podofilox external solution	1	
PROCTOFOAM HC RECTAL FOAM	2	
PROTOPIC EXTERNAL OINTMENT	2	
PRUDOXIN EXTERNAL CREAM	2	
QBREXZA EXTERNAL PAD	2	
RECTIV RECTAL OINTMENT	2	
REGRANEX EXTERNAL GEL	2	
RETIN-A EXTERNAL CREAM	2	
RETIN-A EXTERNAL GEL	2	
RETIN-A MICRO EXTERNAL GEL	2	
RETIN-A MICRO PUMP EXTERNAL GEL	2	
RHOFADE EXTERNAL CREAM	2	
RIAX EXTERNAL FOAM	2	
ROSADAN EXTERNAL CREAM	1	
ROSADAN EXTERNAL GEL	1	
SANTYL EXTERNAL OINTMENT	2	
selenium sulfide external lotion	1	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
SOOLANTRA EXTERNAL CREAM	2	
SORIATANE ORAL CAPSULE	2	
SORILUX EXTERNAL FOAM	2	
STELARA INTRAVENOUS SOLUTION	2	
STELARA SUBCUTANEOUS SOLUTION	2	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
SYNALAR (CREAM) EXTERNAL KIT	2	
SYNALAR TS EXTERNAL KIT	2	
TACLONEX EXTERNAL OINTMENT	2	
TACLONEX EXTERNAL SUSPENSION	2	
tacrolimus external ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
tazarotene external cream	1	
TAZORAC EXTERNAL CREAM	2	
TAZORAC EXTERNAL GEL	2	
TISSEEL EXTERNAL KIT	2	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
tretinoin external cream	1	
tretinoin external gel	1	
tretinoin microsphere external gel	1	
tretinoin microsphere pump external gel	1	
VECTICAL EXTERNAL OINTMENT	2	
VEREGEN EXTERNAL OINTMENT	2	
XERAC AC EXTERNAL SOLUTION	2	
ZENATANE ORAL CAPSULE	1	
ZIANA EXTERNAL GEL	2	
ZONALON EXTERNAL CREAM	2	
ZYCLARA EXTERNAL CREAM	2	
ZYCLARA PUMP EXTERNAL CREAM	2	
Electrolytes/Minerals/ Metals/Vitamins		
Electrolyte/Mineral Replacement		
calcium gluconate intravenous solution	1	
CARBAGLU ORAL TABLET	2	
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX N14G30E INTRAVENOUS SOLUTION	2	B/D
CLINIMIX N9G15E INTRAVENOUS SOLUTION	2	B/D

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Drug Name	Drug Tier	Requirements /Limits
CLINIMIX N9G20E INTRAVENOUS SOLUTION	2	B/D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	2	B/D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	2	B/D
CRYSVITA SUBCUTANEOUS SOLUTION	2	
dextrose 5%/electrolyte #48 intravenous solution	1	
dextrose in lactated ringers intravenous solution	1	
dextrose intravenous solution	1	
dextrose-nacl intravenous solution	1	
EFFER-K ORAL TABLET EFFERVESCENT 20 MEQ	2	
FLUORABON ORAL SOLUTION	2	
fluoritab oral solution	1	
fluoritab oral tablet chewable 1.1 (0.5 f) mg	1	
FLURA-DROPS ORAL SOLUTION	2	
glucose intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
IONOSOL-MB IN D5W INTRAVENOUS SOLUTION	2	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	2	
ISOLYTE-S INTRAVENOUS SOLUTION	2	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	2	
KABIVEN INTRAVENOUS EMULSION	2	B/D
kcl in d5w lactated ringers intravenous solution	1	
kcl in dextrose-nacl intravenous solution	1	
kcl-lactated ringers-d5w intravenous solution	1	
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE	1	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	1	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	1	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE	1	
KLOR-CON ORAL PACKET	1	
KLOR-CON ORAL TABLET EXTENDED RELEASE	1	
KLOR-CON SPRINKLE ORAL CAPSULE EXTENDED RELEASE	1	

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Drug Name	Drug Tier	Requirements /Limits
K-TAB ORAL TABLET EXTENDED RELEASE	2	
lactated ringers intravenous solution	1	
LMD IN NACL INTRAVENOUS SOLUTION	2	
LUDENT ORAL TABLET CHEWABLE	1	
magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%	1	
magnesium sulfate injection solution 50 %	1	
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	1	
NORMOSOL-M IN D5W INTRAVENOUS SOLUTION	2	
NORMOSOL-R IN D5W INTRAVENOUS SOLUTION	2	
NORMOSOL-R INTRAVENOUS SOLUTION	2	
NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION	2	
PERIKABIVEN INTRAVENOUS EMULSION	2	B/D
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	2	
PLASMA-LYTE A INTRAVENOUS SOLUTION	2	
potassium acetate intravenous solution	1	
potassium chloride crys er oral tablet extended release	1	
potassium chloride er oral capsule extended release	1	
potassium chloride er oral tablet extended release	1	
potassium chloride in dextrose intravenous solution	1	
potassium chloride in nacl intravenous solution	1	
potassium chloride intravenous solution 0.4 meq/ml, 10 meq/100ml, 10 meq/50ml, 2 meq/ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml	1	
potassium chloride oral packet	1	
potassium chloride oral solution	1	
potassium citrate er oral tablet extended release	1	
PROCALAMINE INTRAVENOUS SOLUTION	2	B/D
ringers intravenous solution	1	
sodium acetate intravenous solution	1	
sodium bicarbonate intravenous solution 4.2 %, 8.4 %	1	
sodium chloride injection solution	1	

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Drug Name	Drug Tier	Requirements /Limits
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	1	
sodium fluoride oral solution	1	
sodium fluoride oral tablet chewable	1	
sodium lactate intravenous solution	1	
sodium phosphates intravenous solution 45 mmole/15ml	1	
TPN ELECTROLYTES INTRAVENOUS SOLUTION	1	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	2	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	2	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	2	
Electrolyte/Mineral/Metal Modifiers		
CHEMET ORAL CAPSULE	2	
CLOVIQUE ORAL CAPSULE	1	
CUPRIMINE ORAL CAPSULE	2	
deferasirox oral tablet soluble	1	
DEPEN TITRATABS ORAL TABLET	2	
d-penamine oral tablet	2	
EXJADE ORAL TABLET SOLUBLE	2	
FERRIPROX ORAL SOLUTION	2	
FERRIPROX ORAL TABLET 500 MG	2	
JADENU ORAL TABLET	2	
JADENU SPRINKLE ORAL PACKET	2	
JYNARQUE ORAL TABLET	2	
JYNARQUE ORAL TABLET THERAPY PACK	2	
KIONEX ORAL SUSPENSION	1	
LOKELMA ORAL PACKET	2	
penicillamine oral capsule	1	
SAMSCA ORAL TABLET	2	
sodium polystyrene sulfonate oral powder	1	
sodium polystyrene sulfonate oral suspension	1	
sodium polystyrene sulfonate rectal suspension	1	
SPS ORAL SUSPENSION	1	
SYPRINE ORAL CAPSULE	2	
trientine hcl oral capsule	2	
VELTASSA ORAL PACKET	2	
Phosphate Binders		
AURYXIA ORAL TABLET	2	PA
calcium acetate (phos binder) oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
calcium acetate (phos binder) oral tablet	1	
FOSRENOL ORAL PACKET	2	
FOSRENOL ORAL TABLET CHEWABLE	2	
lanthanum carbonate oral tablet chewable	2	
PHOSLYRA ORAL SOLUTION	2	
RENAGEL ORAL TABLET	2	
RENVELA ORAL PACKET	2	
RENVELA ORAL TABLET	2	
sevelamer carbonate oral packet	2	
sevelamer carbonate oral tablet	1	
sevelamer hcl oral tablet	1	
VELPHORO ORAL TABLET CHEWABLE	2	
Vitamins		
adc/f (0.5mg/ml) oral solution	1	
CITRANATAL BLOOM ORAL TABLET	2	
CITRANATAL MEDLEY ORAL CAPSULE	2	
ENBRACE HR ORAL CAPSULE	2	
FLORIVA PLUS ORAL SOLUTION	1	
m-natal plus oral tablet	2	
multi-vit/iron/fluoride oral solution	1	
multivitamin/fluoride oral solution	1	
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	1	
multivitamin/fluoride/iron oral solution	1	
MVC-FLUORIDE ORAL TABLET CHEWABLE	1	
NEONATAL PLUS ORAL TABLET	2	
NESTABS ONE ORAL CAPSULE	2	
NESTABS ORAL TABLET	2	
POLY-VI-FLOR ORAL SUSPENSION	2	
POLY-VI-FLOR ORAL TABLET CHEWABLE	2	
POLY-VI-FLOR/IRON ORAL SUSPENSION	2	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE	2	
prenaissance oral capsule	2	
PRENATA ORAL TABLET CHEWABLE	2	
prenatal oral tablet 27-1 mg	1	
prenatal plus iron oral tablet	1	
PRIMACARE ORAL CAPSULE	2	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	2	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	2	
tl-fluorivite oral tablet chewable	2	

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Drug Name	Drug Tier	Requirements /Limits
TRICARE PRENATAL DHA ONE ORAL CAPSULE	2	
TRI-VI-FLOR ORAL SUSPENSION	2	
tri-vitamin/fluoride oral solution	1	
VITAFOL STRIPS ORAL FILM	2	
VITAFOL-OB+DHA ORAL	2	
vitamins acd-fluoride oral solution	1	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
BENTYL INTRAMUSCULAR SOLUTION	2	
CUVPOSA ORAL SOLUTION	2	
dicyclomine hcl intramuscular solution	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution	1	
dicyclomine hcl oral tablet	1	
GLYCATE ORAL TABLET	1	
glycopyrrolate injection solution	1	
glycopyrrolate oral tablet	1	
glycopyrrolate pf injection solution prefilled syringe	1	
methscopolamine bromide oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
propantheline bromide oral tablet	2	
Gastrointestinal Agents, Other		
ACTIGALL ORAL CAPSULE	2	
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	2	
amoxicill-clarithro-lansopraz oral	1	
calcium disodium versenate injection solution	2	
CHENODAL ORAL TABLET	2	
CHOLBAM ORAL CAPSULE	2	
cromolyn sodium oral concentrate	1	
diphenoxylate-atropine oral liquid	2	
diphenoxylate-atropine oral tablet	2	
GASTROCROM ORAL CONCENTRATE	2	
GATTEX SUBCUTANEOUS KIT	2	
LOMOTIL ORAL TABLET	2	
loperamide hcl oral capsule	1	
metoclopramide hcl injection solution	1	
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	1	

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Drug Name	Drug Tier	Requirements /Limits
MOTEGRITY ORAL TABLET	2	
MOTOFEN ORAL TABLET	2	
MOVANTIK ORAL TABLET	2	
MYTESI ORAL TABLET DELAYED RELEASE	2	
OCALIVA ORAL TABLET	2	
OMECLAMOX-PAK ORAL	2	
opium oral tincture	1	
paregoric oral tincture	1	
PYLERA ORAL CAPSULE	2	
REGLAN ORAL TABLET	2	
RELISTOR ORAL TABLET	2	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	2	
SYMPROIC ORAL TABLET	2	
TRULANCE ORAL TABLET	2	
URSO 250 ORAL TABLET	2	
URSO FORTE ORAL TABLET	2	
ursodiol oral capsule	1	
ursodiol oral tablet	1	
XERMELO ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
Histamine2 (H2) Receptor Antagonists		
cimetidine hcl oral solution	1	
cimetidine oral tablet	1	
famotidine intravenous solution	1	
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	1	
famotidine premixed intravenous solution	1	
nizatidine oral capsule	1	
nizatidine oral solution	1	
PEPCID ORAL TABLET	2	
ranitidine hcl injection solution	1	
ranitidine hcl oral capsule	1	
ranitidine hcl oral syrup	1	
ranitidine hcl oral tablet 150 mg, 300 mg	1	
Irritable Bowel Syndrome Agents		
alosetron hcl oral tablet	2	
AMITIZA ORAL CAPSULE	2	
LINZESS ORAL CAPSULE	2	
LOTRONEX ORAL TABLET	2	
VIBERZI ORAL TABLET	2	
Laxatives		
CLENPIQ ORAL SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
COLYTE WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED	2	
constulose oral solution	1	
enulose oral solution	1	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	1	
GAVILYTE-H ORAL KIT	1	
GAVILYTE-N WITH FLAVOR PACK ORAL SOLUTION RECONSTITUTED	1	
generlac oral solution	1	
GOLYTELY ORAL SOLUTION RECONSTITUTED	2	
KRISTALOSE ORAL PACKET	2	
lactulose encephalopathy oral solution	1	
lactulose oral packet	1	
lactulose oral solution	1	
MOVIPREP ORAL SOLUTION RECONSTITUTED	2	
NULYTELY WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED	2	
OSMOPREP ORAL TABLET	2	
peg 3350/electrolytes oral solution reconstituted	1	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	1	
peg-3350/electrolytes oral solution reconstituted	1	
PLENVU ORAL SOLUTION RECONSTITUTED	2	
SUPREP BOWEL PREP KIT ORAL SOLUTION	2	
TRILYTE ORAL SOLUTION RECONSTITUTED	1	
Protectants		
CARAFATE ORAL SUSPENSION	2	
CARAFATE ORAL TABLET	2	
CYTOTEC ORAL TABLET	2	
misoprostol oral tablet	1	
sucralfate oral tablet	1	
Proton Pump Inhibitors		
ACIPHEX ORAL TABLET DELAYED RELEASE	2	
DEXILANT ORAL CAPSULE DELAYED RELEASE	2	
esomeprazole magnesium oral capsule delayed release	1	
esomeprazole sodium intravenous solution reconstituted	1	
lansoprazole oral capsule delayed release	1	
lansoprazole oral tablet dispersible 15 mg, 30 mg	1	

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Drug Name	Drug Tier	Requirements /Limits
NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED	2	
NEXIUM ORAL CAPSULE DELAYED RELEASE	2	
NEXIUM ORAL PACKET	2	
omeprazole oral capsule delayed release	1	
omeprazole-sodium bicarbonate oral capsule	2	
omeprazole-sodium bicarbonate oral packet	2	
pantoprazole sodium intravenous solution reconstituted	1	
pantoprazole sodium oral tablet delayed release	1	
PREVACID ORAL CAPSULE DELAYED RELEASE	2	
PREVACID SOLUTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	2	
PRILOSEC ORAL PACKET	2	
PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	2	
PROTONIX ORAL PACKET	2	
PROTONIX ORAL TABLET DELAYED RELEASE	2	
rabeprazole sodium oral tablet delayed release	1	
ZEGERID ORAL CAPSULE	2	
ZEGERID ORAL PACKET	2	
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment		
ALDURAZYME INTRAVENOUS SOLUTION	2	
BUPHENYL ORAL POWDER	2	
BUPHENYL ORAL TABLET	2	
CERDELGA ORAL CAPSULE	2	
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED	2	
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
CYSTADANE ORAL POWDER	2	
CYSTAGON ORAL CAPSULE	2	
ELAPRASE INTRAVENOUS SOLUTION	2	
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
EXONDYS 51 INTRAVENOUS SOLUTION	2	
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	2	
GALAFOLD ORAL CAPSULE	2	
KANUMA INTRAVENOUS SOLUTION	2	
KUVAN ORAL PACKET	2	
KUVAN ORAL TABLET SOLUBLE	2	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	2	
miglustat oral capsule	2	
NAGLAZYME INTRAVENOUS SOLUTION	2	
nitisinone oral capsule 10 mg, 2 mg	1	
NITYR ORAL TABLET	2	
ONPATTRO INTRAVENOUS SOLUTION	2	PA
ORFADIN ORAL CAPSULE	2	
ORFADIN ORAL SUSPENSION	2	
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
PROCYSBI ORAL CAPSULE DELAYED RELEASE	2	
RAVICTI ORAL LIQUID	2	
REVCOVI INTRAMUSCULAR SOLUTION	2	
sodium phenylbutyrate oral powder	2	
sodium phenylbutyrate oral tablet	1	
STRENSIQ SUBCUTANEOUS SOLUTION	2	
SUCRAID ORAL SOLUTION	2	
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
VIMIZIM INTRAVENOUS SOLUTION	2	
VIOKACE ORAL TABLET	2	
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	2	
XIAFLEX INJECTION SOLUTION RECONSTITUTED	2	
XURIDEN ORAL PACKET	2	
ZAVESCA ORAL CAPSULE	2	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	2	

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Drug Name	Drug Tier	Requirements /Limits
Genitourinary Agents		
Antispasmodics, Urinary		
darifenacin hydrobromide er oral tablet extended release 24 hour	1	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
DETROL ORAL TABLET	2	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
ENABLEX ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
flavoxate hcl oral tablet	1	
GELNIQUE PUMP TRANSDERMAL GEL	2	
GELNIQUE TRANSDERMAL GEL	2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er oral tablet extended release 24 hour	1	
oxybutynin chloride oral syrup	1	
oxybutynin chloride oral tablet	1	
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	2	
solifenacin succinate oral tablet	1	
tolterodine tartrate er oral capsule extended release 24 hour	1	
tolterodine tartrate oral tablet	1	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
trospium chloride er oral capsule extended release 24 hour	1	
trospium chloride oral tablet	1	
VESICARE ORAL TABLET	2	
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er oral tablet extended release 24 hour	1	
AVODART ORAL CAPSULE	2	
CARDURA ORAL TABLET	2	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
CIALIS ORAL TABLET 2.5 MG, 5 MG	2	PA
doxazosin mesylate oral tablet	1	
dutasteride oral capsule	1	
dutasteride-tamsulosin hcl oral capsule	1	
finasteride oral tablet 5 mg	1	
FLOMAX ORAL CAPSULE	2	
JALYN ORAL CAPSULE	2	
PROSCAR ORAL TABLET	2	
RAPAFLO ORAL CAPSULE	2	

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Drug Name	Drug Tier	Requirements /Limits
silodosin oral capsule	1	
tadalafil oral tablet 2.5 mg, 5 mg	1	PA
tamsulosin hcl oral capsule	1	
terazosin hcl oral capsule	1	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Genitourinary Agents, Other		
acetic acid irrigation solution	1	
bethanechol chloride oral tablet	1	
ELMIRON ORAL CAPSULE	2	
LITHOSTAT ORAL TABLET	2	
PHENAZO ORAL TABLET 200 MG	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM ORAL TABLET	2	
RENACIDIN IRRIGATION SOLUTION	2	
RIMSO-50 INTRAVESICAL SOLUTION	2	
THIOLA EC ORAL TABLET DELAYED RELEASE	2	
THIOLA ORAL TABLET	2	
URECHOLINE ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ALA SCALP EXTERNAL LOTION	2	
ala-cort external cream	1	
alclometasone dipropionate external cream	1	
alclometasone dipropionate external ointment	1	
amcinonide external cream	1	
amcinonide external lotion	1	
amcinonide external ointment	1	
APEXICON E EXTERNAL CREAM	2	
BESER EXTERNAL LOTION	1	
betamethasone combo injection suspension 7 (4-3) mg/ml	2	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	1	
betamethasone dipropionate aug external lotion	1	
betamethasone dipropionate aug external ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
betamethasone dipropionate external cream	1	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	1	
betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	1	
betamethasone valerate external cream	1	
betamethasone valerate external foam	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
CAPEX EXTERNAL SHAMPOO	2	
CELESTONE SOLUSPAN INJECTION SUSPENSION	2	
clobetasol prop emollient base external cream	1	
clobetasol propionate e external cream	1	
clobetasol propionate emulsion external foam	1	
clobetasol propionate external cream	1	
clobetasol propionate external foam	1	
clobetasol propionate external gel	1	
clobetasol propionate external liquid	1	
clobetasol propionate external lotion	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
CLOBEX EXTERNAL LOTION	2	
CLOBEX EXTERNAL SHAMPOO	2	
CLOBEX SPRAY EXTERNAL LIQUID	2	
clocortolone pivalate external cream	1	
CLODAN EXTERNAL SHAMPOO	1	
CORDRAN EXTERNAL TAPE	2	
CORTEF ORAL TABLET	2	
CORTIFOAM RECTAL FOAM	2	
cortisone acetate oral tablet	1	
CUTIVATE EXTERNAL LOTION	2	
DECADRON ORAL TABLET	2	
DEPO-MEDROL INJECTION SUSPENSION	2	
DERMA-SMOOTHE/FS BODY EXTERNAL OIL	2	
DERMA-SMOOTHE/FS SCALP EXTERNAL OIL	2	

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Drug Name	Drug Tier	Requirements /Limits
DESONATE EXTERNAL GEL	1	
desonide external cream	1	
desonide external lotion	1	
desonide external ointment	1	
DESOWEN EXTERNAL CREAM	2	
desoximetasone external cream	1	
desoximetasone external gel	1	
desoximetasone external liquid	1	
desoximetasone external ointment	1	
dexamethasone (la) injection suspension	1	
dexamethasone ace & sod phos injection suspension	1	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	1	
dexamethasone sod phosphate pf injection solution	1	
dexamethasone sodium phosphate injection solution	1	
DEXPAK 10 DAY ORAL TABLET THERAPY PACK	2	

Drug Name	Drug Tier	Requirements /Limits
DEXPAK 13 DAY ORAL TABLET THERAPY PACK	2	
DEXPAK 6 DAY ORAL TABLET THERAPY PACK	2	
diflorasone diacetate external cream	1	
diflorasone diacetate external ointment	1	
DIPROLENE AF EXTERNAL CREAM	2	
DIPROLENE EXTERNAL OINTMENT	2	
DXEVO 11-DAY ORAL TABLET THERAPY PACK	2	
ELOCON EXTERNAL CREAM	2	
EMFLAZA ORAL SUSPENSION	2	
EMFLAZA ORAL TABLET	2	
fludrocortisone acetate oral tablet	1	
fluocinolone acetonide body external oil	1	
fluocinolone acetonide external cream	1	
fluocinolone acetonide external ointment	1	
fluocinolone acetonide external solution	1	
fluocinolone acetonide scalp external oil	1	
fluocinonide emulsified base external cream	1	
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	2	

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Drug Name	Drug Tier	Requirements /Limits
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
flurandrenolide external cream	1	
flurandrenolide external lotion	1	
flurandrenolide external ointment	1	
fluticasone propionate external cream	1	
fluticasone propionate external lotion	1	
fluticasone propionate external ointment	1	
halcinonide external cream	1	
halobetasol propionate external cream	1	
halobetasol propionate external ointment	1	
HALOG EXTERNAL CREAM	2	
HALOG EXTERNAL OINTMENT	2	
HIDEX 6-DAY ORAL TABLET THERAPY PACK	2	
hydrocortisone butyr lipo base external cream	1	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	1	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone oral tablet	1	
hydrocortisone valerate external cream	1	
hydrocortisone valerate external ointment	1	
IMPOYZ EXTERNAL CREAM	2	
INTRAROSA VAGINAL INSERT	2	PA
KENALOG INJECTION SUSPENSION	2	
KENALOG-80 INJECTION SUSPENSION	2	
LOCOID EXTERNAL CREAM	2	
LOCOID EXTERNAL LOTION	2	
LOCOID EXTERNAL SOLUTION	2	
LOCOID LIPOCREAM EXTERNAL CREAM	2	
LUXIQ EXTERNAL FOAM	2	
MEDROL ORAL TABLET	2	
MEDROL ORAL TABLET THERAPY PACK	2	
methylprednisolone acetate injection suspension	1	

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Drug Name	Drug Tier	Requirements /Limits
methylprednisolone oral tablet	1	
methylprednisolone oral tablet therapy pack	1	
methylprednisolone sodium succ injection solution reconstituted	1	
MILLIPRED ORAL TABLET	2	
mometasone furoate external cream	1	
mometasone furoate external ointment	1	
mometasone furoate external solution	1	
NOLIX EXTERNAL CREAM	1	
NOLIX EXTERNAL LOTION	1	
OLUX EXTERNAL FOAM	2	
OLUX-E EXTERNAL FOAM	2	
ORAPRED ODT ORAL TABLET DISPERSIBLE	2	
PANDEL EXTERNAL CREAM	2	
PEDIAPRED ORAL SOLUTION	2	
prednicarbate external cream	1	
prednicarbate external ointment	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution	1	
prednisolone sodium phosphate oral tablet dispersible	1	

Drug Name	Drug Tier	Requirements /Limits
PREDNISONE INTENSOL ORAL CONCENTRATE	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
psorcon external cream	2	
RAYOS ORAL TABLET DELAYED RELEASE	2	
SERNIVO EXTERNAL EMULSION	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED	2	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED	2	
SYNALAR EXTERNAL CREAM	2	
SYNALAR EXTERNAL OINTMENT	1	
SYNALAR EXTERNAL SOLUTION	2	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK	2	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK	2	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK	2	
TEMOVATE EXTERNAL CREAM	2	
TEMOVATE EXTERNAL OINTMENT	2	

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Drug Name	Drug Tier	Requirements /Limits
TEXACORT EXTERNAL SOLUTION	2	
TOPICORT EXTERNAL CREAM	2	
TOPICORT EXTERNAL GEL	2	
TOPICORT EXTERNAL OINTMENT	2	
TOPICORT SPRAY EXTERNAL LIQUID	2	
TOVET EXTERNAL FOAM	1	
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment	1	
triamcinolone acetonide injection suspension	1	
triamcinolone diacetate injection suspension	1	
TRIANEX EXTERNAL OINTMENT	2	
TRIDERM EXTERNAL CREAM	1	
TRIDESILON EXTERNAL CREAM	2	
UCERIS RECTAL FOAM	2	
ULTRAVATE EXTERNAL LOTION	2	
VANOS EXTERNAL CREAM	2	

Drug Name	Drug Tier	Requirements /Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
ACTHAR INJECTION GEL	2	
chorionic gonadotropin intramuscular solution reconstituted	2	PA
DDAVP INJECTION SOLUTION	2	
DDAVP NASAL SOLUTION	2	
DDAVP ORAL TABLET	2	
DDAVP RHINAL TUBE NASAL SOLUTION	2	
desmopressin ace spray refrig nasal solution	1	
desmopressin acetate injection solution	1	
desmopressin acetate oral tablet	1	
desmopressin acetate spray nasal solution	1	
EGRIFTA SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
HUMATROPE INJECTION SOLUTION RECONSTITUTED	2	
INCRELEX SUBCUTANEOUS SOLUTION	2	
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL	2	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION	2	
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	2	
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	2	
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	2	
OMNITROPE SUBCUTANEOUS SOLUTION	2	
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PA
SAIZEN INJECTION SOLUTION RECONSTITUTED	2	
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	2	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA
STIMATE NASAL SOLUTION	2	
VAPRISOL INTRAVENOUS SOLUTION	2	
VASOSTRICT INTRAVENOUS SOLUTION	2	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
carboprost tromethamine intramuscular solution	1	
CERVIDIL VAGINAL INSERT	2	
HEMABATE INTRAMUSCULAR SOLUTION	2	
KORLYM ORAL TABLET	2	
mifepristone oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
PREPIDIL VAGINAL GEL	2	
PROSTIN E2 VAGINAL SUPPOSITORY	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
ANADROL-50 ORAL TABLET	2	
oxandrolone oral tablet 10 mg	2	
oxandrolone oral tablet 2.5 mg	1	
Androgens		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	2	
ANDROGEL PUMP TRANSDERMAL GEL	2	
ANDROGEL TRANSDERMAL GEL	2	
AVEED INTRAMUSCULAR SOLUTION	2	
danazol oral capsule	1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	2	
FORTESTA TRANSDERMAL GEL	2	
methitest oral tablet	2	
methyltestosterone oral capsule	2	
NATESTO NASAL GEL	2	
TESTIM TRANSDERMAL GEL	2	
testosterone cypionate intramuscular solution	1	
testosterone enanthate intramuscular solution	1	
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	1	
testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	2	
testosterone transdermal solution	1	
VOGELXO PUMP TRANSDERMAL GEL	2	
VOGELXO TRANSDERMAL GEL	2	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
Estrogens		
ACTIVELLA ORAL TABLET	2	
AFIRMELLE ORAL TABLET	1	
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	2	
ALTAVERA ORAL TABLET	1	
alyacen 1/35 oral tablet	1	
alyacen 7/7/7 oral tablet	1	
AMABELZ ORAL TABLET	1	

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Drug Name	Drug Tier	Requirements /Limits
AMETHIA LO ORAL TABLET	1	
AMETHIA ORAL TABLET	1	
AMETHYST ORAL TABLET	1	
ANGELIQ ORAL TABLET	2	
APRI ORAL TABLET	1	
ARANELLE ORAL TABLET	1	
ASHLYNA ORAL TABLET	1	
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	
AUROVELA FE 1.5/30 ORAL TABLET	1	
AUROVELA FE 1/20 ORAL TABLET	1	
AVIANE ORAL TABLET	1	
AYUNA ORAL TABLET	1	
AZURETTE ORAL TABLET	1	
BALCOLTRA ORAL TABLET	2	
BALZIVA ORAL TABLET	1	
BEKYREE ORAL TABLET	1	
BEYAZ ORAL TABLET	2	
BIJUVA ORAL CAPSULE	2	

Drug Name	Drug Tier	Requirements /Limits
BLISOVI 24 FE ORAL TABLET	1	
BLISOVI FE 1.5/30 ORAL TABLET	1	
BLISOVI FE 1/20 ORAL TABLET	1	
briellyn oral tablet	1	
CAMRESE LO ORAL TABLET	1	
CAMRESE ORAL TABLET	1	
CAZIANT ORAL TABLET	1	
CHATEAL EQ ORAL TABLET	1	
CHATEAL ORAL TABLET	1	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	2	
CLIMARA TRANSDERMAL PATCH WEEKLY	2	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	2	
CRYSELLE-28 ORAL TABLET	1	
CYCLAFEM 1/35 ORAL TABLET	1	
CYCLAFEM 7/7/7 ORAL TABLET	1	
CYRED EQ ORAL TABLET	1	
CYRED ORAL TABLET	1	
DASETTA 1/35 ORAL TABLET	1	
DASETTA 7/7/7 ORAL TABLET	1	

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Drug Name	Drug Tier	Requirements /Limits
DAYSEE ORAL TABLET	1	
DELESTROGEN INTRAMUSCULAR OIL	2	
DELYLA ORAL TABLET	1	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	2	
desogestrel-ethinyl estradiol oral tablet	1	
DIVIGEL TRANSDERMAL GEL	2	
DOTTI TRANSDERMAL PATCH TWICE WEEKLY	1	
drospiren-eth estrad-levomefol oral tablet	1	
drospirenone-ethinyl estradiol oral tablet	1	
DUAVEE ORAL TABLET	2	
ELESTRIN TRANSDERMAL GEL	2	
ELINEST ORAL TABLET	1	
EMOQUETTE ORAL TABLET	1	
ENPRESSE-28 ORAL TABLET	1	
ENSKYCE ORAL TABLET	1	
ESTARYLLA ORAL TABLET	1	
ESTRACE ORAL TABLET	2	
ESTRACE VAGINAL CREAM	2	
estradiol oral tablet	1	
estradiol transdermal patch twice weekly	1	

Drug Name	Drug Tier	Requirements /Limits
estradiol transdermal patch weekly	1	
estradiol vaginal cream	1	
estradiol vaginal tablet	1	
estradiol valerate intramuscular oil	1	
estradiol-norethindrone acet oral tablet	1	
ESTRING VAGINAL RING	2	
ESTROSTEP FE ORAL TABLET	2	
ethynodiol diac-eth estradiol oral tablet	1	
EVAMIST TRANSDERMAL SOLUTION	2	
FALMINA ORAL TABLET	1	
FAYOSIM ORAL TABLET	1	
FEMHRT LOW DOSE ORAL TABLET	2	
FEMRING VAGINAL RING	2	
FEMYNOR ORAL TABLET	1	
FYAVOLV ORAL TABLET	1	
GENERESS FE ORAL TABLET CHEWABLE	2	
GIANVI ORAL TABLET	1	
HAILEY 1.5/30 ORAL TABLET	1	
HAILEY 24 FE ORAL TABLET	1	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	2	PA

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Drug Name	Drug Tier	Requirements /Limits
IMVEXXY STARTER PACK VAGINAL INSERT	2	PA
INTROVALE ORAL TABLET	1	
ISIBLOOM ORAL TABLET	1	
JASMIEL ORAL TABLET	1	
JINTELI ORAL TABLET	1	
JOLESSA ORAL TABLET	1	
JULEBER ORAL TABLET	1	
JUNEL 1.5/30 ORAL TABLET	1	
JUNEL 1/20 ORAL TABLET	1	
JUNEL FE 1.5/30 ORAL TABLET	1	
JUNEL FE 1/20 ORAL TABLET	1	
JUNEL FE 24 ORAL TABLET	1	
KAITLIB FE ORAL TABLET CHEWABLE	1	
KALLIGA ORAL TABLET	1	
KARIVA ORAL TABLET	1	
KELNOR 1/35 ORAL TABLET	1	
KELNOR 1/50 ORAL TABLET	1	
KURVELO ORAL TABLET	1	
LARIN 1.5/30 ORAL TABLET	1	
LARIN 1/20 ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
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	
LAYOLIS FE ORAL TABLET CHEWABLE	1	
LEENA ORAL TABLET	1	
LESSINA ORAL TABLET	1	
LEVONEST ORAL TABLET	1	
levonorgest-eth est & eth est oral tablet	1	
levonorgest-eth estrad 91-day oral tablet	1	
levonorgestrel-ethinyl estrad oral tablet	1	
levonorg-eth estrad triphasic oral tablet	1	
LEVORA 0.15/30 (28) ORAL TABLET	1	
LILLOW ORAL TABLET	1	
LO LOESTRIN FE ORAL TABLET	2	
LOESTRIN 1.5/30 (21) ORAL TABLET	2	
LOESTRIN 1/20 (21) ORAL TABLET	2	
LOESTRIN FE 1.5/30 ORAL TABLET	2	
LOESTRIN FE 1/20 ORAL TABLET	2	
LOPREEZA ORAL TABLET	1	
LORYNA ORAL TABLET	1	

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Drug Name	Drug Tier	Requirements /Limits
LOSEASONIQUE ORAL TABLET	2	
LOW-OGESTREL ORAL TABLET	1	
LO-ZUMANDIMINE ORAL TABLET	1	
LUTERA ORAL TABLET	1	
marlissa oral tablet	1	
MELODETTA 24 FE ORAL TABLET CHEWABLE	1	
MENEST ORAL TABLET	2	
MENOSTAR TRANSDERMAL PATCH WEEKLY	2	
MIBELAS 24 FE ORAL TABLET CHEWABLE	1	
MICROGESTIN 1.5/30 ORAL TABLET	1	
MICROGESTIN 1/20 ORAL TABLET	1	
MICROGESTIN FE 1.5/30 ORAL TABLET	1	
MICROGESTIN FE 1/20 ORAL TABLET	1	
MILI ORAL TABLET	1	
MIMVEY LO ORAL TABLET	1	
MIMVEY ORAL TABLET	1	
MINASTRIN 24 FE ORAL TABLET CHEWABLE	2	
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY	2	
MIRCETTE ORAL TABLET	2	
MONO-LINYAH ORAL TABLET	1	
NATAZIA ORAL TABLET	2	
NECON 0.5/35 (28) ORAL TABLET	1	
NIKKI ORAL TABLET	1	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	1	
norethin ace-eth estrad-fe oral tablet chewable	1	
norethindrone acet-ethinyl est oral tablet	1	
norethindrone-eth estradiol oral tablet	1	
norethin-eth estradiol-fe oral tablet chewable	1	
norgestimate-eth estradiol oral tablet	1	
norgestim-eth estrad triphasic oral tablet	1	
NORTREL 0.5/35 (28) ORAL TABLET	1	
NORTREL 1/35 (21) ORAL TABLET	1	
NORTREL 1/35 (28) ORAL TABLET	1	
NORTREL 7/7/7 ORAL TABLET	1	
NUVARING VAGINAL RING	2	
OCELLA ORAL TABLET	1	
ORSYTHIA ORAL TABLET	1	
ORTHO TRI-CYCLEN LO ORAL TABLET	2	
ORTHO-NOVUM 1/35 (28) ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
ORTHO-NOVUM 7/7/7 (28) ORAL TABLET	2	
PHILITH ORAL TABLET	1	
PIMTREA ORAL TABLET	1	
PIRMELLA 1/35 ORAL TABLET	1	
PIRMELLA 7/7/7 ORAL TABLET	1	
PORTIA-28 ORAL TABLET	1	
PREFEST ORAL TABLET	2	
PREMARIN INJECTION SOLUTION RECONSTITUTED	2	
PREMARIN ORAL TABLET	2	
PREMARIN VAGINAL CREAM	2	
PREMPHASE ORAL TABLET	2	
PREMPRO ORAL TABLET	2	
PREVIFEM ORAL TABLET	1	
QUARTETTE ORAL TABLET	2	
RECLIPSEN ORAL TABLET	1	
RIVELSA ORAL TABLET	1	
SAFYRAL ORAL TABLET	2	
SEASONIQUE ORAL TABLET	2	
SETLAKIN ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
SIMLIYA ORAL TABLET	1	
SIMPESSE ORAL TABLET	1	
SPRINTEC 28 ORAL TABLET	1	
SRONYX ORAL TABLET	1	
SYEDA ORAL TABLET	1	
TARINA 24 FE ORAL TABLET	1	
TARINA FE 1/20 EQ ORAL TABLET	1	
TARINA FE 1/20 ORAL TABLET	1	
TAYTULLA ORAL CAPSULE	2	
TILIA FE ORAL TABLET	1	
TRI FEMYNOR ORAL TABLET	1	
TRI-ESTARYLLA ORAL TABLET	1	
TRI-LEGEST FE ORAL TABLET	1	
TRI-LINYAH ORAL TABLET	1	
TRI-LO-ESTARYLLA ORAL TABLET	1	
TRI-LO-MARZIA ORAL TABLET	1	
TRI-LO-MILI ORAL TABLET	1	
TRI-LO-SPRINTEC ORAL TABLET	1	
TRI-MILI ORAL TABLET	1	
TRI-PREVIFEM ORAL TABLET	1	
TRI-SPRINTEC ORAL TABLET	1	

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Drug Name	Drug Tier	Requirements /Limits
TRIVORA (28) ORAL TABLET	1	
TRI-VYLIBRA LO ORAL TABLET	1	
TRI-VYLIBRA ORAL TABLET	1	
TYDEMY ORAL TABLET	1	
VAGIFEM VAGINAL TABLET	2	
VELIVET ORAL TABLET	1	
VIENVA ORAL TABLET	1	
viorele oral tablet	1	
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY	2	
VYFEMLA ORAL TABLET	1	
VYLIBRA ORAL TABLET	1	
WERA ORAL TABLET	1	
WYMZYA FE ORAL TABLET CHEWABLE	1	
XULANE TRANSDERMAL PATCH WEEKLY	1	
YASMIN 28 ORAL TABLET	2	
YAZ ORAL TABLET	2	
YUVAFEM VAGINAL TABLET	1	
ZARAH ORAL TABLET	1	
ZOVIA 1/35E (28) ORAL TABLET	1	
ZUMANDIMINE ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
Progesterone Agonists/Antagonists		
ELLA ORAL TABLET	2	
MAKENA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA
Progestins		
AYGESTIN ORAL TABLET	2	
CAMILA ORAL TABLET	1	
CRINONE VAGINAL GEL	2	PA
DEBLITANE ORAL TABLET	1	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	2	QL (5 ML per 365 days)
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	2	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	QL (5 ML per 365 days)
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	2	QL (3.25 ML per 365 days)
ERRIN ORAL TABLET	1	
HEATHER ORAL TABLET	1	
hydroxyprogesterone caproate intramuscular oil	1	
hydroxyprogesterone caproate intramuscular solution	2	

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Drug Name	Drug Tier	Requirements /Limits
INCASSIA ORAL TABLET	1	
JENCYCLA ORAL TABLET	1	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	2	
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	2	
LYZA ORAL TABLET	1	
MAKENA INTRAMUSCULAR OIL	2	
medroxyprogesterone acetate intramuscular suspension	1	QL (5 ML per 365 days)
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	QL (5 ML per 365 days)
medroxyprogesterone acetate oral tablet	1	
megestrol acetate oral suspension	1	
megestrol acetate oral tablet	1	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	2	
NEXPLANON SUBCUTANEOUS IMPLANT	2	
NORA-BE ORAL TABLET	1	
norethindrone acetate oral tablet	1	
norethindrone oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
NORLYDA ORAL TABLET	1	
NORLYROC ORAL TABLET	1	
ORTHO MICRONOR ORAL TABLET	2	
progesterone intramuscular oil	1	
progesterone micronized oral capsule	1	
PROMETRIUM ORAL CAPSULE	2	
PROVERA ORAL TABLET	2	
SHAROBEL ORAL TABLET	1	
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	2	
SLYND ORAL TABLET	2	
TULANA ORAL TABLET	1	
Selective Estrogen Receptor Modifying Agents		
clomiphene citrate oral tablet	1	PA
EVISTA ORAL TABLET	2	
OSPHENA ORAL TABLET	2	PA
raloxifene hcl oral tablet	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
ARMOUR THYROID ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
CYTOMEL ORAL TABLET	2	
LEVO-T ORAL TABLET	2	
levothyroxine sodium intravenous solution	2	
levothyroxine sodium intravenous solution reconstituted	2	
levothyroxine sodium oral tablet	1	
levothyroxine-liothyronine oral tablet 30 mg, 60 mg, 90 mg	1	
LEVOXYL ORAL TABLET	2	
liothyronine sodium intravenous solution	1	
liothyronine sodium oral tablet	1	
np thyroid oral tablet	1	
SYNTHROID ORAL TABLET	2	
thyroid oral tablet 120 mg, 15 mg	1	
TIROSINT ORAL CAPSULE	2	
TIROSINT-SOL ORAL SOLUTION	2	
TRIOSTAT INTRAVENOUS SOLUTION	2	
UNITHROID ORAL TABLET	2	
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
cabergoline oral tablet	1	
ELIGARD SUBCUTANEOUS KIT	2	
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
leuprolide acetate injection kit	2	
LUPANETA PACK COMBINATION KIT	2	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	2	
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	2	
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	2	
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	2	
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT	2	
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT	2	
octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml	1	
octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml	2	

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Drug Name	Drug Tier	Requirements /Limits
ORILISSA ORAL TABLET	2	
SANDOSTATIN INJECTION SOLUTION	2	
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	2	
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	2	
SIGNIFOR SUBCUTANEOUS SOLUTION	2	
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	2	
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
SUPPRELIN LA SUBCUTANEOUS KIT	2	
SYNAREL NASAL SOLUTION	2	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	2	
VANTAS SUBCUTANEOUS KIT	2	
ZOLADEX SUBCUTANEOUS IMPLANT	2	

Drug Name	Drug Tier	Requirements /Limits
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
methimazole oral tablet	1	
propylthiouracil oral tablet	1	
TAPAZOLE ORAL TABLET	2	
Immunological Agents		
Angioedema Agents		
BERINERT INTRAVENOUS KIT	2	
FIRAZYR SUBCUTANEOUS SOLUTION	2	
icatibant acetate subcutaneous solution	1	
KALBITOR SUBCUTANEOUS SOLUTION	2	
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	2	
TAKHZYRO SUBCUTANEOUS SOLUTION	2	
Immune Suppressants		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	B/D
AZASAN ORAL TABLET	2	B/D
azathioprine oral tablet	1	B/D
azathioprine sodium injection solution reconstituted	1	B/D

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Drug Name	Drug Tier	Requirements /Limits
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	2	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED	2	B/D
CELLCEPT ORAL CAPSULE	2	B/D
CELLCEPT ORAL SUSPENSION RECONSTITUTED	2	B/D
CELLCEPT ORAL TABLET	2	B/D
CIMZIA PREFILLED SUBCUTANEOUS KIT	2	
CIMZIA STARTER KIT SUBCUTANEOUS KIT	2	
CIMZIA SUBCUTANEOUS KIT	2	
cyclosporine intravenous solution	1	
cyclosporine modified oral capsule	1	B/D
cyclosporine modified oral solution	1	B/D
cyclosporine oral capsule	1	B/D
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	2	
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	B/D
GENGRAF ORAL CAPSULE	1	B/D
GENGRAF ORAL SOLUTION	1	B/D
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	2	
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	2	
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	2	
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	2	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
IMURAN ORAL TABLET	2	B/D
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	2	
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
methotrexate oral tablet	1	
methotrexate sodium (pf) injection solution	1	
methotrexate sodium injection solution	1	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral tablet	1	
mycophenolate mofetil hcl intravenous solution reconstituted	1	B/D
mycophenolate mofetil oral capsule	1	B/D
mycophenolate mofetil oral suspension reconstituted	2	B/D
mycophenolate mofetil oral tablet	1	B/D
mycophenolate sodium oral tablet delayed release	1	B/D
MYFORTIC ORAL TABLET DELAYED RELEASE	2	B/D
NEORAL ORAL CAPSULE	2	B/D
NEORAL ORAL SOLUTION	2	B/D

Drug Name	Drug Tier	Requirements /Limits
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	2	
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	2	
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
PROGRAF INTRAVENOUS SOLUTION	2	
PROGRAF ORAL CAPSULE	2	B/D
PROGRAF ORAL PACKET	2	B/D
RAPAMUNE ORAL SOLUTION	2	B/D
RAPAMUNE ORAL TABLET	2	B/D
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	2	
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
SANDIMMUNE INTRAVENOUS SOLUTION	2	
SANDIMMUNE ORAL CAPSULE	2	B/D
SANDIMMUNE ORAL SOLUTION	2	B/D
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
sirolimus oral solution	1	B/D
sirolimus oral tablet 0.5 mg, 1 mg	1	B/D
sirolimus oral tablet 2 mg	2	B/D
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	2	
tacrolimus oral capsule	1	B/D
TREXALL ORAL TABLET	2	
XATMEP ORAL SOLUTION	2	
ZORTRESS ORAL TABLET	2	PA
Immunizing Agents, Passive		
ATGAM INTRAVENOUS INJECTABLE	2	
BIVIGAM INTRAVENOUS SOLUTION	2	PA
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED	2	PA
CUTAQUIG SUBCUTANEOUS SOLUTION	2	PA
CUVITRU SUBCUTANEOUS SOLUTION	2	PA
CYTOGAM INTRAVENOUS INJECTABLE	2	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	2	PA
GAMASTAN INTRAMUSCULAR INJECTABLE	2	PA
GAMASTAN S/D INTRAMUSCULAR INJECTABLE	2	PA
GAMMAGARD INJECTION SOLUTION	2	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	2	PA
GAMMAKED INJECTION SOLUTION	2	PA
GAMMAPLEX INTRAVENOUS SOLUTION	2	PA
GAMUNEX-C INJECTION SOLUTION	2	PA
HEPAGAM B INJECTION SOLUTION	2	B/D

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Drug Name	Drug Tier	Requirements /Limits
HIZENTRA SUBCUTANEOUS SOLUTION	2	PA
HYPERHEP B S/D INTRAMUSCULAR SOLUTION	2	B/D
HYPERRAB INJECTION SOLUTION	2	B/D
HYPERRAB S/D INJECTION SOLUTION	2	B/D
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	
HYQVIA SUBCUTANEOUS KIT	2	PA
IMOGAM RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	2	B/D
kedrab injection solution	2	B/D
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	
NABI-HB INTRAMUSCULAR SOLUTION	2	B/D
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 25 GM/500ML, 5 GM/100ML, 5 GM/50ML	2	PA
PANZYGA INTRAVENOUS SOLUTION	2	PA
PRIVIGEN INTRAVENOUS SOLUTION	2	PA
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	2	
SYNAGIS INTRAMUSCULAR SOLUTION	2	
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
WINRHO SDF INJECTION SOLUTION	2	
Immunomodulators		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
ACTEMRA INTRAVENOUS SOLUTION	2	
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
ACTIMMUNE SUBCUTANEOUS SOLUTION	2	
ARAVA ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	2	
ILARIS SUBCUTANEOUS SOLUTION	2	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
leflunomide oral tablet	1	
LEMTRADA INTRAVENOUS SOLUTION	2	
OLUMIANT ORAL TABLET	2	
OTEZLA ORAL TABLET	2	
OTEZLA ORAL TABLET THERAPY PACK	2	
RIDAURA ORAL CAPSULE	2	
SIMPONI ARIA INTRAVENOUS SOLUTION	2	
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	2	
XELJANZ ORAL TABLET	2	
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
ZINPLAVA INTRAVENOUS SOLUTION	2	
Vaccines		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	2	
bcg vaccine injection injectable	2	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	2	
DAPTACEL INTRAMUSCULAR SUSPENSION	2	
diphtheria-tetanus toxoids dt intramuscular suspension	1	
ENGERIX-B INJECTION SUSPENSION	2	B/D
GARDASIL 9 INTRAMUSCULAR SUSPENSION	2	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	2	
HIBERIX INJECTION SOLUTION RECONSTITUTED	2	
IMOVAX RABIES INTRAMUSCULAR INJECTABLE	2	B/D
INFANRIX INTRAMUSCULAR SUSPENSION	2	
IPOL INJECTION INJECTABLE	2	
IXIARO INTRAMUSCULAR SUSPENSION	2	
KINRIX INTRAMUSCULAR SUSPENSION	2	
MENACTRA INTRAMUSCULAR INJECTABLE	2	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
M-M-R II SUBCUTANEOUS INJECTABLE	2	
PEDIARIX INTRAMUSCULAR SUSPENSION	2	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	2	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	2	
QUADRACEL INTRAMUSCULAR SUSPENSION	2	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	B/D
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	2	B/D
ROTARIX ORAL SUSPENSION RECONSTITUTED	2	
ROTATEQ ORAL SOLUTION	2	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
stamaril injection suspension reconstituted	2	
TDVAX INTRAMUSCULAR SUSPENSION	2	
TENIVAC INTRAMUSCULAR INJECTABLE	2	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	2	
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	2	
VARIVAX SUBCUTANEOUS INJECTABLE	2	
VARIZIG INTRAMUSCULAR SOLUTION	2	
YF-VAX SUBCUTANEOUS INJECTABLE	2	
ZOSTAVAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	2	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
ASACOL HD ORAL TABLET DELAYED RELEASE	2	
balsalazide disodium oral capsule	1	
CANASA RECTAL SUPPOSITORY	2	
COLAZAL ORAL CAPSULE	2	
DELZICOL ORAL CAPSULE DELAYED RELEASE	2	
DIPENTUM ORAL CAPSULE	2	
LIALDA ORAL TABLET DELAYED RELEASE	2	
mesalamine oral capsule delayed release	1	
mesalamine oral tablet delayed release	1	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	
mesalamine-cleanser rectal kit	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE	2	
ROWASA RECTAL KIT	2	
SFROWASA RECTAL ENEMA	2	
Glucocorticoids		
budesonide er oral tablet extended release 24 hour	1	
budesonide oral capsule delayed release particles	1	
COLOCORT RECTAL ENEMA	1	
CORTENEMA RECTAL ENEMA	2	
ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
hydrocortisone rectal enema	1	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
Sulfonamides		
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	2	

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Drug Name	Drug Tier	Requirements /Limits
AZULFIDINE ORAL TABLET	2	
sulfasalazine oral tablet	1	
sulfasalazine oral tablet delayed release	1	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
ACTONEL ORAL TABLET	2	
alendronate sodium oral solution	1	
alendronate sodium oral tablet 10 mg, 35 mg, 40 mg, 70 mg	1	
ATELVIA ORAL TABLET DELAYED RELEASE	2	
BINOSTO ORAL TABLET EFFERVESCENT	2	
BONIVA INTRAVENOUS SOLUTION	2	
BONIVA ORAL TABLET	2	
calcitonin (salmon) nasal solution	1	
calcitriol intravenous solution	1	
calcitriol oral capsule	1	
calcitriol oral solution	1	
cinacalcet hcl oral tablet	1	
doxercalciferol intravenous solution	1	
doxercalciferol oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
FORTEO SUBCUTANEOUS SOLUTION	2	
FOSAMAX ORAL TABLET	2	
FOSAMAX PLUS D ORAL TABLET	2	
HECTOROL INTRAVENOUS SOLUTION	2	
ibandronate sodium intravenous solution	1	
ibandronate sodium oral tablet	1	
MIACALCIN INJECTION SOLUTION	2	
NATPARA SUBCUTANEOUS CARTRIDGE	2	
pamidronate disodium intravenous solution	1	
pamidronate disodium intravenous solution reconstituted	1	
paricalcitol intravenous solution	1	
paricalcitol oral capsule	1	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
RECLAST INTRAVENOUS SOLUTION	2	
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	1	

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Drug Name	Drug Tier	Requirements /Limits
risedronate sodium oral tablet delayed release	1	
ROCALTROL ORAL CAPSULE	2	
ROCALTROL ORAL SOLUTION	2	
SENSIPAR ORAL TABLET	2	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
ZEMPLAR INTRAVENOUS SOLUTION	2	
ZEMPLAR ORAL CAPSULE	2	
zoledronic acid intravenous concentrate	1	
zoledronic acid intravenous solution	1	
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
1st tier unifine pentips 32g x 6 mm , 33g x 4 mm	2	
1st tier unifine pentips plus 33g x 4 mm	2	
ACETADOTE INTRAVENOUS SOLUTION	2	
acetylcysteine intravenous solution	1	
AKLIEF EXTERNAL CREAM	2	
alcohol pads pad	1	
alcohol prep pad	2	

Drug Name	Drug Tier	Requirements /Limits
AMINOSYN II INTRAVENOUS SOLUTION	2	B/D
AMINOSYN-PF INTRAVENOUS SOLUTION	2	B/D
AMMONUL INTRAVENOUS SOLUTION	2	
ANNOVERA VAGINAL RING	2	
ASSURE ID SAFETY PEN NEEDLES	2	
BAQSIMI ONE PACK NASAL POWDER	2	
BAQSIMI TWO PACK NASAL POWDER	2	
BD AUTOSHIELD DUO	2	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML	2	
BD INSULIN SYRINGE 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	2	
BD INSULIN SYRINGE U/F	2	
BD INSULIN SYRINGE U/F 1/2UNIT	2	
BD INSULIN SYRINGE U-500	2	
BD PEN NEEDLE MICRO U/F	2	
BD PEN NEEDLE MINI U/F	2	
BD PEN NEEDLE NANO 2ND GEN	2	
BD PEN NEEDLE NANO U/F	2	
BD PEN NEEDLE ORIGINAL U/F	2	

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Drug Name	Drug Tier	Requirements /Limits
BD PEN NEEDLE SHORT U/F	2	
BD VEO INSULIN SYRINGE U/F	2	
BEOVU INTRAVITREAL SOLUTION	2	
CAREFINE PEN NEEDLES 29G X 12MM , 32G X 4 MM	2	
CARETOUCH ALCOHOL PREP PAD	1	
CARETOUCH PEN NEEDLES 31G X 5 MM	2	
CARNITOR INTRAVENOUS SOLUTION	2	
CARNITOR ORAL SOLUTION	2	
CARNITOR ORAL TABLET	2	
CARNITOR SF ORAL SOLUTION	2	
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	2	
CLICKFINE PEN NEEDLES 31G X 5 MM	2	
clickfine pen needles 31g x 8 mm , 32g x 4 mm	2	
CLINISOL SF INTRAVENOUS SOLUTION	1	B/D
CLINOLIPID INTRAVENOUS EMULSION	2	B/D
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	2	
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	
COMFORT EZ MICRO PEN NEEDLES	2	
COMFORT EZ PEN NEEDLES 31G X 5 MM , 31G X 6 MM	2	
COMFORT EZ SHORT PEN NEEDLES	2	
CORLANOR ORAL SOLUTION	2	
CURITY GAUZE PAD 2"X2"	2	
deferoxamine mesylate injection solution reconstituted	1	B/D
DESFERAL INJECTION SOLUTION RECONSTITUTED	2	B/D
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE	2	
DROPLET INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML	2	
dropsafe safety pen needles	2	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
easy comfort alcohol pads pad	1	
easy comfort insulin syringe 32g x 5/16" 0.5 ml, 32g x 5/16" 1 ml	2	

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Drug Name	Drug Tier	Requirements /Limits
easy comfort pen needles 33g x 4 mm , 33g x 5 mm , 33g x 6 mm	2	
EASY TOUCH SAFETY PEN NEEDLES	2	
ENDARI ORAL PACKET	2	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	2	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
FERRIPROX ORAL TABLET 1000 MG	2	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	2	
FIRDAPSE ORAL TABLET	2	
fomepizole intravenous solution	1	
FREAMINE HBC INTRAVENOUS SOLUTION	2	B/D
FREAMINE III INTRAVENOUS SOLUTION	2	B/D
GLUCOPRO INSULIN SYRINGE	2	
goodsense clickfine pen needle	2	
GOODSENSE PEN NEEDLE PENFINE	2	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
HARVONI ORAL TABLET 45-200 MG	2	
healthwise insulin syr/needle	2	
healthwise micron pen needles	2	
healthwise short pen needles	2	
heparin sodium (porcine) injection solution prefilled syringe	1	
heparin sodium (porcine) pf injection solution 5000 unit/ml	1	
HEPATAMINE INTRAVENOUS SOLUTION	2	B/D
INPEN 100-BLUE-LILLY DEVICE	2	
INPEN 100-BLUE-NOVO DEVICE	2	
INPEN 100-GRAY-LILLY DEVICE	2	
INPEN 100-GREY-NOVO DEVICE	2	
INPEN 100-PINK-LILLY DEVICE	2	
INPEN 100-PINK-NOVO DEVICE	2	
INREBIC ORAL CAPSULE	2	
INTRALIPID INTRAVENOUS EMULSION	2	B/D

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Drug Name	Drug Tier	Requirements /Limits
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	2	
KATERZIA ORAL SUSPENSION	2	
KEVEYIS ORAL TABLET	2	
lactated ringers irrigation solution	1	
LEADER UNIFINE PENTIPS PLUS 31G X 8 MM	2	
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
LITETOUCH INSULIN SYRINGE 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	
LITETOUCH PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	
MAXICOMFORT II PEN NEEDLE	2	
MAXI-COMFORT INSULIN SYRINGE	2	
MAXI-COMFORT SAFETY PEN NEEDLE	2	
MAXICOMFORT SYR 27G X 1/2"	2	
METHERGINE ORAL TABLET	2	
methylergonovine maleate injection solution	1	
methylergonovine maleate oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
METOPIRONE ORAL CAPSULE	2	
MVASI INTRAVENOUS SOLUTION	2	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
MYXREDLIN INTRAVENOUS SOLUTION	2	
NAYZILAM NASAL SOLUTION	2	
NEPHRAMINE INTRAVENOUS SOLUTION	2	B/D
NOURIANZ ORAL TABLET	2	
NOVOFINE	2	
NOVOFINE AUTOCOVER	2	
NOVOFINE PLUS	2	
NOVOPEN ECHO DEVICE	2	
NOVOTWIST	2	
NUBEQA ORAL TABLET	2	
nutrilipid intravenous emulsion	2	B/D
OCTAGAM INTRAVENOUS SOLUTION 30 GM/300ML	2	
OMEGAVEN INTRAVENOUS EMULSION	2	B/D
OMNIPOD 5 PACK	2	
OMNIPOD DASH 5 PACK	2	
OMNIPOD STARTER KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	2	
oxytocin injection solution	1	
pen needles 1/2"	2	
pen needles 30g x 8 mm , 31g x 6 mm	2	
pen needles 5/16" 31g x 8 mm	2	
phenobarbital sodium injection solution	1	
PHYSIOLYTE IRRIGATION SOLUTION	2	
PITOCIN INJECTION SOLUTION	2	
PLENAMINE INTRAVENOUS SOLUTION	1	B/D
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 0.3 ML	2	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML	2	
preferred plus insulin syringe 28g x 1/2" 0.5 ml	2	
PREMASOL INTRAVENOUS SOLUTION	2	B/D
PREVENT SAFETY PEN NEEDLES	2	
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
PROSOL INTRAVENOUS SOLUTION	2	B/D
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	2	
ra insulin syringe 30g x 5/16" 1 ml	2	
ra pen needles 31g x 5 mm	2	
RELAFEN DS ORAL TABLET	2	
RELI-ON INSULIN SYRINGE 29G 0.3 ML	2	
RELION INSULIN SYRINGE 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML	2	
ringers irrigation irrigation solution	1	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
ROZLYTREK ORAL CAPSULE	2	
RUZURGI ORAL TABLET	2	
RYBELSUS ORAL TABLET	2	
saps health care alcohol prep pad	1	
SECURESAFE INSULIN SYRINGE	2	
SMOFLIPID INTRAVENOUS EMULSION	2	B/D
sod benz-sod phenylacet intravenous solution	2	
sodium chloride irrigation solution	1	
SOVALDI ORAL TABLET 200 MG	2	

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Drug Name	Drug Tier	Requirements /Limits
SPINRAZA INTRATHECAL SOLUTION	2	PA
sterile water for irrigation irrigation solution	1	
SYNTHAMIN 17 INTRAVENOUS SOLUTION	2	B/D
TIS-U-SOL IRRIGATION SOLUTION	1	
TOSYMRA NASAL SOLUTION	2	
TRAVASOL INTRAVENOUS SOLUTION	2	B/D
TRIKAFTA ORAL TABLET THERAPY PACK	2	
TROPHAMINE INTRAVENOUS SOLUTION	2	B/D
true comfort alcohol prep pads pad	1	
TRUEPLUS 5-BEVEL PEN NEEDLES	2	
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML	2	
TRUEPLUS PEN NEEDLES 31G X 8 MM	2	
TURALIO ORAL CAPSULE	2	
ULTICARE MICRO PEN NEEDLES	2	
ULTICARE MINI PEN NEEDLES 32G X 6 MM	2	
ultracare insulin syringe	2	
ultracare pen needles	2	
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 1 ML	2	
ULTRA-THIN II MINI PEN NEEDLE	2	
ULTRA-THIN II PEN NEEDLE SHORT	2	
ULTRA-THIN II PEN NEEDLES	2	
UNIFINE PENTIPS 30G X 5 MM , 31G X 5 MM , 32G X 6 MM , 33G X 4 MM	2	
UNIFINE PENTIPS PLUS 30G X 5 MM	2	
V-GO 20 KIT	2	
V-GO 30 KIT	2	
V-GO 40 KIT	2	
VISTOGARD ORAL PACKET	2	
VOLUVEN INTRAVENOUS SOLUTION	2	
VYNDAMAX ORAL CAPSULE	2	
WAKIX ORAL TABLET	2	
XENICAL ORAL CAPSULE	2	PA
ZELNORM ORAL TABLET	2	
Ophthalmic Agents		
Ophthalmic Prostaglandin and Prostamide Analogs		
bimatoprost ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits
latanoprost ophthalmic solution	1	
LUMIGAN OPHTHALMIC SOLUTION	2	
TRAVATAN Z OPHTHALMIC SOLUTION	2	
VYZULTA OPHTHALMIC SOLUTION	2	
XALATAN OPHTHALMIC SOLUTION	2	
XELPROS OPHTHALMIC EMULSION	2	
ZIOPTAN OPHTHALMIC SOLUTION	2	
Ophthalmic Agents, Other		
ak-poly-bac ophthalmic ointment	1	
AKTEN OPHTHALMIC GEL	2	
ALCAINE OPHTHALMIC SOLUTION	2	
atropine sulfate ophthalmic solution	1	
bacitracin-polymyxin b ophthalmic ointment	1	
CEQUA OPHTHALMIC SOLUTION	2	
CYCLOGYL OPHTHALMIC SOLUTION	2	
cyclopentolate hcl ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
CYSTARAN OPHTHALMIC SOLUTION	2	
EYLEA INTRAVITREAL SOLUTION	2	
ISOPTO ATROPINE OPHTHALMIC SOLUTION	1	
LACRISERT OPHTHALMIC INSERT	2	
LUCENTIS INTRAVITREAL SOLUTION	2	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	2	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	1	
neomycin-polymyxin-gramicidin ophthalmic solution	1	
NEO-POLYCIN OPHTHALMIC OINTMENT	1	
OXERVATE OPHTHALMIC SOLUTION	2	
POLYCIN OPHTHALMIC OINTMENT	1	
polymyxin b-trimethoprim ophthalmic solution	1	
POLYTRIM OPHTHALMIC SOLUTION	2	
proparacaine hcl ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	2	
RESTASIS OPHTHALMIC EMULSION	2	
RHOPRESSA OPHTHALMIC SOLUTION	2	
tetracaine hcl ophthalmic solution	1	
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED	2	
XIIDRA OPHTHALMIC SOLUTION	2	
Ophthalmic Anti-allergy Agents		
ALOCRIL OPHTHALMIC SOLUTION	2	
azelastine hcl ophthalmic solution	1	
BEPREVE OPHTHALMIC SOLUTION	2	
cromolyn sodium ophthalmic solution	1	
epinastine hcl ophthalmic solution	1	
LASTACAFT OPHTHALMIC SOLUTION	2	
olopatadine hcl ophthalmic solution	1	
PATADAY OPHTHALMIC SOLUTION	2	
PATANOL OPHTHALMIC SOLUTION	2	
PAZEO OPHTHALMIC SOLUTION	2	
phenylephrine hcl ophthalmic solution	1	
Ophthalmic Antiglaucoma Agents		
acetazolamide er oral capsule extended release 12 hour	1	
acetazolamide oral tablet	1	
ALPHAGAN P OPHTHALMIC SOLUTION	2	
apraclonidine hcl ophthalmic solution	1	
AZOPT OPHTHALMIC SUSPENSION	2	
betaxolol hcl ophthalmic solution	1	
BETIMOL OPHTHALMIC SOLUTION	2	
BETOPTIC-S OPHTHALMIC SUSPENSION	2	
brimonidine tartrate ophthalmic solution	1	
carteolol hcl ophthalmic solution	1	
COMBIGAN OPHTHALMIC SOLUTION	2	
COSOPT OPHTHALMIC SOLUTION	2	
COSOPT PF OPHTHALMIC SOLUTION 22.3-6.8 MG/ML	2	
dorzolamide hcl ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits
dorzolamide hcl-timolol mal ophthalmic solution	1	
dorzolamide hcl-timolol mal pf ophthalmic solution 22.3-6.8 mg/ml	1	
IOPIDINE OPHTHALMIC SOLUTION	2	
ISOPTO CARPINE OPHTHALMIC SOLUTION	2	
ISTALOL OPHTHALMIC SOLUTION	2	
levobunolol hcl ophthalmic solution	1	
methazolamide oral tablet	1	
MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED	2	
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	2	
pilocarpine hcl ophthalmic solution	1	
ROCKLATAN OPHTHALMIC SOLUTION	2	
SIMBRINZA OPHTHALMIC SUSPENSION	2	
timolol maleate ophthalmic gel forming solution	1	
timolol maleate ophthalmic solution	1	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	2	
TIMOPTIC OPHTHALMIC SOLUTION	2	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION	2	
TRUSOPT OPHTHALMIC SOLUTION	2	
Ophthalmic Anti-inflammatories		
ACULAR LS OPHTHALMIC SOLUTION	2	
ACULAR OPHTHALMIC SOLUTION	2	
ALOMIDE OPHTHALMIC SOLUTION	2	
ALREX OPHTHALMIC SUSPENSION	2	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	1	
BLEPHAMIDE OPHTHALMIC SUSPENSION	2	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	2	
bromfenac sodium (once-daily) ophthalmic solution	1	
BROMSITE OPHTHALMIC SOLUTION	2	
dexamethasone sodium phosphate ophthalmic solution	1	
diclofenac sodium ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits
DUREZOL OPHTHALMIC EMULSION	2	
FLAREX OPHTHALMIC SUSPENSION	2	
fluorometholone ophthalmic suspension	1	
flurbiprofen sodium ophthalmic solution	1	
FML FORTE OPHTHALMIC SUSPENSION	2	
FML LIQUIFILM OPHTHALMIC SUSPENSION	2	
FML OPHTHALMIC OINTMENT	2	
ILEVRO OPHTHALMIC SUSPENSION	2	
INVELTYS OPHTHALMIC SUSPENSION	2	
ketorolac tromethamine ophthalmic solution	1	
LOTEMAX OPHTHALMIC GEL	2	
LOTEMAX OPHTHALMIC OINTMENT	2	
LOTEMAX OPHTHALMIC SUSPENSION	2	
LOTEMAX SM OPHTHALMIC GEL	2	
loteprednol etabonate ophthalmic suspension	1	
MAXIDEX OPHTHALMIC SUSPENSION	2	

Drug Name	Drug Tier	Requirements /Limits
MAXITROL OPHTHALMIC OINTMENT	2	
MAXITROL OPHTHALMIC SUSPENSION	2	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
neomycin-polymyxin-hc ophthalmic suspension	1	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	1	
NEVANAC OPHTHALMIC SUSPENSION	2	
PRED FORTE OPHTHALMIC SUSPENSION	2	
PRED MILD OPHTHALMIC SUSPENSION	2	
PRED-G OPHTHALMIC SUSPENSION	2	
PRED-G S.O.P. OPHTHALMIC OINTMENT	2	
prednisolone acetate ophthalmic suspension	1	
prednisolone sodium phosphate ophthalmic solution	1	
PROLENSA OPHTHALMIC SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
sulfacetamide-prednisolone ophthalmic solution	1	
TOBRADEX OPHTHALMIC OINTMENT	2	
TOBRADEX OPHTHALMIC SUSPENSION	2	
TOBRADEX ST OPHTHALMIC SUSPENSION	2	
tobramycin-dexamethasone ophthalmic suspension	1	
TRIESENCE INTRAOCULAR SUSPENSION	2	
ZYLET OPHTHALMIC SUSPENSION	2	
Otic Agents		
Otic Agents		
acetic acid otic solution	1	
CIPRO HC OTIC SUSPENSION	2	
CIPRODEX OTIC SUSPENSION	2	
DERMOTIC OTIC OIL	2	
FLAC OTIC OIL	1	
fluocinolone acetonide otic oil	1	
hydrocortisone-acetic acid otic solution	1	
neomycin-polymyxin-hc otic solution	1	
neomycin-polymyxin-hc otic suspension	1	

Drug Name	Drug Tier	Requirements /Limits
Respiratory Tract/Pulmonary Agents		
Antihistamines		
azelastine hcl nasal solution	1	
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet	1	
cetirizine hcl oral solution 1 mg/ml	1	
CLARINEX ORAL TABLET	2	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
clemastine fumarate oral tablet 2.68 mg	1	
cyproheptadine hcl oral syrup	1	
cyproheptadine hcl oral tablet	1	
desloratadine oral tablet	1	
desloratadine oral tablet dispersible	1	
dexchlorpheniramine maleate oral solution	1	
diphen oral elixir	1	
diphenhydramine hcl injection solution	1	
diphenhydramine hcl oral elixir	1	
hydroxyzine hcl intramuscular solution	1	
hydroxyzine hcl oral syrup	1	
hydroxyzine hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
hydroxyzine pamoate oral capsule	1	
levocetirizine dihydrochloride oral solution	1	
levocetirizine dihydrochloride oral tablet	1	
olopatadine hcl nasal solution	1	
PATANASE NASAL SOLUTION	2	
RYCLORA ORAL SOLUTION	2	
RYVENT ORAL TABLET	1	
SEMPREX-D ORAL CAPSULE	2	
VISTARIL ORAL CAPSULE	2	
Anti-inflammatories, Inhaled Corticosteroids		
ALVESCO INHALATION AEROSOL SOLUTION	2	
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	2	

Drug Name	Drug Tier	Requirements /Limits
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX HFA INHALATION AEROSOL	2	
BECONASE AQ NASAL SUSPENSION	2	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
budesonide inhalation suspension	1	B/D
DYMISTA NASAL SUSPENSION	2	
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
FLOVENT HFA INHALATION AEROSOL	2	
flunisolide nasal solution	1	
fluticasone propionate nasal suspension	1	
mometasone furoate nasal suspension	1	
NASONEX NASAL SUSPENSION	2	

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Drug Name	Drug Tier	Requirements /Limits
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
OMNARIS NASAL SUSPENSION	2	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
PULMICORT INHALATION SUSPENSION	2	B/D
QNASL CHILDRENS NASAL AEROSOL SOLUTION	2	
QNASL NASAL AEROSOL SOLUTION	2	
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	2	
XHANCE NASAL EXHALER SUSPENSION	2	
ZETONNA NASAL AEROSOL SOLUTION	2	
Antileukotrienes		
ACCOLATE ORAL TABLET	2	
montelukast sodium oral packet	1	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
SINGULAIR ORAL PACKET	2	
SINGULAIR ORAL TABLET	2	
SINGULAIR ORAL TABLET CHEWABLE	2	
zafirlukast oral tablet	1	
zileuton er oral tablet extended release 12 hour	2	
ZYFLO ORAL TABLET	2	
Bronchodilators, Anticholinergic		
ATROVENT HFA INHALATION AEROSOL SOLUTION	2	
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	2	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ipratropium bromide inhalation solution	1	B/D
ipratropium bromide nasal solution	1	
ipratropium-albuterol inhalation solution	1	B/D
LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION	2	
LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION	2	
SEEBRI NEOHALER INHALATION CAPSULE	2	
SPIRIVA HANDIHALER INHALATION CAPSULE	2	

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Drug Name	Drug Tier	Requirements /Limits
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	2	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	2	
YUPELRI INHALATION SOLUTION	2	B/D
Bronchodilators, Sympathomimetic		
albuterol sulfate er oral tablet extended release 12 hour	2	
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	2	
albuterol sulfate inhalation nebulization solution	1	B/D
albuterol sulfate oral syrup	2	
albuterol sulfate oral tablet	2	
ARCAPTA NEOHALER INHALATION CAPSULE	2	
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	2	
BEVESPI AEROSPHERE INHALATION AEROSOL	2	
BROVANA INHALATION NEBULIZATION SOLUTION	2	B/D
epinephrine injection solution 0.3 mg/0.3ml	2	
epinephrine injection solution auto-injector	2	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	2	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	2	
isoproterenol hcl injection solution	1	
ISUPREL INJECTION SOLUTION	2	
levalbuterol hcl inhalation nebulization solution	1	B/D
levalbuterol tartrate inhalation aerosol	1	
metaproterenol sulfate oral syrup	2	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	2	B/D
PROAIR HFA INHALATION AEROSOL SOLUTION	2	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
PROVENTIL HFA INHALATION AEROSOL SOLUTION	2	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	2	
terbutaline sulfate injection solution	2	
terbutaline sulfate oral tablet	2	
UTIBRON NEOHALER INHALATION CAPSULE	2	
VENTOLIN HFA INHALATION AEROSOL SOLUTION	2	
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION	2	B/D
XOPENEX HFA INHALATION AEROSOL	2	
XOPENEX INHALATION NEBULIZATION SOLUTION	2	B/D
Cystic Fibrosis Agents		
BETHKIS INHALATION NEBULIZATION SOLUTION	2	B/D
CAYSTON INHALATION SOLUTION RECONSTITUTED	2	
KALYDECO ORAL PACKET	2	
KALYDECO ORAL TABLET	2	
KITABIS PAK INHALATION NEBULIZATION SOLUTION	2	B/D
ORKAMBI ORAL PACKET	2	
ORKAMBI ORAL TABLET	2	
PULMOZYME INHALATION SOLUTION	2	B/D
SYMDEKO ORAL TABLET THERAPY PACK	2	
TOBI INHALATION NEBULIZATION SOLUTION	2	B/D
TOBI PODHALER INHALATION CAPSULE	2	
tobramycin inhalation nebulization solution	2	B/D
Mast Cell Stabilizers		
cromolyn sodium inhalation nebulization solution	1	B/D
Phosphodiesterase Inhibitors, Airways Disease		
aminophylline intravenous solution	1	
DALIRESP ORAL TABLET	2	
ELIXOPHYLLIN ORAL ELIXIR	2	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
theophylline er oral tablet extended release 12 hour	1	
theophylline er oral tablet extended release 24 hour	1	
theophylline in d5w intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
theophylline oral solution	1	
Pulmonary Antihypertensives		
ADCIRCA ORAL TABLET	2	PA
ADEMPAS ORAL TABLET	2	
ALYQ ORAL TABLET	1	PA
ambrisentan oral tablet	1	
bosentan oral tablet	1	
epoprostenol sodium intravenous solution reconstituted	2	PA
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	2	PA
LETAIRIS ORAL TABLET	2	
OPSUMIT ORAL TABLET	2	
ORENITRAM ORAL TABLET EXTENDED RELEASE	2	
REMODULIN INJECTION SOLUTION	2	PA
REVATIO INTRAVENOUS SOLUTION	2	
REVATIO ORAL SUSPENSION RECONSTITUTED	2	PA
REVATIO ORAL TABLET	2	PA
sildenafil citrate intravenous solution	2	
sildenafil citrate oral suspension reconstituted	1	PA
sildenafil citrate oral tablet 20 mg	1	PA
tadalafil (pah) oral tablet	1	PA
TRACLEER ORAL TABLET	2	
TRACLEER ORAL TABLET SOLUBLE	2	
treprostinil injection solution	1	PA
TYVASO INHALATION SOLUTION	2	PA
TYVASO REFILL INHALATION SOLUTION	2	PA
TYVASO STARTER INHALATION SOLUTION	2	PA
UPTRAVI ORAL TABLET	2	
UPTRAVI ORAL TABLET THERAPY PACK	2	
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	2	PA
VENTAVIS INHALATION SOLUTION	2	B/D
Pulmonary Fibrosis Agents		
ESBRIET ORAL TABLET	2	
Respiratory Tract Agents, Other		
acetylcysteine inhalation solution	1	B/D
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	2	

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Drug Name	Drug Tier	Requirements /Limits
ADVAIR HFA INHALATION AEROSOL	2	
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	2	
CINQAIR INTRAVENOUS SOLUTION	2	
DULERA INHALATION AEROSOL	2	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	2	
ESBRIET ORAL CAPSULE	2	
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	2	
GLASSIA INTRAVENOUS SOLUTION	2	
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	1	B/D
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	2	B/D
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
OFEV ORAL CAPSULE	2	
PROLASTIN-C INTRAVENOUS SOLUTION	2	
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	2	
promethazine-phenylephrine oral syrup	1	

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Drug Name	Drug Tier	Requirements /Limits
PULMOSAL INHALATION NEBULIZATION SOLUTION	1	B/D
ribavirin inhalation solution reconstituted	2	
sodium chloride inhalation nebulization solution	1	B/D
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	2	
SYMBICORT INHALATION AEROSOL	2	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
VIRAZOLE INHALATION SOLUTION RECONSTITUTED	2	
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED	1	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	2	

Drug Name	Drug Tier	Requirements /Limits
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
ANECTINE INJECTION SOLUTION	2	
carisoprodol oral tablet	1	PA
carisoprodol-aspirin oral tablet	1	PA
chlorzoxazone oral tablet 250 mg	2	
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	
cisatracurium besylate (pf) intravenous solution 10 mg/5ml	1	
cyclobenzaprine hcl er oral capsule extended release 24 hour	1	
cyclobenzaprine hcl oral tablet	1	
FEXMID ORAL TABLET	2	
LORZONE ORAL TABLET	2	
metaxalone oral tablet	1	
methocarbamol injection solution	1	
methocarbamol oral tablet	1	
NIMBEX INTRAVENOUS SOLUTION 10 MG/5ML	2	
norgesic forte oral tablet	2	

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Drug Name	Drug Tier	Requirements /Limits
orphenadrine citrate er oral tablet extended release 12 hour	1	
orphenadrine citrate injection solution	1	
orphenadrine-aspirin-caffeine oral tablet	1	
ORPHENGESIC FORTE ORAL TABLET	2	
QUELICIN INJECTION SOLUTION	2	
ROBAXIN INJECTION SOLUTION	2	
ROBAXIN-750 ORAL TABLET	2	
SKELAXIN ORAL TABLET	2	
SOMA ORAL TABLET	2	PA
succinylcholine chloride injection solution	1	
Sleep Disorder Agents		
GABA Receptor Modulators		
AMBIEN CR ORAL TABLET EXTENDED RELEASE	2	
AMBIEN ORAL TABLET	2	
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	2	
eszopiclone oral tablet	1	
flurazepam hcl oral capsule	1	
LUNESTA ORAL TABLET	2	
zaleplon oral capsule	1	
zolpidem tartrate er oral tablet extended release	1	
zolpidem tartrate oral tablet	1	
zolpidem tartrate sublingual tablet sublingual	1	
Sleep Disorders, Other		
armodafinil oral tablet	2	PA
BELSOMRA ORAL TABLET	2	
HETLIOZ ORAL CAPSULE	2	
modafinil oral tablet	1	PA
NEMBUTAL INJECTION SOLUTION	2	
NUVIGIL ORAL TABLET	2	PA
pentobarbital sodium injection solution	1	
PROVIGIL ORAL TABLET	2	PA
ramelteon oral tablet	1	
ROZEREM ORAL TABLET	2	
SECONAL ORAL CAPSULE	2	
SILENOR ORAL TABLET	2	
SUNOSI ORAL TABLET	2	
XYREM ORAL SOLUTION	2	

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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 معرّف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon 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. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल 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.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ(Khmer)**សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe 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 yáníłti'go, saad bee áka›anída›awo›ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dęę› t'áá jíík'ehgo béésh 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.

This formulary was updated on January 1, 2020, and is a complete list of drugs covered by our plan.

For a complete listing or other questions, please contact:

OptumRx Member Services
Phone: 1-855-409-6999
TTY users call: 711
Hour of operation: 24 hours a day, 7 days a week
Website: optumrx.com

optumrx.com

OptumRx specializes in the delivery, clinical management and affordability of prescription medications and consumer health products. We are an Optum® company — a leading provider of integrated health services. Learn more at **optum.com/optumrx**.

WF1122368_ORX_AlaskaCare_PDL

AlaskaCare

Defined Benefit Retiree Plan Non-Part D Comprehensive Formulary (list of covered drugs)

Administered by OptumRx
Effective January 1, 2020

Please read: this document contains information about the AlaskaCare Wrap Supplemental drugs we cover in this plan.

This formulary was updated on January 1, 2020, and is a complete list of the wrap supplemental (Non-Part D) drugs covered by our plan. For more recent information or if you have questions, please contact:

OptumRx Member Services
Phone: 1-855-409-6999
TTY users call: 711
Hour of operation: 24 hours a day, 7 days a week
Website: optumrx.com

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

Understanding your formulary

What is a formulary?
A formulary is a list of prescribed medications chosen by your plan 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 approved by the U.S. Food and Drug Administration (FDA).

OptumRx® is guided by the Pharmacy and Therapeutics Committee (a group of doctors, nurses, and pharmacists) who review which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

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

How do I use my formulary?
You and your doctor can consult the formulary to help you select 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 member website or call the member phone number on your ID card.

What are tiers?
Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, determined 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 equivalent becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 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 member phone number on your ID card.

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 could be right for you. Generic medications are usually your lowest-cost option.

Over-the-counter medications
An over-the-counter (OTC) medication may be the right treatment option 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.

What if I am taking a specialty medication?
Specialty medications treat 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.

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) and generic medications 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 hit your deductible.

Drug Tier	Includes	Helpful Tips
Tier 1	**$ Lower-cost** generics and some brand-name	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	**$$ Mid-range cost** preferred brand-name	Many Tier 2 drugs have lower-cost options in Tier 1. 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 determines how these medications may be covered.

PA	**Prior Authorization**	Your doctor is required to give OptumRx morel information to determine coverage.
QL	**Quantity Limit**	Medication may be limited to a certain quantity.

Table of Contents

Drug Name	Drug Tier	Requirements /Limits
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
active-prep kit i external cream	2	
active-prep kit ii external cream	2	
active-prep kit iii external cream	2	
aif #2 drug preparation kit external cream	2	
aif #3 drug preparation kit external cream	2	
DICLOFEX DC COMBINATION THERAPY PACK	1	
DICLOFONO TRANSDERMAL GEL	2	
dimentho external therapy pack	2	
dual complex formula 1 kit external cream	2	
duraxin oral capsule	1	
enovarx-ibuprofen external cream	2	
fbl kit external cream	2	
fenoprofen calcium powder	2	
flurbiprofen powder	2	
ibuprofen powder	2	
IC 400 ORAL KIT	2	
IC 800 ORAL KIT	2	
indomethacin powder	2	
K.B.G.L IN TERODERM EXTERNAL CREAM	2	
LIDOPROFEN EXTERNAL CREAM	2	
meclofenamate sodium powder	2	
napro external cream	2	
NAPROXEN COMFORT PAC COMBINATION KIT	2	
naproxen powder	2	
np #2 drug preparation kit external cream	2	
phenylbutazone powder	2	
piroxicam powder	2	
sulindac powder	2	
VOPAC GB EXTERNAL CREAM	2	
VOPAC KT EXTERNAL CREAM	2	
vp fc kit external cream	2	
Opioid Analgesics, Long-acting		
methadone hcl oral tablet soluble	1	
METHADOSE ORAL TABLET SOLUBLE	1	
morphine sulfate in dextrose intravenous solution	2	
morphine sulfate-nacl intravenous solution 100-0.9 mg/100ml-%	2	
morphine sulfate-nacl intravenous solution prefilled syringe 0.5-0.9 mg/ml-%, 150-0.9 mg/30ml-%, 2-0.9 mg/2ml-%, 5-0.9 mg/5ml-%	2	
PROBUPHINE IMPLANT KIT SUBCUTANEOUS IMPLANT	2	
SYNAPRYN FUSEPAQ ORAL SUSPENSION RECONSTITUTED	2	

Effective 1/1/2020

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
Opioid Analgesics, Short-acting		
alfentanil hcl intravenous solution	1	
DSUVIA SUBLINGUAL TABLET SUBLINGUAL	2	
fentanyl citrate injection solution	2	
fentanyl citrate injection solution prefilled syringe	2	
fentanyl citrate intravenous solution	2	
fentanyl citrate intravenous solution prefilled syringe	2	
fentanyl citrate powder	2	
fentanyl citrate-nacl intravenous solution 1-0.9 mg/100ml-%, 1.25-0.9 mg/250ml-%, 2-0.9 mg/100ml-%, 2.5-0.9 mg/250ml-%	2	
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-%	2	
fentanyl cit-ropivacaine-nacl epidural solution 0.2-0.125-0.9 mg/100ml-%, 0.2-0.2-0.9 mg/100ml-%, 0.3-0.2-0.9 mg/150ml-%, 0.4-0.15-0.9 mg/200ml-%	2	
fentanyl cit-ropivacaine-nacl epidural solution prefilled syringe	2	
fentanyl-bupivacaine-nacl epidural solution 0.2-0.08-0.9 mg/100ml-%, 0.2-0.1-0.9 mg/100ml-%, 0.2-0.125-0.9 mg/100ml-%, 0.3-0.125-0.9 mg/100ml-%, 0.5-0.0625-0.9 mg/100ml-%, 0.5-0.0625-0.9 mg/250ml-%, 0.5-0.1-0.9 mg/100ml-%, 0.5-0.1-0.9 mg/250ml-%, 0.5-0.125-0.9 mg/250ml-%, 1-0.1-0.9 mg/250ml-%, 1-0.125-0.9 mg/250ml-%, 1.25-0.0625-0.9 mg/250ml-%	2	
hydromorphone hcl-nacl injection solution	2	
hydromorphone hcl-nacl intravenous solution 10-0.9 mg/50ml-%, 100-0.9 mg/100ml-%, 100-0.9 mg/50ml-%, 12-0.9 mg/30ml-%, 15-0.9 mg/30ml-%, 2-0.9 mg/50ml-%, 20-0.9 mg/100ml-%, 25-0.9 mg/250ml-%, 25-0.9 mg/50ml-%, 30-0.9 mg/30ml-%, 40-0.9 mg/200ml-%, 50-0.9 mg/100ml-%, 50-0.9 mg/250ml-%, 50-0.9 mg/50ml-%, 6-0.9 mg/30ml-%	2	
hydromorphone hcl-nacl intravenous solution prefilled syringe	2	
morphine sulfate injection solution	2	

Effective 1/1/2020

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
morphine sulfate intravenous solution 0.5 mg/ml	2	
morphine sulfate-nacl intravenous solution 250-0.9 mg/250ml-%, 50-0.9 mg/50ml-%, 500-0.9 mg/100ml-%	2	
morphine sulfate-nacl intravenous solution prefilled syringe 2-0.9 mg/ml-%, 30-0.9 mg/30ml-%, 4-0.9 mg/ml-%, 50-0.9 mg/50ml-%, 55-0.9 mg/55ml-%	2	
oxycodone hcl powder	2	
remifentanil hcl intravenous solution reconstituted	1	
sufentanil citrate intravenous solution	1	
ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED	2	
Anesthetics		
Anesthetics		
anesthesia s/i-40 intravenous kit	2	
anesthesia s/i-40a intravenous kit	2	
anesthesia s/i-40h intravenous kit	2	
anesthesia s/i-40s intravenous kit	2	
anesthesia s/i-60 intravenous kit	2	
ketamine hcl injection solution prefilled syringe 30 mg/3ml, 50 mg/5ml	2	
ketamine hcl-sodium chloride intravenous solution prefilled syringe 10-0.9 mg/ml-%	2	
Local Anesthetics		
ASTERO EXTERNAL GEL	2	
BD PUDENDAL/LOCAL TRAY/1% LIDO INJECTION KIT	1	
buffered lidocaine injection solution prefilled syringe	2	
bupivacaine hcl injection solution 0.25 %	1	
bupivacaine hcl injection solution prefilled syringe	2	
bupivacaine hcl powder	2	
bupivacaine hcl-nacl epidural solution	2	
bupivacaine hcl-nacl epidural solution prefilled syringe	2	
bupivacaine hcl-nacl injection solution	2	
bupivacaine hcl-nacl injection solution prefilled syringe	2	
bupivacaine in dextrose solution prefilled syringe	2	
CLOROTEKAL INTRATHECAL SOLUTION	2	
cocaine hcl nasal solution	2	
d-care 100x injection kit	2	

Effective 1/1/2020

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
DURASAFE SPINAL/EPIDURAL TRAY INJECTION KIT	2	
enovarx-lidocaine hcl external cream	2	
ethyl chloride external aerosol	1	
EXPAREL INJECTION SUSPENSION	2	
GEBAUERS PAIN EASE EXTERNAL AEROSOL	2	
GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	2	
goprelto nasal solution	2	
lets kit	2	
lidocaine hcl injection solution prefilled syringe	2	
lidocaine hcl intradermal jet-injector	2	
lidocaine hcl-sodium chloride injection solution	2	
lidocaine hcl-sodium chloride injection solution prefilled syringe	2	
lidocaine-sodium bicarbonate injection solution prefilled syringe	2	
lido-epinephrine-tetracaine external solution	2	
LIDTOPIC MAX EXTERNAL CREAM	2	
MARCAINE INJECTION SOLUTION 0.25 %	2	
prepiv supply combination kit	2	
prilovix external kit	1	
prilovix lite external kit	2	
prilovix ultralite external kit	1	
ropivacaine hcl epidural solution prefilled syringe	2	
ropivacaine hcl injection solution prefilled syringe	2	
ropivacaine hcl-nacl epidural solution	2	
ropivacaine hcl-nacl epidural solution prefilled syringe	2	
ropivacaine hcl-nacl injection solution	2	
ropivacaine hcl-nacl injection solution prefilled syringe	2	
SENSORCAINE INJECTION SOLUTION 0.25 %	1	
triamcinolone-bupivacaine injection suspension	2	
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	2	
vp gkl kit external cream	2	
ZINGO INTRADERMAL JET-INJECTOR	2	
Antibacterials		
Aminoglycosides		
gentamicin sulfate powder	2	
tobramycin sulfate powder	2	

Effective 1/1/2020

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
Antibacterials, Other		
benzalkonium chloride external solution	1	
BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION	2	
essentra wipes 9x9" external	2	
FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED	2	
FIRST-VANCOMYCIN ORAL SOLUTION	2	
glutaraldehyde external solution	1	
hydrogen peroxide solution	1	
iodine tincture external tincture 2 %	1	
METRONIDAZOLE BENZO+SYRSPEND ORAL SUSPENSION RECONSTITUTED	2	
phenol crystals	2	
phenol liquid	2	
povidone-iodine ophthalmic solution	2	
thimerosal powder	2	
trimethoprim powder	2	
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-%	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-%	2	
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	2	
VANCOMYCIN+SYRSPEND SF ORAL SUSPENSION	2	
Beta-lactam, Cephalosporins		
cefazolin in sodium chloride intravenous solution	2	
cefazolin sodium intravenous solution prefilled syringe	2	
Quinolones		
double pm ophthalmic solution reconstituted	2	
Sulfonamides		
sulfadiazine sodium powder	2	
sulfamethoxazole powder	2	
Tetracyclines		
doxycycline hyclate powder	2	
tetracycline hcl powder	2	

Effective 1/1/2020

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
Anticonvulsants		
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
FANATREX FUSEPAQ ORAL SUSPENSION	2	
phenobarbital powder	2	
Antidepressants		
Tricyclics		
imipramine hcl powder	2	
nortriptyline hcl powder	2	
Antiemetics		
Antiemetics, Other		
prochlorperazine maleate powder	2	
Antifungals		
Antifungals		
CICLODAN SOLUTION EXTERNAL KIT	2	
ciclopirox olamine powder	2	
clotrimazole crystals	2	
clotrimazole powder	2	
KETODAN EXTERNAL KIT	2	
miconazole nitrate powder	2	
miconazole powder	2	
tolnaftate powder	2	
Anti-inflammatory Agents		
Glucocorticoids		
SCARZEN SKIN REPAIR EXTERNAL KIT	2	
Nonsteroidal Anti-inflammatory Drugs		
active-ketoprofen external cream	2	
FROTEK EXTERNAL CREAM	2	
KETOPHENE RAPIDPAQ EXTERNAL CREAM	2	
triple complex formula 3 kit external cream	2	
Antimigraine Agents		
Ergot Alkaloids		
dihydroergotamine mesylate crystals	2	
Antimyasthenic Agents		
Parasympathomimetics		
BLOXIVERZ INTRAVENOUS SOLUTION	2	
neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml	1	
neostigmine methylsulfate intravenous solution prefilled syringe	2	
Antimycobacterials		
Antituberculars		
RIFAMPIN+SYRSPEND SF ORAL SUSPENSION	2	
Antineoplastics		
Alkylating Agents		
ALKERAN ORAL TABLET	2	
GLIADEL WAFER IMPLANT WAFER	2	
melphalan oral tablet	1	
MYLERAN ORAL TABLET	2	

Effective 1/1/2020

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
TEMODAR ORAL CAPSULE	2	
temozolomide oral capsule	1	
Antimetabolites		
capecitabine oral tablet	1	
XELODA ORAL TABLET	2	
Antineoplastics, Other		
AZEDRA DOSIMETRIC INTRAVENOUS SOLUTION	2	
AZEDRA THERAPEUTIC INTRAVENOUS SOLUTION	2	
IMLYGIC INTRALESIONAL SUSPENSION	2	
levamisole hcl powder	2	
LUTATHERA INTRAVENOUS SOLUTION	2	
XOFIGO INTRAVENOUS SOLUTION	2	
YESCARTA INTRAVENOUS SUSPENSION	2	
Enzyme Inhibitors		
etoposide oral capsule	1	
HYCAMTIN ORAL CAPSULE	2	
Antiparasitics		
Anthelmintics		
mebendazole powder	2	
thiabendazole powder	2	
Antiprotozoals		
iodoquinol powder	2	
quinacrine hcl powder	2	
Pediculicides/Scabicides		
sulfurated lime external solution	1	
Antiparkinson Agents		
Monoamine Oxidase B (MAO-B) Inhibitors		
selegiline hcl powder	2	
Antipsychotics		
1st Generation/Typical		
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
Antispasticity Agents		
Antispasticity Agents		
baclofen powder	2	
FIRST-BACLOFEN ORAL SUSPENSION	2	
RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED	2	
TIZANIDINE COMFORT PAC COMBINATION	2	
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
ganciclovir intravenous solution	2	
Anxiolytics		
Anxiolytics, Other		
dexmedetomidine hcl in nacl intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
dexmedetomidine hcl intravenous solution 1000 mcg/10ml, 400 mcg/4ml	2	
dexmedetomidine hcl intravenous solution 200 mcg/2ml	1	
dexmedetomidine hcl-dextrose intravenous solution	2	
PRECEDEX INTRAVENOUS SOLUTION	2	
Benzodiazepines		
midazolam hcl-sodium chloride intravenous solution	2	
midazolam hcl-sodium chloride intravenous solution prefilled syringe	2	
MIDAZOLAM+SYRSP END SF ORAL SUSPENSION	2	
midazolam-sodium chloride intravenous solution	2	
Blood Glucose Regulators		
Antidiabetic Agents		
glyburide powder	2	
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
acd formula a in vitro solution	1	
ACD-A NOCLOT-50 IN VITRO SOLUTION	1	

Drug Name	Drug Tier	Requirements /Limits
ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED	2	
ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED	2	
anticoagulant cit dext soln a in vitro solution	1	
anticoagulant sodium citrate in vitro solution	1	
bivalirudin trifluoroacetate intravenous solution reconstituted	1	
bivalirudin-sodium chloride intravenous solution	2	
CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED	2	
CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	2	
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-%	2	
RETAVASE HALF-KIT INTRAVENOUS KIT	2	
RETAVASE INTRAVENOUS KIT	2	
THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
TNKASE INTRAVENOUS KIT	2	
TRICITRASOL IN VITRO CONCENTRATE	2	
Blood Products/Modifiers/Volume Expanders		
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
Hemostasis Agents		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
adynovate intravenous solution reconstituted	2	
AFSTYLA INTRAVENOUS KIT	2	
ALPHANATE/VWF COMPLEX/HUMAN INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED	2	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED	2	
BENEFIX INTRAVENOUS KIT	2	
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	2	
CORIFACT INTRAVENOUS KIT	2	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED	2	
HEMLIBRA SUBCUTANEOUS SOLUTION	2	
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED	2	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED	2	
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	2	
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED	2	
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	2	
KCENTRA INTRAVENOUS KIT	2	
KOATE INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED	2	
KOGENATE FS INTRAVENOUS KIT	2	
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	2	
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED	2	
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	2	
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	2	
NUWIQ INTRAVENOUS KIT	2	
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	2	
obizur intravenous solution reconstituted	2	
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	2	
PROFILNINE SD INTRAVENOUS SOLUTION RECONSTITUTED	2	
protamine sulfate intravenous solution	1	
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	2	
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED	2	
RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	2	
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	2	
rixubis intravenous solution reconstituted	2	
THROMBIN-JMI EPISTAXIS EXTERNAL KIT	2	
THROMBIN-JMI EXTERNAL KIT	2	
THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	2	
THROMBOGEN EXTERNAL KIT	2	
THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	2	
TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED	2	
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	2	
WILATE INTRAVENOUS KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
XYNTHA INTRAVENOUS KIT	2	
XYNTHA SOLOFUSE INTRAVENOUS KIT	2	
Platelet Modifying Agents		
AGGRASTAT INTRAVENOUS CONCENTRATE	2	
AGGRASTAT INTRAVENOUS SOLUTION	2	
dipyridamole intravenous solution	1	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
AKOVAZ INTRAVENOUS SOLUTION	2	
clonidine hcl powder	2	
ephedrine sulfate intravenous solution	1	
phenylephrine hcl (pressors) intravenous solution prefilled syringe 1 mg/10ml	2	
phenylephrine hcl intravenous solution prefilled syringe	2	
phenylephrine hcl-dextrose intravenous solution 10-5 mg/250ml-%, 20-5 mg/250ml-%, 8-5 mg/100ml-%	2	
phenylephrine hcl-nacl intravenous solution 10-0.9 mg/250ml-%, 100-0.9 mg/100ml-%, 160-0.9 mg/500ml-%, 20-0.9 mg/250ml-%, 25-0.9 mg/250ml-%, 30-0.9 mg/250ml-%, 40-0.9 mg/250ml-%, 50-0.9 mg/250ml-%, 80-0.9 mg/250ml-%	2	
phenylephrine hcl-nacl intravenous solution prefilled syringe	2	
Alpha-adrenergic Blocking Agents		
phenylephrine hcl-dextrose intravenous solution 40-5 mg/250ml-%	2	
prazosin hcl powder	2	
Antiarrhythmics		
adenosine intravenous solution prefilled syringe	2	
amiodarone hcl in dextrose intravenous solution	2	
Beta-adrenergic Blocking Agents		
ATENOLOL+SYRSPEND SF ORAL SUSPENSION	2	
FIRST - METOPROLOL ORAL SOLUTION	2	
metoprolol tartrate powder	2	
propranolol hcl powder	2	
timolol maleate powder	2	

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Drug Name	Drug Tier	Requirements /Limits
Calcium Channel Blocking Agents		
AMLODIPINE BES+SYRSPEND SF ORAL SUSPENSION	2	
CLEVIPREX INTRAVENOUS EMULSION	2	
diltiazem hcl-dextrose intravenous solution	2	
diltiazem hcl-sodium chloride intravenous solution 100-0.9 mg/100ml-%, 125-0.9 mg/125ml-%	2	
nicardipine hcl in nacl intravenous solution	2	
nicardipine hcl in nacl intravenous solution prefilled syringe	2	
nifedipine powder	2	
verapamil hcl powder	2	
Cardiovascular Agents		
norepinephrine-dextrose intravenous solution 16-5 mg/250ml-%	2	
norepinephrine-sodium chloride intravenous solution 16-0.9 mg/500ml-%	2	
Cardiovascular Agents, Other		
ephedrine sulfate intravenous solution prefilled syringe	2	
ephedrine sulfate-nacl intravenous solution prefilled syringe 10-0.9 mg/ml-%, 100-0.9 mg/10ml-%, 25-0.9 mg/5ml-%, 50-0.9 mg/10ml-%	2	
epinephrine hcl-dextrose intravenous solution	2	
epinephrine hcl-nacl intravenous solution	2	
epinephrine-dextrose intravenous solution	2	
epinephrine-nacl intravenous solution	2	
GIAPREZA INTRAVENOUS SOLUTION	2	
norepinephrine-dextrose intravenous solution 4-5 mg/250ml-%, 8-5 mg/250ml-%, 8-5 mg/500ml-%	2	
norepinephrine-dextrose intravenous solution prefilled syringe	2	
norepinephrine-sodium chloride intravenous solution 16-0.9 mg/250ml-%, 32-0.9 mg/250ml-%, 4-0.9 mg/250ml-%, 8-0.9 mg/250ml-%, 8-0.9 mg/500ml-%	2	
norepinephrine-sodium chloride intravenous solution prefilled syringe	2	
SOTRADECOL INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
Diuretics, Loop		
furosemide powder	2	
Diuretics, Potassium-sparing		
spironolactone powder	2	
Diuretics, Thiazide		
hydrochlorothiazide powder	2	
Dyslipidemics, Fibric Acid Derivatives		
gemfibrozil powder	2	
Vasodilators, Direct-acting Arterial		
papaverine hcl powder	2	
Vasodilators, Direct-acting Arterial/Venous		
NIPRIDE RTU INTRAVENOUS SOLUTION	2	
Central Nervous System Agents		
Central Nervous System, Other		
ADDYI ORAL TABLET	2	
ADIPEX-P ORAL CAPSULE	2	
ADIPEX-P ORAL TABLET	2	
BELVIQ ORAL TABLET	2	
BELVIQ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
benzphetamine hcl oral tablet	1	
caffeine anhydrous powder	2	
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
diethylpropion hcl er oral tablet extended release 24 hour	1	
diethylpropion hcl oral tablet	1	
DOPRAM INTRAVENOUS SOLUTION	2	
LOMAIRA ORAL TABLET	2	
phendimetrazine tartrate er oral capsule extended release 24 hour	1	
phendimetrazine tartrate oral tablet	1	
phentermine hcl oral capsule	1	
phentermine hcl oral tablet	1	
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
Dental and Oral Agents		
Dental and Oral Agents		
CAVAREST DENTAL GEL	1	
CLINPRO 5000 DENTAL PASTE	1	
DENTA 5000 PLUS DENTAL CREAM	1	
DENTAGEL DENTAL GEL	1	
FIRST-MOUTHWASH BLM MOUTH/THROAT SUSPENSION	2	
FLUORIDEX DENTAL PASTE	1	

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Drug Name	Drug Tier	Requirements /Limits
FLUORIDEX ENHANCED WHITENING DENTAL PASTE	1	
MI PASTE DENTAL PASTE	2	
MI PASTE PLUS DENTAL PASTE	2	
neutral sodium fluoride mouth/throat solution	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	2	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	2	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE	2	
PREVIDENT 5000 PLUS DENTAL CREAM	2	
PREVIDENT DENTAL GEL	2	
PREVIDENT MOUTH/THROAT SOLUTION	1	
REMESENSE DENTAL	2	
sf 5000 plus dental cream	1	
sf dental gel	1	
sodium fluoride 5000 plus dental cream	1	
sodium fluoride dental gel	1	
sodium fluoride dental paste	1	

Drug Name	Drug Tier	Requirements /Limits
Dermatological Agents		
Dermatological Agents		
A.A.G.C. KIT IN TERODERM EXTERNAL CREAM	2	
active-prep kit iv external cream	2	
active-prep kit v external cream	2	
active-tramadol external cream	2	
aluminum chloride anhydrous powder	2	
aluminum chloride hexahydrate crystals	2	
aluminum chloride hexahydrate powder	2	
ARTISS EXTERNAL SOLUTION	2	
AVAGE EXTERNAL CREAM	2	
balsam peru-castor oil external ointment	1	
beau rx external gel	2	
BLANCHE EXTERNAL CREAM	1	
bp wash external liquid 2.5 %	1	
bpco external ointment	2	
calamine powder	2	
camphor crystals	2	
CETYLCIDE-G CONCENTRATE	2	
chlorhexidine gluconate solution 20 %	2	
CLINOIN EXTERNAL CREAM	2	
coal tar external solution	1	

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Drug Name	Drug Tier	Requirements /Limits
DERMULCERA EXTERNAL OINTMENT	2	
enovarx-diclofenac sodium transdermal cream	2	
enovarx-naproxen external cream	2	
enovarx-tramadol external cream	2	
ENZOCLEAR EXTERNAL FOAM	2	
EPIQUIN MICRO EXTERNAL CREAM	2	
ESKATA EXTERNAL SOLUTION	2	
formaldehyde external solution	1	
GORDOFILM EXTERNAL SOLUTION	2	
hyalucil-4 transdermal cream	2	
hydroquinone external cream	1	
hydroquinone powder	2	
hydroquinone time release external cream	1	
ichthammol powder	2	
KAMDOY EXTERNAL EMULSION	2	
ketorolac tromethamine external gel	2	
KIVIK EXTERNAL EMULSION	2	
lactic acid e external cream	1	
MEDROX-RX EXTERNAL OINTMENT	2	

Drug Name	Drug Tier	Requirements /Limits
melpaque hp external cream	1	
methoxsalen powder	2	
MICROCYN EXTERNAL LIQUID 0.023 %	2	
NEURAPTINE EXTERNAL CREAM	2	
QUTENZA (2 PATCH) EXTERNAL KIT	2	
QUTENZA EXTERNAL KIT	2	
RECEDO EXTERNAL GEL	1	
REFISSA EXTERNAL CREAM	2	
REGENECARE EXTERNAL GEL	2	
REMERGENT HQ EXTERNAL CREAM	1	
RENOVA EXTERNAL CREAM	2	
RENOVA PUMP EXTERNAL CREAM	2	
scarsilk external gel	2	
silipac external kit	2	
sulfacetamide sodium powder	2	
suvicort external emulsion	2	
TISSEEL EXTERNAL SOLUTION	2	
tl hydroquinone external cream	1	
tretinoin (emollient) external cream	1	
tretinoin powder	2	
TRI-LUMA EXTERNAL CREAM	2	
VANIQA EXTERNAL CREAM	2	

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Drug Name	Drug Tier	Requirements /Limits
VASHE CLEANSING EXTERNAL SOLUTION	1	
VENELEX EXTERNAL OINTMENT	2	
Electrolytes/Minerals/ Metals/Vitamins		
Electrolyte/Mineral Replacement		
active fe oral tablet	2	
calcium carbonate light powder	2	
calcium carbonate powder	2	
calcium chloride anhydrous granules	2	
calcium chloride dihydrate granules	2	
calcium chloride dihydrate powder	2	
calcium chloride solution 10 % intravenous	2	
calcium chloride solution 10 % intravenous	1	
calcium gluconate anhydrous powder	2	
calcium gluconate intravenous solution prefilled syringe	2	
calcium gluconate monohydrate powder	2	
calcium gluconate powder	2	
calcium gluconate-nacl intravenous solution 1-0.9 gm/100ml-%, 2-0.9 gm/100ml-%	2	
calcium lactate pentahydrate powder	2	

Drug Name	Drug Tier	Requirements /Limits
calcium phosphate dibasic powder	2	
calcium phosphate tribasic powder	2	
cardioplegic solution perfusion	2	
cardioplegic solution perfusion	1	
CENTRATEX ORAL CAPSULE	2	
CHROMAGEN ORAL CAPSULE	1	
chromic chloride intravenous solution	1	
copper chloride intravenous solution	2	
CORVITA 150 ORAL TABLET	1	
CORVITE 150 ORAL TABLET	2	
corvite fe oral tablet	2	
dl-methionine powder	2	
FERAHEME INTRAVENOUS SOLUTION	2	
FERIVA 21/7 ORAL TABLET	2	
ferocon oral capsule	1	
ferotrinsic oral capsule	1	
FERRALET 90 ORAL TABLET	2	
ferraplus 90 oral tablet	1	
FERRLECIT INTRAVENOUS SOLUTION	2	
FERROCITE PLUS ORAL TABLET	1	
FERRO-PLEX HEMATINIC ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
FERROTRIN ORAL CAPSULE	2	
FOLIVANE-F ORAL CAPSULE	2	
FOLIVANE-PLUS ORAL CAPSULE	2	
foltrin oral capsule	1	
FOSTEUM PLUS ORAL CAPSULE	2	
FOVEX ORAL CAPSULE	2	
GABADONE ORAL CAPSULE	2	
GALZIN ORAL CAPSULE	2	
GLYCOPHOS INTRAVENOUS SOLUTION	2	
hematinic plus vit/minerals oral tablet	1	
hematinic/folic acid oral tablet	1	
HEMATOGEN FORTE ORAL CAPSULE	1	
HEMATOGEN ORAL CAPSULE	1	
HEMATRON-AF ORAL TABLET	2	
HEMOCYTE PLUS ORAL CAPSULE	2	
HEMOCYTE-F ORAL TABLET	1	
hemocyte-plus oral tablet	1	
HESPAN INTRAVENOUS SOLUTION	2	
hetastarch-nacl intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
HEXTEND INTRAVENOUS SOLUTION	2	
HYPERTENSA ORAL CAPSULE	2	
ICAR-C PLUS ORAL TABLET	2	
IFEREX 150 FORTE ORAL CAPSULE	1	
INFED INJECTION SOLUTION	2	
INJECTAFER INTRAVENOUS SOLUTION	2	
INTEGRA F ORAL CAPSULE	2	
INTEGRA PLUS ORAL CAPSULE	2	
IS 24/6 ORAL	2	
K-TAN PLUS ORAL CAPSULE	1	
LIPICHOL 540 ORAL CAPSULE	2	
LISTER-V ORAL CAPSULE	2	
LMD IN D5W SOLUTION 10-5 % INTRAVENOUS	1	
LMD IN D5W SOLUTION 10-5 % INTRAVENOUS	2	
l-methionine powder	2	
l-tyrosine powder	2	
magnesium carbonate heavy powder	2	
magnesium carbonate powder	2	

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Drug Name	Drug Tier	Requirements /Limits
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-%	2	
magnesium sulfate intravenous solution 1000 mg/1.6ml, 2000 mg/3.2ml, 3000 mg/4.8ml, 4000 mg/6.4ml	2	
magnesium sulfate-lact ringers intravenous solution	2	
magnesium sulfate-nacl intravenous solution 1-0.9 gm/50ml-%, 2-0.9 gm/50ml-%, 20-0.9 gm/250ml-%, 4-0.9 gm/100ml-%, 4-0.9 gm/50ml-%, 6-0.9 gm/100ml-%, 6-0.9 gm/150ml-%, 6-0.9 gm/50ml-%	2	
manganese chloride intravenous solution	2	
MAXFE ORAL TABLET	2	
mebolic oral tablet	2	
methionine powder	2	
MULTIGEN FOLIC ORAL TABLET	1	
MULTIGEN ORAL TABLET	1	
MULTIGEN PLUS ORAL TABLET	1	
na ferric gluc cplx in sucrose intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
NEOPHE ORAL TABLET	2	
NEPHRON FA ORAL TABLET	2	
NEUREPA ORAL CAPSULE	2	
NICAPRIN ORAL TABLET	2	
nicazyme oral tablet	2	
NIFEREX ORAL TABLET	2	
NUFERA ORAL TABLET	2	
omnivex oral tablet	2	
PERCURA ORAL CAPSULE	2	
phosphorous oral tablet	1	
PLEGISOL PERFUSION SOLUTION	2	
poly-iron 150 forte oral capsule	1	
polysaccharide iron forte oral capsule	1	
potassium chloride granules	2	
potassium chloride intravenous solution prefilled syringe	2	
potassium chloride powder	2	
PRISMASOL B22GK 4/0 INTRAVENOUS SOLUTION	2	
PRISMASOL BGK 0/2.5 INTRAVENOUS SOLUTION	2	
PRISMASOL BGK 2/0 INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
PRISMASOL BGK 2/3.5 INTRAVENOUS SOLUTION	2	
PRISMASOL BGK 4/2.5 INTRAVENOUS SOLUTION	2	
PRISMASOL BK 0/0/1.2 INTRAVENOUS SOLUTION	2	
proleva oral tablet	2	
PROTEOLIN ORAL TABLET	2	
PULMONA ORAL CAPSULE	2	
purevit dualfe plus oral capsule	1	
rheumate oral capsule	2	
ribozel oral capsule	2	
saline bacteriostatic injection solution	1	
saline-phenol injection solution	2	
SENTRA AM ORAL CAPSULE	2	
SENTRA PM ORAL CAPSULE	2	
se-tan plus oral capsule	1	
sod citrate-citric acid oral solution	1	
sodium chloride bacteriostatic injection solution	1	
sodium citrate granules	2	
sodium phosphate-nacl intravenous solution	2	
sodium phosphates-dextrose intravenous solution	2	
taron forte oral capsule	2	
THE LIQUILIFT TRACE INTRAVENOUS KIT	2	
THERAMINE ORAL CAPSULE	2	
tl icon oral capsule	1	
tl-hem 150 oral tablet	1	
tl-icare oral capsule	2	
TOBAKIENT ORAL CAPSULE	2	
TREPADONE ORAL CAPSULE	2	
TRICON ORAL CAPSULE	1	
TRIFERIC HEMODIALYSIS PACKET	2	
trigels-f forte oral capsule	1	
t-support max oral capsule	2	
VASCULERA ORAL TABLET	2	
VENOFER INTRAVENOUS SOLUTION	2	
virt-fefa plus oral capsule	2	
virt-phos 250 neutral oral tablet	1	
xyzbac oral tablet	2	
zinc acetate crystals 100 %	2	
zinc trace metal intravenous solution	2	
zyvexol oral tablet	2	
zyvit oral tablet	2	
Vitamins		
ABANEU-SL SUBLINGUAL TABLET SUBLINGUAL	2	

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Drug Name	Drug Tier	Requirements /Limits
activite oral tablet	2	
ADRENAL C FORMULA ORAL TABLET	2	
advanced am/pm oral	2	
AIRAVITE ORAL TABLET	1	
ap-zel oral tablet	2	
AQUASOL A INTRAMUSCULAR SOLUTION	2	
ASCOR INTRAVENOUS SOLUTION	2	
ascorbic acid injection solution	1	
b-6 folic acid oral capsule	1	
b-complex injection injectable	2	
biocel oral tablet	1	
bp vit 3 oral capsule	1	
b-plex oral tablet	1	
b-plex plus oral tablet	1	
CALCIFOL ORAL WAFER	2	
calcium pantothenate powder	2	
calcium-d-pantothenate powder	2	
CENFOL ORAL TABLET	2	
CEREFOLIN NAC ORAL TABLET	2	
CEREFOLIN ORAL TABLET	2	
cod liver oil oral oil	1	
CORVITA ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
CORVITE FREE ORAL TABLET	1	
cyanocobalamin injection solution 1000 mcg/ml	1	
DEXIFOL ORAL TABLET	1	
DIALYVITE 3000 ORAL TABLET	2	
DIALYVITE 5000 ORAL TABLET	2	
DIALYVITE ORAL TABLET	1	
DIALYVITE/ZINC ORAL TABLET	2	
DRISDOL ORAL CAPSULE	2	
ELFOLATE PLUS ORAL TABLET 3-43.75-2.72 MG	2	
ergocalciferol oral capsule	1	
fabb oral tablet	1	
fa-vitamin b-6-vitamin b-12 oral tablet	1	
folbee oral tablet	1	
FOLBEE PLUS CZ ORAL TABLET	1	
folbee plus oral tablet	1	
FOLBIC ORAL TABLET	1	
FOLBIC RF ORAL TABLET	2	
FOLGARD OS ORAL TABLET	2	
FOLGARD RX ORAL TABLET	2	
folic acid injection solution	1	
folic acid oral tablet 1 mg	1	

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Drug Name	Drug Tier	Requirements /Limits
folica-v oral capsule	2	
folic-k oral capsule	2	
folplex 2.2 oral tablet	1	
FOLTANX ORAL TABLET	2	
FOLTANX RF ORAL CAPSULE	2	
FOLTX ORAL TABLET	2	
FOLVITE-D ORAL TABLET	2	
FORTAVIT ORAL CAPSULE	2	
FOSTEUM ORAL CAPSULE	2	
FUSION PLUS ORAL CAPSULE	2	
hydroxocobalamin acetate intramuscular solution	1	
hylavite oral tablet	2	
INFUVITE ADULT INJECTABLE INTRAVENOUS	1	
INFUVITE ADULT INJECTABLE INTRAVENOUS	2	
INFUVITE PEDIATRIC SOLUTION INTRAVENOUS	1	
INFUVITE PEDIATRIC SOLUTION INTRAVENOUS	2	
lipo-b intramuscular solution	2	
l-methylfolate ca me-cbl nac oral tablet	2	
l-methylfolate-algae-b12-b6 oral capsule	1	
l-methylfolate-b6-b12 oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
l-methyl-mc nac oral tablet	2	
l-methyl-mc oral tablet	2	
LYSIPLEX PLUS ORAL TABLET	1	
M.V.I. ADULT INTRAVENOUS INJECTABLE	2	
M.V.I. PEDIATRIC INTRAVENOUS SOLUTION RECONSTITUTED	2	
MAGNEBIND 400 ORAL TABLET	2	
MEPHYTON ORAL TABLET	2	
METAFOLBIC ORAL TABLET	2	
METAFOLBIC PLUS ORAL TABLET	2	
METAFOLBIC PLUS RF ORAL TABLET	1	
METANX ORAL CAPSULE	2	
methylfol-algae-b12-acetylcyst oral tablet	1	
mynephrocaps oral capsule	1	
MYNEPHRON ORAL CAPSULE	1	
NASCOBAL NASAL SOLUTION	2	
neovite oral tablet	2	
NEPHRONEX ORAL TABLET	1	
NEPHRO-VITE RX ORAL TABLET	2	
neurin-sl sublingual tablet sublingual	2	
niacin powder	2	
niacinamide powder	2	

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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
NICADAN ORAL TABLET	2	
NICAZEL FORTE ORAL TABLET	2	
NICAZEL ORAL TABLET	2	
NICOMIDE ORAL TABLET	2	
NIVA-FOL ORAL TABLET	1	
NUFOL ORAL TABLET	1	
NUTRICAP ORAL TABLET	1	
NUTRIFAC ZX ORAL TABLET	1	
NUTRIVIT ORAL LIQUID	2	
onevite oral tablet	2	
phytonadione injection solution	1	
phytonadione oral tablet	1	
PODIAPN ORAL CAPSULE	2	
pyridoxine hcl powder	2	
pyridoxine hcl solution 100 mg/ml injection	2	
pyridoxine hcl solution 100 mg/ml injection	1	
QUFLORA FE ORAL TABLET CHEWABLE	2	
RENAL ORAL CAPSULE	1	
RENATABS ORAL TABLET	2	
RENATABS WITH IRON ORAL	2	
REQ 49+ ORAL TABLET	2	
SIDEROL ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
sodium ascorbate powder	2	
STROVITE FORTE ORAL SYRUP	2	
SUPERVITE ORAL LIQUID	2	
support oral liquid	2	
SUPPORT-500 ORAL CAPSULE	2	
SYNAGEX ORAL CAPSULE	2	
SYNATEK ORAL CAPSULE	2	
TALIVA ORAL CAPSULE	2	
thiamine hcl injection solution	1	
thiamine hcl powder	2	
tl gard rx oral tablet	1	
TL G-FOL OS ORAL TABLET	2	
triphrocaps oral capsule	1	
tronvite oral tablet	2	
UDAMIN SP ORAL TABLET	2	
urosex oral tablet	1	
v-c forte oral capsule	1	
VIC-FORTE ORAL CAPSULE	1	
virt-caps oral capsule	1	
VIRT-GARD ORAL TABLET	1	
vit b12-methionine-inos-chol intramuscular solution	2	
VITA S FORTE ORAL TABLET	1	
VITACEL ORAL TABLET	1	

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Drug Name	Drug Tier	Requirements /Limits
VITAL-D RX ORAL TABLET	2	
VITAMAX PEDIATRIC ORAL SOLUTION	2	
VITAMEZ ORAL CAPSULE	2	
vitamin b complex 100 injection injectable	1	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	
vitamin k1 injection solution	1	
vita-min oral capsule	1	
VITAROCA PLUS ORAL TABLET	2	
vitasure oral tablet	2	
vitaxyme oral tablet	2	
vp-vite rx oral tablet	1	
xvite oral tablet	2	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
ANASPAZ ORAL TABLET DISPERSIBLE	2	
atropine sulfate intravenous solution prefilled syringe	2	
chlordiazepoxide-clidinium oral capsule	1	
ed-spaz oral tablet dispersible	1	
glycopyrrolate injection solution prefilled syringe	2	
glycopyrrolate intravenous solution prefilled syringe	2	

Drug Name	Drug Tier	Requirements /Limits
hyoscyamine sulfate injection solution	1	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral solution	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl sublingual tablet sublingual	1	
hyoscyamine sulfate sublingual tablet sublingual	1	
LIBRAX ORAL CAPSULE	2	
NULEV ORAL TABLET DISPERSIBLE	1	
oscimin oral tablet	1	
oscimin oral tablet dispersible	1	
oscimin sublingual tablet sublingual	1	
propantheline bromide powder	2	
Gastrointestinal Agents, Other		
charcoal activated powder	2	
ENTEREG ORAL CAPSULE	2	
enzadyne oral capsule	2	
l-glutamic acid hcl powder	2	
loperamide hcl powder	2	
metoclopramide hcl monohydrate powder	2	
RESTORA RX ORAL CAPSULE	2	

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Drug Name	Drug Tier	Requirements /Limits
sodium bicarbonate oral powder	1	
URSODIOL+SYRSPEND SF ORAL SUSPENSION	2	
Histamine2 (H2) Receptor Antagonists		
DEPRIZINE FUSEPAQ ORAL SUSPENSION RECONSTITUTED	2	
famotidine in nacl intravenous solution prefilled syringe	2	
Laxatives		
bisacodyl powder	2	
cascara sagrada oral fluid extract	1	
docusate sodium powder	2	
GIALAX ORAL KIT	2	
magnesium sulfate-nacl intravenous solution 2-0.9 gm/100ml-%, 3-0.9 gm/50ml-%	2	
mineral oil heavy oil	2	
mineral oil heavy oral oil	1	
mineral oil light oil	2	
mineral oil oil	2	
MURI-LUBE OIL	2	
polyethylene glycol 300 liquid	2	
polyethylene glycol 3350 powder	2	
polyethylene glycol 4500 powder	2	
Protectants		
sucralfate powder	2	

Drug Name	Drug Tier	Requirements /Limits
Proton Pump Inhibitors		
FIRST-OMEPRAZOLE ORAL SUSPENSION	2	
OMEPRAZOLE+SYRSPEND SF ALKA ORAL SUSPENSION	2	
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment		
BRINEURA KIT	2	
MEPSEVII INTRAVENOUS SOLUTION	2	
Genitourinary Agents		
Benign Prostatic Hypertrophy Agents		
finasteride oral tablet 1 mg	1	
PROPECIA ORAL TABLET	2	
Genitourinary Agents, Other		
aminoacetic acid irrigation solution	1	
CAVERJECT IMPULSE INTRACAVERNOSAL KIT	2	PA
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED	2	PA
CIALIS ORAL TABLET 10 MG, 20 MG	2	PA

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Drug Name	Drug Tier	Requirements /Limits
EDEX INTRACAVERNOSAL KIT	2	PA
glycine irrigation solution	1	
glycine powder	2	
glycine urologic irrigation solution	1	
LEVITRA ORAL TABLET	2	PA
MUSE URETHRAL PELLET	2	PA
phenazopyridine hcl powder	2	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	PA
STAXYN ORAL TABLET DISPERSIBLE	2	PA
STENDRA ORAL TABLET	2	PA
tadalafil oral tablet 10 mg, 20 mg	1	PA
vardenafil hcl oral tablet	1	PA
vardenafil hcl oral tablet dispersible	1	PA
VIAGRA ORAL TABLET	2	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
betamethasone dipropionate powder	2	
betamethasone valerate powder	2	

Drug Name	Drug Tier	Requirements /Limits
clobetasol propionate powder	2	
cortisone acetate powder	2	
dexamethasone sod phos in d5w intravenous solution	2	
dexamethasone sod phos-nacl intravenous solution	2	
dexamethasone sodium phosphate intravenous solution prefilled syringe	2	
fludrocortisone acetate powder	2	
fluocinolone acetonide powder	2	
fluocinonide powder	2	
hydrocortisone micronized powder	2	
methylprednisolone acetate powder	2	
methylprednisolone-bupivacaine injection suspension	2	
POINT OF CARE L.2 INJECTION KIT	2	
prednisolone acetate powder	2	
prednisolone powder	2	
prednisolone sodium phosphate powder	2	
prednisone powder	2	
triamcinolone acetonide powder	2	
triamcinolone diacet micronize powder	2	

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Drug Name	Drug Tier	Requirements /Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
oxytocin-dextrose intravenous solution 30-5 ut/500ml-%	2	
oxytocin-lactated ringers intravenous solution 20 unit/l	2	
oxytocin-sodium chloride intravenous solution 15-0.9 ut/250ml-%, 20-0.9 ut/500ml-%, 30-0.9 unit/l-%, 30-0.9 ut/500ml-%, 40-0.9 unit/l-%	2	
vasopressin-sodium chloride intravenous solution	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
alprostadil injection solution	1	
PROSTIN VR INJECTION SOLUTION	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
danazol powder	2	
ec-rx testosterone transdermal cream	2	
methyltestosterone powder	2	
TESTOPEL IMPLANT PELLET	2	
testosterone compounding kit transdermal cream	2	
Estrogens		
bi-est 50:50 transdermal cream	2	
bi-est 80:20 progesterone transdermal cream	2	
bi-est progest-testosterone transdermal cream	2	
BIEST/PROGESTERONE TRANSDERMAL CREAM	2	
ec-rx estradiol transdermal cream	2	
estriol-progesterone micro transdermal cream	2	
Progestins		
ec-rx progesterone transdermal cream	2	
ENDOMETRIN VAGINAL INSERT	2	
FIRST-PROGESTERONE VGS VAGINAL SUPPOSITORY	2	
megestrol acetate powder	2	
progesterone compounding kit transdermal cream	2	

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Drug Name	Drug Tier	Requirements /Limits
progesterone micronized transdermal cream	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
thyroid powder 0.23 %	2	
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
leuprolide acetate-bupivacaine intramuscular solution	2	
Hormonal Agents, Suppressant (Thyroid)		
Hormonal Agents, Suppressant (Thyroid)		
PARSABIV INTRAVENOUS SOLUTION	2	
Immunological Agents		
Immune Suppressants		
azathioprine powder	2	
methotrexate powder	2	
Immunomodulators		
KYMRIAH INTRAVENOUS SUSPENSION	2	
Inflammatory Bowel Disease Agents		
Sulfonamides		
sulfasalazine powder	2	

Drug Name	Drug Tier	Requirements /Limits
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
12-PANEL POC TOXICOLOGY SYSTEM IN VITRO KIT	2	
7t gummy es oral tablet chewable	2	
ABLYSINOL INTRA-ARTERIAL SOLUTION	2	
ACCU-CHEK AVIVA CONNECT KIT	2	
ACCU-CHEK AVIVA DEVICE	2	
ACCU-CHEK AVIVA IN VITRO SOLUTION	2	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	2	
ACCU-CHEK AVIVA PLUS KIT	2	
ACCU-CHEK COMPACT PLUS CARE KIT	2	
ACCU-CHEK COMPACT PLUS CONTROL IN VITRO SOLUTION	2	
ACCU-CHEK COMPACT PLUS IN VITRO STRIP	2	
ACCU-CHEK FASTCLIX LANCET KIT	2	
ACCU-CHEK FASTCLIX LANCETS	2	
ACCU-CHEK FLEXLINK PLUS 6MM	2	
ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	2	

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Drug Name	Drug Tier	Requirements /Limits
ACCU-CHEK GUIDE IN VITRO STRIP	2	
ACCU-CHEK GUIDE KIT	2	
ACCU-CHEK GUIDE ME KIT	2	
ACCU-CHEK MULTICLIX LANCET DEV KIT	2	
ACCU-CHEK MULTICLIX LANCETS	2	
ACCU-CHEK NANO SMARTVIEW KIT	2	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	2	
ACCU-CHEK SMARTVIEW IN VITRO STRIP	2	
ACCU-CHEK SOFT TOUCH LANCETS	2	
ACCU-CHEK SOFTCLIX LANCET DEV KIT	2	
ACCU-CHEK SOFTCLIX LANCETS	2	
ACCU-CHEK ULTRAFLEX INF SET	2	
ACTHREL INTRAVENOUS SOLUTION RECONSTITUTED	2	
adenosine (diagnostic) intravenous solution	1	
adenosine intravenous solution 3 mg/ml	1	
ADREVIEW INTRAVENOUS SOLUTION	2	
alanine powder	2	

Drug Name	Drug Tier	Requirements /Limits
ALBUKED 25 INTRAVENOUS SOLUTION	2	
ALBUKED 5 INTRAVENOUS SOLUTION	2	
albumin human intravenous solution	1	
ALBUMINEX INTRAVENOUS SOLUTION	2	
albumin-zlb intravenous solution	1	
alburx intravenous solution	1	
ALBUTEIN INTRAVENOUS SOLUTION	2	
alpha-lipoic acid injection solution	2	
AMD FOAM DRESSING PAD	2	
AMD FOAM DRESSING TOPSHEET PAD	2	
AMIDATE INTRAVENOUS SOLUTION	2	
amino acid intravenous solution 5 %	2	
AMPHADASE INJECTION SOLUTION	2	
AMYVID INTRAVENOUS SOLUTION	2	
ANHYDROUS BASE CREAM	2	
APLISOL INTRADERMAL SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
APPTRIM ORAL CAPSULE	2	
APPTRIM-D ORAL CAPSULE	2	
AQUACEL AG BURN EXTERNAL PAD	2	
arginine hcl injection solution	2	
ARIDOL INHALATION KIT	2	
arnica flower tincture	1	
ascorbic acid intravenous solution	2	
ASPARTAME (NUTRASWEET) POWDER	1	
aspartame powder	2	
ASTAMED MYO ORAL CAPSULE	2	
atropine sulfate ophthalmic emulsion	2	
AUTOLET LANCING DEVICE	2	
AUTOSOFT 30 INFUSION SET	2	
AUTOSOFT 90 INFUSION SET	2	
AUTOSOFT XC INFUSION SET	2	
AVAILNEX ORAL TABLET CHEWABLE	2	
axifol oral capsule	2	
AXONA ORAL PACKET	2	
AXUMIN INTRAVENOUS SOLUTION	2	
bacteriostatic water(benz alc) injection solution	2	

Drug Name	Drug Tier	Requirements /Limits
bal in oil intramuscular solution	1	
barium sulfate powder	1	
BAYER CONTOUR IN VITRO LIQUID HIGH , LOW , NORMAL	2	
bcaa injection solution	2	
bcaa intravenous solution	2	
BD INTEGRA NEEDLE 25G X 5/8"	2	
BD LANCET ULTRAFINE 30G	2	
BD POSIFLUSH INTRAVENOUS SOLUTION	1	
BD SAFETYGLIDE SYRINGE/NEEDLE 21G X 1-1/2"	2	
BD SYRINGE LUER-LOK 30 ML	2	
BENZEPRO EXTERNAL	2	
BENZEPRO EXTERNAL FOAM 5.2 %, 9.7 %	2	
BENZEPRO EXTERNAL LIQUID	2	
bevacizumab intravitreal solution prefilled syringe	2	
bi-mix intracavernosal solution reconstituted	2	PA
BIOGUARD GAUZE SPONGES PAD 4"X4"	2	
BIOGUARD ISLAND DRESSINGS PAD	2	
BIOGUARD NON-ADHERENT DRESSING PAD	2	
BIOTEL CARE BLOOD GLUCOSE SYST KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
boric acid external granules	1	
BOTOX COSMETIC INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
bravura all-in-one external cream	2	
BREVITAL SODIUM INJECTION SOLUTION RECONSTITUTED	2	
BRIDION INTRAVENOUS SOLUTION	2	
bromelain powder	2	
candida albicans skn tst antgn intradermal solution	1	
CANDIN INTRADERMAL SOLUTION	2	
cantharidin external solution	2	
capsule coni-snap #0 purple capsule	2	
CARETOUCH LANCING/EJECTOR	2	
CARTICEL INTRA-ARTICULAR IMPLANT	2	
CAYA VAGINAL DIAPHRAGM	2	
CERETEC INTRAVENOUS KIT	2	
CHEMSTRIP UGK IN VITRO STRIP	2	
CHIRHOSTIM INTRAVENOUS SOLUTION RECONSTITUTED	2	
CHOLETEC INTRAVENOUS KIT	2	

Drug Name	Drug Tier	Requirements /Limits
CHOLEXMAX ORAL POWDER	2	
CHOLEXTRA T/F ORAL POWDER	2	
choline bitartrate powder	2	
cisatracurium besylate intravenous solution 10 mg/ml, 2 mg/ml	1	
CITANEST FORTE DENTAL INJECTION SOLUTION	2	
CLEO 90 INFUSION SET 24"/6MM	2	
coenzyme q-10 injection solution	2	
CONTOUR NEXT CONTROL IN VITRO SOLUTION	2	
CONTOUR NEXT MONITOR KIT	2	
CONTOUR NEXT TEST IN VITRO STRIP	2	
CONTOUR TEST IN VITRO STRIP	2	
CORTROSYN INJECTION SOLUTION RECONSTITUTED	2	
cosyntropin injection solution reconstituted	1	
cream base external cream	2	
CURITY AMD ANTIMICROBIAL SPNGE PAD 4"X4"	2	
CURITY AMD ANTIMICROBIAL STRIP	2	
CURITY IODOFORM PACKING STRIP	2	

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Drug Name	Drug Tier	Requirements /Limits
cyanocobalamin injection solution 2000 mcg/ml	2	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED	2	
CYSVIEW INTRAVESICAL SOLUTION RECONSTITUTED	2	
DATSCAN INTRAVENOUS SOLUTION	2	
DEFINITY INTRAVENOUS SUSPENSION	2	
dehydrated alcohol injection solution	1	
DELFLEX-LC/1.5% DEXTROSE INTRAPERITONEAL SOLUTION	1	
DELFLEX-LC/2.5% DEXTROSE SOLUTION 394 MOSM/L INTRAPERITONEAL	1	
DELFLEX-LC/2.5% DEXTROSE SOLUTION 394 MOSM/L INTRAPERITONEAL	2	
DELFLEX-LC/4.25% DEXTROSE SOLUTION 483 MOSM/L INTRAPERITONEAL	1	
DELFLEX-LC/4.25% DEXTROSE SOLUTION 483 MOSM/L INTRAPERITONEAL	2	

Drug Name	Drug Tier	Requirements /Limits
DELFLEX-SM/1.5% DEXTROSE INTRAPERITONEAL SOLUTION	1	
DELFLEX-SM/2.5% DEXTROSE INTRAPERITONEAL SOLUTION	1	
DELTEC COZMO CLEO SET 24" 6MM	2	
DEPLIN 15 ORAL CAPSULE	2	
DEPLIN 7.5 ORAL CAPSULE	2	
desflurane inhalation solution	1	
dexamethasone sod phos-bupiv injection solution prefilled syringe	2	
DEXCOM G4 PLAT PED RCV/SHARE DEVICE	2	
DEXCOM G4 PLAT PED RECEIVER DEVICE	2	
DEXCOM G4 PLATINUM RCV/SHARE DEVICE	2	
DEXCOM G4 PLATINUM RECEIVER DEVICE	2	
DEXCOM G4 PLATINUM TRANSMITTER	2	
DEXCOM G4 SENSOR	2	
DEXCOM G5 MOB/G4 PLAT SENSOR	2	
DEXCOM G5 MOBILE RECEIVER DEVICE	2	
DEXCOM G5 MOBILE TRANSMITTER	2	

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Drug Name	Drug Tier	Requirements /Limits
DEXCOM G6 RECEIVER DEVICE	2	
DEXCOM G6 SENSOR	2	
DEXCOM G6 TRANSMITTER	2	
DEXCOM RECEIVER KIT DEVICE	2	
DEXOPIN INJECTION KIT	2	
DIANEAL LOW CALCIUM/1.5% DEX INTRAPERITONEAL SOLUTION	2	
DIANEAL LOW CALCIUM/2.5% DEX INTRAPERITONEAL SOLUTION	2	
DIANEAL LOW CALCIUM/4.25% DEX INTRAPERITONEAL SOLUTION	2	
DIANEAL PD-2/1.5% DEXTROSE INTRAPERITONEAL SOLUTION	2	
DIANEAL PD-2/2.5% DEXTROSE INTRAPERITONEAL SOLUTION	2	
DIANEAL PD-2/4.25% DEXTROSE INTRAPERITONEAL SOLUTION	2	
diathrive blood glucose meter device	2	
diathrive blood glucose test in vitro strip	2	
diathrive glucose control soln in vitro liquid	2	
diathrive glucose test in vitro strip	2	
diathrive lancing device	2	

Drug Name	Drug Tier	Requirements /Limits
diflunisal powder	2	
DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	2	
diltiazem hcl-sodium chloride intravenous solution 125-0.7 mg/125ml-%	2	
diluent for treprostinil intravenous solution	1	
DIPRIVAN INTRAVENOUS EMULSION	2	
dl-alanine powder	2	
dl-leucine powder	2	
dl-phenylalanine powder	2	
DOTAREM INTRAVENOUS SOLUTION	2	
DOTAREM INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
DOTATOC GA 68 INTRAVENOUS SOLUTION	2	
DURABASE ADVANCED EXTERNAL CREAM	2	
DURABASE EXTERNAL CREAM	2	
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE	2	
d-xylose powder	1	
DYNABAC 5.0 COMBINATION THERAPY PACK	2	
EASY GLIDE LUER LOCK SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
EASYMAX CONTROL IN VITRO SOLUTION	2	
easyplus blood glucose test in vitro strip	2	
EASYPOINT NEEDLE 25G X 1-1/2"	2	
EC-RX DHEA EXTERNAL CREAM	2	
edetate disodium intravenous solution	2	
ELFOLATE ORAL TABLET	2	
EMBRACE TALK BLOOD GLUCOSE DEVICE	2	
EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION	2	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	2	
EMBRACE TALK MONITORING SYSTEM KIT	2	
emollient base external cream	2	
empty capsule size 0 clear capsule	2	
empty capsule size 0 white/opa capsule	2	
empty capsule size 1 clear capsule	2	
empty capsule size 1 white/opa capsule	2	
empty capsule size 3 clear capsule	2	
empty capsule size 3 white/opa capsule	2	
ENLITE GLUCOSE SENSOR	2	
ENTERAGAM ORAL PACKET	2	

Drug Name	Drug Tier	Requirements /Limits
EOVIST INTRAVENOUS SOLUTION	2	
ephedrine sulfate (pressors) injection solution prefilled syringe	2	
EROS-CTD DEVICE	2	
ETHAMOLIN INTRAVENOUS SOLUTION	2	
etomidate intravenous solution	1	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
EVERSENSE SENSOR/HOLDER	2	
EVERSENSE SMART TRANSMITTER	2	
EXCILON AMD DRAIN SPONGES PAD	2	
EXQUISITE HRT CREAM	2	
EXTRANEAL INTRAPERITONEAL SOLUTION	2	
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED	2	
FEMCAP VAGINAL DEVICE	2	
filter needle	2	
FIRST-ATENOLOL ORAL SOLUTION	2	
fixed oil suspension liquid	2	
FLEXBUMIN INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
fludeoxyglucose f 18 intravenous solution	2	
folite oral tablet	2	
food color blue powder	2	
FORA D40D GLUCOSE/PRESSURE DEVICE	2	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	2	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	2	
FORANE INHALATION SOLUTION	2	
FORTISCARE CONTROL IN VITRO SOLUTION	2	
FREESTYLE FREEDOM LITE KIT	2	
FREESTYLE INSULINX SYSTEM KIT	2	
FREESTYLE INSULINX TEST IN VITRO STRIP	2	
FREESTYLE LIBRE 14 DAY READER DEVICE	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	
FREESTYLE LIBRE READER DEVICE	2	
FREESTYLE LIBRE SENSOR SYSTEM	2	
FREESTYLE LITE TEST IN VITRO STRIP	2	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	2	
FREESTYLE TEST IN VITRO STRIP	2	

Drug Name	Drug Tier	Requirements /Limits
fresenius propoven intravenous emulsion	1	
GADAVIST INTRAVENOUS SOLUTION	2	
GALAXTRA ORAL POWDER	2	
gallium citrate ga 67 intravenous solution	2	
GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE	2	
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
gen7t external lotion	2	
gen7t external patch	2	
gen7t plus external lotion	2	
gen7t plus external patch	2	
GENTEEL LANCING KIT (BLUE) KIT	2	
GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
GLEOLAN ORAL SOLUTION RECONSTITUTED	2	
GLUCAGEN DIAGNOSTIC INJECTION SOLUTION RECONSTITUTED	2	
glucagon hcl (diagnostic) injection solution reconstituted	2	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP	2	

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Drug Name	Drug Tier	Requirements /Limits
GLUCOCARD EXPRESSION TEST IN VITRO STRIP	2	
GLUCOCARD SHINE CONNEX KIT	2	
GLUCOCARD SHINE EXPRESS KIT	2	
GLUCOCARD SHINE TEST IN VITRO STRIP	2	
GLUCOCARD VITAL TEST IN VITRO STRIP	2	
glutamine powder	2	
glutathione injection solution	2	
glutathione intravenous solution	2	
glutathione powder	2	
glutathione-l powder	2	
glutathione-l reduced powder	2	
glycine injection solution	2	
GUARDIAN CONNECT TRANSMITTER	2	
GUARDIAN LINK 3 TRANSMITTER	2	
GUARDIAN REAL-TIME SYSTEM KIT	2	
GUARDIAN SENSOR (3)	2	
heparin lock flush intravenous solution	1	
heparin sodium flush intravenous kit	1	
heparin sodium lock flush intravenous solution	1	
HEPATOLITE INTRAVENOUS KIT	1	

Drug Name	Drug Tier	Requirements /Limits
HISTATROL INJECTION SOLUTION	2	
HISTATROL INTRADERMAL SOLUTION	2	
home pap kit in vitro kit	2	
HRT BOTANICAL CREAM	2	
hrt cream base cream	2	
HRT CREAM CREAM	2	
HRT HEAVY CREAM	2	
HUMAN ALBUMIN GRIFOLS INTRAVENOUS SOLUTION	2	
HW EMBRACE PRO GLUCOSE METER DEVICE	2	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	2	
HW EMBRACE TALK BLOOD GLUCOSE DEVICE	2	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	2	
HYALGAN INTRA-ARTICULAR SOLUTION	2	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
hyaluronidase (intraocular) intraocular solution	2	
hydromorphone hcl injection solution 0.2 mg/ml	2	

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Drug Name	Drug Tier	Requirements /Limits
HYLENEX INJECTION SOLUTION	2	
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
IC GREEN INTRAVENOUS SOLUTION RECONSTITUTED	2	
indigo carmine injection solution	1	
indium in 111 dtpa intrathecal solution	1	
indium in 111 oxyquinoline intravenous solution	1	
indocyanine green intravenous solution reconstituted	1	
INFLATHERM COMBINATION THERAPY PACK	2	
inulin intravenous solution	2	
iodine strong oral solution	1	
isoflurane inhalation solution	1	
isosulfan blue subcutaneous solution	1	
J-TIP KIT W/VIAL ADAPTERS KIT	2	
kedbumin intravenous solution	1	
KERAMATRIX REPLICINE 5CMX5CM EXTERNAL SHEET	2	
KERLIX AMD ANTIMICROBIAL	2	
KERLIX AMD SUPER SPONGES PAD	2	

Drug Name	Drug Tier	Requirements /Limits
KETALAR INJECTION SOLUTION	2	
ketamine hcl injection solution 0.6 mg/ml	2	
ketamine hcl injection solution 10 mg/ml, 100 mg/ml, 50 mg/ml	1	
ketamine hcl injection solution prefilled syringe 50 mg/ml, 60 mg/20ml	2	
ketamine hcl intravenous solution prefilled syringe	2	
ketamine hcl sublingual troche	2	
ketamine hcl-sodium chloride intravenous solution prefilled syringe 100-0.9 mg/10ml-%, 20-0.9 mg/2ml-%, 50-0.9 mg/5ml-%	2	
KETOCARE IN VITRO STRIP	2	
ketorolac-ropiv-ketamine injection solution prefilled syringe	2	
KETOSTIX IN VITRO STRIP	2	
KINEVAC INJECTION SOLUTION RECONSTITUTED	2	
KLARITY-B OPHTHALMIC SOLUTION	2	
KLARITY-L OPHTHALMIC EMULSION	2	
L.E.T. EXTERNAL GEL	2	
l-alanine powder	2	
lancets thin	2	

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Drug Name	Drug Tier	Requirements /Limits
LANCETS ULTRA THIN	2	
l-arginine powder	2	
l-cystine powder	2	
LDL CARE ORAL POWDER	2	
lecithin granules	2	
levocarnitine injection solution	2	
LEXISCAN INTRAVENOUS SOLUTION	2	
l-glutamic acid powder	2	
l-glutamine crystals	2	
l-glutamine powder	2	
l-histidine monohydrochloride crystals	2	
l-histidine monohydrochloride powder	2	
lidocaine in d5w intravenous solution 3-5 mg/ml-%	2	
LIFESCAN UNISTIK II LANCETS	2	
LIMBREL ORAL CAPSULE	2	
LIMBREL250 ORAL CAPSULE	2	
LIMBREL500 ORAL CAPSULE	2	
LIPIODOL INJECTION OIL	2	
lipo intramuscular solution	2	
lipo-c intramuscular solution	2	
LIPOCREAM BASE EXTERNAL CREAM	2	

Drug Name	Drug Tier	Requirements /Limits
liposomal heavy external cream	2	
l-isoleucine powder	2	
l-leucine powder	2	
l-methylfolate calcium oral tablet	1	
l-methylfolate forte oral capsule 15-90.314 mg	1	
l-methylfolate forte oral capsule 7.5-90.314 mg	2	
l-methylfolate oral tablet	1	
l-methylfolate-algae oral capsule 15-90.314 mg	1	
LMR PLUS EXTERNAL KIT	2	
l-phenylalanine powder	2	
l-proline powder	2	
l-threonine crystals	2	
l-tryptophan powder	2	
l-valine crystals	2	
l-valine powder	2	
lysine hcl injection solution	2	
MACRILEN ORAL PACKET	2	
MACUTEK ORAL TABLET DISPERSIBLE	2	
magnesium sulfate-nacl intravenous solution 3-0.9 gm/150ml-%	2	
MAGNEVIST INTRAVENOUS SOLUTION	2	
medactiv oral tablet	2	
methohexital sodium intravenous solution prefilled syringe	2	

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Drug Name	Drug Tier	Requirements /Limits
methylcobalamin injection solution reconstituted	2	
MICROLET NEXT LANCING DEVICE	2	
MINIMED 530G INSULIN PUMP DEVICE	2	
MINIMED GUARDIAN SENSOR 3	2	
MINIMED PRO-SET INFUSION 24"	2	
MINIMED PUMP RESERVOIR 3ML	2	
MITOSOL OPHTHALMIC KIT	2	
MONOJECT FLUSH SYRINGE INTRAVENOUS SOLUTION	1	
MONOJECT SODIUM CHLORIDE FLUSH INTRAVENOUS SOLUTION	1	
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
morphine sulfate-nacl injection solution prefilled syringe	2	
moxifloxacin hcl intraocular solution 1 mg/ml	2	
MULTIBASE EXTERNAL CREAM	2	
MULTIHANCE INTRAVENOUS SOLUTION	2	
MULTI-LANCET DEVICE 2 KIT	2	
MYOVIEW 30ML INTRAVENOUS KIT	2	

Drug Name	Drug Tier	Requirements /Limits
NEOKE ALCAR ORAL POWDER	2	
NEOKE BCAA4 ORAL POWDER	2	
neoke bhb oral powder	2	
NEOKE RA LIPOIC ORAL POWDER	2	
neostigmine methylsulfate intravenous solution 3 mg/3ml, 5 mg/5ml	2	
NEXAVIR INJECTION SOLUTION	2	
NORDIPEN 5 INJECTION DEVICE	2	
normal saline flush intravenous solution	1	
NORM-JECT LUER SLIP SYRINGE	2	
NUCARACLINPAK EXTERNAL KIT	2	
NUCARARXPAK EXTERNAL KIT	2	
NUDERMRXPAK 120 EXTERNAL THERAPY PACK	2	
NUDERMRXPAK 60 EXTERNAL THERAPY PACK	2	
OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION	2	
OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION	2	
OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION	2	
omega-3 rx complete oral therapy pack	2	
OMNIBASE EXTERNAL CREAM	2	
OMNIPAQUE INTRAVENOUS SOLUTION 350 MG/ML	2	
OMNISCAN INJECTION INJECTABLE	2	
OMNISCAN INTRAVENOUS SOLUTION	2	
one drop blood glucose monitor kit	2	
one drop test in vitro strip	2	
ONETOUCH DELICA LANCING DEV	2	
ONETOUCH DELICA PLUS LANCING	2	
ONETOUCH ULTRA 2 KIT	2	
ONETOUCH ULTRA BLUE IN VITRO STRIP	2	
ONETOUCH ULTRA MINI KIT	2	
ONETOUCH VERIO FLEX SYSTEM KIT	2	
ONETOUCH VERIO IN VITRO SOLUTION HIGH	2	
ONETOUCH VERIO IN VITRO STRIP	2	
ONETOUCH VERIO IQ SYSTEM KIT	2	
ONETOUCH VERIO KIT	2	
ONETOUCH VERIO SYNC SYSTEM KIT	2	
OPTIRAY 350 INJECTION SOLUTION	2	
OPTISON INTRAVENOUS SUSPENSION	2	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
oxytocin-dextrose intravenous solution 20-5 unt/l-%	2	
oxytocin-lactated ringers intravenous solution 30 unit/500ml	2	
oxytocin-sodium chloride intravenous solution 20-0.9 unt/l-%	2	
PARADIGM INSULIN PUMP DEVICE	2	
PARADIGM QUICK-SET 23" 9MM	2	
PARADIGM REAL-TIME STARTER KIT	2	
PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE	2	
passion fruit flavor powder	2	
pedizolpak external therapy pack	2	
peg troche base pellet	2	
PERFORMAX SALT SUPPORTIVE BASE EXTERNAL CREAM	2	

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Drug Name	Drug Tier	Requirements /Limits
ph strips in vitro diagnostic test	2	
phenylephrine hcl (pressors) intravenous solution prefilled syringe 0.5 mg/5ml	2	
phenylephrine hcl intracavernosal solution	2	PA
PHOTREXA VISCOUS OPHTHALMIC SOLUTION PREFILLED SYRINGE	2	
PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE	2	
PLASBUMIN-25 INTRAVENOUS SOLUTION	2	
PLASBUMIN-5 INTRAVENOUS SOLUTION	2	
PLASMANATE INTRAVENOUS SOLUTION	2	
plasticized base ointment	2	
PLO20 FLOWABLE EXTERNAL GEL	2	
PLURONIC GEL 30 %	2	
poloxamer 407 powder	2	
polyethylene glycol 1450 flakes	2	
POLYFIN INFUSION SET 42"	2	
polymac progel gel	2	
PR BENZOYL PEROXIDE EXTERNAL LIQUID	2	
PRECISION LINK KIT	2	

Drug Name	Drug Tier	Requirements /Limits
PRECISION PCX PLUS TEST IN VITRO STRIP	2	
PRECISION QID MONITOR DEVICE	2	
PRECISION QID TEST IN VITRO STRIP	2	
PRECISION SOF-TACT MONITOR DEVICE	2	
PRECISION SOF-TACT TEST IN VITRO STRIP	2	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	2	
PRECISION XTRA DEVICE	2	
PRECISION XTRA KIT	2	
PRECISION XTRA MONITOR DEVICE	2	
prednisol ace-moxiflox-bromfen ophthalmic suspension	2	
prednisolone acetate-nepafenac ophthalmic suspension	2	
prednisolone acet-moxifloxacin ophthalmic suspension	2	
prednisolon-moxiflox-bromfenac ophthalmic solution	2	
prednisolon-moxiflox-nepafenac ophthalmic suspension	2	
PRE-PEN INTRADERMAL SOLUTION	2	
PRODIGY NO CODING BLOOD GLUC KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
professional dna collection combination kit	2	
PROHANCE INTRAVENOUS SOLUTION	2	
propofol intravenous emulsion	1	
PROVAYBLUE INTRAVENOUS SOLUTION	2	
PROVOCHOLINE INHALATION SOLUTION RECONSTITUTED	2	
purified water oral liquid	2	
quad-mix intracavernosal solution reconstituted	2	PA
QUINIXIL EXTERNAL THERAPY PACK	2	
RADIOGARDASE ORAL CAPSULE	2	
RAPPORT RLS KIT	2	
RAPPORT VTD KIT	2	
READI-CAT 2 ORAL SUSPENSION	2	
RELION BLOOD GLUCOSE TEST IN VITRO STRIP	2	
RELION LANCET DEVICES 30G	2	
RELION PREMIER CLASSIC DEVICE	2	
RELION PREMIER TEST IN VITRO STRIP	2	
RELION ULTIMA TEST IN VITRO STRIP	2	
REMEDIENT ORAL CAPSULE	2	
renewcream hrt cream	2	

Drug Name	Drug Tier	Requirements /Limits
RESECTISOL IRRIGATION SOLUTION	2	
RESET FOR IOS OR ANDROID APP	2	
RESET-O FOR IOS OR ANDROID APP	2	
R-GENE 10 INTRAVENOUS SOLUTION	2	
rocuronium bromide intravenous solution prefilled syringe 100 mg/10ml, 75 mg/7.5ml	2	
ROPIDEX INJECTION KIT	2	
ropiv-clonidine-ketorolac solution prefilled syringe	2	
saccharin powder	2	
saline flush intravenous solution	1	
SALINE FLUSH ZR INTRAVENOUS SOLUTION	1	
sash kit intravenous kit	1	
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
SECREFLO INTRAVENOUS SOLUTION RECONSTITUTED	2	
SECURE SAFE ALLERGY TRAY KIT	2	
SECURESAFE HYPODERMIC NEEDLE 18G X 1" , 19G X 1" , 19G X 1-1/2" , 22G X 1" , 25G X 1-1/2"	2	

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Drug Name	Drug Tier	Requirements /Limits
SECURESAFE SYRINGE/NEEDLE 20G X 1" 3 ML, 20G X 1-1/2" 3 ML, 21G X 1" 3 ML, 21G X 1-1/2" 10 ML, 21G X 1-1/2" 3 ML, 21G X 1-1/2" 5 ML, 22G X 1" 3 ML, 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 1" 1 ML, 25G X 5/8" 1 ML, 25G X 5/8" 3 ML, 27G X 1/2" 1 ML	2	
SECURESAFE TUBERCULIN SYRINGE	2	
selenious acid intravenous solution	2	
sevoflurane inhalation solution	1	
sodium chloride flush intravenous solution	1	
sodium citrate in vitro solution prefilled syringe	2	
sodium citrate intravenous solution prefilled syringe	2	
sodium citrate lock flush intravenous solution prefilled syringe	2	
sodium hyaluronate intra-articular solution prefilled syringe	2	
sodium lauryl sulfate powder	2	
sodium nitrite intravenous solution	1	
sodium saccharin granules	1	
sodium saccharin powder	1	
SOF-SENSOR	2	
SOF-SET INFUSION SET 42"	2	
sorbitol candy base	2	
sorbitol irrigation solution 3 %	2	
sorbitol irrigation solution 3.3 %	1	
sorbitol-mannitol irrigation solution	1	
SPHERUSOL INTRADERMAL SOLUTION	2	
stearic acid powder	2	
STERILE DILUENT FLOLAN PH 12 INTRAVENOUS SOLUTION	2	
STERILE DILUENT FOR FLOLAN INTRAVENOUS SOLUTION	2	
sterile diluent/epoprostenol intravenous solution	1	
sterile water for injection injection solution	1	
sterile water for injection intravenous solution	1	
succinylcholine chloride injection solution prefilled syringe	2	
SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
super bi-mix intracavernosal solution reconstituted	2	PA

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Drug Name	Drug Tier	Requirements /Limits
super quad-mix intracavernosal solution reconstituted	2	PA
super tri-mix intracavernosal solution reconstituted	2	PA
suppository blend pellet	2	
SUPRANE INHALATION SOLUTION	2	
SURESTEP PRO HIGH GLUCOSE IN VITRO LIQUID	2	
SURESTEP PRO LOW GLUCOSE IN VITRO LIQUID	2	
SURESTEP PRO NORMAL GLUCOSE IN VITRO LIQUID	2	
SUSPENDRX W/BITTERBLOC SWEET ORAL SUSPENSION	2	
SUSPENDRX W/BITTERBLOC UNSWEET ORAL SUSPENSION	2	
SWABFLUSH SALINE FLUSH INTRAVENOUS SOLUTION	1	
sweetening enhancer liquid	2	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
syringe luer lock 30 ml	2	
syringe luer slip 1 ml	2	

Drug Name	Drug Tier	Requirements /Limits
TAGITOL V ORAL SUSPENSION	2	
tangerine flavor oil	2	
taurine injection solution	2	
taurine liquid	2	
taurine powder	2	
technet tc 99m sulfur colloid injection kit	2	
technetium tc 99m mebrofenin intravenous kit	1	
technetium tc 99m medronate intravenous kit	2	
technetium tc 99m pyrophos intravenous kit	2	
technetium tc 99m sestamibi intravenous kit	1	
TELFA AMD ISLAND DRESSING PAD	2	
TELFA AMD NON-ADHERENT PAD	2	
TERRELL INHALATION SOLUTION	1	
thallous chloride tl 201 intravenous solution 1 mci/ml	1	
thallous chloride tl 201 intravenous solution 2 mci/ml	2	
THERAHONEY EXTERNAL SHEET	2	
THERAMINE PLUS ORAL PACKET	2	
thiamine mononitrate powder	2	
threonine powder	2	

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Drug Name	Drug Tier	Requirements /Limits
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
TOVET EXTERNAL KIT	2	
TOXICOLOGY MED COLLECTION SYS IN VITRO KIT	2	
toxicology saliva collection oral kit	2	
tri-amino injection solution	2	
tri-mix intracavernosal solution reconstituted	2	PA
trisodium citrate/crrt intravenous solution	2	
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
troche base powder	2	
tropicamide powder	2	
tropicamide-phenylephrine ophthalmic solution	2	
TRUE FOCUS BLOOD GLUCOSE METER DEVICE	2	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP	2	
TRUE METRIX LEVEL 1 IN VITRO SOLUTION	2	
TRUE METRIX LEVEL 2 IN VITRO SOLUTION	2	
TRUE METRIX LEVEL 3 IN VITRO SOLUTION	2	
TRUETRACK TEST IN VITRO STRIP	2	
TRUSTEEL INFUSION SET	2	

Drug Name	Drug Tier	Requirements /Limits
tryptophan powder	2	
TUBERSOL INTRADERMAL SOLUTION	2	
ULTANE INHALATION SOLUTION	2	
ULTRABAG/DIANEAL PD-2/1.5% DEX INTRAPERITONEAL SOLUTION	2	
ULTRABAG/DIANEAL PD-2/2.5% DEX INTRAPERITONEAL SOLUTION	2	
ULTRABAG/DIANEAL PD-2/4.25%DEX INTRAPERITONEAL SOLUTION	2	
ULTRABAG/DIANEAL/ 1.5% DEXTROSE INTRAPERITONEAL SOLUTION	2	
ULTRABAG/DIANEAL/ 2.5% DEXTROSE INTRAPERITONEAL SOLUTION	2	
ULTRABAG/DIANEAL/ 4.25% DEX INTRAPERITONEAL SOLUTION	2	
ULTRAVIST INJECTION SOLUTION 77 %	2	
UNISTIK 1	2	
UNISTRIP CONTROL IN VITRO SOLUTION LOW	2	
universal water gel	2	
valine powder	2	
vanishing external cream	2	
VARISOFT INFUSION SET	2	

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Drug Name	Drug Tier	Requirements /Limits
VAROPHEN EXTERNAL KIT	2	
VASCAZEN ORAL CAPSULE	2	
vb6 p5p oral powder	2	
versabase cream	2	
versabase foam	2	
versabase lotion	2	
versabase shampoo	2	
VISBIOME ORAL PACKET	2	
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
VISIPAQUE INTRAVENOUS SOLUTION 320 MG/ML	2	
VITATROCHE PLUS BASE SF GRANULES	2	
VITRASE INJECTION SOLUTION	2	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	2	
VIVAGUARD INO GLUCOSE METER DEVICE	2	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	2	
VIVAGUARD LANCING DEVICE	2	
VIZAMYL INTRAVENOUS SOLUTION	2	
volumex intravenous solution prefilled syringe	1	

Drug Name	Drug Tier	Requirements /Limits
VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	2	
xenon xe 133 inhalation gas	2	
XERFORM OIL EMULSION ROLL EXTERNAL	2	
XEROFORM OIL EMULSION 2"X2" EXTERNAL PAD	2	
XEROFORM OIL EMULSION GAUZE EXTERNAL PAD	2	
XEROFORM OIL EMULSION STRIP EXTERNAL	2	
XEROFORM PETROLAT GAUZE 1"X8" EXTERNAL	2	
XEROFORM PETROLAT GAUZE 5"X9" EXTERNAL	2	
XEROFORM PETROLAT PATCH 2"X2" EXTERNAL PAD	2	
XEROFORM PETROLAT PATCH 4"X4" EXTERNAL PAD	2	
XEROFORM PETROLATUM ROLL 4"X9' EXTERNAL	2	
ZOLGENSMA 10.1-10.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 10.6-11.0 KG INTRAVENOUS KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
ZOLGENSMA 11.1-11.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 11.6-12.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 12.1-12.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 12.6-13.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 13.1-13.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 2.6-3.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 3.1-3.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 3.6-4.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 4.1-4.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 4.6-5.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 5.1-5.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 5.6-6.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 6.1-6.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 6.6-7.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 7.1-7.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 7.6-8.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 8.1-8.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 8.6-9.0 KG INTRAVENOUS KIT	2	
ZOLGENSMA 9.1-9.5 KG INTRAVENOUS KIT	2	
ZOLGENSMA 9.6-10.0 KG INTRAVENOUS KIT	2	
ZULRESSO INTRAVENOUS SOLUTION	2	
Ophthalmic Agents		
Ophthalmic Prostaglandin and Prostamide Analogs		
bimatoprost external solution	1	
LATISSE EXTERNAL SOLUTION	2	
Ophthalmic Agents, Other		
ak-fluor intravenous solution	1	
altafluor benox ophthalmic solution	1	
AMVISC INTRAOCULAR SOLUTION	2	
AMVISC PLUS INTRAOCULAR SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
balanced salt intraocular solution	1	
BIOLON INTRAOCULAR SOLUTION	2	
BSS INTRAOCULAR SOLUTION	1	
fluorescein-benoxinate ophthalmic solution	1	
FLUORESCITE INTRAVENOUS SOLUTION	2	
FLUOR-I-STRIPS A.T. OPHTHALMIC STRIP	1	
FLURA-SAFE OPHTHALMIC SOLUTION	2	
GLOSTRIPS OPHTHALMIC STRIP	1	
HEALON GV INTRAOCULAR SOLUTION	2	
HEALON INTRAOCULAR SOLUTION	2	
HEALON5 INTRAOCULAR SOLUTION	2	
JETREA INTRAVITREAL SOLUTION	2	
lidocaine-phenylephrine intraocular solution	2	
lissamine green ophthalmic strip	1	
LUXTURNA INTRAOCULAR SUSPENSION	2	
MACUGEN INTRAOCULAR SOLUTION	2	
moxifloxacin hcl intraocular solution 5 mg/ml	2	
MYDRIACYL OPHTHALMIC SOLUTION	2	
PAREMYD OPHTHALMIC SOLUTION	2	
proparacaine-fluorescein ophthalmic solution	1	
PROVISC INTRAOCULAR SOLUTION	2	
ROSE GLO OPHTHALMIC STRIP	2	
tropicamide ophthalmic solution	1	
tropicamide-cyclopentolate-pe ophthalmic solution	2	
Ophthalmic Anti-allergy Agents		
CYCLOMYDRIL OPHTHALMIC SOLUTION	2	
Ophthalmic Antiglaucoma Agents		
MIOSTAT INTRAOCULAR SOLUTION	2	
Ophthalmic Anti-inflammatories		
DEXYCU INTRAOCULAR SUSPENSION	2	
ILUVIEN INTRAVITREAL IMPLANT	2	
OZURDEX INTRAVITREAL IMPLANT	2	

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Drug Name	Drug Tier	Requirements /Limits
prednisolone-bromfenac ophthalmic solution	2	
prednisolone-gatifloxacin ophthalmic suspension	2	
prednisolon-gatiflox-bromfenac ophthalmic solution	2	
prednisolon-gatiflox-bromfenac ophthalmic suspension	2	
RETISERT INTRAVITREAL IMPLANT	2	
triple pmb ophthalmic solution reconstituted	2	
YUTIQ INTRAVITREAL IMPLANT	2	
Otic Agents		
Otic Agents		
triple pmk ophthalmic solution reconstituted	2	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
DICOPANOL FUSEPAQ ORAL SUSPENSION RECONSTITUTED	2	
DICOPANOL RAPIDPAQ ORAL SUSPENSION RECONSTITUTED	2	
diphenhydramine hcl powder	2	
doxylamine succinate powder	2	
hydroxyzine pamoate powder	2	
tripelennamine hcl powder	2	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	2	
Bronchodilators, Sympathomimetic		
ephedrine sulfate-nacl intravenous solution prefilled syringe 50-0.9 mg/5ml-%	2	
epinephrine hcl-nacl intravenous solution prefilled syringe	2	
epinephrine professional injection kit	2	
EPINEPHRINESNAP-EMS INJECTION KIT	2	
EPINEPHRINESNAP-V INJECTION KIT	2	
Phosphodiesterase Inhibitors, Airways Disease		
aminophylline anhydrous powder	2	
aminophylline powder	2	
DIFIL-G FORTE ORAL LIQUID	1	
theophylline-ethylenediamine powder	2	
Respiratory Tract Agents, Other		
acetylcysteine powder	2	
benzonatate oral capsule	1	
BROMFED DM ORAL SYRUP	1	
CUROSURF INTRATRACHEAL SUSPENSION	2	

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Drug Name	Drug Tier	Requirements /Limits
dextromethorphan hbr monohyd powder	2	
GILPHEX TR ORAL TABLET	2	
GILTUSS TR ORAL TABLET	2	
guaiatussin ac oral syrup	1	
guaifenesin ac oral syrup	1	
guaifenesin powder	2	
hydrocod polst-cpm polst er oral suspension extended release	1	
hydrocodone-homatropine oral syrup	1	
hydrocodone-homatropine oral tablet	1	
hydromet oral syrup	1	
INFASURF INTRATRACHEAL SUSPENSION	2	
NEOTUSS PLUS ORAL LIQUID	2	
phenylephrine hcl powder	2	
phenylephrine-guaifenesin oral liquid	1	
promethazine-codeine oral solution	1	
promethazine-codeine oral syrup	1	
promethazine-dm oral syrup	1	
promethazine-phenyleph-codeine oral syrup	1	
pseudoeph-bromphen-dm oral syrup	1	
pseudoeph-chlorphen-hydrocod oral solution	1	
pseudoephedrine hcl crystals	2	
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER	2	
SINUVA NASAL IMPLANT	2	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED	2	
STERITALC INTRAPLEURAL POWDER	2	
SURVANTA INTRATRACHEAL SUSPENSION	2	
TESSALON PERLES ORAL CAPSULE	2	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
Z-TUSS AC ORAL LIQUID	2	
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
active-cyclobenzaprine transdermal cream	2	
atracurium besylate intravenous solution	1	
baclofen external cream	1	
cisatracurium besylate (pf) intravenous solution 200 mg/20ml	1	

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Drug Name	Drug Tier	Requirements /Limits
cisatracurium besylate intravenous solution 20 mg/10ml	1	
cyclo/gaba 10/300 oral therapy pack	2	
CYCLOPHENE RAPIDPAQ TRANSDERMAL CREAM	2	
enovarx-baclofen external cream	2	
enovarx-cyclobenzaprine hcl cream 20 mg/gm transdermal	1	
enovarx-cyclobenzaprine hcl cream 20 mg/gm transdermal	2	
NIMBEX INTRAVENOUS SOLUTION 20 MG/10ML, 200 MG/20ML	2	
orphenadrine citrate powder	2	
pancuronium bromide intravenous solution	1	
rocuronium bromide intravenous solution	1	
rocuronium bromide intravenous solution prefilled syringe 20 mg/2ml, 50 mg/5ml	2	
succinylcholine chloride intravenous solution prefilled syringe	2	
TABRADOL FUSEPAQ ORAL SUSPENSION	2	
TABRADOL RAPIDPAQ ORAL SUSPENSION	2	
vecuronium bromide intravenous solution prefilled syringe	2	
vecuronium bromide intravenous solution reconstituted	1	

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OPTUMRx®

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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 معرّف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon 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. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, निःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल 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.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ(Khmer)**សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe 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 yáníłti'go, saad bee áka›anída›awo›ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dęę› t'áá jíík'ehgo béésh 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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