



AlaskaCare Employee Plan Prescription Drug Formulary

Effective Jan. 1, 2024

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

Optum Rx Member Services



Phone (toll-free): **1-855-409-6999**
TTY users: **711**
Hours of operation: 24 hours a day, 7 days a week



Visit optumrx.com or log on to the Optum Rx app to:

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

Understanding your formulary

What is a formulary?

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

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

How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's website or call Optum Rx at **1-855-409-6999**.

What are tiers?

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

When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 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 Optum Rx at **1-855-409-6999**.



About this formulary

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

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

Specialty medications are used to treat complex conditions. These high-cost medications may be injected, infused or taken by mouth. Please note, not all specialty medications are listed in the formulary. Our specialty pharmacy can provide most of your specialty medications along with helpful programs and services. Call **1-855-427-4682** and have your prescriptions delivered right to your home or doctor's office.



Over-the-counter medications

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

Reading your formulary

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

Tier information

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

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

Drug list information

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

Prior Authorization (PA)	Your doctor is required to give Optum Rx more information to determine coverage.
Quantity Limit (QL)	Medication may be limited to a certain quantity.
Specialty Medication (SP)	Medication is designated as specialty.
Preventive Medication (PV)	Due to Health Care Reform, this medication may be available at zero copay.

AlaskaCare Commercial

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Drug Name	Drug Tier	Requirements /Limits
Analgesics - Drugs for Pain		
acetaminophen intravenous solution	2	
acetaminophen-codeine oral solution	2	QL (136 ML per 1 day)
acetaminophen-codeine oral tablet 300-15 mg	2	QL (13 EA per 1 day)
acetaminophen-codeine oral tablet 300-30 mg	2	QL (10 EA per 1 day)
acetaminophen-codeine oral tablet 300-60 mg	2	QL (5 EA per 1 day)
apap-caff-dihydrocodeine oral capsule	2	QL (12 EA per 1 day)
ascomp-codeine oral capsule	2	
bac oral tablet	2	
BELBUCA BUCCAL FILM	3	PA; QL (2 EA per 1 day)
BUPRENEX INJECTION SOLUTION	4	
buprenorphine hcl injection solution	2	
buprenorphine transdermal patch weekly	2	PA; QL (0.15 EA per 1 day)
butalbital-acetaminophen oral capsule	2	
butalbital-acetaminophen oral tablet	2	
butalbital-apap-caff-cod oral capsule	2	
butalbital-apap-caffeine oral capsule	2	
butalbital-apap-caffeine oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
butalbital-asa-caff-codeine oral capsule	2	
butalbital-aspirin-caffeine oral capsule	2	
butorphanol tartrate injection solution	2	
butorphanol tartrate nasal solution	2	QL (2.5 ML per 1 fill)
codeine sulfate oral tablet 15 mg	2	QL (21 EA per 1 day)
codeine sulfate oral tablet 30 mg	2	QL (10 EA per 1 day)
codeine sulfate oral tablet 60 mg	2	QL (5 EA per 1 day)
DEMEROL INJECTION SOLUTION	4	
DILAUDID INJECTION SOLUTION	4	
DURAMORPH INJECTION SOLUTION	4	
endocet oral tablet 10-325 mg	2	QL (3 EA per 1 day)
endocet oral tablet 2.5-325 mg	2	QL (12 EA per 1 day)
endocet oral tablet 5-325 mg	2	QL (6 EA per 1 day)
endocet oral tablet 7.5-325 mg	2	QL (4 EA per 1 day)
fentanyl citrate buccal lozenge on a handle	2	PA; QL (4 EA per 1 day)
FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE 250 MCG/5ML	4	
fentanyl citrate solution prefilled syringe 100 mcg/2ml injection	2	

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

Drug Name	Drug Tier	Requirements /Limits
FENTANYL CITRATE SOLUTION PREFILLED SYRINGE 100 MCG/2ML INJECTION	4	
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-%	4	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 10-0.9 MCG/ML-%, 1000-0.9 MCG/50ML-%, 5-0.9 MCG/ML-%, 500-0.9 MCG/50ML-%, 550-0.9 MCG/55ML-%	4	
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	2	PA; QL (1 EA per 1 day)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	2	PA; QL (0.5 EA per 1 day)
hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	2	PA; QL (2 EA per 1 day)
hydrocodone bitartrate er oral capsule extended release 12 hour 50 mg	2	PA; QL (4 EA per 1 day)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	2	PA; QL (1 EA per 1 day)
hydrocodone-acetaminophen oral solution	2	QL (98 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	2	QL (4 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	2	QL (9 EA per 1 day)
hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg	2	QL (6 EA per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg	2	QL (4 EA per 1 day)
hydrocodone-ibuprofen oral tablet 5-200 mg	2	QL (9 EA per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	2	QL (6 EA per 1 day)
hydromorphone hcl er oral tablet extended release 24 hour	2	PA; QL (2 EA per 1 day)
HYDROMORPHONE HCL INJECTION SOLUTION 0.2 MG/ML, 0.5 MG/ML	4	
hydromorphone hcl injection solution 2 mg/ml, 4 mg/ml	2	
HYDROMORPHONE HCL INTRAVENOUS SOLUTION	4	
hydromorphone hcl oral liquid	2	QL (10 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	2	QL (5 EA per 1 day)
hydromorphone hcl oral tablet 4 mg	2	QL (2 EA per 1 day)
hydromorphone hcl oral tablet 8 mg	2	QL (1 EA per 1 day)
hydromorphone hcl pf injection solution	2	
HYDROMORPHONE HCL SOLUTION 1 MG/ML INJECTION	4	

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

Drug Name	Drug Tier	Requirements /Limits
hydromorphone hcl solution 1 mg/ml injection	2	
HYDROMORPHONE HCL-NACL INJECTION SOLUTION 20-0.9 MG/100ML-%	4	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION	4	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	3	PA; QL (1 EA per 1 day)
INFUMORPH 200 INJECTION SOLUTION	4	
INFUMORPH 500 INJECTION SOLUTION	4	
levorphanol tartrate oral tablet 2 mg	2	QL (2 EA per 1 day)
levorphanol tartrate oral tablet 3 mg	2	QL (1 EA per 1 day)
meperidine hcl injection solution	2	
meperidine hcl oral solution	2	QL (49 ML per 1 day)
meperidine hcl oral tablet	2	QL (9 EA per 1 day)
methadone hcl injection solution	2	
methadone hcl intensol oral concentrate	2	
methadone hcl oral concentrate	2	
methadone hcl oral solution	2	

Drug Name	Drug Tier	Requirements /Limits
methadone hcl oral tablet	2	PA
methadone hcl oral tablet soluble	2	
METHADONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
METHADONE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
METHADOSE ORAL CONCENTRATE 10 MG/ML	4	
methadose oral tablet soluble	2	
METHADOSE SUGAR-FREE ORAL CONCENTRATE	4	
mitigo injection solution	2	
morphine sulfate (concentrate) oral solution	2	QL (2.4 ML per 1 day)
morphine sulfate (pf) injection solution	2	
morphine sulfate (pf) intravenous solution	2	
morphine sulfate er beads oral capsule extended release 24 hour 120 mg	2	PA; QL (2 EA per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	2	PA; QL (1 EA per 1 day)
morphine sulfate er oral capsule extended release 24 hour	2	PA; QL (2 EA per 1 day)
morphine sulfate er oral tablet extended release	2	PA; QL (3 EA per 1 day)

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

Drug Name	Drug Tier	Requirements /Limits
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	4	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	2	
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML	4	
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml	2	
morphine sulfate oral solution 10 mg/5ml	2	QL (24.5 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	2	QL (12.25 ML per 1 day)
morphine sulfate oral tablet 15 mg	2	QL (3 EA per 1 day)
morphine sulfate oral tablet 30 mg	2	QL (1 EA per 1 day)
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/ML-%, 100-0.9 MG/100ML-%, 50-0.9 MG/50ML-%, 500-0.9 MG/100ML-%	4	
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
nalbuphine hcl injection solution	2	
oxycodone hcl oral capsule	2	QL (6 EA per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml	2	QL (1.6 ML per 1 day)
oxycodone hcl oral solution	2	QL (32.6 ML per 1 day)
oxycodone hcl oral tablet 10 mg	2	QL (3 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
oxycodone hcl oral tablet 15 mg	2	QL (2 EA per 1 day)
oxycodone hcl oral tablet 20 mg, 30 mg	2	QL (1 EA per 1 day)
oxycodone hcl oral tablet 5 mg	2	QL (6 EA per 1 day)
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	4	QL (32.6 ML per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	2	QL (3 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg	2	QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 5-325 mg	2	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	2	QL (4 EA per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	3	PA; QL (4 EA per 1 day)
oxymorphone hcl er oral tablet extended release 12 hour	2	PA; QL (4 EA per 1 day)
oxymorphone hcl oral tablet 10 mg	2	QL (1 EA per 1 day)
oxymorphone hcl oral tablet 5 mg	2	QL (3 EA per 1 day)
pentazocine-naloxone hcl oral tablet	2	QL (5 EA per 1 day)
remifentanil hcl intravenous solution reconstituted	2	
TENCON ORAL TABLET	4	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	2	PA; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
tramadol hcl er oral tablet extended release 24 hour	2	PA; QL (1 EA per 1 day)
tramadol hcl oral tablet 100 mg	2	QL (2 EA per 1 day)
tramadol hcl oral tablet 50 mg	2	QL (5 EA per 1 day)
tramadol-acetaminophen oral tablet	2	QL (6 EA per 1 day)
TREZIX ORAL CAPSULE	4	QL (12 EA per 1 day)
ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED	4	
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	3	PA; QL (4 EA per 1 day)
Analgesics - Drugs for Pain and Inflammation		
CALDOLOR INTRAVENOUS SOLUTION	4	
celecoxib oral capsule	2	QL (2 EA per 1 day)
DAYPRO ORAL TABLET	4	
diclofenac potassium oral tablet 50 mg	2	
diclofenac sodium er oral tablet extended release 24 hour	2	
diclofenac sodium external gel 1 %	2	QL (33.33 GM per 1 day)
diclofenac sodium external solution	2	PA
diclofenac sodium oral tablet delayed release	2	

Drug Name	Drug Tier	Requirements /Limits
diclofenac-misoprostol oral tablet delayed release	2	
DICLOFONO EXTERNAL GEL	4	
diflunisal oral tablet	2	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE	4	
ec-naproxen oral tablet delayed release	2	
etodolac er oral tablet extended release 24 hour	2	
etodolac oral capsule	2	
etodolac oral tablet	2	
flurbiprofen oral tablet	2	
ibuprofen lysine intravenous solution	2	
ibuprofen oral suspension 100 mg/5ml	2	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	2	
indomethacin er oral capsule extended release	2	
indomethacin oral capsule	2	
indomethacin sodium intravenous solution reconstituted	2	
ketoprofen er oral capsule extended release 24 hour	2	
ketoprofen oral capsule 50 mg	2	
ketorolac tromethamine injection solution 15 mg/ml	2	
ketorolac tromethamine intramuscular solution	2	

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

Drug Name	Drug Tier	Requirements /Limits
ketorolac tromethamine oral tablet	2	QL (20 EA per 1 fill)
ketorolac tromethamine solution 30 mg/ml injection	2	
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	4	
LODINE ORAL TABLET	4	
meclofenamate sodium oral capsule	2	
meloxicam oral tablet	2	
nabumetone oral tablet	2	
naproxen dr oral tablet delayed release	2	
naproxen oral tablet	2	
naproxen oral tablet delayed release	2	
naproxen sodium oral tablet 275 mg, 550 mg	2	
NEOPROFEN INTRAVENOUS SOLUTION	4	
oxaprozin oral tablet	2	
piroxicam oral capsule	2	
sulindac oral tablet	2	
tolmetin sodium oral capsule	2	
tolmetin sodium oral tablet	2	
Anesthetics		
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE	4	
bupivacaine fisiopharma injection solution	2	
bupivacaine hcl (pf) injection solution	2	

Drug Name	Drug Tier	Requirements /Limits
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.25 % (10 ML)	4	
bupivacaine hcl solution 0.25 % injection	2	
BUPIVACAINE HCL SOLUTION 0.25 % INJECTION	4	
bupivacaine hcl solution 0.5 % injection	2	
BUPIVACAINE HCL SOLUTION 0.5 % INJECTION	4	
bupivacaine-epinephrine (pf) injection solution	2	
bupivacaine-epinephrine injection solution	2	
chloroprocaine hcl (pf) injection solution	2	
COCAINE HCL NASAL SOLUTION	4	
ethyl chloride external aerosol	2	
EXPAREL INJECTION SUSPENSION	4	
GEBAUERS PAIN EASE EXTERNAL AEROSOL	4	
GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	4	
glydo external prefilled syringe	2	
L.E.T. EXTERNAL GEL	4	
L.E.T. EXTERNAL SOLUTION	4	
lidocaine external ointment 5 %	2	

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

Drug Name	Drug Tier	Requirements /Limits
lidocaine external patch 5 %	2	
LIDOCAINE HCL (BUFFERED) INJECTION SOLUTION PREFILLED SYRINGE	4	
LIDOCAINE HCL (CARDIAC) INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML, 200 MG/10ML, 60 MG/3ML	4	
lidocaine hcl (cardiac) intravenous solution prefilled syringe 50 mg/5ml	2	
lidocaine hcl (cardiac) pf intravenous solution	2	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	2	
lidocaine hcl (cardiac) solution prefilled syringe 100 mg/5ml intravenous	2	
LIDOCAINE HCL (CARDIAC) SOLUTION PREFILLED SYRINGE 100 MG/5ML INTRAVENOUS	4	
lidocaine hcl (pf) injection solution	2	
lidocaine hcl external solution	2	
lidocaine hcl injection solution 0.5 %	2	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	4	
LIDOCAINE HCL SOLUTION 1 % INJECTION	4	

Drug Name	Drug Tier	Requirements /Limits
lidocaine hcl solution 1 % injection	2	
LIDOCAINE HCL SOLUTION 2 % INJECTION	4	
lidocaine hcl solution 2 % injection	2	
lidocaine hcl urethral/mucosal external prefilled syringe	2	
LIDOCAINE IN D5W INTRAVENOUS SOLUTION 2-5 MG/ML-%	4	
lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%	2	
LIDOCAINE(BUFFERD)-EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE	4	
LIDOCAINE-EPINEPHRINE (3 ML) INJECTION SOLUTION PREFILLED SYRINGE	4	
lidocaine-epinephrine injection solution 0.5 %-1:200000, 1.5 %-1:200000, 2 %-1:100000, 2 %-1:50000	2	
lidocaine-epinephrine solution 1 %-1:100000 injection	2	
LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION	4	
lidocaine-epinephrine solution 2 %-1:200000 injection	2	

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

Drug Name	Drug Tier	Requirements /Limits
LIDOCAINE-EPINEPHRINE SOLUTION 2 %-1:200000 INJECTION	4	
lidocaine-prilocaine external cream	2	
LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE	4	
LIDO-EPINEPHRINE-TETRACAINE EXTERNAL SOLUTION	4	
LIDO-RACEPINEPHRINE-TETRACAINE EXTERNAL GEL	4	
LIDOTRAL-MENTHOL EXTERNAL LIQUID	4	
MARCAINE INJECTION SOLUTION	4	
MARCAINE PRESERVATIVE FREE INJECTION SOLUTION	4	
MARCAINE/EPINEPHRINE INJECTION SOLUTION	4	
MARCAINE/EPINEPHRINE PF INJECTION SOLUTION	4	
NAROPIN INJECTION SOLUTION 10 MG/ML, 5 MG/ML, 7.5 MG/ML	4	
NESACAINE INJECTION SOLUTION	4	
NESACAINE-MPF INJECTION SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
ORABLOC INJECTION SOLUTION CARTRIDGE	4	
POLOCAINE INJECTION SOLUTION	4	
POLOCAINE-MPF INJECTION SOLUTION	4	
PREPIV SUPPLY COMBINATION KIT	4	
ropivacaine hcl injection solution	2	
ROPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.5 %	4	
ROPIVACAINE HCL-NACL INJECTION SOLUTION	4	
SENSORCAINE INJECTION SOLUTION	4	
SENSORCAINE/EPINEPHRINE INJECTION SOLUTION	4	
SENSORCAINE-MPF INJECTION SOLUTION	4	
SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	4	
STERILE TOPICAL L.E.T. GEL EXTERNAL GEL	4	
tetracaine hcl injection solution	2	
TOPICAL L.E.T. EXTERNAL GEL	4	
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	4	

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

Drug Name	Drug Tier	Requirements /Limits
XYLOCAINE INJECTION SOLUTION	4	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION	4	
XYLOCAINE-MPF INJECTION SOLUTION	4	
XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	4	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium oral tablet delayed release	2	
APO-VARENICLINE ORAL TABLET	4	PV; QL (180 day supply per 365 days)
BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	SP
BRIXADI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	SP
buprenorphine hcl sublingual tablet sublingual 2 mg	2	QL (12 EA per 1 day)
buprenorphine hcl sublingual tablet sublingual 8 mg	2	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	2	QL (2 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	2	QL (12 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	2	QL (6 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	2	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	2	QL (12 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	2	QL (3 EA per 1 day)
bupropion hcl er (smoking det) oral tablet extended release 12 hour	2	PV; QL (180 day supply per 365 days)
disulfiram oral tablet	2	
KLOXXADO NASAL LIQUID	3	
LUCEMYRA ORAL TABLET	4	QL (16 EA per 1 day)
NALMEFENE HCL INJECTION SOLUTION	4	
naloxone hcl injection solution	2	
naloxone hcl injection solution cartridge	2	
naloxone hcl injection solution prefilled syringe	2	
naloxone hcl nasal liquid	2	
naltrexone hcl oral tablet	2	
NARCAN NASAL LIQUID	3	
NICOTROL INHALATION INHALER	4	PV; QL (180 day supply per 365 days)

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
NICOTROL NS NASAL SOLUTION	4	PV; QL (180 day supply per 365 days)
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	SP
varenicline tartrate (starter) oral tablet therapy pack	2	PV; QL (180 day supply per 365 days)
varenicline tartrate oral tablet	2	PV; QL (180 day supply per 365 days)
varenicline tartrate(continue) oral tablet	2	PV; QL (180 day supply per 365 days)
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	SP
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE	4	
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 5.7-1.4 MG	3	QL (3 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG	3	QL (12 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	3	QL (1 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 2.9-0.71 MG	3	QL (6 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	3	QL (2 EA per 1 day)
Antibacterials		
AEMCOLO ORAL TABLET DELAYED RELEASE	4	PA

Drug Name	Drug Tier	Requirements /Limits
ALTABAX EXTERNAL OINTMENT	4	
amikacin sulfate injection solution	2	
amoxicillin oral capsule	2	
amoxicillin oral suspension reconstituted	2	
amoxicillin oral tablet	2	
amoxicillin oral tablet chewable	2	
amoxicillin-potassium clavulanate er oral tablet extended release 12 hour	2	
amoxicillin-potassium clavulanate oral suspension reconstituted	2	
amoxicillin-potassium clavulanate oral tablet	2	
amoxicillin-potassium clavulanate oral tablet chewable	2	
ampicillin oral capsule	2	
ampicillin sodium injection solution reconstituted	2	
ampicillin sodium intravenous solution reconstituted	2	
ampicillin-sulbactam sodium injection solution reconstituted	2	
ampicillin-sulbactam sodium intravenous solution reconstituted	2	
ARIKAYCE INHALATION SUSPENSION	4	PA; SP
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	4	

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

Drug Name	Drug Tier	Requirements /Limits
AUGMENTIN ORAL SUSPENSION RECONSTITUTED	4	
AUGMENTIN ORAL TABLET	4	
avidoxy oral tablet	2	
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	4	
AZACTAM INJECTION SOLUTION RECONSTITUTED	4	
azithromycin intravenous solution reconstituted	2	
azithromycin oral packet	2	
azithromycin oral suspension reconstituted	2	
azithromycin oral tablet	2	
aztreonam injection solution reconstituted	2	
BACTRIM DS ORAL TABLET	4	
BACTRIM ORAL TABLET	4	
benzalkonium chloride external solution	2	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	4	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	4	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
cefaclor er oral tablet extended release 12 hour	2	

Drug Name	Drug Tier	Requirements /Limits
cefaclor oral capsule	2	
cefaclor oral suspension reconstituted	2	
cefadroxil oral capsule	2	
cefadroxil oral suspension reconstituted	2	
cefadroxil oral tablet	2	
CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
CEFAZOLIN SODIUM INJECTION SOLUTION PREFILLED SYRINGE	4	
cefazolin sodium injection solution reconstituted	2	
CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
cefazolin sodium injection solution reconstituted	2	
cefazolin sodium intravenous solution reconstituted	2	
cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%	2	
CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION 2-5 GM/100ML-%	4	
cefazolin sodium-dextrose intravenous solution reconstituted	2	
cefdinir oral capsule	2	
cefdinir oral suspension reconstituted	2	
cefepime hcl injection solution reconstituted	2	

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Drug Name	Drug Tier	Requirements /Limits
cefepime hcl intravenous solution	2	
cefepime hcl intravenous solution reconstituted 2 gm	2	
cefepime-dextrose intravenous solution reconstituted	2	
cefixime oral capsule	2	
cefixime oral suspension reconstituted	2	
CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED	4	
cefotetan disodium injection solution reconstituted	2	
cefoxitin sodium intravenous solution reconstituted	2	
CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED	4	
cefpodoxime proxetil oral suspension reconstituted	2	
cefpodoxime proxetil oral tablet	2	
cefprozil oral suspension reconstituted	2	
cefprozil oral tablet	2	
ceftazidime injection solution reconstituted	2	
ceftazidime intravenous solution reconstituted	2	
ceftriaxone sodium in dextrose intravenous solution	2	

Drug Name	Drug Tier	Requirements /Limits
ceftriaxone sodium injection solution reconstituted	2	
ceftriaxone sodium intravenous solution reconstituted	2	
ceftriaxone sodium-dextrose intravenous solution reconstituted	2	
cefuroxime axetil oral tablet	2	
cefuroxime sodium injection solution reconstituted	2	
cefuroxime sodium intravenous solution reconstituted	2	
cephalexin oral capsule	2	
cephalexin oral suspension reconstituted	2	
cephalexin oral tablet	2	
chloramphenicol sod succinate intravenous solution reconstituted	2	
CIPRO ORAL SUSPENSION RECONSTITUTED	4	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral tablet	2	
ciprofloxacin in d5w intravenous solution	2	
clarithromycin er oral tablet extended release 24 hour	2	
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	2	
CLEOCIN ORAL CAPSULE	4	

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Drug Name	Drug Tier	Requirements /Limits
CLEOCIN ORAL SOLUTION RECONSTITUTED	4	
CLEOCIN PHOSPHATE INJECTION SOLUTION	4	
clindamycin hcl oral capsule	2	
clindamycin palmitate hcl oral solution reconstituted	2	
clindamycin phosphate in d5w intravenous solution	2	
CLINDAMYCIN PHOSPHATE IN NA CL INTRAVENOUS SOLUTION	4	
clindamycin phosphate injection solution	2	
clindamycin phosphate vaginal cream	2	
CLINDESSE VAGINAL CREAM	4	
colistimethate sodium (cba) injection solution reconstituted	2	
COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED	4	
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	4	
daptomycin intravenous solution reconstituted	2	
DAPTOMYCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
demeclocycline hcl oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
dicloxacillin sodium oral capsule	2	
DIFICID ORAL SUSPENSION RECONSTITUTED	4	
DIFICID ORAL TABLET	4	
doxy 100 intravenous solution reconstituted	2	
doxycycline hyclate intravenous solution reconstituted	2	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg, 20 mg	2	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	2	
doxycycline monohydrate oral capsule	2	
doxycycline monohydrate oral suspension reconstituted	2	
doxycycline monohydrate oral tablet	2	
E.E.S. 400 ORAL TABLET	4	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	4	
ertapenem sodium injection solution reconstituted	2	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	4	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	4	

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Drug Name	Drug Tier	Requirements /Limits
ERY-TAB ORAL TABLET DELAYED RELEASE	4	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	4	
ERYTHROCIN STEARATE ORAL TABLET	4	
erythromycin base oral capsule delayed release particles	2	
erythromycin base oral tablet	2	
erythromycin base oral tablet delayed release	2	
erythromycin ethylsuccinate oral suspension reconstituted	2	
erythromycin ethylsuccinate oral tablet	2	
erythromycin lactobionate intravenous solution reconstituted	2	
erythromycin oral tablet delayed release	2	
FETROJA INTRAVENOUS SOLUTION RECONSTITUTED	4	
FIRVANQ ORAL SOLUTION RECONSTITUTED	4	
fosfomycin tromethamine oral packet	2	
gentamicin in saline intravenous solution	2	

Drug Name	Drug Tier	Requirements /Limits
gentamicin sulfate external cream	2	
gentamicin sulfate external ointment	2	
gentamicin sulfate injection solution	2	
HIPREX ORAL TABLET	4	
HUMATIN ORAL CAPSULE	3	
hydrogen peroxide solution	2	
imipenem-cilastatin intravenous solution reconstituted	2	
KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED	4	
levofloxacin in d5w intravenous solution	2	
levofloxacin intravenous solution	2	
levofloxacin oral solution	2	
levofloxacin oral tablet	2	
LIKMEZ ORAL SUSPENSION	4	
LINCOICIN INJECTION SOLUTION	4	
lincomycin hcl injection solution	2	
linezolid in sodium chloride intravenous solution	2	
linezolid intravenous solution	2	
linezolid oral suspension reconstituted	2	QL (32.2 ML per 1 day)
linezolid oral tablet	2	QL (28 EA per 30 days)

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Drug Name	Drug Tier	Requirements /Limits
LUGOLS STRONG IODINE EXTERNAL SOLUTION	4	
MACROBID ORAL CAPSULE	4	
MACRODANTIN ORAL CAPSULE	4	
mafenide acetate external packet	2	
meropenem intravenous solution reconstituted	2	
MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	4	
methenamine hippurate oral tablet	2	
metronidazole intravenous solution	2	
metronidazole oral capsule	2	
metronidazole oral tablet	2	
metronidazole vaginal gel	2	
MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
minocycline hcl er oral tablet extended release 24 hour	2	
minocycline hcl oral capsule	2	
minocycline hcl oral tablet	2	
mondoxyne nl oral capsule	2	
MONUROL ORAL PACKET	4	

Drug Name	Drug Tier	Requirements /Limits
moxifloxacin hcl in nacl intravenous solution	2	
MOXIFLOXACIN HCL INTRAVENOUS SOLUTION	4	
moxifloxacin hcl oral tablet	2	
mupirocin calcium external cream	2	
mupirocin external ointment	2	
NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	4	
nafcillin sodium injection solution reconstituted	2	
nafcillin sodium intravenous solution reconstituted	2	
neomycin sulfate oral tablet	2	
neomycin-polymyxin b gu irrigation solution	2	
nitrofurantoin macrocrystal oral capsule	2	
nitrofurantoin monohydrate macrocrystals oral capsule	2	
nitrofurantoin oral suspension 25 mg/5ml	2	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	4	
NUZYRA ORAL TABLET	4	
ofloxacin oral tablet	2	

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Drug Name	Drug Tier	Requirements /Limits
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	4	
OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	4	
oxacillin sodium injection solution reconstituted	2	
oxacillin sodium intravenous solution reconstituted	2	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION	4	
penicillin g potassium injection solution reconstituted	2	
penicillin g sodium injection solution reconstituted	2	
penicillin v potassium oral solution reconstituted	2	
penicillin v potassium oral tablet	2	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED	4	
piperacillin sod-tazobactam so intravenous solution reconstituted	2	
polymyxin b sulfate injection solution reconstituted	2	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED	4	

Drug Name	Drug Tier	Requirements /Limits
RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED	4	
SEYSARA ORAL TABLET	4	
silver sulfadiazine external cream	2	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	4	QL (6 EA per 30 days)
SOLOSEC ORAL PACKET	4	
ssd external cream	2	
streptomycin sulfate intramuscular solution reconstituted	2	
sulfadiazine oral tablet	2	
sulfamethoxazole-trimethoprim intravenous solution	2	
sulfamethoxazole-trimethoprim oral suspension	2	
sulfamethoxazole-trimethoprim oral tablet	2	
SULFAMYLON EXTERNAL PACKET	4	
sulfatrim pediatric oral suspension	2	
tazicef injection solution reconstituted	2	
TAZICEF INTRAVENOUS SOLUTION	4	
tazicef intravenous solution reconstituted	2	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	4	

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

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

Drug Name	Drug Tier	Requirements /Limits
VANCOMYCIN HCL IN NAACL INTRAVENOUS SOLUTION 1-0.9 GM/250ML-%, 1.25-0.9 GM/250ML-%, 1.5-0.9 GM/250ML-%, 1.5-0.9 GM/500ML-%, 1.75-0.9 GM/250ML-%, 2-0.9 GM/500ML-%	4	
VANCOMYCIN HCL IN NAACL SOLUTION 750-0.9 MG/150ML-% INTRAVENOUS	4	
vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous	2	
vancomycin hcl intravenous solution	2	
vancomycin hcl intravenous solution reconstituted	2	
vancomycin hcl oral capsule	2	
vancomycin hcl oral solution reconstituted	2	
VANDAZOLE VAGINAL GEL	4	
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED	4	
VIBRAMYCIN ORAL CAPSULE	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	4	
XENLETA INTRAVENOUS SOLUTION	4	
XENLETA ORAL TABLET	4	
XEPI EXTERNAL CREAM	4	

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Drug Name	Drug Tier	Requirements /Limits
XERAHA INTRAVENOUS SOLUTION RECONSTITUTED	4	
XIFAXAN ORAL TABLET 550 MG	4	PA
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
ZEMDRI INTRAVENOUS SOLUTION	4	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	4	
ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	4	
ZITHROMAX ORAL PACKET	4	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	4	
ZITHROMAX ORAL TABLET	4	
ZITHROMAX TRI-PAK ORAL TABLET	4	
ZITHROMAX Z-PAK ORAL TABLET	4	
ZOSYN INTRAVENOUS SOLUTION	4	
ZYVOX INTRAVENOUS SOLUTION	4	
ZYVOX ORAL SUSPENSION RECONSTITUTED	4	QL (32.2 ML per 1 day)
Anticoagulants		
ACD FORMULA A IN VITRO SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
ACD-A NOCLOT-50 IN VITRO SOLUTION	4	
ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED	4	
ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION	4	
argatroban intravenous solution	2	
ARIXTRA SUBCUTANEOUS SOLUTION	4	
bivalirudin trifluoroacetate intravenous solution reconstituted	2	
dabigatran etexilate mesylate oral capsule	1	QL (2 EA per 1 day)
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	3	QL (148 EA per 365 days)
ELIQUIS ORAL TABLET 2.5 MG	3	QL (2 EA per 1 day)
ELIQUIS ORAL TABLET 5 MG	3	QL (3 EA per 1 day)
enoxaparin sodium injection solution	2	
enoxaparin sodium injection solution prefilled syringe	2	
fondaparinux sodium subcutaneous solution	2	
FRAGMIN SUBCUTANEOUS SOLUTION	4	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	

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Drug Name	Drug Tier	Requirements /Limits
heparin (porcine) in nacl intravenous solution	2	
HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 2500-0.9 UT/500ML-%, 30000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%, 5000-0.9 UT/500ML-%	4	
heparin sod (porcine) in d5w intravenous solution	2	
heparin sodium (porcine) injection solution	2	
heparin sodium (porcine) injection solution prefilled syringe	2	
heparin sodium (porcine) pf injection solution	2	
jantoven oral tablet	2	
LOVENOX INJECTION SOLUTION	4	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	4	
PRADAXA ORAL CAPSULE	3	QL (2 EA per 1 day)
PRADAXA ORAL PACKET 110 MG, 30 MG, 40 MG, 50 MG	4	QL (4 EA per 1 day)
PRADAXA ORAL PACKET 150 MG, 20 MG	4	QL (2 EA per 1 day)
RETAVASE HALF-KIT INTRAVENOUS KIT	4	
RETAVASE INTRAVENOUS KIT	4	

Drug Name	Drug Tier	Requirements /Limits
SAVAYSA ORAL TABLET	4	QL (1 EA per 1 day)
SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE	4	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION	4	
TNKASE INTRAVENOUS KIT	4	
TRICITRASOL IN VITRO CONCENTRATE	4	
warfarin sodium oral tablet	2	
XARELTO ORAL SUSPENSION RECONSTITUTED	3	QL (20 ML per 1 day)
XARELTO ORAL TABLET 10 MG, 20 MG	3	QL (1 EA per 1 day)
XARELTO ORAL TABLET 15 MG, 2.5 MG	3	QL (2 EA per 1 day)
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	3	QL (102 EA per 365 days)
Anticonvulsants - Drugs for Seizures		
APTIOM ORAL TABLET	4	
BRIVIACT INTRAVENOUS SOLUTION	4	
BRIVIACT ORAL SOLUTION	4	
BRIVIACT ORAL TABLET	4	

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

Drug Name	Drug Tier	Requirements /Limits
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	
CELONTIN ORAL CAPSULE	4	
CEREBYX INJECTION SOLUTION	4	
clobazam oral suspension	2	PA
clobazam oral tablet	2	PA
DIACOMIT ORAL CAPSULE	4	PA; SP
DIACOMIT ORAL PACKET	4	PA; SP
DIASTAT ACUDIAL RECTAL GEL	4	QL (2 EA per 1 fill)
DIASTAT PEDIATRIC RECTAL GEL	4	QL (2 EA per 1 fill)
diazepam rectal gel	2	QL (2 EA per 1 fill)
DILANTIN ORAL CAPSULE 30 MG	4	
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	
EPIDIOLEX ORAL SOLUTION	4	PA; SP
epitol oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
ethosuximide oral capsule	1	
ethosuximide oral solution	1	
felbamate oral suspension	1	
felbamate oral tablet	1	
FINTEPLA ORAL SOLUTION	4	PA; SP
fosphenytoin sodium injection solution	2	
FYCOMPA ORAL SUSPENSION	4	
FYCOMPA ORAL TABLET	4	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA INTRAVENOUS SOLUTION	4	
lacosamide intravenous solution	2	
lacosamide oral solution	1	
lacosamide oral tablet	1	
LAMICTAL XR ORAL KIT	4	
lamotrigine er oral tablet extended release 24 hour	1	
lamotrigine oral kit	2	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
lamotrigine starter kit-blue oral kit	2	

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

Drug Name	Drug Tier	Requirements /Limits
lamotrigine starter kit-green oral kit	2	
lamotrigine starter kit-orange oral kit	2	
levetiracetam er oral tablet extended release 24 hour	1	
levetiracetam in nacl intravenous solution	2	
levetiracetam intravenous solution	2	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
methsuximide oral capsule	1	
NAYZILAM NASAL SOLUTION	4	QL (0.34 EA per 1 day)
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	
pentobarbital sodium injection solution	2	
phenobarbital oral elixir	1	
phenobarbital oral tablet	1	
phenobarbital sodium injection solution	2	
phenytek oral capsule	1	
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	2	

Drug Name	Drug Tier	Requirements /Limits
primidone oral tablet 125 mg	2	
primidone oral tablet 250 mg, 50 mg	1	
roweepra oral tablet	1	
rufinamide oral suspension	1	PA
rufinamide oral tablet	1	PA
SEZABY INTRAVENOUS SOLUTION RECONSTITUTED	4	
subvenite oral tablet	1	
subvenite starter kit-blue oral kit	2	
subvenite starter kit-green oral kit	2	
subvenite starter kit-orange oral kit	2	
SYMPAZAN ORAL FILM	4	PA
tiagabine hcl oral tablet	1	
topiramate er oral capsule er 24 hour sprinkle	1	
topiramate er oral capsule extended release 24 hour	1	
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
valproate sodium intravenous solution	2	
valproic acid oral capsule	1	
valproic acid oral solution	1	
VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML	4	QL (0.34 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
VALTOCO NASAL LIQUID THERAPY PACK 10 MG/0.1ML, 7.5 MG/0.1ML	4	QL (0.67 EA per 1 day)
vigabatrin oral packet	2	PA; SP
vigabatrin oral tablet	2	PA; SP
vigadrone oral packet	2	PA; SP
vigadrone oral tablet	2	PA; SP
XCOPRI ORAL TABLET	4	
XCOPRI ORAL TABLET THERAPY PACK	4	
ZARONTIN ORAL CAPSULE	4	
ZARONTIN ORAL SOLUTION	4	
zonisamide oral capsule	1	
ZTALMY ORAL SUSPENSION	4	PA; SP
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl oral tablet	1	
donepezil hcl oral tablet dispersible	1	
galantamine hydrobromide er oral capsule extended release 24 hour	1	
galantamine hydrobromide oral solution	1	
galantamine hydrobromide oral tablet	1	
memantine hcl er oral capsule extended release 24 hour	1	QL (1 EA per 1 day)
memantine hcl oral solution	1	

Drug Name	Drug Tier	Requirements /Limits
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET	4	
NAMENDA TITRATION PAK ORAL TABLET	4	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	3	QL (56 EA per 365 days)
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	QL (1 EA per 1 day)
rivastigmine tartrate oral capsule	1	
rivastigmine transdermal patch 24 hour	1	
Antidepressants		
amitriptyline hcl oral tablet	2	
amoxapine oral tablet	2	
bupropion hcl er (sr) oral tablet extended release 12 hour	1	QL (2 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	1	QL (3 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	1	QL (1 EA per 1 day)
bupropion hcl oral tablet	1	
chlordiazepoxide-amitriptyline oral tablet	2	
citalopram hydrobromide oral solution	1	

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

Drug Name	Drug Tier	Requirements /Limits
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral capsule	2	
desipramine hcl oral tablet	2	
DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
desvenlafaxine succinate er oral tablet extended release 24 hour	1	QL (1 EA per 1 day)
doxepin hcl oral capsule	2	
doxepin hcl oral concentrate	2	
duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	1	QL (2 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 30 mg	1	QL (3 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 40 mg	2	QL (2 EA per 1 day)
EMSAM TRANSDERMAL PATCH 24 HOUR	4	QL (1 EA per 1 day)
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	QL (56 EA per 365 days)

Drug Name	Drug Tier	Requirements /Limits
fluoxetine hcl (pmdd) oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	QL (0.15 EA per 1 day)
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate er oral capsule extended release 24 hour	1	QL (2 EA per 1 day)
fluvoxamine maleate oral tablet	1	
imipramine hcl oral tablet	2	
imipramine pamoate oral capsule	2	
MARPLAN ORAL TABLET	4	
mirtazapine oral tablet	1	
mirtazapine oral tablet dispersible	1	
NARDIL ORAL TABLET	4	
nefazodone hcl oral tablet	1	
NORPRAMIN ORAL TABLET	4	
nortriptyline hcl oral capsule	2	
nortriptyline hcl oral solution	2	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	2	QL (1 EA per 1 day)
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	2	QL (3 EA per 1 day)
PARNATE ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits
paroxetine hcl er oral tablet extended release 24 hour	1	
paroxetine hcl oral suspension	1	
paroxetine hcl oral tablet	1	
paroxetine mesylate oral capsule	1	QL (1 EA per 1 day)
PAXIL ORAL SUSPENSION	4	
perphenazine-amitriptyline oral tablet	2	
phenelzine sulfate oral tablet	2	
protriptyline hcl oral tablet	2	
REMERON ORAL TABLET	4	
REMERON SOLTAB ORAL TABLET DISPERSIBLE	4	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	4	PA; SP
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	4	PA; SP
SYMBYAX ORAL CAPSULE	4	QL (3 EA per 1 day)
tranylcypromine sulfate oral tablet	2	
trazodone hcl oral tablet	1	
trimipramine maleate oral capsule	2	
TRINTELLIX ORAL TABLET	4	QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
venlafaxine hcl er oral capsule extended release 24 hour 150 mg	1	QL (2 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg	1	QL (1 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 75 mg	1	QL (3 EA per 1 day)
venlafaxine hcl er oral tablet extended release 24 hour	1	
venlafaxine hcl oral tablet	1	
VIIBRYD ORAL TABLET	4	QL (1 EA per 1 day)
VIIBRYD STARTER PACK ORAL KIT	4	QL (30 EA per 1 fill)
vilazodone hcl oral tablet	1	QL (1 EA per 1 day)
ZULRESSO INTRAVENOUS SOLUTION	4	PA; SP
Antiemetics - Drugs for Nausea and Vomiting		
AKYNZEO (READY-TO-USE) INTRAVENOUS SOLUTION	4	
AKYNZEO (TO-BE-DILUTED) INTRAVENOUS SOLUTION	4	
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	4	
AKYNZEO ORAL CAPSULE	4	QL (0.07 EA per 1 day)
ANTIVERT ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits
ANTIVERT ORAL TABLET CHEWABLE	4	
ANZEMET ORAL TABLET	4	QL (0.07 EA per 1 day)
APONVIE INTRAVENOUS EMULSION	4	
aprepitant oral	2	QL (6 EA per 30 days)
aprepitant oral capsule 125 mg	2	QL (2 EA per 30 days)
aprepitant oral capsule 40 mg	2	QL (1 EA per 30 days)
aprepitant pak 80 & 125mg	2	QL (6 EA per 30 days)
aprepitant oral capsule 80 mg	2	QL (4 EA per 30 days)
BARHEMSYS INTRAVENOUS SOLUTION	4	
BONJESTA ORAL TABLET EXTENDED RELEASE	4	PA; QL (2 EA per 1 day)
CINVANTI INTRAVENOUS EMULSION	4	
compro rectal suppository	2	
DICLEGIS ORAL TABLET DELAYED RELEASE	4	PA; QL (4 EA per 1 day)
dimenhydrinate injection solution	2	
doxylamine-pyridoxine oral tablet delayed release	2	PA; QL (4 EA per 1 day)
dronabinol oral capsule	2	PA; QL (2 EA per 1 day)
droperidol injection solution	2	

Drug Name	Drug Tier	Requirements /Limits
EMEND INTRAVENOUS SOLUTION RECONSTITUTED	4	
EMEND ORAL CAPSULE	4	QL (4 EA per 30 days)
EMEND ORAL SUSPENSION RECONSTITUTED	4	QL (0.1 EA per 1 day)
EMEND TRI-PACK ORAL CAPSULE	4	QL (6 EA per 30 days)
fosaprepitant dimeglumine intravenous solution reconstituted	2	
granisetron hcl intravenous solution	2	
granisetron hcl oral tablet	2	QL (0.14 EA per 1 day)
MARINOL ORAL CAPSULE	4	PA; QL (2 EA per 1 day)
meclizine hcl oral tablet	2	
metoclopramide hcl injection solution	2	
metoclopramide hcl oral solution	2	
metoclopramide hcl oral tablet	2	
metoclopramide hcl oral tablet dispersible	2	
ondansetron hcl injection solution	2	
ondansetron hcl injection solution prefilled syringe	2	
ondansetron hcl oral solution	2	QL (4 ML per 1 day)
ondansetron hcl oral tablet 24 mg	2	QL (0.07 EA per 1 day)
ondansetron hcl oral tablet 4 mg, 8 mg	2	
ondansetron odt oral tablet dispersible	2	

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Drug Name	Drug Tier	Requirements /Limits
palonosetron hcl intravenous solution	2	
palonosetron hcl intravenous solution prefilled syringe	2	
perphenazine oral tablet	2	
PHENERGAN INJECTION SOLUTION	4	
prochlorperazine edisylate injection solution	2	
prochlorperazine maleate oral tablet	2	
prochlorperazine rectal suppository	2	
promethazine hcl injection solution	2	
promethazine hcl oral solution	2	
promethazine hcl oral syrup	2	
promethazine hcl oral tablet	2	
promethazine hcl rectal suppository	2	
promethegan rectal suppository	2	
REGLAN ORAL TABLET	4	
scopolamine transdermal patch 72 hour	2	
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	4	QL (0.03 ML per 1 day)
SYNDROS ORAL SOLUTION	4	PA; QL (4 ML per 1 day)
TIGAN INTRAMUSCULAR SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	4	
trimethobenzamide hcl oral capsule	2	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	4	QL (0.14 EA per 1 day)
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	4	
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	4	
amphotericin b intravenous solution reconstituted	2	
amphotericin b liposome intravenous suspension reconstituted	2	
ANCOBON ORAL CAPSULE	4	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	4	
caspofungin acetate intravenous solution reconstituted	2	
ciclodan external solution	2	
ciclopirox external gel	2	
ciclopirox external shampoo	2	
ciclopirox external solution	2	
ciclopirox olamine external cream	2	
ciclopirox olamine external suspension	2	

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Drug Name	Drug Tier	Requirements /Limits
clotrimazole external cream	2	
clotrimazole external solution	2	
clotrimazole mouth/throat troche	2	
clotrimazole-betamethasone external cream	2	
clotrimazole-betamethasone external lotion	2	
CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED	4	
CRESEMBA ORAL CAPSULE	4	PA
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	4	
DIFLUCAN ORAL TABLET	4	
econazole nitrate external cream	2	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	4	
EXODERM EXTERNAL LOTION	4	
fluconazole in sodium chloride intravenous solution	2	
fluconazole oral suspension reconstituted	2	
fluconazole oral tablet	2	
flucytosine oral capsule	2	
griseofulvin microsize oral suspension	2	
griseofulvin microsize oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
griseofulvin ultramicrosize oral tablet	2	
GYNAZOLE-1 VAGINAL CREAM	4	
itraconazole oral capsule	2	PA
itraconazole oral solution	2	PA
ketoconazole external cream	2	
ketoconazole external foam	2	
ketoconazole external shampoo	2	
ketoconazole oral tablet	2	
ketodan external foam	2	
LOPROX EXTERNAL SUSPENSION 0.77 %	4	
micafungin sodium intravenous solution reconstituted	2	
miconazole 3 vaginal suppository	2	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	4	
naftifine hcl external cream	2	
naftifine hcl external gel	2	
NOXAFIL INTRAVENOUS SOLUTION	4	
NOXAFIL ORAL PACKET	4	PA
NOXAFIL ORAL SUSPENSION	4	PA
nyamyc external powder	2	
nystatin external cream	2	

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Drug Name	Drug Tier	Requirements /Limits
nystatin external ointment	2	
nystatin external powder	2	
nystatin mouth/throat suspension	2	
nystatin oral tablet	2	
nystatin-triamcinolone external cream	2	
nystatin-triamcinolone external ointment	2	
nystop external powder	2	
oxiconazole nitrate external cream	2	
posaconazole intravenous solution	2	
posaconazole oral suspension	2	PA
posaconazole oral tablet delayed release	2	PA
SPORANOX ORAL CAPSULE	4	PA
SPORANOX ORAL SOLUTION	4	PA
tavaborole external solution	2	PA
terbinafine hcl oral tablet	2	QL (84 day supply per 180 days)
terconazole vaginal cream	2	
terconazole vaginal suppository	2	
VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	4	
VFEND ORAL SUSPENSION RECONSTITUTED	4	PA
VFEND ORAL TABLET	4	PA

Drug Name	Drug Tier	Requirements /Limits
voriconazole intravenous solution reconstituted	2	
voriconazole oral suspension reconstituted	2	PA
voriconazole oral tablet	2	PA
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	1	
allopurinol sodium intravenous solution reconstituted	2	
ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED	4	
colchicine oral tablet	1	
colchicine-probenecid oral tablet	1	
febuxostat oral tablet	1	
probenecid oral tablet	1	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	3	PA; QL (0.04 ML per 1 day)
AIMOVIG	3	PA; QL (0.07 ML per 1 day)
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (0.06 ML per 1 day)
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (0.06 ML per 1 day)
almotriptan malate oral tablet	1	QL (0.4 EA per 1 day)
diclofenac potassium(migraine) oral packet	2	

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Drug Name	Drug Tier	Requirements /Limits
dihydroergotamine mesylate injection solution	2	PA; QL (0.86 ML per 1 day)
dihydroergotamine mesylate nasal solution	2	PA; QL (0.27 ML per 1 day)
eletriptan hydrobromide oral tablet	2	QL (12 EA per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	3	PA; QL (0.1 ML per 1 day)
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (0.72 EA per 1 day)
ergotamine-caffeine oral tablet	2	PA; QL (0.86 EA per 1 day)
frovatriptan succinate oral tablet	2	QL (0.4 EA per 1 day)
MIGERGOT RECTAL SUPPOSITORY	4	PA; QL (0.72 EA per 1 day)
naratriptan hcl oral tablet	2	QL (0.3 EA per 1 day)
NURTEC ORAL TABLET DISPERSIBLE	3	PA; QL (0.27 EA per 1 day)
QULIPTA ORAL TABLET	3	PA; QL (1 EA per 1 day)
rizatriptan benzoate oral tablet 10 mg	2	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet 5 mg	2	QL (0.6 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 10 mg	2	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 5 mg	2	QL (0.6 EA per 1 day)
sumatriptan nasal solution	2	QL (0.4 EA per 1 day)
sumatriptan succinate oral tablet	2	QL (0.3 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
sumatriptan succinate refill subcutaneous solution cartridge subcutaneous solution cartridge	2	QL (0.17 ML per 1 day)
sumatriptan succinate subcutaneous solution	2	QL (0.17 ML per 1 day)
sumatriptan succinate subcutaneous solution auto-injector	2	QL (0.17 ML per 1 day)
sumatriptan-naproxen sodium oral tablet	2	QL (0.3 EA per 1 day)
UBRELVY ORAL TABLET	3	PA; QL (0.34 EA per 1 day)
VYEPTI INTRAVENOUS SOLUTION	4	PA; QL (3 ML per 81 days)
zolmitriptan nasal solution	2	QL (0.4 EA per 1 day)
zolmitriptan oral tablet	2	QL (0.4 EA per 1 day)
zolmitriptan oral tablet dispersible	2	QL (0.4 EA per 1 day)
Antimyasthenic Agents		
BLOXIVERZ INTRAVENOUS SOLUTION	4	
MESTINON ORAL SOLUTION	4	
MESTINON ORAL TABLET EXTENDED RELEASE	4	
neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml	2	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 3 MG/3ML, 5 MG/5ML	4	

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Drug Name	Drug Tier	Requirements /Limits
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 2 MG/2ML, 4 MG/4ML, 5 MG/5ML	4	
neostigmine methylsulfate solution prefilled syringe 3 mg/3ml intravenous	2	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 3 MG/3ML INTRAVENOUS	4	
pyridostigmine bromide er oral tablet extended release	1	
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	
REGONOL INTRAVENOUS SOLUTION	4	
Antimycobacterials		
cycloserine oral capsule	2	
dapsone oral tablet	2	
ethambutol hcl oral tablet	2	
isoniazid injection solution	2	
isoniazid oral syrup	2	
isoniazid oral tablet	2	
MYAMBUTOL ORAL TABLET	4	
MYCOBUTIN ORAL CAPSULE	4	
PRETOMANID ORAL TABLET	4	

Drug Name	Drug Tier	Requirements /Limits
PRIFTIN ORAL TABLET	4	
pyrazinamide oral tablet	2	
rifabutin oral capsule	2	
RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
rifampin intravenous solution reconstituted	2	
rifampin oral capsule	2	
SIRTURO ORAL TABLET	4	
TRECTOR ORAL TABLET	4	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet	2	PA; SP
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	3	SP
ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
adriamycin intravenous solution reconstituted	2	SP
ALECENSA ORAL CAPSULE	3	PA; SP
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ALUNBRIG ORAL TABLET 180 MG, 90 MG	3	PA; SP; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
ALUNBRIG ORAL TABLET 30 MG	3	PA; SP; QL (4 EA per 1 day)
ALUNBRIG ORAL TABLET THERAPY PACK	3	PA; SP; QL (30 EA per 365 days)
anastrozole oral tablet	1	PV
ARRANON INTRAVENOUS SOLUTION	4	SP
arsenic trioxide intravenous solution	2	SP
ARZERRA INTRAVENOUS CONCENTRATE	3	PA; SP
ASPARLAS INTRAVENOUS SOLUTION	4	SP
AVASTIN INTRAVENOUS SOLUTION	4	PA; SP
AYVAKIT ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
azacitidine injection suspension reconstituted	2	SP
BALVERSA ORAL TABLET	4	PA; SP
BAVENCIO INTRAVENOUS SOLUTION	4	PA; SP
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
bendamustine hcl intravenous solution reconstituted	2	PA; SP
BENDEKA INTRAVENOUS SOLUTION	4	PA; SP
BESPONSА INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
bexarotene external gel	2	PA; SP
bexarotene oral capsule	2	PA; SP
bicalutamide oral tablet	2	
BICNU INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
bleomycin sulfate injection solution reconstituted	2	SP
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
bortezomib injection solution reconstituted	2	PA; SP
bortezomib intravenous solution	2	PA; SP
BOORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
BOSULIF ORAL TABLET	4	PA; SP
BRAFTOVI ORAL CAPSULE	4	PA; SP
BRUKINSA ORAL CAPSULE	4	PA; SP
busulfan intravenous solution	2	SP
BUSULFEX INTRAVENOUS SOLUTION	4	SP
CABOMETYX ORAL TABLET	3	PA; SP
CALQUENCE ORAL TABLET	4	PA; SP
CAMPTOSAR INTRAVENOUS SOLUTION	4	SP
capecitabine oral tablet	2	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
CAPRELSA ORAL TABLET 100 MG	3	PA; SP; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	3	PA; SP
carboplatin intravenous solution	2	SP
carmustine intravenous solution reconstituted	2	SP
CASODEX ORAL TABLET	4	
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml	2	SP
CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
cisplatin solution 50 mg/50ml intravenous	2	SP
CISPLATIN SOLUTION 50 MG/50ML INTRAVENOUS	4	SP
cladribine intravenous solution	2	SP
clofarabine intravenous solution	2	SP
CLOLAR INTRAVENOUS SOLUTION	4	SP
COLUMVI INTRAVENOUS SOLUTION	4	PA; SP
COMETRIQ ORAL KIT	4	PA; SP
COPIKTRA ORAL CAPSULE	4	PA; SP
COSMEGEN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
COTELLIC ORAL TABLET	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
cyclophosphamide injection solution reconstituted	2	SP
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION	4	SP
cyclophosphamide oral capsule	2	
CYCLOPHOSPHAMIDE ORAL TABLET	3	
CYRAMZA INTRAVENOUS SOLUTION	4	PA; SP
cytarabine (pf) injection solution	2	SP
cytarabine injection solution	2	SP
dacarbazine intravenous solution reconstituted	2	SP
dactinomycin intravenous solution reconstituted	2	SP
DANYELZA INTRAVENOUS SOLUTION	4	PA; SP
DARZALEX INTRAVENOUS SOLUTION	4	PA; SP
daunorubicin hcl intravenous solution	2	SP
DAURISMO ORAL TABLET	4	PA; SP
decitabine intravenous solution reconstituted	2	PA; SP
dexrazoxane hcl intravenous solution reconstituted	2	SP
dexrazoxane intravenous solution reconstituted	2	SP
docetaxel intravenous concentrate	2	SP

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Drug Name	Drug Tier	Requirements /Limits
docetaxel intravenous solution	2	SP
DOXIL INTRAVENOUS INJECTABLE	4	SP
doxorubicin hcl intravenous solution	2	SP
doxorubicin hcl intravenous solution reconstituted	2	SP
doxorubicin hcl liposomal intravenous injectable	2	SP
DROXIA ORAL CAPSULE	4	
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
ELLENCÉ INTRAVENOUS SOLUTION	4	SP
EMCYT ORAL CAPSULE	3	
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
EPKINLY SUBCUTANEOUS SOLUTION	4	PA; SP
ERBITUX INTRAVENOUS SOLUTION	3	PA; SP
ERIVEDGE ORAL CAPSULE	4	PA; SP
ERLEADA ORAL TABLET	4	PA; SP
erlotinib hcl oral tablet 100 mg, 150 mg	2	PA; SP

Drug Name	Drug Tier	Requirements /Limits
erlotinib hcl oral tablet 25 mg	2	PA; SP; QL (3 EA per 1 day)
ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED	4	
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
etoposide intravenous solution	2	SP
etoposide oral capsule	2	SP
EULEXIN ORAL CAPSULE	4	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	2	PA; SP; QL (1 EA per 1 day)
everolimus oral tablet soluble	2	PA; SP
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
exemestane oral tablet	1	PV
EXKIVITY ORAL CAPSULE	4	PA; SP
FARESTON ORAL TABLET	4	
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	SP
fludarabine phosphate intravenous solution	2	SP
fludarabine phosphate intravenous solution reconstituted	2	SP
fluorouracil intravenous solution	2	SP
FOLOTYN INTRAVENOUS SOLUTION	4	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
fulvestrant intramuscular solution prefilled syringe	2	SP
FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED	4	PA; SP
GAVRETO ORAL CAPSULE	4	PA; SP
GAZYVA INTRAVENOUS SOLUTION	4	PA; SP
gefitinib oral tablet	2	PA; SP
gemcitabine hcl intravenous solution	2	SP
gemcitabine hcl intravenous solution reconstituted	2	SP
GILOTRIF ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
GLEOSTINE ORAL CAPSULE	4	SP
HALAVEN INTRAVENOUS SOLUTION	3	PA; SP
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	4	PA; SP
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
HYCAMTIN ORAL CAPSULE	4	SP
HYDREA ORAL CAPSULE	4	
hydroxyurea oral capsule	2	

Drug Name	Drug Tier	Requirements /Limits
IBRANCE ORAL CAPSULE	4	PA; SP
IBRANCE ORAL TABLET	4	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	4	PA; SP; QL (1 EA per 1 day)
ICLUSIG ORAL TABLET 30 MG, 45 MG	4	PA; SP
IDAMYCIN PFS INTRAVENOUS SOLUTION	4	SP
idarubicin hcl intravenous solution	2	SP
IDHIFA ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
IFEX INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
ifosfamide intravenous solution	2	SP
ifosfamide intravenous solution reconstituted	2	SP
imatinib mesylate oral tablet	2	PA; SP
IMBRUVICA ORAL CAPSULE 140 MG	4	PA; SP; QL (3 EA per 1 day)
IMBRUVICA ORAL CAPSULE 70 MG	4	PA; SP; QL (1 EA per 1 day)
IMBRUVICA ORAL SUSPENSION	4	PA; SP
IMBRUVICA ORAL TABLET 420 MG	4	PA; SP; QL (1 EA per 1 day)
IMFINZI INTRAVENOUS SOLUTION	4	PA; SP
IMJUDO INTRAVENOUS SOLUTION	4	PA; SP
INLYTA ORAL TABLET	4	PA; SP
INREBIC ORAL CAPSULE	4	PA; SP

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
IRESSA ORAL TABLET	4	PA; SP
irinotecan hcl intravenous solution	2	SP
ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
JAKAFI ORAL TABLET 10 MG, 5 MG	3	PA; SP; QL (2 EA per 1 day)
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	3	PA; SP
JAYPIRCA ORAL TABLET 100 MG	4	PA; SP
JAYPIRCA ORAL TABLET 50 MG	4	PA; SP; QL (1 EA per 1 day)
JEMPERLI INTRAVENOUS SOLUTION	4	PA; SP
JEVTANA INTRAVENOUS SOLUTION	3	PA; SP
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
KEMOPLAT INTRAVENOUS SOLUTION	4	SP
KEYTRUDA INTRAVENOUS SOLUTION	4	PA; SP
KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED	4	SP

Drug Name	Drug Tier	Requirements /Limits
KIMMTRAK INTRAVENOUS SOLUTION	4	PA; SP
KISQALI FEMARA ORAL TABLET THERAPY PACK	4	PA; SP
KISQALI ORAL TABLET THERAPY PACK 200 MG	4	PA; SP
KOSELUGO ORAL CAPSULE	4	PA; SP
KRAZATI ORAL TABLET	4	PA; SP
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
lapatinib ditosylate oral tablet	2	PA; SP
lenalidomide oral capsule	2	PA; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	4	PA; SP
letrozole oral tablet	1	
leucovorin calcium injection solution	2	
leucovorin calcium injection solution reconstituted	2	
leucovorin calcium oral tablet	2	
LEUKERAN ORAL TABLET	3	
levoleucovorin calcium intravenous solution reconstituted	2	SP
levoleucovorin calcium pf intravenous solution	2	SP

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
LIBTAYO INTRAVENOUS SOLUTION	4	PA; SP
LONSURF ORAL TABLET	4	PA; SP
LORBRENA ORAL TABLET	4	PA; SP
LUMAKRAS ORAL TABLET	4	PA; SP
LUMOXITI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
LUNSUMIO INTRAVENOUS SOLUTION	4	PA; SP
LYNPARZA ORAL TABLET	3	PA; SP
LYSODREN ORAL TABLET	3	
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA; SP
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA; SP
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	4	PA; SP
MARGENZA INTRAVENOUS SOLUTION	4	PA; SP
MATULANE ORAL CAPSULE	3	SP
MEKINIST ORAL SOLUTION RECONSTITUTED	4	PA; SP
MEKINIST ORAL TABLET	4	PA; SP
MEKTOVI ORAL TABLET	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
melphalan hcl intravenous solution reconstituted	2	SP
melphalan oral tablet	2	SP
mercaptopurine oral tablet	2	
mesna intravenous solution	2	SP
MESNEX INTRAVENOUS SOLUTION	4	SP
MESNEX ORAL TABLET	4	SP
mitomycin intravenous solution reconstituted	2	SP
mitoxantrone hcl intravenous concentrate	2	PA; SP
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
mutamycin intravenous solution reconstituted	2	SP
MVASI INTRAVENOUS SOLUTION	3	PA; SP
MYLERAN ORAL TABLET	3	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
nelarabine intravenous solution	2	SP
NERLYNX ORAL TABLET	4	PA; SP; QL (6 EA per 1 day)
NEXAVAR ORAL TABLET	4	PA; SP
NILANDRON ORAL TABLET	4	SP
nilutamide oral tablet	2	SP

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Drug Name	Drug Tier	Requirements /Limits
NINLARO ORAL CAPSULE	4	PA; SP
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
NUBEQA ORAL TABLET	4	PA; SP
ODOMZO ORAL CAPSULE	4	PA; SP
ONCASPAR INJECTION SOLUTION	3	SP
ONIVYDE INTRAVENOUS INJECTABLE	4	SP
ONUREG ORAL TABLET	4	PA; SP
OPDIVO INTRAVENOUS SOLUTION	4	PA; SP
OPDUALAG INTRAVENOUS SOLUTION	4	PA; SP
ORGOVYX ORAL TABLET	4	PA; SP
ORSERDU ORAL TABLET	4	PA; SP
oxaliplatin intravenous solution	2	SP
oxaliplatin intravenous solution reconstituted	2	SP
paclitaxel intravenous concentrate	2	SP
PACLITAXEL PROTEIN-BOUND PART INTRAVENOUS SUSPENSION RECONSTITUTED	4	SP
PADCEV INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
PANRETIN EXTERNAL GEL	4	
PARAPLATIN INTRAVENOUS SOLUTION	4	SP
pazopanib hcl oral tablet	2	PA; SP
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	4	SP
pemetrexed disodium intravenous solution reconstituted	2	SP
PEMETREXED DITROMETHAMINE INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
PEMETREXED INTRAVENOUS SOLUTION	4	SP
PEMFEXY INTRAVENOUS SOLUTION	4	SP
PERJETA INTRAVENOUS SOLUTION	3	PA; SP
PHESGO SUBCUTANEOUS SOLUTION	3	PA; SP
PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
PIQRAY ORAL TABLET THERAPY PACK	4	PA; SP
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
POMALYST ORAL CAPSULE	4	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
PORTRAZZA INTRAVENOUS SOLUTION	4	PA; SP
POTELIGEO INTRAVENOUS SOLUTION	4	PA; SP
PRALATREXATE INTRAVENOUS SOLUTION	4	PA; SP
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
PURIXAN ORAL SUSPENSION	4	SP
QINLOCK ORAL TABLET	4	PA; SP
RETEVMO ORAL CAPSULE	4	PA; SP
REVLIMID ORAL CAPSULE	3	PA; SP
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	4	PA; SP
RITUXAN INTRAVENOUS SOLUTION	4	PA; SP
ROMIDEPSIN INTRAVENOUS SOLUTION	4	PA; SP
romidepsin intravenous solution reconstituted	2	PA; SP
ROZLYTREK ORAL CAPSULE	4	PA; SP
RUXIENCE INTRAVENOUS SOLUTION	3	PA; SP
RYBREVAANT INTRAVENOUS SOLUTION	4	PA; SP
RYDAPT ORAL CAPSULE	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
SARCLISA INTRAVENOUS SOLUTION	4	PA; SP
SCEMBLIX ORAL TABLET 20 MG	4	PA; SP; QL (2 EA per 1 day)
SCEMBLIX ORAL TABLET 40 MG	4	PA; SP
SOLTAMOX ORAL SOLUTION	4	PV
sorafenib tosylate oral tablet	2	PA; SP
SPRYCEL ORAL TABLET	3	PA; SP
STIVARGA ORAL TABLET	3	PA; SP
sunitinib malate oral capsule	2	PA; SP
SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
TABLOID ORAL TABLET	3	SP
TABRECTA ORAL TABLET	4	PA; SP
TAFINLAR ORAL CAPSULE	4	PA; SP
TAFINLAR ORAL TABLET SOLUBLE	4	PA; SP
TAGRISSEO ORAL TABLET 40 MG	4	PA; SP; QL (1 EA per 1 day)
TAGRISSEO ORAL TABLET 80 MG	4	PA; SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	PV
TASIGNA ORAL CAPSULE	4	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
TECENTRIQ INTRAVENOUS SOLUTION	4	PA; SP
TECVAYLI SUBCUTANEOUS SOLUTION	4	PA; SP
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
temozolomide oral capsule	2	PA; SP
TEPADINA INJECTION SOLUTION RECONSTITUTED	4	SP
THALOMID ORAL CAPSULE	3	PA; SP
thiotepa injection solution reconstituted	2	SP
TIBSOVO ORAL TABLET	4	PA; SP
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	3	SP
TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
topotecan hcl intravenous solution	2	SP
topotecan hcl intravenous solution reconstituted	2	SP
toremifene citrate oral tablet	1	
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
tretinoin oral capsule	2	SP
TRISENOX INTRAVENOUS SOLUTION	4	SP

Drug Name	Drug Tier	Requirements /Limits
TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
TUKYSA ORAL TABLET	4	PA; SP
TURALIO ORAL CAPSULE	4	PA; SP
UNITUXIN INTRAVENOUS SOLUTION	4	PA; SP
UVADEX EXTRACORPOREAL SOLUTION	4	
VALCHLOR EXTERNAL GEL	4	PA; SP
valrubicin intravesical solution	2	SP
VALSTAR INTRAVESICAL SOLUTION	4	SP
VECTIBIX INTRAVENOUS SOLUTION	4	SP
VELCADE INJECTION SOLUTION RECONSTITUTED	4	PA; SP
VENCLEXTA ORAL TABLET	4	PA; SP
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	4	PA; SP
VERZENIO ORAL TABLET	4	PA; SP
VIDAZA INJECTION SUSPENSION RECONSTITUTED	4	SP
vinblastine sulfate intravenous solution	2	SP
vincristine sulfate intravenous solution	2	SP

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Drug Name	Drug Tier	Requirements /Limits
vinorelbine tartrate intravenous solution	2	SP
VITRAKVI ORAL CAPSULE	4	PA; SP
VITRAKVI ORAL SOLUTION	4	PA; SP
VIZIMPRO ORAL TABLET	4	PA; SP
VONJO ORAL CAPSULE	4	PA; SP
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED	4	
VOTRIENT ORAL TABLET	4	PA; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED	4	PA; SP
WELIREG ORAL TABLET	4	PA; SP
XOFIGO INTRAVENOUS SOLUTION	3	
XOSPATA ORAL TABLET	4	PA; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	4	PA; SP
XTANDI ORAL CAPSULE	4	PA; SP
XTANDI ORAL TABLET	4	PA; SP
YERVOY INTRAVENOUS SOLUTION	3	PA; SP
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
ZALTRAP INTRAVENOUS SOLUTION	3	PA; SP
ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ZEJULA ORAL TABLET 100 MG	3	PA; SP; QL (1 EA per 1 day)
ZEJULA ORAL TABLET 200 MG, 300 MG	3	PA; SP
ZELBORAF ORAL TABLET	4	PA; SP
ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ZEVALIN Y-90 INTRAVENOUS KIT	4	SP

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Drug Name	Drug Tier	Requirements /Limits
ZIRABEV INTRAVENOUS SOLUTION	3	PA; SP
ZOLINZA ORAL CAPSULE	3	PA; SP
ZYDELIG ORAL TABLET	4	PA; SP
ZYKADIA ORAL TABLET	4	PA; SP
ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ZYNYZ INTRAVENOUS SOLUTION	4	PA; SP
Antiparasitics		
albendazole oral tablet	2	PA
ALINIA ORAL SUSPENSION RECONSTITUTED	3	
ARAKODA ORAL TABLET	4	
ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED	4	
atovaquone oral suspension	2	
atovaquone-proguanil hcl oral tablet	2	
BENZNIDAZOLE ORAL TABLET	4	
BILTRICIDE ORAL TABLET	4	
chloroquine phosphate oral tablet	2	
COARTEM ORAL TABLET	4	
CROTAN EXTERNAL LOTION	4	
DARAPRIM ORAL TABLET	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
EGATEN ORAL TABLET	4	
EMVERM ORAL TABLET CHEWABLE	3	
hydroxychloroquine sulfate oral tablet 100 mg, 300 mg, 400 mg	2	
hydroxychloroquine sulfate oral tablet 200 mg	1	
IMPAVIDO ORAL CAPSULE	4	
ivermectin oral tablet	2	
KRINTAFEL ORAL TABLET	4	
LAMPIT ORAL TABLET	4	
MALARONE ORAL TABLET	4	
malathion external lotion	2	
mefloquine hcl oral tablet	2	
MEPRON ORAL SUSPENSION	4	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	4	
nitazoxanide oral tablet	2	
OVIDE EXTERNAL LOTION	4	
PENTAM INJECTION SOLUTION RECONSTITUTED	4	
pentamidine isethionate inhalation solution reconstituted	2	
pentamidine isethionate injection solution reconstituted	2	
permethrin external cream	2	

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Drug Name	Drug Tier	Requirements /Limits
praziquantel oral tablet	2	
primaquine phosphate oral tablet	2	
pyrimethamine oral tablet	2	PA; SP
PYRIMETHAMINE-LEUCOVORIN ORAL CAPSULE	4	
QUALAQUIN ORAL CAPSULE	4	PA
quinine sulfate oral capsule	2	PA
spinosad external suspension	2	
STROMECTOL ORAL TABLET	4	
sulfurated lime external solution	2	
Antiparkinson Agents		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	4	PA; SP; QL (3 ML per 1 day)
apomorphine hcl subcutaneous solution cartridge	2	PA; SP; QL (3 ML per 1 day)
benztropine mesylate injection solution	2	
benztropine mesylate oral tablet	1	
bromocriptine mesylate oral capsule	1	
bromocriptine mesylate oral tablet	1	
carbidopa oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
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	
COMTAN ORAL TABLET	4	
DUOPA ENTERAL SUSPENSION	4	PA
entacapone oral tablet	1	
INBRIJA INHALATION CAPSULE	4	PA; SP
NEUPRO TRANSDERMAL PATCH 24 HOUR	4	
NOURIANZ ORAL TABLET	4	PA
ONGENTYS ORAL CAPSULE	4	
PARLODEL ORAL CAPSULE	4	
PARLODEL ORAL TABLET	4	
pramipexole dihydrochloride er oral tablet extended release 24 hour	1	
pramipexole dihydrochloride oral tablet	1	
rasagiline mesylate oral tablet	1	
ropinirole hcl er oral tablet extended release 24 hour	1	
ropinirole hcl oral tablet	1	
RYTARY ORAL CAPSULE EXTENDED RELEASE	4	

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Drug Name	Drug Tier	Requirements /Limits
selegiline hcl oral capsule	1	
selegiline hcl oral tablet	1	
SINEMET ORAL TABLET	4	
TASMAR ORAL TABLET	4	
tolcapone oral tablet	1	
trihexyphenidyl hcl oral solution	1	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets		
AGGRASTAT INTRAVENOUS CONCENTRATE	4	
AGGRASTAT INTRAVENOUS SOLUTION	4	
aspirin-dipyridamole er oral capsule extended release 12 hour	1	
BRILINTA ORAL TABLET	3	
CABLIVI INJECTION KIT	4	PA; SP; QL (1 EA per 1 day)
cilostazol oral tablet	1	
clopidogrel bisulfate oral tablet 300 mg	2	
clopidogrel bisulfate oral tablet 75 mg	1	
dipyridamole oral tablet	1	
EFFIENT ORAL TABLET	4	
eptifibatide intravenous solution	2	
KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	4	
prasugrel hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
tirofiban hcl in nacl intravenous solution	2	
ZONTIVITY ORAL TABLET	4	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE	4	
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	4	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	4	PA
aripiprazole oral solution	2	QL (25 ML per 1 day)
aripiprazole oral tablet	2	QL (1 EA per 1 day)
aripiprazole oral tablet dispersible	2	QL (2 EA per 1 day)
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	4	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	4	
asenapine maleate sublingual tablet sublingual	2	QL (2 EA per 1 day)
CAPLYTA ORAL CAPSULE	4	QL (1 EA per 1 day)
chlorpromazine hcl injection solution	2	
chlorpromazine hcl oral concentrate	2	

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Drug Name	Drug Tier	Requirements /Limits
chlorpromazine hcl oral tablet	2	
clozapine oral tablet 100 mg, 25 mg	2	QL (9 EA per 1 day)
clozapine oral tablet 200 mg	2	QL (4 EA per 1 day)
clozapine oral tablet 50 mg	2	QL (6 EA per 1 day)
clozapine oral tablet dispersible 100 mg, 25 mg	2	QL (9 EA per 1 day)
clozapine oral tablet dispersible 12.5 mg	2	QL (3 EA per 1 day)
clozapine oral tablet dispersible 150 mg	2	QL (6 EA per 1 day)
clozapine oral tablet dispersible 200 mg	2	QL (4 EA per 1 day)
FANAPT ORAL TABLET	4	QL (2 EA per 1 day)
FANAPT TITRATION PACK ORAL TABLET	4	QL (8 EA per 180 days)
fluphenazine decanoate injection solution	2	
fluphenazine hcl injection solution	2	
fluphenazine hcl oral concentrate	2	
fluphenazine hcl oral elixir	2	
fluphenazine hcl oral tablet	2	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION	4	
haloperidol decanoate intramuscular solution	2	
haloperidol lactate injection solution	2	

Drug Name	Drug Tier	Requirements /Limits
haloperidol lactate oral concentrate	2	
haloperidol oral tablet	2	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 1.5 MG, 3 MG, 9 MG	4	QL (1 EA per 1 day)
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	4	QL (2 EA per 1 day)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
loxapine succinate oral capsule	2	
lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg	2	QL (1 EA per 1 day)
lurasidone hcl oral tablet 80 mg	2	QL (2 EA per 1 day)
molindone hcl oral tablet	2	
NUPLAZID ORAL CAPSULE	4	PA
NUPLAZID ORAL TABLET	4	PA
olanzapine intramuscular solution reconstituted	2	
olanzapine oral tablet	2	QL (1 EA per 1 day)
olanzapine oral tablet dispersible	2	QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	2	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	2	QL (2 EA per 1 day)
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	4	
pimozide oral tablet	2	
quetiapine fumarate er oral tablet extended release 24 hour	2	QL (2 EA per 1 day)
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 50 mg	2	QL (3 EA per 1 day)
quetiapine fumarate oral tablet 300 mg, 400 mg	2	QL (2 EA per 1 day)
REXULTI ORAL TABLET	4	QL (1 EA per 1 day)
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	
risperidone oral solution	2	QL (8 ML per 1 day)
risperidone oral tablet	2	QL (2 EA per 1 day)
risperidone oral tablet dispersible	2	QL (2 EA per 1 day)
thioridazine hcl oral tablet	2	
thiothixene oral capsule	2	
trifluoperazine hcl oral tablet	2	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	4	

Drug Name	Drug Tier	Requirements /Limits
VERSACLOZ ORAL SUSPENSION	4	QL (18 ML per 1 day)
VRAYLAR ORAL CAPSULE	4	QL (1 EA per 1 day)
VRAYLAR ORAL CAPSULE THERAPY PACK	4	QL (14 EA per 365 days)
ziprasidone hcl oral capsule	2	QL (2 EA per 1 day)
ziprasidone mesylate intramuscular solution reconstituted	2	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE	4	QL (1 EA per 1 day)
Antivirals		
abacavir sulfate oral solution	2	
abacavir sulfate oral tablet	2	
abacavir sulfate-lamivudine oral tablet	2	
acyclovir external ointment	2	QL (1 GM per 1 day)
acyclovir oral capsule	2	
acyclovir oral suspension	2	
acyclovir oral tablet	2	
acyclovir sodium intravenous solution	2	
adefovir dipivoxil oral tablet	2	
APTIVUS ORAL CAPSULE	3	
atazanavir sulfate oral capsule	2	
BARACLUDE ORAL SOLUTION	4	QL (630 ML per 30 days)

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
BIKTARVY ORAL TABLET	4	
cidofovir intravenous solution	2	
CIMDUO ORAL TABLET	3	
COMBIVIR ORAL TABLET	4	
COMPLERA ORAL TABLET	4	
darunavir oral tablet	2	
DELSTRIGO ORAL TABLET	4	
DOVATO ORAL TABLET	3	
EDURANT ORAL TABLET	3	
efavirenz oral capsule 200 mg, 50 mg	2	
efavirenz oral tablet	2	
efavirenz-emtricitab-tenofo df oral tablet	2	
efavirenz-lamivudine-tenofovir oral tablet	2	
emtricitabine oral capsule	2	
emtricitabine-tenofovir df oral tablet	2	PV
EMTRIVA ORAL CAPSULE	4	
EMTRIVA ORAL SOLUTION	3	
entecavir oral tablet	2	QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 150-37.5 MG	3	PA; SP; QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 200-50 MG	3	PA; SP; QL (2 EA per 1 day)
EPCLUSA ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
EPIVIR ORAL SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
EPIVIR ORAL TABLET	4	
EPZICOM ORAL TABLET	4	
etravirine oral tablet	2	
EVOTAZ ORAL TABLET	3	
famciclovir oral tablet	2	
fosamprenavir calcium oral tablet	2	
foscarnet sodium intravenous solution	2	
FOSCAVIR INTRAVENOUS SOLUTION	4	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	
GANCICLOVIR INTRAVENOUS SOLUTION	4	
ganciclovir sodium intravenous solution	2	
ganciclovir sodium intravenous solution reconstituted	2	
GENVOYA ORAL TABLET	4	
HARVONI ORAL PACKET 33.75-150 MG	3	PA; SP; QL (1 EA per 1 day)
HARVONI ORAL PACKET 45-200 MG	3	PA; SP; QL (2 EA per 1 day)
HARVONI ORAL TABLET 45-200 MG	3	PA; SP; QL (2 EA per 1 day)
HARVONI ORAL TABLET 90-400 MG	3	PA; SP; QL (1 EA per 1 day)
INTELENCE ORAL TABLET 100 MG, 200 MG	4	
INTELENCE ORAL TABLET 25 MG	3	

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
ISENTRESS HD ORAL TABLET	3	
ISENTRESS ORAL PACKET	3	
ISENTRESS ORAL TABLET	3	
ISENTRESS ORAL TABLET CHEWABLE	3	
JULUCA ORAL TABLET	3	
KALETRA ORAL SOLUTION	4	
KALETRA ORAL TABLET	4	
LAGEVRIO ORAL CAPSULE	4	QL (8 EA per 1 day)
lamivudine oral solution	2	
lamivudine oral tablet	2	
lamivudine-zidovudine oral tablet	2	
LEXIVA ORAL SUSPENSION	3	
LEXIVA ORAL TABLET	4	
LIVTENCITY ORAL TABLET	4	PA; SP
lopinavir-ritonavir oral solution	2	
lopinavir-ritonavir oral tablet	2	
maraviroc oral tablet	2	PA
MAVYRET ORAL PACKET	3	PA; SP; QL (5 EA per 1 day)
MAVYRET ORAL TABLET	3	PA; SP; QL (3 EA per 1 day)
nevirapine er oral tablet extended release 24 hour	2	
nevirapine oral suspension	2	
nevirapine oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
NORVIR ORAL PACKET	3	
NORVIR ORAL TABLET	4	
ODEFSEY ORAL TABLET	4	
oseltamivir phosphate oral capsule 30 mg	2	QL (40 EA per 365 days)
oseltamivir phosphate oral capsule 45 mg, 75 mg	2	QL (20 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted	2	QL (360 ML per 365 days)
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	3	QL (4 EA per 1 day)
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	3	QL (6 EA per 1 day)
PEGASYS SUBCUTANEOUS SOLUTION	3	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
penciclovir external cream	2	QL (0.17 GM per 1 day)
PIFELTRO ORAL TABLET	4	
PREVYMIS INTRAVENOUS SOLUTION	4	SP
PREVYMIS ORAL TABLET	4	SP
PREZCOBIX ORAL TABLET	3	
PREZISTA ORAL SUSPENSION	3	
PREZISTA ORAL TABLET 150 MG, 75 MG	3	

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
PREZISTA ORAL TABLET 600 MG, 800 MG	4	
RAPIVAB INTRAVENOUS SOLUTION	4	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (40 EA per 365 days)
RETROVIR INTRAVENOUS SOLUTION	3	
RETROVIR ORAL CAPSULE	4	
RETROVIR ORAL SYRUP	4	
REYATAZ ORAL CAPSULE	4	
REYATAZ ORAL PACKET	3	
ribavirin inhalation solution reconstituted	2	
ribavirin oral capsule	2	SP
ribavirin oral tablet	2	SP
rimantadine hcl oral tablet	2	
ritonavir oral tablet	2	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
SELZENTRY ORAL SOLUTION	3	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	3	PA
SOVALDI ORAL PACKET 150 MG	4	PA; SP; QL (1 EA per 1 day)
SOVALDI ORAL PACKET 200 MG	4	PA; SP; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 200 MG	4	PA; SP; QL (2 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
SOVALDI ORAL TABLET 400 MG	4	PA; SP; QL (1 EA per 1 day)
STRIBILD ORAL TABLET	4	
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG	4	PA; QL (8 EA per 365 days)
SUNLENCA ORAL TABLET THERAPY PACK 5 X 300 MG	4	PA; QL (10 EA per 365 days)
SUNLENCA SUBCUTANEOUS SOLUTION	4	PA; QL (9 ML per 365 days)
SYMFI LO ORAL TABLET	3	
SYMFI ORAL TABLET	3	
SYMITUZA ORAL TABLET	4	
TEMBEXA ORAL SUSPENSION	4	
TEMBEXA ORAL TABLET	4	
tenofovir disoproxil fumarate oral tablet	2	PV
TIVICAY ORAL TABLET	4	
TIVICAY PD ORAL TABLET SOLUBLE	4	
TPOXX INTRAVENOUS SOLUTION	4	
TPOXX ORAL CAPSULE	4	
TRIUMEQ ORAL TABLET	3	
TRIUMEQ PD ORAL TABLET SOLUBLE	4	
TRIZIVIR ORAL TABLET	4	
TROGARZO INTRAVENOUS SOLUTION	4	

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

Drug Name	Drug Tier	Requirements /Limits
TYBOST ORAL TABLET	3	
valacyclovir hcl oral tablet	2	QL (4 EA per 1 day)
valganciclovir hcl oral solution reconstituted	2	
valganciclovir hcl oral tablet	2	
VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED	4	QL (2 EA per 1 day)
VIRACEPT ORAL TABLET	3	
VIRAZOLE INHALATION SOLUTION RECONSTITUTED	4	
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	
VOSEVI ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	4	QL (2 EA per 365 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	4	QL (2 EA per 365 days)
ZEPATIER ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
ZIAGEN ORAL SOLUTION	4	
ZIAGEN ORAL TABLET	4	
zidovudine oral capsule	2	
zidovudine oral syrup	2	
zidovudine oral tablet	2	

Drug Name	Drug Tier	Requirements /Limits
Anxiolytics - Drugs for Anxiety		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
alprazolam intensol oral concentrate	2	QL (10 ML per 1 day)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	2	QL (4 EA per 1 day)
alprazolam oral tablet 2 mg	2	QL (5 EA per 1 day)
alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg	2	QL (4 EA per 1 day)
alprazolam oral tablet dispersible 2 mg	2	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	2	QL (1 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 2 mg	2	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 3 mg	2	QL (3 EA per 1 day)
ATIVAN INJECTION SOLUTION	4	
buspirone hcl oral tablet	2	
chlordiazepoxide hcl oral capsule 10 mg	2	QL (30 EA per 1 day)
chlordiazepoxide hcl oral capsule 25 mg	2	QL (12 EA per 1 day)
chlordiazepoxide hcl oral capsule 5 mg	2	QL (4 EA per 1 day)
clonazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
clonazepam oral tablet 2 mg	1	QL (10 EA per 1 day)
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
clonazepam oral tablet dispersible 2 mg	1	QL (10 EA per 1 day)
clorazepate dipotassium oral tablet 15 mg	2	QL (6 EA per 1 day)
clorazepate dipotassium oral tablet 3.75 mg	2	QL (24 EA per 1 day)
clorazepate dipotassium oral tablet 7.5 mg	2	QL (12 EA per 1 day)
diazepam injection solution 10 mg/2ml	2	
diazepam intensol oral concentrate	2	
diazepam intramuscular solution auto-injector 10 mg/2ml	2	
diazepam oral concentrate	2	
diazepam oral solution	2	
diazepam oral tablet	2	
diazepam solution 5 mg/ml injection	2	
DIAZEPAM SOLUTION 5 MG/ML INJECTION	4	
DORAL ORAL TABLET	4	QL (1 EA per 1 day)
estazolam oral tablet	2	QL (1 EA per 1 day)
HALCION ORAL TABLET	4	QL (2 EA per 1 day)
hydroxyzine hcl intramuscular solution	2	
hydroxyzine hcl oral syrup	2	

Drug Name	Drug Tier	Requirements /Limits
hydroxyzine hcl oral tablet	2	
hydroxyzine pamoate oral capsule	2	
lorazepam injection solution	2	
lorazepam intensol oral concentrate	2	QL (5 ML per 1 day)
lorazepam oral concentrate 2 mg/ml	2	QL (5 ML per 1 day)
lorazepam oral tablet 0.5 mg, 1 mg	2	QL (3 EA per 1 day)
lorazepam oral tablet 2 mg	2	QL (5 EA per 1 day)
meprobamate oral tablet	2	
oxazepam oral capsule	2	QL (4 EA per 1 day)
quazepam oral tablet	2	QL (1 EA per 1 day)
triazolam oral tablet	2	QL (2 EA per 1 day)
VISTARIL ORAL CAPSULE	4	
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	
lithium carbonate er oral tablet extended release	2	
lithium carbonate oral capsule	2	
lithium carbonate oral tablet	2	
lithium oral solution	2	

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Drug Name	Drug Tier	Requirements /Limits
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
AFSTYLA INTRAVENOUS KIT	4	SP
AGRYLIN ORAL CAPSULE	4	
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
ALTUVIIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	4	SP
aminocaproic acid intravenous solution	2	
aminocaproic acid oral solution	2	
aminocaproic acid oral tablet	2	
anagrelide hcl oral capsule	2	

Drug Name	Drug Tier	Requirements /Limits
ARANESP (ALBUMIN FREE) INJECTION SOLUTION	3	PA; SP
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP
ASTRINGYN EXTERNAL SOLUTION	4	
BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED	4	
BENEFIX INTRAVENOUS KIT	3	SP
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
CORIFACT INTRAVENOUS KIT	3	SP
CYKLOKAPRON INTRAVENOUS SOLUTION	4	
DOPTELET ORAL TABLET	4	PA; SP
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
EMPAVELI SUBCUTANEOUS SOLUTION	4	PA; SP
ENJAYMO INTRAVENOUS SOLUTION	4	PA; SP
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

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Drug Name	Drug Tier	Requirements /Limits
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
HEMLIBRA SUBCUTANEOUS SOLUTION	4	SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
HESPAN INTRAVENOUS SOLUTION	4	
hetastarch-nacl intravenous solution	2	
HEXTEND INTRAVENOUS SOLUTION	4	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
KCENTRA INTRAVENOUS KIT	4	
KOATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

Drug Name	Drug Tier	Requirements /Limits
KOGENATE FS INTRAVENOUS KIT	3	SP
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
LEUKINE INJECTION SOLUTION RECONSTITUTED	4	PA; SP
LMD IN D5W INTRAVENOUS SOLUTION	4	
LMD IN NAACL INTRAVENOUS SOLUTION	4	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	4	PA; SP
MOZOBIL SUBCUTANEOUS SOLUTION	4	SP
MULPLETA ORAL TABLET	3	PA; SP
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	4	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
NIVESTYM INJECTION SOLUTION	3	PA; SP
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

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Drug Name	Drug Tier	Requirements /Limits
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
NUWIQ INTRAVENOUS KIT	3	SP
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
plerixafor subcutaneous solution	2	SP
PROCRIT INJECTION SOLUTION	3	PA; SP
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
PROMACTA ORAL PACKET	4	PA; SP
PROMACTA ORAL TABLET	4	PA; SP
protamine sulfate intravenous solution	2	
PYRUKYND ORAL TABLET	4	PA; SP; QL (2 EA per 1 day)
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	4	PA; SP; QL (1 EA per 1 day)
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP

Drug Name	Drug Tier	Requirements /Limits
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED	4	
RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	4	
RETACRIT INJECTION SOLUTION	3	PA; SP
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
SOLIRIS INTRAVENOUS SOLUTION	4	PA; SP
TAVALISSE ORAL TABLET	4	PA; SP
THROMBIN-JMI EPISTAXIS EXTERNAL KIT	4	
THROMBIN-JMI EXTERNAL KIT	4	
THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	4	
THROMBOGEN EXTERNAL KIT	4	

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Drug Name	Drug Tier	Requirements /Limits
THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	4	
tranexamic acid intravenous solution	2	
tranexamic acid oral tablet	2	
TRANEXAMIC ACID-NACL INTRAVENOUS SOLUTION	4	
TRETEN INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; SP
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
ULTOMIRIS INTRAVENOUS SOLUTION	4	PA; SP
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
WILATE INTRAVENOUS KIT	3	SP
XYNTHA INTRAVENOUS KIT	3	SP
XYNTHA SOLOFUSE INTRAVENOUS KIT	3	SP
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL ORAL TABLET	4	
ACCURETIC ORAL TABLET	4	
acebutolol hcl oral capsule	1	
acetazolamide sodium injection solution reconstituted	2	
adenosine intravenous solution 12 mg/4ml, 6 mg/2ml	2	
AKOVAZ INTRAVENOUS SOLUTION	4	
AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
ALDACTONE ORAL TABLET	4	
aliskiren fumarate oral tablet	1	
amiloride hcl oral tablet	1	
amiloride-hydrochlorothiazide oral tablet	1	
amiodarone hcl intravenous solution	2	
amiodarone hcl oral tablet	1	
amlodipine besylate oral tablet	1	
amlodipine besylate-benazepril hcl oral capsule	1	
amlodipine besylate-valsartan oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
amlodipine-atorvastatin oral tablet	1	
amlodipine-olmesartan oral tablet	1	
amlodipine-valsartan-hctz oral tablet	1	
ASCLERA INTRAVENOUS SOLUTION	4	
atenolol oral tablet	1	
atenolol-chlorthalidone oral tablet	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	PV
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
AVALIDE ORAL TABLET	4	
benazepril hcl oral tablet	1	
benazepril-hydrochlorothiazide oral tablet	1	
betaxolol hcl oral tablet	1	
BIDIL ORAL TABLET	4	
BIORPHEN INTRAVENOUS SOLUTION	4	
bisoprolol fumarate oral tablet	1	
bisoprolol-hydrochlorothiazide oral tablet	1	
BREVIBLOC IN NACL INTRAVENOUS SOLUTION	4	
BREVIBLOC INTRAVENOUS SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION	4	
BREVIBLOC PREMIXED INTRAVENOUS SOLUTION	4	
bumetanide injection solution	2	
bumetanide oral tablet	1	
BUMEX ORAL TABLET	4	
candesartan cilexetil oral tablet	1	
candesartan cilexetil-hctz oral tablet	1	
captopril oral tablet	1	
captopril-hydrochlorothiazide oral tablet	1	
CARDENE IV INTRAVENOUS SOLUTION	4	
CARDIZEM ORAL TABLET	4	
CARDURA ORAL TABLET	4	
cartia xt oral capsule extended release 24 hour	1	
carvedilol oral tablet	1	
carvedilol phosphate er oral capsule extended release 24 hour	1	
chlorothiazide sodium intravenous solution reconstituted	2	
chlorthalidone oral tablet	1	
cholestyramine light oral packet	1	

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

Drug Name	Drug Tier	Requirements /Limits
cholestyramine light oral powder	1	
cholestyramine oral packet	1	
cholestyramine oral powder	1	
CLEVIPREX INTRAVENOUS EMULSION	4	
clonidine hcl oral tablet	1	
clonidine transdermal patch weekly	1	
colesevelam hcl oral packet	1	
colesevelam hcl oral tablet	1	
colestipol hcl oral granules	1	
colestipol hcl oral packet	1	
colestipol hcl oral tablet	1	
CORLANOR ORAL SOLUTION	4	PA; QL (15 ML per 1 day)
CORLANOR ORAL TABLET	4	PA; QL (2 EA per 1 day)
CORLOPAM INTRAVENOUS SOLUTION	4	
CORVERT INTRAVENOUS SOLUTION	4	
DEMSEER ORAL CAPSULE	4	PA; QL (16 EA per 1 day)
DIBENZYLINE ORAL CAPSULE	4	PA
digoxin injection solution	2	
digoxin oral solution	1	
digoxin oral tablet	1	
diltiazem hcl er beads oral capsule extended release 24 hour	1	

Drug Name	Drug Tier	Requirements /Limits
diltiazem hcl er coated beads oral capsule extended release 24 hour	1	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	
diltiazem hcl intravenous solution	2	
diltiazem hcl intravenous solution reconstituted	2	
diltiazem hcl oral tablet	1	
DILTIAZEM HCL-DEXTROSE INTRAVENOUS SOLUTION	4	
DILTIAZEM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
dilt-xr oral capsule extended release 24 hour	1	
disopyramide phosphate oral capsule	1	
DIURIL ORAL SUSPENSION	4	
dobutamine hcl intravenous solution	2	
dobutamine in d5w intravenous solution	2	
dofetilide oral capsule	1	
dopamine hcl intravenous solution	2	

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

Drug Name	Drug Tier	Requirements /Limits
dopamine in d5w intravenous solution	2	
doxazosin mesylate oral tablet	1	
droxidopa oral capsule	2	PA; SP
DYRENIUM ORAL CAPSULE	4	
EDARBI ORAL TABLET	4	
EDARBYCLOR ORAL TABLET	4	
EDECIN ORAL TABLET	4	
EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE 25 MG/5ML	4	
enalapril maleate oral solution	1	
enalapril maleate oral tablet	1	
enalaprilat intravenous injectable	2	
enalapril-hydrochlorothiazide oral tablet	1	
ENTRESTO ORAL TABLET	3	QL (2 EA per 1 day)
EPHEDRINE SULFATE (PRESSORS) INJECTION SOLUTION PREFILLED SYRINGE 50 MG/10ML, 50 MG/5ML	4	
ephedrine sulfate (pressors) intravenous solution 50 mg/ml	2	

Drug Name	Drug Tier	Requirements /Limits
EPHEDRINE SULFATE (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
EPHEDRINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
EPINEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION	4	
EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION 8-0.9 MG/250ML-%	4	
epinephrine injection solution 10 mg/10ml	2	
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 1 MG/10ML, 1 MG/ML	4	
EPINEPHRINE INTRAVENOUS SOLUTION	4	
EPINEPHRINE INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.1 MG/10ML	4	
epinephrine intravenous solution prefilled syringe 1 mg/10ml	2	
epinephrine pf injection solution	2	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 2-5 MG/250ML-%	4	

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

Drug Name	Drug Tier	Requirements /Limits
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION 2-0.9 MG/250ML-%	4	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
eplerenone oral tablet	1	
esmolol hcl intravenous solution 100 mg/10ml	2	
ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML	4	
esmolol hcl-sodium chloride intravenous solution	2	
ethacrynate sodium intravenous solution reconstituted	2	
ethacrynic acid oral tablet	1	
ETHAMOLIN INTRAVENOUS SOLUTION	4	
EVKEEZA INTRAVENOUS SOLUTION	4	PA; SP
ezetimibe oral tablet	1	
ezetimibe-simvastatin oral tablet	1	
felodipine er oral tablet extended release 24 hour	1	
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	

Drug Name	Drug Tier	Requirements /Limits
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
fenofibric acid oral tablet	1	
flecainide acetate oral tablet	1	
fluvastatin sodium er oral tablet extended release 24 hour	1	
fluvastatin sodium oral capsule	1	
fosinopril sodium oral tablet	1	
fosinopril sodium-hctz oral tablet	1	
FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
furosemide injection solution	2	
furosemide oral solution	1	
furosemide oral tablet	1	
gemfibrozil oral tablet	1	
guanfacine hcl oral tablet	1	
HEMANGEOL ORAL SOLUTION	4	
hydralazine hcl injection solution	2	
hydralazine hcl oral tablet	1	
hydrochlorothiazide oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
hydrochlorothiazide oral tablet	1	
ibutilide fumarate intravenous solution	2	
icosapent ethyl oral capsule	1	PA
indapamide oral tablet	1	
INPEFA ORAL TABLET	4	
INSPRA ORAL TABLET	4	
irbesartan oral tablet	1	
irbesartan-hydrochlorothiazide oral tablet	1	
ISORDIL TITRADOSE ORAL TABLET	4	
isosorb dinitrate-hydralazine oral tablet	1	
isosorbide dinitrate oral tablet	1	
isosorbide mononitrate er oral tablet extended release 24 hour	1	
isosorbide mononitrate oral tablet	1	
isradipine oral capsule	1	
JUXTAPID ORAL CAPSULE 10 MG, 5 MG	4	PA; SP; QL (1 EA per 1 day)
JUXTAPID ORAL CAPSULE 20 MG, 30 MG	4	PA; SP; QL (2 EA per 1 day)
LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
labetalol hcl oral tablet	1	
labetalol hcl solution 5 mg/ml intravenous	2	

Drug Name	Drug Tier	Requirements /Limits
LABETALOL HCL SOLUTION 5 MG/ML INTRAVENOUS	4	
LABETALOL HCL-DEXTROSE INTRAVENOUS SOLUTION	4	
LABETALOL HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
LANOXIN INJECTION SOLUTION	4	
LANOXIN ORAL TABLET	3	
LANOXIN PEDIATRIC INJECTION SOLUTION	4	
LEVOPHED INTRAVENOUS SOLUTION	4	
lisinopril oral tablet	1	
lisinopril-hydrochlorothiazide oral tablet	1	
LOPID ORAL TABLET	4	
LOPRESSOR ORAL TABLET	4	
losartan potassium oral tablet	1	
losartan potassium-hctz oral tablet	1	
LOTENSIN HCT ORAL TABLET	4	
LOTENSIN ORAL TABLET	4	
lovastatin oral tablet	1	PV
mannitol intravenous solution	2	
matzim la oral tablet extended release 24 hour	1	

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

Drug Name	Drug Tier	Requirements /Limits
MAXZIDE ORAL TABLET	4	
MAXZIDE-25 ORAL TABLET	4	
METHYLDOPA ORAL TABLET	4	
metolazone oral tablet	1	
metoprolol succinate er oral tablet extended release 24 hour	1	
metoprolol tartrate intravenous solution	2	
metoprolol tartrate oral tablet	1	
metoprolol-hydrochlorothiazide oral tablet	1	
metyrosine oral capsule	1	PA; QL (16 EA per 1 day)
mexiletine hcl oral capsule	1	
midodrine hcl oral tablet	2	
milrinone lactate in dextrose intravenous solution	2	
milrinone lactate intravenous solution	2	
MINIPRESS ORAL CAPSULE	4	
minoxidil oral tablet	1	
moexipril hcl oral tablet	1	
MULTAQ ORAL TABLET	4	
nadolol oral tablet	1	
nebivolol hcl oral tablet	1	
NEXLETOL ORAL TABLET	3	PA; QL (1 EA per 1 day)
NEXLIZET ORAL TABLET	3	PA; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
NEXTERONE INTRAVENOUS SOLUTION	4	
niacin (antihyperlipidemic) oral tablet	1	
niacin er (antihyperlipidemic) oral tablet extended release	1	
niacor oral tablet	1	
NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION	4	
NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
nicardipine hcl intravenous solution	2	
nicardipine hcl oral capsule	1	
nifedipine er oral tablet extended release 24 hour	1	
nifedipine er osmotic release oral tablet extended release 24 hour	1	
nifedipine oral capsule	1	
nimodipine oral capsule	1	
nisoldipine er oral tablet extended release 24 hour	1	
NITRO-BID TRANSDERMAL OINTMENT	4	
nitroglycerin in d5w intravenous solution	2	
nitroglycerin intravenous solution	2	
nitroglycerin sublingual tablet sublingual	2	

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

Drug Name	Drug Tier	Requirements /Limits
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	2	
NITROLINGUAL TRANSLINGUAL SOLUTION	4	
nitroprusside sodium intravenous solution	2	
norepinephrine bitartrate intravenous solution	2	
NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 4-5 MG/250ML-%, 8-5 MG/250ML-%, 8-5 MG/500ML-%	4	
NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 16-0.9 MG/250ML-%, 4-0.9 MG/250ML-%, 8-0.9 MG/250ML-%	4	
NORLIQVA ORAL SOLUTION	4	PA
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
NORPACE ORAL CAPSULE	4	
NYMALIZE ORAL SOLUTION	4	
olmesartan medoxomil oral tablet	1	
olmesartan medoxomil-hctz oral tablet	1	
olmesartan-amlodipine-hctz oral tablet	1	
omega-3-acid ethyl esters oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
OSMITROL INTRAVENOUS SOLUTION	4	
PACERONE ORAL TABLET	4	
pentoxifylline er oral tablet extended release	1	
perindopril erbumine oral tablet	1	
phenoxybenzamine hcl oral capsule	1	PA
phentolamine mesylate injection solution reconstituted	2	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION 0.4 MG/10ML, 0.8 MG/10ML	4	
phenylephrine hcl (pressors) intravenous solution 10 mg/ml	2	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION	4	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION 10-0.9 MG/250ML-%, 20-0.9 MG/250ML-%, 25-0.9 MG/250ML-%, 40-0.9 MG/250ML-%, 50-0.9 MG/250ML-%, 80-0.9 MG/250ML-%	4	

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Drug Name	Drug Tier	Requirements /Limits
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.5-0.9 MG/5ML-%, 0.8-0.9 MG/10ML-%, 1-0.9 MG/10ML-%, 100-0.9 MCG/10ML-%, 20-0.9 MG/50ML-%, 5-0.9 MG/50ML-%	4	
pindolol oral tablet	1	
pravastatin sodium oral tablet	1	
prazosin hcl oral capsule	1	
PRESTALIA ORAL TABLET	4	
prevalite oral packet	1	
prevalite oral powder	1	
procainamide hcl injection solution	2	
propafenone hcl er oral capsule extended release 12 hour	1	
propafenone hcl oral tablet	1	
propranolol hcl er oral capsule extended release 24 hour	1	
propranolol hcl intravenous solution	2	
propranolol hcl oral solution	1	
propranolol hcl oral tablet	1	
PROSTIN VR INJECTION SOLUTION	4	
quinapril hcl oral tablet	1	
quinapril-hydrochlorothiazide oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
quinidine gluconate er oral tablet extended release	1	
quinidine sulfate oral tablet	1	
ramipril oral capsule	1	
ranolazine er oral tablet extended release 12 hour	1	
RECTIV RECTAL OINTMENT	4	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL (0.13 ML per 1 day)
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (0.11 ML per 1 day)
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (0.11 ML per 1 day)
rosuvastatin calcium oral tablet	1	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	PV
simvastatin oral tablet 80 mg	1	
SODIUM EDECRIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
sodium nitroprusside intravenous solution 25 mg/ml	2	
sotalol hcl (af) oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
SOTALOL HCL INTRAVENOUS SOLUTION	4	
sotalol hcl oral tablet	1	
SOTYLIZE ORAL SOLUTION	4	
spironolactone oral tablet	1	
spironolactone-hctz oral tablet	1	
taztia xt oral capsule extended release 24 hour	1	
TEKTURNA ORAL TABLET	3	
telmisartan oral tablet	1	
telmisartan-amlodipine oral tablet	1	
telmisartan-hctz oral tablet	1	
TENORETIC 100 ORAL TABLET	4	
TENORETIC 50 ORAL TABLET	4	
THALITONE ORAL TABLET	4	
tiadyt er oral capsule extended release 24 hour	1	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
timolol maleate oral tablet	1	
toremide oral tablet	1	
trandolapril oral tablet	1	
trandolapril-verapamil hcl er oral tablet extended release	1	
triamterene oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
triamterene-hctz oral capsule	1	
triamterene-hctz oral tablet	1	
TRILIPIX ORAL CAPSULE DELAYED RELEASE	4	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide oral tablet	1	
VARITHENA INTRAVENOUS FOAM	4	
VASCEPA ORAL CAPSULE	3	PA
VAZCULEP INTRAVENOUS SOLUTION	4	
VECAMYL ORAL TABLET	4	
verapamil hcl er oral capsule extended release 24 hour	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl intravenous solution	2	
verapamil hcl oral tablet	1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
VERQUVO ORAL TABLET	4	PA; QL (1 EA per 1 day)
VYNDAMAX ORAL CAPSULE	4	PA; SP; QL (1 EA per 1 day)
VYNDAQEL ORAL CAPSULE	4	PA; SP; QL (4 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
Central Nervous System Agents		
SKYCLARYS ORAL CAPSULE	4	PA; SP; QL (3 EA per 1 day)
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 5 MG, 7.5 MG	4	QL (3 EA per 1 day)
ADDERALL ORAL TABLET 30 MG	4	QL (2 EA per 1 day)
amphetamine sulfate oral tablet	2	QL (6 EA per 1 day)
amphetamine-dextroamphetamine er oral capsule extended release 24 hour	2	QL (2 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	2	QL (3 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 30 mg	2	QL (2 EA per 1 day)
amphet-dextroamphet 3-bead er oral capsule extended release 24 hour	2	QL (1 EA per 1 day)
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
atomoxetine hcl oral capsule	2	QL (1 EA per 1 day)
AZSTARYS ORAL CAPSULE	3	QL (1 EA per 1 day)
clonidine hcl er oral tablet extended release 12 hour	2	

Drug Name	Drug Tier	Requirements /Limits
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG	4	QL (1 EA per 1 day)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG	4	QL (2 EA per 1 day)
dexmethylphenidate hcl er oral capsule extended release 24 hour	2	QL (1 EA per 1 day)
dexmethylphenidate hcl oral tablet	2	QL (2 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	2	QL (6 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	2	QL (4 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	2	QL (3 EA per 1 day)
dextroamphetamine sulfate oral solution	2	QL (60 ML per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	2	QL (6 EA per 1 day)
dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 5 mg	2	QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 30 mg	2	QL (2 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 10 MG, 5 MG	4	QL (3 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 15 MG, 20 MG	4	QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
guanfacine hcl er oral tablet extended release 24 hour	1	
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	QL (1 EA per 1 day)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	4	
lisdexamfetamine dimesylate oral capsule	2	QL (1 EA per 1 day)
lisdexamfetamine dimesylate oral tablet chewable	2	QL (1 EA per 1 day)
methamphetamine hcl oral tablet	2	QL (5 EA per 1 day)
METHYLIN ORAL SOLUTION 10 MG/5ML	4	QL (30 ML per 1 day)
METHYLIN ORAL SOLUTION 5 MG/5ML	4	QL (60 ML per 1 day)
methylphenidate hcl er (cd) oral capsule extended release	2	QL (1 EA per 1 day)
methylphenidate hcl er (la) oral capsule extended release 24 hour	2	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg	2	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	2	QL (2 EA per 1 day)
methylphenidate hcl er (xr) oral capsule extended release 24 hour	2	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg	2	QL (2 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
methylphenidate hcl er oral tablet extended release 20 mg	2	QL (3 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg	2	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 36 mg	2	QL (2 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5ml	2	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	2	QL (60 ML per 1 day)
methylphenidate hcl oral tablet	2	QL (3 EA per 1 day)
methylphenidate hcl oral tablet chewable 10 mg	2	QL (6 EA per 1 day)
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	2	QL (3 EA per 1 day)
methylphenidate transdermal patch	2	QL (1 EA per 1 day)
PROCENTRA ORAL SOLUTION	4	QL (60 ML per 1 day)
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	3	PA; SP; QL (0.04 EA per 1 day)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	3	PA; SP; QL (0.04 EA per 1 day)
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	3	PA; SP; QL (4 EA per 1 day)
BETASERON SUBCUTANEOUS KIT	3	PA; SP; QL (0.5 EA per 1 day)

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

Drug Name	Drug Tier	Requirements /Limits
BRIUMVI INTRAVENOUS SOLUTION	4	PA; SP
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	3	PA; SP; QL (0.43 ML per 1 day)
dalfampridine er oral tablet extended release 12 hour	2	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate oral capsule delayed release	2	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate starter pack oral capsule delayed release therapy pack	2	PA; SP; QL (120 EA per 365 days)
fingolimod hcl oral capsule	2	PA; SP; QL (1 EA per 1 day)
GILENYA ORAL CAPSULE 0.25 MG	4	PA; SP; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	2	PA; SP; QL (1 ML per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	2	PA; SP; QL (0.43 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	2	PA; SP; QL (1 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	2	PA; SP; QL (0.43 ML per 1 day)
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.02 ML per 1 day)
LEMTRADA INTRAVENOUS SOLUTION	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
MAVENCLAD ORAL TABLET THERAPY PACK	4	PA; SP
MAYZENT ORAL TABLET 0.25 MG	4	PA; SP; QL (4 EA per 1 day)
MAYZENT ORAL TABLET 1 MG, 2 MG	4	PA; SP; QL (1 EA per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	4	PA; SP; QL (24 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	4	PA; SP; QL (14 EA per 365 days)
OCREVUS INTRAVENOUS SOLUTION	4	PA; SP
teriflunomide oral tablet	2	PA; SP; QL (1 EA per 1 day)
TYSABRI INTRAVENOUS CONCENTRATE	4	PA; SP; QL (0.54 ML per 1 day)
VUMERITY ORAL CAPSULE DELAYED RELEASE	3	PA; SP; QL (4 EA per 1 day)
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	4	PA; SP; QL (14 EA per 365 days)
ZEPOSIA ORAL CAPSULE	4	PA; SP; QL (1 EA per 1 day)
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	4	PA; SP; QL (56 EA per 365 days)
Central Nervous System Agents - Miscellaneous		
AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.5 ML per 81 days)

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Drug Name	Drug Tier	Requirements /Limits
ANECTINE INJECTION SOLUTION	4	
atracurium besylate intravenous solution	2	
AUSTEDO ORAL TABLET	4	PA; SP; QL (4 EA per 1 day)
AUSTEDO PATIENT TITRATION KIT ORAL TABLET THERAPY PACK	4	PA; SP; QL (140 EA per 365 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG	4	PA; SP; QL (3 EA per 1 day)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 24 MG	4	PA; SP; QL (2 EA per 1 day)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	4	PA; SP; QL (7 EA per 1 day)
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK	4	PA; SP; QL (84 EA per 365 days)
benzphetamine hcl oral tablet	2	
caffeine citrate intravenous solution	2	
caffeine citrate oral solution	2	
CAFFEINE-SODIUM BENZOATE INJECTION SOLUTION	4	
cisatracurium besylate (pf) intravenous solution	2	
cisatracurium besylate intravenous solution	2	

Drug Name	Drug Tier	Requirements /Limits
diethylpropion hcl er oral tablet extended release 24 hour	2	
diethylpropion hcl oral tablet	2	
DOPRAM INTRAVENOUS SOLUTION	4	
GRALISE ORAL	4	QL (66 EA per 365 days)
GRALISE ORAL TABLET 300 MG	4	QL (6 EA per 1 day)
GRALISE ORAL TABLET 450 MG, 600 MG	4	QL (3 EA per 1 day)
GRALISE ORAL TABLET 750 MG, 900 MG	4	QL (2 EA per 1 day)
HORIZANT ORAL TABLET EXTENDED RELEASE	4	PA; QL (2 EA per 1 day)
INGREZZA ORAL CAPSULE	4	PA; SP; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE THERAPY PACK	4	PA; SP; QL (56 EA per 365 days)
LOMAIRA ORAL TABLET	4	PA
NUEDEXTA ORAL CAPSULE	4	PA
ONPATTRO INTRAVENOUS SOLUTION	4	PA; SP
ORLISTAT ORAL CAPSULE	4	PA
phendimetrazine tartrate er oral capsule extended release 24 hour	2	
phendimetrazine tartrate oral tablet	2	
phentermine hcl oral capsule	2	

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Drug Name	Drug Tier	Requirements /Limits
phentermine hcl oral tablet	2	
pregabalin er oral tablet extended release 24 hour 165 mg, 82.5 mg	1	QL (3 EA per 1 day)
pregabalin er oral tablet extended release 24 hour 330 mg	1	QL (2 EA per 1 day)
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	1	QL (3 EA per 1 day)
pregabalin oral capsule 300 mg	1	QL (2 EA per 1 day)
pregabalin oral solution	1	QL (30 ML per 1 day)
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA
QUELICIN INJECTION SOLUTION	4	
RADICAVA INTRAVENOUS SOLUTION	4	PA; SP
RADICAVA ORS ORAL SUSPENSION	3	PA; SP
RADICAVA ORS STARTER KIT ORAL SUSPENSION	3	PA; SP
RELYVRIO ORAL PACKET	4	PA; SP; QL (2 EA per 1 day)
RILUTEK ORAL TABLET	4	PA; QL (2 EA per 1 day)
riluzole oral tablet	2	PA; QL (2 EA per 1 day)
rocuronium bromide intravenous solution	2	
ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	

Drug Name	Drug Tier	Requirements /Limits
SAVELLA ORAL TABLET	4	QL (2 EA per 1 day)
SAVELLA TITRATION PACK ORAL	4	QL (110 EA per 365 days)
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (0.5 ML per 1 day)
SUCCINYLCHOLINE CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE 100 MG/5ML	4	
SUCCINYLCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
succinylcholine chloride solution 20 mg/ml injection	2	
SUCCINYLCHOLINE CHLORIDE SOLUTION 20 MG/ML INJECTION	4	
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.22 ML per 1 day)
tetrabenazine oral tablet	2	PA; SP
TIGLUTIK ORAL SUSPENSION	3	PA; QL (20 ML per 1 day)
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
vecuronium bromide intravenous solution reconstituted	2	

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Drug Name	Drug Tier	Requirements /Limits
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	4	PA; QL (0.08 ML per 1 day)
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.7 MG/0.75ML, 2.4 MG/0.75ML	4	PA; QL (0.11 ML per 1 day)
XENICAL ORAL CAPSULE	4	PA
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
ACYCLONINE MUM MOUTH/THROAT AEROSOL POWDER	4	
AQUORAL MOUTH/THROAT SOLUTION	4	
cevimeline hcl oral capsule	1	
chlorhexidine gluconate mouth/throat solution	2	
DEBACTEROL MOUTH/THROAT SOLUTION	4	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	4	
FLUORIMAX 5000 SENSITIVE DENTAL PASTE	4	
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
kourzeq mouth/throat paste	2	

Drug Name	Drug Tier	Requirements /Limits
lidocaine viscous hcl mouth/throat solution	2	
MI PASTE DENTAL PASTE	4	
MI PASTE PLUS DENTAL PASTE	4	
oralone mouth/throat paste	2	
PERIDEX MOUTH/THROAT SOLUTION	4	
periogard mouth/throat solution	2	
pilocarpine hcl oral tablet	1	
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL	4	
PREVIDENT 5000 SENSITIVE DENTAL GEL	4	
REMESENSE DENTAL	4	
SALAGEN ORAL TABLET	4	
triamcinolone acetonide mouth/throat paste	2	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA LD ORAL CAPSULE	4	PA
accutane oral capsule	2	
acitretin oral capsule	2	
adapalene external cream	2	
adapalene external gel	2	
adapalene-benzoyl peroxide external gel	2	
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.15 ML per 1 day)

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

Drug Name	Drug Tier	Requirements /Limits
AKLIEF EXTERNAL CREAM	4	PA
ala-cort external cream	2	
alclometasone dipropionate external cream	2	
alclometasone dipropionate external ointment	2	
ALTRENO EXTERNAL LOTION	4	PA
ALUMINUM CHLORIDE ANHYDROUS POWDER	4	
ALUMINUM CHLORIDE HEXAHYDRATE POWDER	4	
amcinonide external lotion	2	
amcinonide external ointment	2	
ammonium lactate external cream	2	
ammonium lactate external lotion	2	
amnestem oral capsule	2	
AMZEEQ EXTERNAL FOAM	4	
AQUACEL AG BURN EXTERNAL PAD	4	
ATRALIN EXTERNAL GEL	4	PA
ATRAPRO DERMAL SPRAY EXTERNAL LIQUID	4	
azelaic acid external gel	2	
B & C EXTERNAL OINTMENT	4	

Drug Name	Drug Tier	Requirements /Limits
balsam peru-castor oil external ointment	2	
benzoyl peroxide-erythromycin external gel	2	
betamethasone dipropionate aug external cream	2	
betamethasone dipropionate aug external gel	2	
betamethasone dipropionate aug external lotion	2	
betamethasone dipropionate aug external ointment	2	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	2	
betamethasone dipropionate external ointment	2	
betamethasone valerate external cream	2	
betamethasone valerate external foam	2	
betamethasone valerate external lotion	2	
betamethasone valerate external ointment	2	
BPCO EXTERNAL OINTMENT	4	
brimonidine tartrate external gel	2	
CALAMINE POWDER	4	
calcipotriene external cream	2	

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

Drug Name	Drug Tier	Requirements /Limits
calcipotriene external ointment	2	
calcipotriene external solution	2	
calcipotriene-betameth diprop external suspension	2	QL (4 GM per 1 day)
CALCITRENE EXTERNAL OINTMENT	4	
calcitriol external ointment	2	
CARAC EXTERNAL CREAM	4	
CIBINQO ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
claravis oral capsule	2	
CLEOCIN-T EXTERNAL LOTION	4	
clindacin etz external swab	2	
clindacin external foam	2	
clindacin-p external swab	2	
clindamycin phos-benzoyl perox external gel	2	
clindamycin phosphate external foam	2	
clindamycin phosphate external gel	2	
clindamycin phosphate external lotion	2	
clindamycin phosphate external solution	2	
clindamycin phosphate external swab	2	
clindamycin-tretinoin external gel	2	
clobetasol prop emollient base external cream	2	

Drug Name	Drug Tier	Requirements /Limits
clobetasol propionate e external cream	2	
clobetasol propionate emulsion external foam	2	
clobetasol propionate external cream	2	
clobetasol propionate external foam	2	
clobetasol propionate external gel	2	
clobetasol propionate external liquid	2	
clobetasol propionate external lotion	2	
clobetasol propionate external ointment	2	
clobetasol propionate external shampoo	2	
clobetasol propionate external solution	2	
clocortolone pivalate external cream	2	
clodan external shampoo	2	
coal tar external solution	2	
CONDYLOX EXTERNAL GEL	4	
dapsone external gel	2	
DERMA-SMOOTH/FS BODY EXTERNAL OIL	4	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL	4	
desonide external cream	2	
desonide external gel	2	
desonide external lotion	2	
desonide external ointment	2	
DESOWEN EXTERNAL CREAM	4	

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Drug Name	Drug Tier	Requirements /Limits
desoximetasone external cream	2	
desoximetasone external gel	2	
desoximetasone external liquid	2	
desoximetasone external ointment	2	
diclofenac sodium external gel 3 %	2	QL (10 GM per 1 day)
DIPROLENE EXTERNAL OINTMENT	4	
DRYSOL EXTERNAL SOLUTION	4	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	3	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	3	PA; SP; QL (0.29 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	3	PA; SP; QL (0.05 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	3	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	3	PA; SP; QL (0.29 ML per 1 day)
EFUDEX EXTERNAL CREAM	4	
ENSTILAR EXTERNAL FOAM	4	QL (15 GM per 1 day)

Drug Name	Drug Tier	Requirements /Limits
EPIDUO FORTE EXTERNAL GEL	4	
EPIFOAM EXTERNAL FOAM	4	
ery external pad	2	
ERYGEL EXTERNAL GEL	4	
erythromycin external gel	2	
erythromycin external solution	2	
EUCRISA EXTERNAL OINTMENT	3	
FINACEA EXTERNAL FOAM	4	
FINACEA EXTERNAL GEL	4	
fluocinolone acetonide body external oil	2	
fluocinolone acetonide external cream	2	
fluocinolone acetonide external ointment	2	
fluocinolone acetonide external solution	2	
fluocinolone acetonide scalp external oil	2	
fluocinonide emulsified base external cream	2	
fluocinonide external cream	2	
fluocinonide external gel	2	
fluocinonide external ointment	2	
fluocinonide external solution	2	
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	
fluorouracil external cream 5 %	2	

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Drug Name	Drug Tier	Requirements /Limits
fluorouracil external solution	2	
flurandrenolide external cream	2	
flurandrenolide external lotion	2	
fluticasone propionate external cream	2	
fluticasone propionate external lotion	2	
fluticasone propionate external ointment	2	
GORDOFILM EXTERNAL SOLUTION	4	
halcinonide external cream	2	
halobetasol propionate external cream	2	
halobetasol propionate external ointment	2	
hydrocortisone butyr lipo base external cream	2	
hydrocortisone butyrate external cream	2	
hydrocortisone butyrate external lotion	2	
hydrocortisone butyrate external ointment	2	
hydrocortisone butyrate external solution	2	
hydrocortisone external cream 1 %, 2.5 %	2	
hydrocortisone external lotion 2.5 %	2	
hydrocortisone external ointment 1 %, 2.5 %	2	
hydrocortisone valerate external cream	2	
hydrocortisone valerate external ointment	2	

Drug Name	Drug Tier	Requirements /Limits
imiquimod external cream	2	
imiquimod pump external cream	2	
isotretinoin oral capsule	2	
ivermectin external cream	2	
KERALYT EXTERNAL SHAMPOO	4	
KLARON EXTERNAL LOTION	4	
KLISYRI EXTERNAL OINTMENT	4	
lactic acid e external cream	2	
lactic acid external lotion	2	
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED	4	
L-MESITRAN SOFT WOUND EXTERNAL GEL	4	
LUXAMEND EXTERNAL CREAM	4	
MEDIHONEY WOUND & BURN DRESSING EXTERNAL PASTE	4	
MEDIHONEY WOUND/BURN DRESSING EXTERNAL GEL	4	
methoxsalen rapid oral capsule	2	
METROCREAM EXTERNAL CREAM	4	
METROLOTION EXTERNAL LOTION	4	
metronidazole external cream	2	
metronidazole external gel	2	

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Drug Name	Drug Tier	Requirements /Limits
metronidazole external lotion	2	
MICROCYN EXTERNAL LIQUID	4	
MIRVASO EXTERNAL GEL	4	
mometasone furoate external cream	2	
mometasone furoate external ointment	2	
mometasone furoate external solution	2	
NEO-SYNALAR EXTERNAL CREAM	4	
neuac external gel	2	
ONEXTON EXTERNAL GEL	4	
PETROLEUM GAUZE NON-WOVEN 3X9" EXTERNAL	4	
pimecrolimus external cream	2	QL (2 GM per 1 day)
podofilox external solution	2	
PYROGALLIC ACID EXTERNAL OINTMENT	4	
QBREXZA EXTERNAL PAD	4	QL (1 EA per 1 day)
RADIAPLEXRX EXTERNAL GEL	4	
REGENECARE EXTERNAL GEL	4	
REGRANEX EXTERNAL GEL	4	PA
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	4	PA
RHOFADE EXTERNAL CREAM	4	
SALICATE EXTERNAL LIQUID	4	

Drug Name	Drug Tier	Requirements /Limits
SANTYL EXTERNAL OINTMENT	4	QL (3 GM per 1 day)
SCENESSE SUBCUTANEOUS IMPLANT	4	PA; SP
selenium sulfide external lotion	2	
SOOLANTRA EXTERNAL CREAM	4	
sulfacetamide sodium (acne) external lotion	2	
SYNALAR EXTERNAL CREAM	4	
SYNALAR EXTERNAL OINTMENT	4	
SYNALAR EXTERNAL SOLUTION	4	
TACLONEX EXTERNAL SUSPENSION	4	QL (4 GM per 1 day)
tacrolimus external ointment	2	QL (2 GM per 1 day)
tazarotene external cream	2	PA
tazarotene external gel	2	PA
TOLAK EXTERNAL CREAM	4	
TOPICORT EXTERNAL CREAM 0.25 %	4	
TOPICORT EXTERNAL GEL	4	
TOPICORT EXTERNAL OINTMENT	4	
tovet external foam	2	
tretinoin external cream	2	
tretinoin external gel	2	
tretinoin microsphere external gel	2	
tretinoin microsphere pump external gel	2	

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Drug Name	Drug Tier	Requirements /Limits
triamcinolone acetonide external cream	2	
triamcinolone acetonide external lotion	2	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	2	
triderm external cream	2	
TWYNEO EXTERNAL CREAM	4	
VELEX EXTERNAL OINTMENT	4	
VTAMA EXTERNAL CREAM	4	PA
WYNZORA EXTERNAL CREAM	4	QL (15 GM per 1 day)
XALIX EXTERNAL SOLUTION	4	
XERAC AC EXTERNAL SOLUTION	4	
XEROFORM OCCLUSIVE GAUZE PATCH EXTERNAL PAD	4	
XEROFORM OIL EMULSION 2"X2" EXTERNAL PAD	4	
XEROFORM OIL EMULSION GAUZE EXTERNAL PAD	4	
XEROFORM OIL EMULSION STRIP EXTERNAL	4	
XEROFORM OIL ROLL 4"X9' EXTERNAL	4	
XEROFORM PETROLAT GAUZE 1"X8" EXTERNAL	4	
XEROFORM PETROLAT GAUZE 5"X9" EXTERNAL	4	

Drug Name	Drug Tier	Requirements /Limits
XEROFORM PETROLAT PATCH 2"X2" EXTERNAL PAD	4	
XEROFORM PETROLAT PATCH 4"X4" EXTERNAL PAD	4	
XEROFORM PETROLATUM DRES 4"X4" EXTERNAL PAD	4	
XEROFORM PETROLATUM DRES 5"X9" EXTERNAL PAD	4	
XEROFORM PETROLATUM ROLL 4"X9' EXTERNAL	4	
zenatane oral capsule	2	
ZILXI EXTERNAL FOAM	4	
Diabetes - Antidiabetic Agents		
acarbose oral tablet	1	
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	3	PA; QL (0.15 ML per 1 day)
BYETTA 10 MCG PEN	3	PA; QL (0.08 ML per 1 day)
BYETTA 5 MCG PEN	3	PA; QL (0.04 ML per 1 day)
CYCLOSET ORAL TABLET	4	
DUETACT ORAL TABLET	4	
FARXIGA ORAL TABLET	3	
glimepiride oral tablet	1	
glipizide er oral tablet extended release 24 hour	1	
glipizide oral tablet 10 mg, 2.5 mg	2	
glipizide oral tablet 5 mg	1	

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Drug Name	Drug Tier	Requirements /Limits
glipizide xl oral tablet extended release 24 hour	1	
glipizide-metformin hcl oral tablet	1	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
glyburide micronized oral tablet	1	
glyburide oral tablet	1	
glyburide-metformin oral tablet	1	
GLYNASE ORAL TABLET	4	
GLYXAMBI ORAL TABLET	3	
JANUMET ORAL TABLET	3	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
JANUVIA ORAL TABLET	3	
JARDIANCE ORAL TABLET	3	
JENTADUETO ORAL TABLET	3	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
metformin hcl er oral tablet extended release 24 hour	1	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
miglitol oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (0.08 ML per 1 day)
nateglinide oral tablet	1	
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (0.11 ML per 1 day)
pioglitazone hcl oral tablet	1	
pioglitazone hcl-glimepiride oral tablet	1	
pioglitazone hcl-metformin hcl oral tablet	1	
repaglinide oral tablet	1	
RIOMET ORAL SOLUTION	4	
RYBELSUS ORAL TABLET 14 MG, 7 MG	3	PA; QL (1 EA per 1 day)
RYBELSUS ORAL TABLET 3 MG	3	PA; QL (60 EA per 365 days)
saxagliptin hcl oral tablet	1	
saxagliptin-metformin er oral tablet extended release 24 hour	1	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	QL (0.6 ML per 1 day)
SYMLINPEN 120	4	PA
SYMLINPEN 60	4	PA
SYNJARDY ORAL TABLET	3	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
TRADJENTA ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (0.08 ML per 1 day)
VICTOZA	3	PA; QL (0.3 ML per 1 day)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	QL (0.5 ML per 1 day)
Diabetes - Glucose Monitoring		
ACCU-CHEK FASTCLIX LANCET KIT KIT	3	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	3	
AUTOLET II CLINISAFE KIT	4	
AUTOLET LANCING DEVICE	4	
CARESENS LANCETS 30G	3	
CARETOUCH LANCING/EJECTOR	4	
CEQUR SIMPLICITY 2U DEVICE	3	
CHEMSTRIP BG LOG BOOK	4	
CHEMSTRIP K IN VITRO STRIP	4	
CHEMSTRIP UGK IN VITRO STRIP	4	
CLEVER CHOICE COMFORT EZ	3	

Drug Name	Drug Tier	Requirements /Limits
CONTOUR CONTROL IN VITRO LIQUID	3	
CONTOUR MONITOR DEVICE DEVICE	3	
CONTOUR MONITOR KIT W/DEVICE KIT	3	
CONTOUR NEXT CONTROL IN VITRO SOLUTION	3	
CONTOUR NEXT EZ KIT	3	
CONTOUR NEXT GEN MONITOR DEVICE	3	
CONTOUR NEXT GEN MONITOR KIT	3	
CONTOUR NEXT LINK KIT	3	
CONTOUR NEXT MONITOR KIT	3	
CONTOUR NEXT ONE DEVICE	3	
CONTOUR NEXT ONE KIT	3	
CONTOUR NEXT TEST IN VITRO STRIP	3	QL (10 EA per 1 day)
CONTOUR TEST IN VITRO STRIP	3	QL (10 EA per 1 day)
CVS KETONE CARE IN VITRO STRIP	4	
DEXCOM G6 RECEIVER DEVICE	3	PA
DEXCOM G6 SENSOR	3	PA
DEXCOM G6 TRANSMITTER	3	PA
DEXCOM G7 RECEIVER DEVICE	3	PA
DEXCOM G7 SENSOR	3	PA
DIATHRIVE LANCING DEVICE	4	
DROPLET GENTEEL LANCING DEVICE	4	

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Drug Name	Drug Tier	Requirements /Limits
EASY TOUCH LANCING DEVICE	4	
EMBRACE LANCING DEVICE/EJECTOR	4	
ENLITE GLUCOSE SENSOR	4	PA
GENTEEL LANCING KIT (BLUE) KIT	4	
GOJJI LANCING DEVICE/CLEAR CAP	4	
GUARDIAN 4 GLUCOSE SENSOR	4	PA
GUARDIAN 4 TRANSMITTER	4	PA
GUARDIAN CONNECT TRANSMITTER	4	PA
GUARDIAN LINK 3 TRANSMITTER	4	PA
GUARDIAN SENSOR (3)	4	PA
GUARDIAN SENSOR 3	4	PA
KETO-DIASTIX IN VITRO STRIP	4	
KETONE TEST IN VITRO STRIP	4	
KETOSTIX IN VITRO STRIP	4	
LANCETS	3	
LANCETS	4	
MICROLET NEXT LANCING DEVICE	4	
NOVOPEN ECHO DEVICE	4	
ONETOUCH DELICA PLUS LANCING	4	
ONETOUCH DELICA SAFETY LANCING	4	
VERIFINE SAFE LANCET MINI 21G	3	
VERIFINE SAFE LANCET MINI 23G	3	

Drug Name	Drug Tier	Requirements /Limits
VERIFINE SAFE LANCET MINI 28G	3	
VERIFINE SAFE LANCET MINI 30G	3	
VIVAGUARD LANCING DEVICE	4	
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK NASAL POWDER	3	
BAQSIMI TWO PACK NASAL POWDER	3	
diazoxide oral suspension	1	
glucagon emergency kit	2	
GLUCAGON EMERGENCY KIT	3	
PROGLYCEM ORAL SUSPENSION	4	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
Diabetes - Insulins		
ADMELOG INJECTION SOLUTION	2	
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
AFREZZA INHALATION POWDER	4	PA
APIDRA SOLOSTAR	2	
APIDRA VIAL INJECTION SOLUTION	2	
AQ INSULIN SYRINGE	3	

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Drug Name	Drug Tier	Requirements /Limits
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
BD ULTRA-FINE INSULIN SYRINGES	3	
DROPSAFE SAFETY SYRINGE/NEEDLE	3	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
FIASP INJECTION SOLUTION	2	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	2	
FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMALOG INJECTION SOLUTION	2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION	2	

Drug Name	Drug Tier	Requirements /Limits
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	2	
HUMULIN N KWIKPEN	2	
HUMULIN N VIAL SUBCUTANEOUS SUSPENSION	2	
HUMULIN R U-500 KWIKPEN	2	
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION	2	
HUMULIN R VIAL INJECTION SOLUTION	2	
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
INSULIN LISPRO INJECTION SOLUTION	2	
INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	

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Drug Name	Drug Tier	Requirements /Limits
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G 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, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G 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 1/2" 0.3 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML	3	
LANTUS U-100 SOLOSTAR	2	
LANTUS U-100 VIAL SUBCUTANEOUS SOLUTION	2	
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	
LYUMJEV VIAL INJECTION SOLUTION	2	
MYXREDLIN INTRAVENOUS SOLUTION	4	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	2	
NOVOLIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	2	

Drug Name	Drug Tier	Requirements /Limits
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	2	
NOVOLIN N VIAL SUBCUTANEOUS SUSPENSION	2	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN- INJECTOR	2	
NOVOLIN R VIAL INJECTION SOLUTION	2	
NOVOLOG U-100 FLEXPEN	2	
NOVOLOG MIX 70/30 FLEXPEN	2	
NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION	2	
NOVOLOG U-100 PENFILL	2	
NOVOLOG U-100 VIAL INJECTION SOLUTION	2	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	
ULTIGUARD SAFEPACK SYR/NEEDLE	3	
VERIFINE INSULIN SYRINGE	3	
Electrolytes / Minerals / Metals / Vitamins		
ALANINE POWDER	4	

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Drug Name	Drug Tier	Requirements /Limits
AMINO ACID INTRAVENOUS SOLUTION	4	
AMINOPROTECT INTRAVENOUS SOLUTION	4	
AMINOSYN II INTRAVENOUS SOLUTION	4	
AMINOSYN-PF 7% INTRAVENOUS SOLUTION	4	
AMINOSYN-PF INTRAVENOUS SOLUTION	4	
AQUASOL A INTRAMUSCULAR SOLUTION	4	
ARGININE HCL INJECTION SOLUTION	4	
ARGYLE STERILE SALINE IRRIGATION SOLUTION	4	
argyle sterile water irrigation solution	2	
CALCIFOL ORAL WAFER	4	
CALCIUM CHLORIDE DIHYDRATE POWDER	4	
CALCIUM CHLORIDE SOLUTION 10 % INTRAVENOUS	4	
calcium chloride solution 10 % intravenous	2	
CALCIUM GLUCONATE ANHYDROUS POWDER	4	
calcium gluconate intravenous solution	2	

Drug Name	Drug Tier	Requirements /Limits
CALCIUM GLUCONATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
CALCIUM GLUCONATE MONOHYDRATE POWDER	4	
CALCIUM GLUCONATE POWDER	4	
calcium gluconate-nacl intravenous solution 1-0.675 gm/50ml-%, 2-0.675 gm/100ml-%	2	
CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION 1-0.8 GM/100ML-%, 1-0.9 GM/100ML-%, 2-0.9 GM/100ML-%	4	
CALCIUM LACTATE PENTAHYDRATE POWDER	4	
CALCIUM PHOSPHATE DIBASIC POWDER	4	
CALCIUM PHOSPHATE TRIBASIC POWDER	4	
CARBAGLU ORAL TABLET SOLUBLE	4	PA; SP
carglumic acid oral tablet soluble	2	PA; SP
CARNITOR INTRAVENOUS SOLUTION	4	
CHEMET ORAL CAPSULE	4	
CHOLINE BITARTRATE POWDER	4	

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Drug Name	Drug Tier	Requirements /Limits
chromic chloride intravenous solution	2	
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION	4	
CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION	4	
CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION	4	
CLINISOL SF INTRAVENOUS SOLUTION	4	
CLINOLIPID INTRAVENOUS EMULSION	4	
cupric chloride intravenous solution	2	
CURITY STERILE SALINE IRRIGATION SOLUTION	4	
cyanocobalamin injection solution 1000 mcg/ml	2	
deferasirox granules oral packet	2	PA
deferasirox oral packet	2	PA
deferasirox oral tablet	2	PA
deferasirox oral tablet soluble	2	PA
deferiprone oral tablet	2	PA
DEXPANTHENOL INJECTION SOLUTION	4	
dextrose intravenous solution 10 %, 20 %, 30 %, 40 %, 5 %, 70 %	2	
DEXTROSE SOLUTION 250 MG/ML INTRAVENOUS	4	
dextrose solution 250 mg/ml intravenous	2	

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

Drug Name	Drug Tier	Requirements /Limits
DEXTROSE SOLUTION 50 % INTRAVENOUS	4	
dextrose solution 50 % intravenous	2	
DL-ALANINE POWDER	4	
DL-LEUCINE POWDER	4	
DL-PHENYLALANINE POWDER	4	
DODEX INJECTION SOLUTION	4	
DRISDOL ORAL CAPSULE	4	
EDETATE DISODIUM INTRAVENOUS SOLUTION	4	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	4	
effer-k oral tablet effervescent 25 meq	1	
ergocalciferol oral capsule	1	
FERAHEME INTRAVENOUS SOLUTION	4	
FERRIPROX ORAL SOLUTION	4	PA
FERRLECIT INTRAVENOUS SOLUTION	4	
ferumoxytol intravenous solution	2	
folic acid injection solution	2	
folic acid oral tablet 1 mg	1	
GALZIN ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements /Limits
GLUTATHIONE INJECTION SOLUTION 200 MG/ML	4	
GLUTATHIONE INTRAVENOUS SOLUTION	4	
GLYCINE INJECTION SOLUTION	4	
GLYCOPHOS INTRAVENOUS SOLUTION	4	
hematinic/folic acid oral tablet	2	
hydroxocobalamin acetate intramuscular solution	2	
INFED INJECTION SOLUTION	4	
INJECTAFER INTRAVENOUS SOLUTION	4	
INTRALIPID INTRAVENOUS EMULSION	4	
iodine strong oral solution	2	
KABIVEN INTRAVENOUS EMULSION	4	
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	
K-PHOS ORAL TABLET	4	

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Drug Name	Drug Tier	Requirements /Limits
k-prime oral tablet effervescent	1	
lactated ringers irrigation solution	2	
L-ALANINE POWDER	4	
L-CYSTINE POWDER	4	
LEVOCARNITINE INJECTION SOLUTION	4	
levocarnitine intravenous solution	2	
levocarnitine oral solution	2	
levocarnitine oral tablet	2	
levocarnitine sf oral solution	2	
L-GLUTAMIC ACID POWDER	4	
L-HISTIDINE MONOHYDROCHLORIDE POWDER	4	
L-HISTIDINE POWDER	4	
LIPO INTRAMUSCULAR SOLUTION	4	
LIPO-C INTRAMUSCULAR SOLUTION	4	
L-LEUCINE POWDER	4	
LOKELMA ORAL PACKET	4	
L-PHENYLALANINE POWDER	4	
L-PROLINE POWDER	4	
L-TRYPTOPHAN POWDER	4	
L-TYROSINE POWDER	4	
L-VALINE POWDER	4	

Drug Name	Drug Tier	Requirements /Limits
LYSINE HCL INJECTION SOLUTION	4	
MAGNESIUM CARBONATE HEAVY POWDER	4	
MAGNESIUM CARBONATE POWDER	4	
magnesium chloride injection solution	2	
magnesium sulfate in d5w intravenous solution	2	
magnesium sulfate intravenous solution	2	
MAGNESIUM SULFATE SOLUTION 50 % INJECTION	4	
magnesium sulfate solution 50 % injection	2	
MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION	4	
MANGANESE CHLORIDE INTRAVENOUS SOLUTION	4	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	4	
MONOFERRIC INTRAVENOUS SOLUTION	4	
MULTRYS INTRAVENOUS SOLUTION	4	
na ferric gluc cplx in sucrose intravenous solution	2	
NASCOBAL NASAL SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits
NEOKE ALCAR ORAL POWDER	4	
NUTRILIPID INTRAVENOUS EMULSION	4	
ORACIT ORAL SOLUTION	4	
PERIKABIVEN INTRAVENOUS EMULSION	4	
PHOSPHA 250 NEUTRAL ORAL TABLET	4	
phosphorous oral tablet	1	
phospho-trin 250 neutral oral tablet	1	
PHOSPHO-TRIN K500 ORAL TABLET	4	
PHYSIOLYTE IRRIGATION SOLUTION	4	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	4	
phytonadione injection solution	2	
phytonadione oral tablet	2	
PLENAMINE INTRAVENOUS SOLUTION	4	
potassium acetate solution 2 meq/ml intravenous	2	
POTASSIUM ACETATE SOLUTION 2 MEQ/ML INTRAVENOUS	4	
potassium chloride crys er oral tablet extended release	1	

Drug Name	Drug Tier	Requirements /Limits
potassium chloride er oral capsule extended release	1	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1	
potassium chloride intravenous solution	2	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
potassium chloride oral packet	1	
potassium chloride oral solution	1	
potassium citrate er oral tablet extended release	2	
potassium phosphates intravenous solution	2	
potassium phosphates(66 meq k) intravenous solution	2	
potassium phosphates(71 meq k) intravenous solution	2	
PREMASOL INTRAVENOUS SOLUTION	4	
PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION	4	
PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION	4	
PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits
PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION	4	
PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION	4	
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION	4	
PROSOL INTRAVENOUS SOLUTION	4	
pyridoxine hcl solution 100 mg/ml injection	2	
PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION	4	
ringers irrigation irrigation solution	2	
SAMSCA ORAL TABLET	4	PA; SP; QL (2 EA per 1 day)
SMOFLIPID INTRAVENOUS EMULSION	4	
sod citrate-citric acid oral solution	2	
sodium acetate intravenous solution	2	
SODIUM ASCORBATE POWDER	4	
sodium bicarbonate intravenous solution 4.2 %, 7.5 %	2	
sodium bicarbonate solution 8.4 % intravenous	2	
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	4	

Drug Name	Drug Tier	Requirements /Limits
sodium chloride (pf) injection solution	2	
sodium chloride injection solution	2	
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	2	
sodium chloride irrigation solution	2	
SODIUM CHLORIDE SOLUTION 4 MEQ/ML INTRAVENOUS	4	
sodium chloride solution 4 meq/ml intravenous	2	
sodium phosphates intravenous solution	2	
sodium polystyrene sulfonate oral powder	2	
SPS ORAL SUSPENSION	4	
sterile water for irrigation irrigation solution	2	
TAURINE INJECTION SOLUTION	4	
TAURINE POWDER	4	
THAM INTRAVENOUS SOLUTION	4	
THE LIQUILIFT TRACE INTRAVENOUS KIT	4	
thiamine hcl injection solution	2	
THREONINE POWDER	4	
TIS-U-SOL IRRIGATION SOLUTION	4	
tolvaptan oral tablet	2	PA; SP; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
TRALEMENT INTRAVENOUS SOLUTION	4	
TRAVASOL INTRAVENOUS SOLUTION	4	
TRI-AMINO INJECTION SOLUTION	4	
tricitrates oral solution	2	
trientine hcl oral capsule	2	PA; SP
TRISODIUM CITRATE/CRRT EXTRACORPOREAL SOLUTION	4	
TROMETHAMINE INTRAVENOUS SOLUTION	4	
TROPHAMINE INTRAVENOUS SOLUTION	4	
TRYPTOPHAN POWDER	4	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	4	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	4	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	4	
VALINE POWDER	4	
VELTASSA ORAL PACKET	4	
VENOFER INTRAVENOUS SOLUTION	4	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	

Drug Name	Drug Tier	Requirements /Limits
vitamin k1 injection solution	2	
water for irrigation, sterile irrigation solution	2	
wes-phos 250 neutral oral tablet	1	
zinc chloride intravenous solution	2	
zinc sulfate intravenous solution 1 mg/ml, 5 mg/ml	2	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
CYTOTEC ORAL TABLET	4	
esomeprazole magnesium oral packet	1	QL (1 EA per 1 day)
famotidine oral suspension reconstituted	1	
FIRST PANTOPRAZOLE ORAL SUSPENSION	4	QL (1 ML per 1 day)
misoprostol oral tablet	1	
NEXIUM ORAL PACKET	4	QL (1 EA per 1 day)
omeprazole oral capsule delayed release	1	QL (1 EA per 1 day)
pantoprazole sodium intravenous solution reconstituted	2	QL (1 EA per 1 day)
pantoprazole sodium oral tablet delayed release	1	QL (1 EA per 1 day)
PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	4	QL (1 EA per 1 day)
sucralfate oral suspension	1	
sucralfate oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl oral tablet	1	PA
alvimopan oral capsule	2	
ANASPAZ ORAL TABLET DISPERSIBLE	4	
ATROPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR 0.25 MG/0.3ML, 0.5 MG/0.7ML, 1 MG/0.7ML, 2 MG/0.7ML	4	
atropine sulfate injection solution	2	
atropine sulfate injection solution prefilled syringe 0.25 mg/5ml, 0.5 mg/5ml, 1 mg/10ml	2	
ATROPINE SULFATE INJECTION SOLUTION PREFILLED SYRINGE 0.8 MG/2ML, 1 MG/2.5ML	4	
atropine sulfate intravenous solution	2	
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
BENTYL INTRAMUSCULAR SOLUTION	4	
bis subcit-metronid-tetracyc oral capsule	2	
bismuth/metronidaz/tetracyclin oral capsule	2	

Drug Name	Drug Tier	Requirements /Limits
CHENODAL ORAL TABLET	4	PA; SP
chlordiazepoxide-clidinium oral capsule	2	
CLENPIQ ORAL SOLUTION	4	
constulose oral solution	2	
cromolyn sodium oral concentrate	2	
dicyclomine hcl intramuscular solution	2	
dicyclomine hcl oral capsule	2	
dicyclomine hcl oral solution	2	
dicyclomine hcl oral tablet	2	
diphenoxylate-atropine oral liquid	2	
diphenoxylate-atropine oral tablet	2	
ENTEREG ORAL CAPSULE	4	
enulose oral solution	2	
GASTROCROM ORAL CONCENTRATE	4	
GATTEX SUBCUTANEOUS KIT	4	PA; SP
gavilyte-c oral solution reconstituted	2	PV
gavilyte-g oral solution reconstituted	2	PV
generlac oral solution	2	
glycopyrrolate injection solution	2	
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE	4	

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Drug Name	Drug Tier	Requirements /Limits
GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	4	
glycopyrrolate oral solution	2	PA
glycopyrrolate oral tablet 1 mg, 2 mg	2	QL (4 EA per 1 day)
glycopyrrolate pf injection solution prefilled syringe 0.2 mg/ml, 0.4 mg/2ml	2	
GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	4	
GLYRX-PF INJECTION SOLUTION	4	
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	4	
HELIDAC THERAPY ORAL	4	
hyoscyamine sulfate oral elixir	2	
hyoscyamine sulfate oral tablet	2	
hyoscyamine sulfate oral tablet dispersible	2	
hyoscyamine sulfate sl sublingual tablet sublingual	2	
hyoscyamine sulfate sublingual tablet sublingual	2	
lactulose encephalopathy oral solution	2	
lactulose oral solution	2	
LINZESS ORAL CAPSULE	3	QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
LOMOTIL ORAL TABLET	4	
loperamide hcl oral capsule	2	
lubiprostone oral capsule	1	QL (2 EA per 1 day)
methscopolamine bromide oral tablet	2	
mineral oil heavy oral oil	2	
MOTEGRITY ORAL TABLET	4	QL (1 EA per 1 day)
MYTESI ORAL TABLET DELAYED RELEASE	4	QL (2 EA per 1 day)
na sulfate-k sulfate-mg sulf oral solution	2	PV
OMECLAMOX-PAK ORAL	3	
OSCIMIN ORAL TABLET	4	
OSCIMIN SUBLINGUAL TABLET SUBLINGUAL	4	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	2	PV
peg-3350/electrolytes oral solution reconstituted	2	PV
peg-3350/electrolytes/ascorbic acid oral solution reconstituted	2	
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	2	
PEG-PREP ORAL KIT	4	
PYLERA ORAL CAPSULE	4	
RESTORA RX ORAL CAPSULE	4	

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Drug Name	Drug Tier	Requirements /Limits
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
SUFLAVE ORAL SOLUTION RECONSTITUTED	4	
SUPREP BOWEL PREP KIT ORAL SOLUTION	4	
SUTAB ORAL TABLET	4	
SYMPROIC ORAL TABLET	3	QL (1 EA per 1 day)
TALICIA ORAL CAPSULE DELAYED RELEASE	4	
URSO 250 ORAL TABLET	4	
URSO FORTE ORAL TABLET	4	
ursodiol oral capsule 300 mg	2	
ursodiol oral tablet	2	
VIBERZI ORAL TABLET	4	PA; QL (2 EA per 1 day)
VOWST ORAL CAPSULE	4	PA; SP; QL (24 EA per 365 days)
XERMELO ORAL TABLET	4	PA; SP; QL (3 EA per 1 day)
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
ALDURAZYME INTRAVENOUS SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
AMMONUL INTRAVENOUS SOLUTION	4	
betaine oral powder	2	SP
CERDELGA ORAL CAPSULE	4	PA; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
CHOLBAM ORAL CAPSULE	4	PA; SP
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
CRYSVITA SUBCUTANEOUS SOLUTION	4	PA; SP
CYSTADANE ORAL POWDER	4	SP
CYSTAGON ORAL CAPSULE	4	SP
ELAPRASE INTRAVENOUS SOLUTION	3	PA; SP
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ELFABRIO INTRAVENOUS SOLUTION	4	PA; SP
EVRYSDI ORAL SOLUTION RECONSTITUTED	4	PA; SP; QL (8 ML per 1 day)
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
GALAFOLD ORAL CAPSULE	4	PA; SP; QL (0.5 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
KANUMA INTRAVENOUS SOLUTION	4	PA; SP
L-GLUTAMIC ACID HCL POWDER	4	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
MEPSEVII INTRAVENOUS SOLUTION	4	PA; SP
miglustat oral capsule	2	PA; SP
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
NAGLAZYME INTRAVENOUS SOLUTION	3	PA; SP
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
nitisinone oral capsule	2	PA; SP
NITYR ORAL TABLET	4	PA; SP
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
OCALIVA ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
ORFADIN ORAL CAPSULE	4	PA; SP
ORFADIN ORAL SUSPENSION	4	PA; SP
REVCovi INTRAMUSCULAR SOLUTION	4	PA; SP
sapropterin dihydrochloride oral packet	2	PA; SP

Drug Name	Drug Tier	Requirements /Limits
sapropterin dihydrochloride oral tablet	2	PA; SP
sod benz-sod phenylacet intravenous solution	2	
sodium phenylbutyrate oral powder	2	PA; SP
sodium phenylbutyrate oral tablet	2	PA; SP
STRENSIQ SUBCUTANEOUS SOLUTION	3	PA; SP
SUCRAID ORAL SOLUTION	4	PA; SP
VIMIZIM INTRAVENOUS SOLUTION	4	PA; SP
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP; QL (1 EA per 1 day)
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
XURIDEN ORAL PACKET	4	PA; SP; QL (4 EA per 1 day)
yargesa oral capsule	2	PA; SP
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
acetic acid irrigation solution	2	
bethanechol chloride oral tablet	2	
calcium acetate (phos binder) oral capsule	1	
calcium acetate (phos binder) oral tablet	1	

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

Drug Name	Drug Tier	Requirements /Limits
calcium acetate oral tablet 667 mg	1	
CERVIDIL VAGINAL INSERT	4	
darifenacin hydrobromide er oral tablet extended release 24 hour	1	
DEPEN TITRATABS ORAL TABLET	3	SP
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
DETROL ORAL TABLET	4	
fesoterodine fumarate er oral tablet extended release 24 hour	1	
FILSPARI ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
flavoxate hcl oral tablet	1	
FOSRENOL ORAL PACKET	4	
FOSRENOL ORAL TABLET CHEWABLE	4	
GELNIQUE TRANSDERMAL GEL	4	
glycine irrigation solution	2	
glycine urologic irrigation solution	2	
INTRAROSA VAGINAL INSERT	4	
lanthanum carbonate oral tablet chewable	1	
LITHOSTAT ORAL TABLET	4	
MUSE URETHRAL PELLETT	4	PA; QL (0.2 EA per 1 day)
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

Drug Name	Drug Tier	Requirements /Limits
OXLUMO SUBCUTANEOUS SOLUTION	4	PA; SP
oxybutynin chloride er oral tablet extended release 24 hour	1	
oxybutynin chloride oral solution	1	
oxybutynin chloride oral tablet 2.5 mg	2	
oxybutynin chloride oral tablet 5 mg	1	
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	4	QL (0.29 EA per 1 day)
penicillamine oral tablet	2	SP
phenazo oral tablet 200 mg	2	
phenazopyridine hcl oral tablet	2	
PREPIDIL VAGINAL GEL	4	
RENACIDIN IRRIGATION SOLUTION	4	
RIMSO-50 INTRAVESICAL SOLUTION	4	
sevelamer carbonate oral packet	1	
sevelamer carbonate oral tablet	1	
sevelamer hcl oral tablet	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	PA; QL (0.2 EA per 1 day)
solifenacin succinate oral tablet	1	
tadalafil oral tablet 10 mg, 20 mg	2	PA; QL (0.2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
tadalafil oral tablet 2.5 mg, 5 mg	2	PA; QL (1 EA per 1 day)
THIOLA EC ORAL TABLET DELAYED RELEASE	4	SP
THIOLA ORAL TABLET	4	SP
tiopronin oral tablet	2	SP
tolterodine tartrate er oral capsule extended release 24 hour	1	
tolterodine tartrate oral tablet	1	
tropium chloride er oral capsule extended release 24 hour	1	
tropium chloride oral tablet	1	
uretron d/s oral tablet	2	
vardenafil hcl oral tablet	2	PA; QL (0.2 EA per 1 day)
vardenafil hcl oral tablet dispersible	2	PA; QL (0.2 EA per 1 day)
VELPHORO ORAL TABLET CHEWABLE	4	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er oral tablet extended release 24 hour	1	
dutasteride oral capsule	1	
dutasteride-tamsulosin hcl oral capsule	1	
finasteride oral tablet 5 mg	1	
JALYN ORAL CAPSULE	4	
PROSCAR ORAL TABLET	4	
silodosin oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
tamsulosin hcl oral capsule	1	
terazosin hcl oral capsule	1	
Hormonal Agents - Adrenal		
betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	2	
BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION	4	
CELESTONE SOLUSPAN INJECTION SUSPENSION	4	
DEPO-MEDROL INJECTION SUSPENSION	4	
DEXAMETHASONE (LA) INJECTION SUSPENSION	4	
dexamethasone intensol oral concentrate	2	
dexamethasone oral elixir	2	
dexamethasone oral solution	2	
dexamethasone oral tablet	2	
dexamethasone oral tablet therapy pack	2	
DEXAMETHASONE SOD PHOS-NACL INTRAVENOUS SOLUTION	4	
dexamethasone sod phosphate pf injection solution	2	

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Drug Name	Drug Tier	Requirements /Limits
dexamethasone sod phosphate pf injection solution prefilled syringe	2	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	2	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	4	
dexamethasone sodium phosphate solution 10 mg/ml injection	2	
DEXONTO 0.4% IONTOPHORESIS SOLUTION	4	
fludrocortisone acetate oral tablet	2	
HEXATRIONE INTRA-ARTICULAR SUSPENSION	4	
hydrocortisone oral tablet	2	
KENALOG INJECTION SUSPENSION 10 MG/ML	4	
KENALOG-80 INJECTION SUSPENSION	4	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	3	
MEDROL ORAL TABLET THERAPY PACK	4	

Drug Name	Drug Tier	Requirements /Limits
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	4	
methylprednisolone acetate suspension 40 mg/ml injection	2	
METHYLPREDNISOLONE ACETATE SUSPENSION 40 MG/ML INJECTION	4	
methylprednisolone acetate suspension 80 mg/ml injection	2	
METHYLPREDNISOLONE ACETATE SUSPENSION 80 MG/ML INJECTION	4	
methylprednisolone oral tablet	2	
methylprednisolone oral tablet therapy pack	2	
methylprednisolone sodium succ injection solution reconstituted	2	
METHYLPREDNISOLONE-BUPIVACAINE INJECTION SUSPENSION	4	
PEDIAPRED ORAL SOLUTION	4	
prednisolone oral solution	2	
prednisolone sodium phosphate oral solution	2	
prednisolone sodium phosphate oral tablet dispersible	2	
prednisone intensol oral concentrate	2	
prednisone oral solution	2	
prednisone oral tablet	2	

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Drug Name	Drug Tier	Requirements /Limits
prednisone oral tablet therapy pack	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED	4	
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED	4	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED	4	
triamcinolone acetonide suspension 40 mg/ml injection	2	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	4	
TRIAMCINOLONE DIACETATE INJECTION SUSPENSION 80 MG/ML	4	
TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION	4	
Hormonal Agents - Men's Health		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	PA
danazol oral capsule	2	
METHITEST ORAL TABLET	4	PA
methyltestosterone oral capsule	1	PA
METHYLTESTOSTERONE POWDER	4	
testosterone cypionate intramuscular solution	2	PA

Drug Name	Drug Tier	Requirements /Limits
testosterone enanthate intramuscular solution	2	PA
testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%)	1	PA
testosterone transdermal gel 10 mg/act (2%), 50 mg/5gm (1%)	2	PA
testosterone transdermal solution	2	PA
Hormonal Agents - Pituitary		
ACTHAR INJECTION GEL	3	PA; SP
cabergoline oral tablet	2	
carboprost tromethamine intramuscular solution	2	
CORTROPHIN INJECTION GEL	3	PA; SP
desmopressin ace spray refrig nasal solution	2	
desmopressin acetate injection solution	2	
desmopressin acetate oral tablet	2	
desmopressin acetate pf injection solution	2	
desmopressin acetate spray nasal solution	2	
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP; QL (1 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 22.5 MG	4	PA; SP; QL (0.012 EA per 1 day)

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

Drug Name	Drug Tier	Requirements /Limits
ELIGARD SUBCUTANEOUS KIT 30 MG	4	PA; SP; QL (0.009 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 45 MG	4	PA; SP; QL (0.006 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 7.5 MG	4	PA; SP; QL (0.036 EA per 1 day)
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	4	PA; SP; QL (0.006 EA per 1 day)
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP; QL (2 EA per 365 days)
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP; QL (0.036 EA per 1 day)
HEMABATE INTRAMUSCULAR SOLUTION	4	
INCRELEX SUBCUTANEOUS SOLUTION	3	PA; SP
LEUPROLIDE ACETATE (3 MONTH) INTRAMUSCULAR INJECTABLE	4	PA; SP; QL (0.012 EA per 1 day)
leuprolide acetate injection kit	2	PA; SP
LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION	4	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	3	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	4	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	3	PA; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG INTRAMUSCULAR KIT	3	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG INTRAMUSCULAR KIT	3	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	4	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 15 MG, 7.5 MG	3	PA; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED)	4	PA; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG	3	PA; SP
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT	4	PA; SP
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL	4	PA

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Drug Name	Drug Tier	Requirements /Limits
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
octreotide acetate injection solution	2	PA; SP
octreotide acetate subcutaneous solution prefilled syringe	2	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
ORILISSA ORAL TABLET 150 MG	3	PA; QL (1 EA per 1 day)
ORILISSA ORAL TABLET 200 MG	3	PA; QL (2 EA per 1 day)
oxytocin injection solution	2	
OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	4	
PITOCIN INJECTION SOLUTION	4	
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	PA; SP; QL (0.04 EA per 1 day)
SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	4	PA; SP
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
SUPPRELIN LA SUBCUTANEOUS KIT	3	PA; SP; QL (1 EA per 250 days)
SYNAREL NASAL SOLUTION	3	
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG	4	PA; SP; QL (0.012 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG	4	PA; SP; QL (0.006 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG	4	PA; SP; QL (0.036 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	4	PA; SP; QL (0.006 EA per 1 day)
VAPRISOL INTRAVENOUS SOLUTION	4	
vasopressin +rfid intravenous solution	2	
vasopressin intravenous solution	2	
VASOSTRICT INTRAVENOUS SOLUTION 20 UNIT/ML	4	
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	4	SP; QL (0.012 EA per 1 day)
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	3	SP; QL (0.036 EA per 1 day)
Hormonal Agents - Prostaglandins		
KORLYM ORAL TABLET	4	PA; SP; QL (4 EA per 1 day)
MIFEPREX ORAL TABLET	4	
mifepristone oral tablet	2	
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
EVISTA ORAL TABLET	4	
OSPHENA ORAL TABLET	4	
raloxifene hcl oral tablet	1	PV
Hormonal Agents - Sex Hormones and Birth Control		
ACTIVELLA ORAL TABLET	4	
afirmelle oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
ALORA TRANSDERMAL PATCH TWICE WEEKLY	4	
altavera oral tablet	1	PV
alyacen 1/35 oral tablet	1	PV
alyacen 7/7/7 oral tablet	1	PV
amabelz oral tablet	1	
amethia oral tablet	1	PV; QL (1 EA per 1 day)
amethyst oral tablet	1	PV
ANGELIQ ORAL TABLET	4	
ANNOVERA VAGINAL RING	4	PV; QL (1 EA per 350 days)
apri oral tablet	1	PV
aranelle oral tablet	1	PV
ashlyna oral tablet	1	PV; QL (1 EA per 1 day)
aubra eq oral tablet	1	PV
aurovela 1.5/30 oral tablet	1	PV
aurovela 1/20 oral tablet	1	PV
aurovela 24 fe oral tablet	1	PV
aurovela fe 1.5/30 oral tablet	1	PV
aurovela fe 1/20 oral tablet	1	PV
aviane oral tablet	1	PV
ayuna oral tablet	1	PV
azurette oral tablet	1	PV
BALCOLTRA ORAL TABLET	4	PV
balziva oral tablet	1	PV
BIJUVA ORAL CAPSULE	4	
blisovi 24 fe oral tablet	1	PV

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Drug Name	Drug Tier	Requirements /Limits
blisovi fe 1.5/30 oral tablet	1	PV
blisovi fe 1/20 oral tablet	1	PV
briellyn oral tablet	1	PV
camila oral tablet	1	PV
camrese lo oral tablet	1	PV; QL (1 EA per 1 day)
camrese oral tablet	1	PV; QL (1 EA per 1 day)
charlotte 24 fe oral tablet chewable	1	PV
chateal eq oral tablet	1	PV
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	3	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	4	
CRINONE VAGINAL GEL	4	QL (0.6 GM per 1 day)
cryselle-28 oral tablet	1	PV
cyred eq oral tablet	1	PV
dasetta 1/35 oral tablet	1	PV
dasetta 7/7/7 oral tablet	1	PV
daysee oral tablet	1	PV; QL (1 EA per 1 day)
deblitane oral tablet	1	PV
delyla oral tablet	1	PV
DEPO-ESTRADIOL INTRAMUSCULAR OIL	4	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	4	PV; QL (0.02 ML per 1 day)
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV; QL (0.02 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	4	PV; QL (0.02 ML per 1 day)
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	1	PV
DIVIGEL TRANSDERMAL GEL	4	
dolishale oral tablet	1	PV
dotti transdermal patch twice weekly	1	
drospiren-eth estrad-levomefol oral tablet	1	PV
drospirenone-ethinyl estradiol oral tablet	1	PV
DUAVEE ORAL TABLET	3	
ELESTRIN TRANSDERMAL GEL	4	
elinest oral tablet	1	PV
ELLA ORAL TABLET	4	PV
eluryng vaginal ring	1	PV
ENDOMETRIN VAGINAL INSERT	3	
enilloring vaginal ring	1	PV
enpresse-28 oral tablet	1	PV
enskyce oral tablet	1	PV
errin oral tablet	1	PV
estarylla oral tablet	1	PV
estradiol oral tablet	1	
estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm	1	
estradiol transdermal gel 1.25 mg/1.25gm	2	
estradiol transdermal patch twice weekly	1	

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Drug Name	Drug Tier	Requirements /Limits
estradiol transdermal patch weekly	1	
estradiol vaginal cream	1	
estradiol vaginal tablet	1	
estradiol valerate intramuscular oil	2	
estradiol-norethindrone acet oral tablet	1	
ESTRING VAGINAL RING	4	QL (0.012 EA per 1 day)
ESTROGEL TRANSDERMAL GEL	4	
ethynodiol diac-eth estradiol oral tablet	1	PV
etonogestrel-ethinyl estradiol vaginal ring	1	PV
EVAMIST TRANSDERMAL SOLUTION	4	
falmina oral tablet	1	PV
FEMRING VAGINAL RING	4	QL (0.012 EA per 1 day)
finzala oral tablet chewable	1	PV
fyavolv oral tablet	1	
gemmily oral capsule	1	PV
hailey 1.5/30 oral tablet	1	PV
hailey 24 fe oral tablet	1	PV
hailey fe 1.5/30 oral tablet	1	PV
hailey fe 1/20 oral tablet	1	PV
haloette vaginal ring	1	PV
heather oral tablet	1	PV
HYDROXYPROGESTERONE CAPROATE INTRAMUSCULAR SOLUTION	4	PA; SP
iclevia oral tablet	1	PV; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	3	
IMVEXXY STARTER PACK VAGINAL INSERT	3	
incassia oral tablet	1	PV
introvale oral tablet	1	PV; QL (1 EA per 1 day)
isibloom oral tablet	1	PV
jaimiess oral tablet	1	PV; QL (1 EA per 1 day)
jasmiel oral tablet	1	PV
jencycla oral tablet	1	PV
jinteli oral tablet	1	
jolessa oral tablet	1	PV; QL (1 EA per 1 day)
joyeaux oral tablet	1	PV
juleber oral tablet	1	PV
junel 1.5/30 oral tablet	1	PV
junel 1/20 oral tablet	1	PV
junel fe 1.5/30 oral tablet	1	PV
junel fe 1/20 oral tablet	1	PV
junel fe 24 oral tablet	1	PV
kaitlib fe oral tablet chewable	1	PV
kalliga oral tablet	1	PV
kariva oral tablet	1	PV
kelnor 1/35 oral tablet	1	PV
kelnor 1/50 oral tablet	1	PV
kurvelo oral tablet	1	PV
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	4	PV
larin 1.5/30 oral tablet	1	PV
larin 1/20 oral tablet	1	PV
larin 24 fe oral tablet	1	PV

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Drug Name	Drug Tier	Requirements /Limits
larin fe 1.5/30 oral tablet	1	PV
larin fe 1/20 oral tablet	1	PV
layolis fe oral tablet chewable	1	PV
leena oral tablet	1	PV
lessina oral tablet	1	PV
levonest oral tablet	1	PV
levonorgest-eth est & eth est oral tablet	1	PV; QL (1 EA per 1 day)
levonorgest-eth estrad 91-day oral tablet	1	PV; QL (1 EA per 1 day)
levonorgest-eth estradiol-iron oral tablet	1	PV
levonorgestrel-ethinyl estrad oral tablet	1	PV
levonorg-eth estrad triphasic oral tablet	1	PV
levora 0.15/30 (28) oral tablet	1	PV
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	4	PV
lojaimiess oral tablet	1	PV; QL (1 EA per 1 day)
loryna oral tablet	1	PV
low-ogestrel oral tablet	1	PV
lo-zumandimine oral tablet	1	PV
lutera oral tablet	1	PV
lyleq oral tablet	1	PV
lyllana transdermal patch twice weekly	1	
lyza oral tablet	1	PV
marlissa oral tablet	1	PV
medroxyprogesterone acetate intramuscular suspension	2	PV; QL (0.02 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
medroxyprogesterone acetate intramuscular suspension prefilled syringe	2	PV; QL (0.02 ML per 1 day)
medroxyprogesterone acetate oral tablet	1	
megestrol acetate oral suspension	2	
megestrol acetate oral tablet	2	
MENEST ORAL TABLET	3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	4	
merzee oral capsule	1	PV
mibelas 24 fe oral tablet chewable	1	PV
microgestin 1.5/30 oral tablet	1	PV
microgestin 1/20 oral tablet	1	PV
microgestin 24 fe oral tablet	1	PV
microgestin fe 1.5/30 oral tablet	1	PV
microgestin fe 1/20 oral tablet	1	PV
mili oral tablet	1	PV
mimvey oral tablet	1	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	4	PV
mono-linyah oral tablet	1	PV
MYFEMBREE ORAL TABLET	3	PA; QL (1 EA per 1 day)
NATAZIA ORAL TABLET	3	PV
necon 0.5/35 (28) oral tablet	1	PV

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Drug Name	Drug Tier	Requirements /Limits
NEXPLANON SUBCUTANEOUS IMPLANT	4	PV
nikki oral tablet	1	PV
nora-be oral tablet	1	PV
norethin ace-eth estrad-fe oral capsule	1	PV
norethin ace-eth estrad-fe oral tablet	1	PV
norethin ace-eth estrad-fe oral tablet chewable	1	PV
norethindrone acetate oral tablet	1	
norethindrone acet-ethinyl est oral tablet	1	PV
norethindrone oral tablet	1	PV
norethindrone-eth estradiol oral tablet	1	
norethindron-ethinyl estrad-fe oral tablet	1	PV
norethin-eth estradiol-fe oral tablet chewable	1	PV
norgestimate-eth estradiol oral tablet	1	PV
norgestimate-ethinyl estradiol triphasic oral tablet	1	PV
norlyroc oral tablet	1	PV
nortrel 0.5/35 (28) oral tablet	1	PV
nortrel 1/35 (21) oral tablet	1	PV
nortrel 1/35 (28) oral tablet	1	PV
nortrel 7/7/7 oral tablet	1	PV
NUVARING VAGINAL RING	4	PV
nylia 1/35 oral tablet	1	PV
nylia 7/7/7 oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
nymyo oral tablet	1	PV
ocella oral tablet	1	PV
ORIAHNN ORAL CAPSULE THERAPY PACK	3	PA; QL (2 EA per 1 day)
PARAGARD INTRAUTERINE COPPER INTRAUTERINE DEVICE	4	PV
philith oral tablet	1	PV
pimtrea oral tablet	1	PV
portia-28 oral tablet	1	PV
PREMARIN INJECTION SOLUTION RECONSTITUTED	4	
PREMARIN ORAL TABLET	3	
PREMARIN VAGINAL CREAM	3	
PREMPHASE ORAL TABLET	3	
PREMPRO ORAL TABLET	3	
progesterone intramuscular oil	2	
progesterone oral capsule	2	
PROVERA ORAL TABLET	4	
reclipsen oral tablet	1	PV
rivelsa oral tablet	1	PV; QL (1 EA per 1 day)
setlakin oral tablet	1	PV; QL (1 EA per 1 day)
sharobel oral tablet	1	PV
simliya oral tablet	1	PV
simpesse oral tablet	1	PV; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	4	PV
sprintec 28 oral tablet	1	PV
sronyx oral tablet	1	PV
syeda oral tablet	1	PV
tarina 24 fe oral tablet	1	PV
tarina fe 1/20 eq oral tablet	1	PV
taysofy oral capsule	1	PV
TAYTULLA ORAL CAPSULE	4	PV
tilia fe oral tablet	1	PV
tri-estarylla oral tablet	1	PV
tri-legest fe oral tablet	1	PV
tri-linyah oral tablet	1	PV
tri-lo-estarylla oral tablet	1	PV
tri-lo-marzia oral tablet	1	PV
tri-lo-mili oral tablet	1	PV
tri-lo-sprintec oral tablet	1	PV
tri-mili oral tablet	1	PV
tri-nymyo oral tablet	1	PV
tri-sprintec oral tablet	1	PV
trivora (28) oral tablet	1	PV
tri-vylibra lo oral tablet	1	PV
tri-vylibra oral tablet	1	PV
TYBLUME ORAL TABLET CHEWABLE	4	PV
tydemy oral tablet	1	PV
velivet oral tablet	1	PV
vestura oral tablet	1	PV
vienva oral tablet	1	PV
viorele oral tablet	1	PV
volnea oral tablet	1	PV
vyfemla oral tablet	1	PV
vylibra oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
wera oral tablet	1	PV
wymzya fe oral tablet chewable	1	PV
xulane transdermal patch weekly	1	PV
yuvaferm vaginal tablet	1	
zafemy transdermal patch weekly	1	PV
zovia 1/35 (28) oral tablet	1	PV
zumandimine oral tablet	1	PV
Hormonal Agents - Thyroid		
ADTHYZA ORAL TABLET	4	
ARMOUR THYROID ORAL TABLET	4	
euthyrox oral tablet	1	
levo-t oral tablet	1	
levothyroxine sodium intravenous solution 100 mcg/5ml, 200 mcg/5ml, 500 mcg/5ml	1	
levothyroxine sodium intravenous solution 100 mcg/ml	2	
levothyroxine sodium intravenous solution reconstituted	2	
levothyroxine sodium oral tablet	1	
levoxyl oral tablet	1	
liothyronine sodium intravenous solution	2	
liothyronine sodium oral tablet	1	
methimazole oral tablet	1	
NIVA THYROID ORAL TABLET	4	
np thyroid oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
propylthiouracil oral tablet	1	
SODIUM IODIDE I-131 ORAL SOLUTION	4	
thyroid oral tablet	1	
unithroid oral tablet	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; SP; QL (0.13 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION	4	PA; SP
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.13 ML per 1 day)
ACTIMMUNE SUBCUTANEOUS SOLUTION	3	PA; SP
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.06 ML per 1 day)
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.06 ML per 1 day)
ALFERON N INJECTION SOLUTION	3	SP
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.12 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.2ML	3	PA; SP; QL (0.02 ML per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	3	PA; SP; QL (0.06 EA per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	3	PA; SP; QL (0.12 EA per 1 day)
ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED	4	
ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED	4	
ANTIVENIN LATRODECTUS MACTANS INJECTION KIT	4	
ANTIVENIN MICRURUS FULVIUS INTRAVENOUS SOLUTION RECONSTITUTED	4	
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
ATGAM INTRAVENOUS INJECTABLE	3	

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Drug Name	Drug Tier	Requirements /Limits
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
AZASAN ORAL TABLET	4	
azathioprine oral tablet	2	
azathioprine sodium injection solution reconstituted	2	
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
BERINERT INTRAVENOUS KIT	4	PA; SP; QL (0.34 EA per 1 day)
BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
BIVIGAM INTRAVENOUS SOLUTION	4	PA; SP
CELLCEPT INTRAVENOUS SOLUTION RECONSTITUTED	4	
CELLCEPT ORAL CAPSULE	4	
CELLCEPT ORAL SUSPENSION RECONSTITUTED	4	
CELLCEPT ORAL TABLET	4	

Drug Name	Drug Tier	Requirements /Limits
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (3 EA per 365 days)
CIMZIA SUBCUTANEOUS KIT	3	PA; SP; QL (0.08 EA per 1 day)
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.08 EA per 1 day)
CNJ-016 INTRAVENOUS SOLUTION	4	
CROFAB INTRAVENOUS SOLUTION RECONSTITUTED	4	
CUVITRU SUBCUTANEOUS SOLUTION	4	PA; SP
cyclosporine intravenous solution	2	
cyclosporine modified oral capsule	2	
cyclosporine modified oral solution	2	
cyclosporine oral capsule	2	
CYLTEZO SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
CYLTEZO SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML	3	PA; SP; QL (0.08 EA per 1 day)
CYLTEZO SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
CYLTEZO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
CYTOGAM INTRAVENOUS INJECTABLE	3	PA; SP
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP; QL (0.15 ML per 1 day)
ENBREL SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.15 ML per 1 day)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.15 ML per 1 day)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.15 ML per 1 day)
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	2	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
GAMASTAN INTRAMUSCULAR INJECTABLE	3	PA; SP
GAMIFANT INTRAVENOUS SOLUTION	4	PA; SP
GAMMAGARD INJECTION SOLUTION	4	PA; SP
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
GAMMAKED INJECTION SOLUTION	4	PA; SP
GAMMAPLEX INTRAVENOUS SOLUTION	4	PA; SP
GAMUNEX-C INJECTION SOLUTION	4	PA; SP
gengraf oral capsule	2	
gengraf oral solution	2	
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; SP
HEPAGAM B INJECTION SOLUTION	4	
HIZENTRA SUBCUTANEOUS SOLUTION	4	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML	3	PA; SP; QL (3 EA per 365 days)

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
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML	3	PA; SP; QL (2 EA per 365 days)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA PEN-PSOR/UEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	3	PA; SP; QL (3 EA per 365 days)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML	3	PA; SP; QL (0.08 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
HYPERHEP B INTRAMUSCULAR SOLUTION	4	
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	SP
HYPERTET INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	
HYQVIA SUBCUTANEOUS KIT	4	PA; SP
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	3	PA; SP; QL (0.06 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML	3	PA; SP; QL (0.01 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	3	PA; SP; QL (0.03 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
HYRIMOZ-CROHNS/UC STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.06 ML per 1 day)
HYRIMOZ-PED CROHNS STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML	3	PA; SP; QL (2.4 ML per 365 days)
HYRIMOZ-PED CROHNS STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML & 40MG/0.4ML	3	PA; SP; QL (1.2 ML per 365 days)
HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (1.6 ML per 365 days)
icatibant acetate subcutaneous solution prefilled syringe	2	PA; SP; QL (0.6 ML per 1 day)
ILARIS SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.08 ML per 1 day)
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.02 ML per 1 day)
IMURAN ORAL TABLET	4	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
KALBITOR SUBCUTANEOUS SOLUTION	4	PA; SP; QL (0.2 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; SP; QL (0.09 ML per 1 day)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.09 ML per 1 day)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP
leflunomide oral tablet	1	
methotrexate sodium (pf) injection solution	2	
methotrexate sodium injection solution	2	
methotrexate sodium injection solution reconstituted	2	
methotrexate sodium oral tablet	2	
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	SP
mycophenolate mofetil hcl intravenous solution reconstituted	2	
mycophenolate mofetil intravenous solution reconstituted	2	
mycophenolate mofetil oral capsule	2	
mycophenolate mofetil oral suspension reconstituted	2	
mycophenolate mofetil oral tablet	2	
mycophenolate sodium oral tablet delayed release	2	

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Drug Name	Drug Tier	Requirements /Limits
MYFORTIC ORAL TABLET DELAYED RELEASE	4	
NABI-HB INTRAMUSCULAR SOLUTION	4	
NEORAL ORAL CAPSULE	4	
NEORAL ORAL SOLUTION	4	
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	4	
OCTAGAM INTRAVENOUS SOLUTION	4	PA; SP
OLUMIANT ORAL TABLET	4	PA; SP; QL (1 EA per 1 day)
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; SP; QL (0.15 ML per 1 day)
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	4	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	4	PA; SP; QL (0.06 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	4	PA; SP; QL (0.1 ML per 1 day)
ORLADEYO ORAL CAPSULE	4	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
OTEZLA ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
OTEZLA ORAL TABLET THERAPY PACK	3	PA; SP; QL (55 EA per 365 days)
PRIVIGEN INTRAVENOUS SOLUTION	4	PA; SP
PROGRAF INTRAVENOUS SOLUTION	4	
PROGRAF ORAL CAPSULE	4	
PROGRAF ORAL PACKET	4	
RAPAMUNE ORAL SOLUTION	4	
RAPAMUNE ORAL TABLET	4	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 7.5 MG/0.15ML	3	PA; QL (0.03 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.25ML	3	PA; QL (0.04 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 15 MG/0.3ML, 17.5 MG/0.35ML	3	PA; QL (0.05 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3	PA; QL (0.06 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22.5 MG/0.45ML	3	PA; QL (0.07 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 25 MG/0.5ML	3	PA; QL (0.08 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/0.6ML	3	PA; QL (0.09 ML per 1 day)
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	3	
RIDAURA ORAL CAPSULE	4	SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; SP; QL (1 EA per 1 day)
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP; QL (0.27 EA per 1 day)
sajazir subcutaneous solution prefilled syringe	2	PA; SP; QL (0.6 ML per 1 day)
SANDIMMUNE INTRAVENOUS SOLUTION	3	
SANDIMMUNE ORAL CAPSULE	4	
SANDIMMUNE ORAL SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
SAPHNELO INTRAVENOUS SOLUTION	4	PA; SP
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.11 ML per 1 day)
SIMPONI ARIA INTRAVENOUS SOLUTION	3	PA; SP
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML	3	PA; SP; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	3	PA; SP; QL (0.02 ML per 1 day)
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	4	
sirolimus oral solution	2	
sirolimus oral tablet	2	
SKYRIZI INTRAVENOUS SOLUTION	3	PA; SP; QL (56 day supply per 1 fill)
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.02 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	3	PA; SP; QL (0.03 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	3	PA; SP; QL (0.05 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.02 ML per 1 day)
SPEVIGO INTRAVENOUS SOLUTION	4	PA; SP; QL (30 ML per 84 days)
STELARA INTRAVENOUS SOLUTION	3	PA; SP
STELARA SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
SYNAGIS INTRAMUSCULAR SOLUTION	3	PA; SP
tacrolimus oral capsule	2	
TAKHZYRO SUBCUTANEOUS SOLUTION	4	PA; SP
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
TALTZ SUBCUTANEOUS SOLUTION AUTO- INJECTOR	4	PA; SP; QL (0.04 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.04 ML per 1 day)
temsirolimus intravenous solution	2	SP
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	4	
TORISEL INTRAVENOUS SOLUTION	4	SP
TREMFYA SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; SP; QL (0.02 ML per 1 day)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.02 ML per 1 day)
TREXALL ORAL TABLET	4	
UPLIZNA INTRAVENOUS SOLUTION	4	PA; SP
VARIZIG INTRAMUSCULAR SOLUTION	4	PA
WINRHO SDF INJECTION SOLUTION	3	SP
XATMEP ORAL SOLUTION	4	
XELJANZ ORAL SOLUTION	3	PA; SP; QL (10 ML per 1 day)
XELJANZ ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; SP; QL (1 EA per 1 day)
XEMBIFY SUBCUTANEOUS SOLUTION	4	PA; SP
ZINPLAVA INTRAVENOUS SOLUTION	4	
ZORTRESS ORAL TABLET	4	
Immunological Agents - Drugs for Vaccination		
ABRYSCO INTRAMUSCULAR SOLUTION RECONSTITUTED	4	PV
ACAM2000 INJECTION SOLUTION RECONSTITUTED	4	
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	4	PV
ADACEL INTRAMUSCULAR SUSPENSION	4	PV
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	PV
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	

Drug Name	Drug Tier	Requirements /Limits
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	4	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
BIOTHRAX INTRAMUSCULAR SUSPENSION	4	
BOOSTRIX INTRAMUSCULAR SUSPENSION	4	PV
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
COMIRNATY INTRAMUSCULAR SUSPENSION	4	PV
COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
DAPTACEL INTRAMUSCULAR SUSPENSION	4	PV
DENGVAIXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED	4	PV
ENGERIX-B INJECTION SUSPENSION	4	PV
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	4	PV
FLUAD QUADRIVALENT INTRAMUSCULAR PREFILLED SYRINGE	4	PV

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Drug Name	Drug Tier	Requirements /Limits
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	PV
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	PV
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
FLUMIST QUADRIVALENT NASAL SUSPENSION	4	PV
FLUZONE HIGH- DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION	4	PV
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
GARDASIL 9 INTRAMUSCULAR SUSPENSION	4	PV

Drug Name	Drug Tier	Requirements /Limits
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
HAVRIX INTRAMUSCULAR SUSPENSION	4	PV
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	PV
HIBERIX INJECTION SOLUTION RECONSTITUTED	4	PV
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
INFANRIX INTRAMUSCULAR SUSPENSION	4	PV
IPOL INJECTION INJECTABLE	4	PV
IXIARO INTRAMUSCULAR SUSPENSION	4	
JYNNEOS SUBCUTANEOUS SUSPENSION	4	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
MENACTRA INTRAMUSCULAR SOLUTION	4	PV
MENQUADFI INTRAMUSCULAR SOLUTION	4	PV
MENVEO INTRAMUSCULAR SOLUTION	4	PV

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Drug Name	Drug Tier	Requirements /Limits
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	4	PV
M-M-R II INJECTION SOLUTION RECONSTITUTED	4	PV
MODERNA COVID-19 VAC 6M-11Y INTRAMUSCULAR SUSPENSION	4	PV
NOVAVAX COVID-19 VACCINE INTRAMUSCULAR SUSPENSION	4	PV
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
PEDVAX HIB INTRAMUSCULAR SUSPENSION	4	PV
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	PV
PFIZER COVID-19 VAC-TRIS 5-11Y INTRAMUSCULAR SUSPENSION	4	PV
PFIZER COVID-19 VAC-TRIS 6M-4Y INTRAMUSCULAR SUSPENSION	4	PV
PNEUMOVAX 23 INJECTION INJECTABLE	4	PV
PREHEVBRIO INTRAMUSCULAR SUSPENSION	4	PV
PREVNAR 13 INTRAMUSCULAR SUSPENSION	4	PV

Drug Name	Drug Tier	Requirements /Limits
PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	4	PV
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	4	PV
QUADRACEL INTRAMUSCULAR SUSPENSION	4	PV
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
RECOMBIVAX HB INJECTION SUSPENSION	4	PV
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	4	PV
ROTARIX ORAL SUSPENSION	4	PV
ROTATEQ ORAL SOLUTION	4	PV
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	PV
SPIKEVAX INTRAMUSCULAR SUSPENSION	4	PV
SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV

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Drug Name	Drug Tier	Requirements /Limits
STAMARIL INJECTION SUSPENSION RECONSTITUTED	4	
TDVAX INTRAMUSCULAR SUSPENSION	4	PV
TENIVAC INTRAMUSCULAR INJECTABLE	4	PV
TETANUS-DIPHThERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION	4	PV
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
TYPHIM VI INTRAMUSCULAR SOLUTION	4	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	4	
VAQTA INTRAMUSCULAR SUSPENSION	4	PV
VARIVAX SUBCUTANEOUS INJECTABLE	4	PV
VAXCHORA ORAL SUSPENSION RECONSTITUTED	4	
VAXELIS INTRAMUSCULAR SUSPENSION	4	PV

Drug Name	Drug Tier	Requirements /Limits
VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	PV
VIVOTIF ORAL CAPSULE DELAYED RELEASE	4	
YF-VAX SUBCUTANEOUS INJECTABLE	4	
Inflammatory Bowel Disease Agents		
ANUSOL-HC EXTERNAL CREAM	4	
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	4	
AZULFIDINE ORAL TABLET	4	
balsalazide disodium oral capsule	1	
budesonide er oral tablet extended release 24 hour	2	
budesonide oral capsule delayed release particles	2	
budesonide rectal foam	2	
CORTENEMA RECTAL ENEMA	4	
CORTIFOAM EXTERNAL FOAM	4	
hydrocortisone (perianal) external cream	2	

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Drug Name	Drug Tier	Requirements /Limits
hydrocortisone ace-pramoxine external cream 1-1 %	2	
hydrocortisone rectal enema	2	
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release	1	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	
mesalamine-cleanser rectal kit	1	
PROCTOFOAM HC EXTERNAL FOAM	3	
procto-med hc external cream	2	
proctosol hc external cream	2	
proctozone-hc external cream	2	
ROWASA RECTAL KIT	4	
SFROWASA RECTAL ENEMA	3	
sulfasalazine oral tablet	1	
sulfasalazine oral tablet delayed release	1	
UCERIS RECTAL FOAM	4	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL ORAL TABLET 150 MG	4	QL (0.04 EA per 1 day)
ACTONEL ORAL TABLET 35 MG	4	QL (0.15 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
alendronate sodium oral solution	1	
alendronate sodium oral tablet 10 mg, 5 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL (0.15 EA per 1 day)
ATELVIA ORAL TABLET DELAYED RELEASE	4	QL (0.15 EA per 1 day)
calcitonin (salmon) injection solution	2	
calcitonin (salmon) nasal solution	2	QL (0.13 ML per 1 day)
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; SP; QL (0.09 ML per 1 day)
FOSAMAX ORAL TABLET	4	QL (0.15 EA per 1 day)
ibandronate sodium intravenous solution	2	QL (0.04 ML per 1 day)
ibandronate sodium oral tablet	1	QL (0.04 EA per 1 day)
MIACALCIN INJECTION SOLUTION	4	
pamidronate disodium intravenous solution	2	SP
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (2 ML per 250 days)
RECLAST INTRAVENOUS SOLUTION	4	SP
risedronate sodium oral tablet 150 mg	1	QL (0.04 EA per 1 day)
risedronate sodium oral tablet 30 mg, 5 mg	1	
risedronate sodium oral tablet 35 mg	1	QL (0.15 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
risedronate sodium oral tablet delayed release	1	QL (0.15 EA per 1 day)
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
XGEVA SUBCUTANEOUS SOLUTION	3	PA; SP
zoledronic acid intravenous concentrate	2	SP
zoledronic acid intravenous solution	2	SP
Metabolic Bone Disease Agents - Other		
calcitriol intravenous solution	2	
calcitriol oral capsule	1	
calcitriol oral solution	1	
cinacalcet hcl oral tablet	2	PA
doxercalciferol intravenous solution	2	
doxercalciferol oral capsule	2	
HECTOROL INTRAVENOUS SOLUTION	4	
paricalcitol intravenous solution	2	
paricalcitol oral capsule	2	
PARSABIV INTRAVENOUS SOLUTION	4	SP

Drug Name	Drug Tier	Requirements /Limits
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	4	
ROCALTROL ORAL CAPSULE	4	
ROCALTROL ORAL SOLUTION	4	
ZEMPLAR INTRAVENOUS SOLUTION	4	
ZEMPLAR ORAL CAPSULE	4	
Miscellaneous Therapeutic Agents		
ACETADOTE INTRAVENOUS SOLUTION	4	
acetylcysteine intravenous solution	2	
ADAKVEO INTRAVENOUS SOLUTION	4	PA; SP
AEROCHAMBER MINI CHAMBER DEVICE	3	
AEROCHAMBER MV	3	
AEROCHAMBER PLUS FLO-VU	3	
AEROCHAMBER PLUS FLOW VU	3	
AEROCHAMBER W/FLOWSIGNAL	3	
ALCOHOL PREP PADS PAD , 70 %	4	
ALCOHOL PREP PADS SHEET 70 %	4	
ALPHA-LIPOIC ACID INJECTION SOLUTION	4	
AMD FOAM DRESSING PAD	4	
AMD FOAM DRESSING TOPSHEET PAD	4	

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Drug Name	Drug Tier	Requirements /Limits
AMERICAN BEECH POLLEN SUBCUTANEOUS SOLUTION	4	
AMPHADASE INJECTION SOLUTION	4	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED	4	
AQINJECT PEN NEEDLE	3	
ARTISS EXTERNAL SOLUTION	4	
ASPARTAME (FOR COMPOUNDING) POWDER	4	
ASPARTAME (NUTRASWEET) POWDER	4	
AUM INSULIN SAFETY PEN NEEDLE	3	
AUM MINI INSULIN PEN NEEDLE	3	
AUM PEN NEEDLE	3	
AUM READYGARD DUO PEN NEEDLE	3	
AUM SAFETY PEN NEEDLE	3	
BACTERIOSTATIC WATER(BENZ ALC) INJECTION SOLUTION	4	
BD AUTOSHIELD DUO PEN NEEDLES	3	
BD ULTRA-FINE PEN NEEDLES	3	
BOTOX INJECTION SOLUTION RECONSTITUTED	4	PA

Drug Name	Drug Tier	Requirements /Limits
BREATHE COMFORT CHAMBER/ADULT DEVICE	3	
BREATHE COMFORT CHAMBER/CHILD DEVICE	3	
BREATHE EASE LARGE DEVICE	3	
BREATHE EASE MEDIUM DEVICE	3	
BREATHE EASE SMALL DEVICE	3	
BREATHERITE VALVED MDI CHAMBER DEVICE	3	
BRIDION INTRAVENOUS SOLUTION 200 MG/2ML	4	
BROMELAIN POWDER	4	
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	4	PA; SP
BYLVAY ORAL CAPSULE	4	PA; SP
CAYA VAGINAL DIAPHRAGM	4	PV
CETYLCIDE-G CONCENTRATE	4	
CHARCOAL ACTIVATED POWDER	4	
CHLORHEXIDINE GLUCONATE SOLUTION 20 %	4	
CLEVER CHOICE HOLDING CHAMBER DEVICE	3	
COMFORT EZ PRO PEN NEEDLES	3	
COMPACT SPACE CHAMBER DEVICE	3	

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
COMPACT SPACE CHAMBER/LG MASK DEVICE	3	
COMPACT SPACE CHAMBER/MED MASK DEVICE	3	
COMPACT SPACE CHAMBER/SM MASK DEVICE	3	
CURITY AMD ANTIMICROBIAL SPNGE PAD 4"X4"	4	
CURITY AMD ANTIMICROBIAL STRIP	4	
CURITY IODOFORM PACKING STRIP	4	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED	4	
CYTOTINE ORAL POWDER	4	
deferoxamine mesylate injection solution reconstituted	2	
DESFERAL INJECTION SOLUTION RECONSTITUTED	4	
dexmedetomidine hcl in nacl intravenous solution	2	
DEXMEDETOMIDINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
DEXMEDETOMIDINE HCL INTRAVENOUS SOLUTION 1000 MCG/10ML, 400 MCG/4ML	4	

Drug Name	Drug Tier	Requirements /Limits
dexmedetomidine hcl intravenous solution 200 mcg/2ml	2	
DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION	4	
DIASCREEN 10	4	
DIASCREEN 1B	4	
DIASCREEN 1G STRIP	4	
DIASCREEN 1K	4	
DIASCREEN 1K STRIP	4	
DIASCREEN 2GK STRIP	4	
DIASCREEN 2GP	4	
DIASCREEN 3	4	
DIASCREEN 4NL	4	
DIASCREEN 4OBL	4	
DIASCREEN 4PH	4	
DIASCREEN 5	4	
DIASCREEN 6	4	
DIASCREEN 7	4	
DIASCREEN 8	4	
DIASCREEN 9	4	
DIASCREEN LIQUID URINE CONTROL	4	
DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	4	
DILUENT FOR LEFAMULIN INTRAVENOUS SOLUTION	4	
diluent for treprostinil intravenous solution	2	
DROPLET MICRON	3	
DROPSAFE ALCOHOL PREP PAD	4	

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Drug Name	Drug Tier	Requirements /Limits
DUODOTE INTRAMUSCULAR SOLUTION AUTO-INJECTOR 2.1-600 MG	4	
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE	3	PA
DYSPORE INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
EASIVENT	3	
EDETATE CALCIUM DISODIUM INJECTION SOLUTION	4	
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	3	
ENDARI ORAL PACKET	4	PA
ergoloid mesylates oral tablet	2	
EUA PATIENT ASSESSMENT	4	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	PA
EXCILON AMD DRAIN SPONGES PAD	4	
FEMCAP VAGINAL DEVICE	4	PV
FLEXICHAMBER ADULT MASK/SMALL	3	
FLEXICHAMBER CHILD MASK/LARGE	3	
FLEXICHAMBER CHILD MASK/SMALL	3	
FLEXICHAMBER DEVICE	3	

Drug Name	Drug Tier	Requirements /Limits
flumazenil intravenous solution	2	
fomepizole intravenous solution	2	
FORA D40G GLUCOSE/PRESSURE DEVICE	4	
formaldehyde external solution 37 %	2	
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	PA
glutaraldehyde external solution	2	
GOHIBIC INTRAVENOUS SOLUTION	4	
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
HYLENEX INJECTION SOLUTION	4	
IGALMI SUBLINGUAL FILM	4	PA
INCONTROL ULTICARE PEN NEEDLES	3	
INSPIREASE RESERVOIR BAGS	3	
INSULIN PEN NEEDLES	3	
IV STABILIZER FOR LUMOXITI INTRAVENOUS SOLUTION	4	
J-TIP KIT W/VIAL ADAPTERS KIT	4	
KERENDIA ORAL TABLET	4	PA; QL (1 EA per 1 day)
KERLIX AMD ANTIMICROBIAL	4	

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Drug Name	Drug Tier	Requirements /Limits
KERLIX AMD SUPER SPONGES PAD	4	
KORSUVA INTRAVENOUS SOLUTION	4	PA; SP
methergine oral tablet	2	QL (28 EA per 1 fill)
methylergonovine maleate injection solution	2	
methylergonovine maleate oral tablet	2	QL (28 EA per 1 fill)
MICROCHAMBER DEVICE	3	
MYOBLOC INTRAMUSCULAR SOLUTION	3	PA
NEOKE RA LIPOIC ORAL POWDER	4	
NEXAVIR INJECTION SOLUTION	4	
NITHIODOTE INTRAVENOUS KIT	4	
NOVOFINE AUTOCOVER PEN NEEDLE	3	
NOVOFINE PEN NEEDLE	3	
NOVOFINE PLUS PEN NEEDLE	3	
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
OMNIPOD 5 G6 INTRO (GEN 5) KIT	3	
OMNIPOD 5 G6 POD (GEN 5)	3	
OMNIPOD CLASSIC PODS (GEN 3)	3	
OMNIPOD DASH INTRO (GEN 4) KIT	3	
OMNIPOD DASH PDM (GEN 4) KIT	3	

Drug Name	Drug Tier	Requirements /Limits
OMNIPOD DASH PODS (GEN 4)	3	
OPTICHAMBER DIAMOND	3	
OPTICHAMBER DIAMOND-LG MASK DEVICE	3	
OPTICHAMBER DIAMOND-MD MASK	3	
OPTICHAMBER DIAMOND-SM MASK	3	
ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (6 EA per 365 days)
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
PANDA MASK LARGE	3	
PANDA MASK MEDIUM	3	
PANDA MASK SMALL	3	
PARI VORTEX ADULT MASK	3	
PEDIATRIC PANDA MASK	3	
PEDMARK INTRAVENOUS SOLUTION	4	PA
PENTETATE CALCIUM TRISODIUM COMBINATION SOLUTION	4	
PENTETATE ZINC TRISODIUM COMBINATION SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits
PHOTREXA- PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE	4	
PIP PEN NEEDLES 31G X 5MM	3	
PIP PEN NEEDLES 32G X 4MM	3	
POCKET SPACER DEVICE	3	
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML	4	
PREVDUO INTRAVENOUS SOLUTION PREFILLED SYRINGE	4	
PRO COMFORT SPACER ADULT	3	
PRO COMFORT SPACER CHILD	3	
PRO COMFORT SPACER INFANT DEVICE	3	
PROCARE SPACER/ADULT MASK DEVICE	3	
PROCARE SPACER/CHILD MASK DEVICE	3	
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	4	
PROVAYBLUE INTRAVENOUS SOLUTION	4	
PURE COMFORT SAFETY PEN NEEDLE	3	

Drug Name	Drug Tier	Requirements /Limits
PURE COMFORT SPACER CHAMBER DEVICE	3	
RADIOGARDASE ORAL CAPSULE	4	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; QL (1 EA per 1 day)
RAPPORT RLS KIT	4	
RAPPORT VTD KIT	4	
RAYA SURE PEN NEEDLE	3	
RYSTIGGO SUBCUTANEOUS SOLUTION	4	PA; SP
SACCHARIN POWDER	4	
SAFETY PEN NEEDLES	3	
saline bacteriostatic injection solution	2	
SALINE-PHENOL INJECTION SOLUTION	4	
sodium chloride bacteriostatic injection solution	2	
sodium nitrite intravenous solution	2	
sodium saccharin powder	2	
sodium thiosulfate intravenous solution	2	
SORBITOL IRRIGATION SOLUTION	4	
sorbitol-mannitol irrigation solution	2	
STERILE DILUENT FLOLAN PH 12 INTRAVENOUS SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits
sterile water for injection injection solution	2	
TACHOSIL EXTERNAL PATCH	4	
TELFA AMD ISLAND DRESSING PAD	4	
TELFA AMD NON-ADHERENT PAD	4	
TISSEEL EXTERNAL KIT	4	
TISSEEL EXTERNAL SOLUTION	4	
VEOZAH ORAL TABLET	4	PA; QL (1 EA per 1 day)
VERIFINE INSULIN PEN NEEDLE	3	
VERIFINE PLUS PEN NEEDLE	3	
VISTOGARD ORAL PACKET	4	
VORTEX VALVED HOLDING CHAMBER DEVICE	3	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	4	PA; SP
VYVGART INTRAVENOUS SOLUTION	4	PA; SP
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM	4	PV

Drug Name	Drug Tier	Requirements /Limits
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM	4	PV
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM	4	PV
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
XIAFLEX INJECTION SOLUTION RECONSTITUTED	3	PA; SP
ZOKINVY ORAL CAPSULE	4	PA; SP; QL (4 EA per 1 day)
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR LS OPHTHALMIC SOLUTION	4	
ACULAR OPHTHALMIC SOLUTION	4	
ALOMIDE OPHTHALMIC SOLUTION	4	
AZASITE OPHTHALMIC SOLUTION	4	

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Drug Name	Drug Tier	Requirements /Limits
azelastine hcl ophthalmic solution	2	
bacitracin ophthalmic ointment	2	
bepotastine besilate ophthalmic solution	2	
BESIVANCE OPTHALMIC SUSPENSION	4	
BETADINE OPTHALMIC PREP OPTHALMIC SOLUTION	4	
bromfenac sodium (once-daily) ophthalmic solution	2	QL (6.8 ML per 365 days)
ciprofloxacin hcl ophthalmic solution	2	
cromolyn sodium ophthalmic solution	2	
dexamethasone sodium phosphate ophthalmic solution	2	
diclofenac sodium ophthalmic solution	2	
difluprednate ophthalmic emulsion	2	
epinastine hcl ophthalmic solution	2	
erythromycin ophthalmic ointment	2	
EYSUVIS OPTHALMIC SUSPENSION	4	PA
FLAREX OPTHALMIC SUSPENSION	4	
fluorometholone ophthalmic suspension	2	
flurbiprofen sodium ophthalmic solution	2	

Drug Name	Drug Tier	Requirements /Limits
FML FORTE OPTHALMIC SUSPENSION	4	
FML LIQUIFILM OPTHALMIC SUSPENSION	4	
gatifloxacin ophthalmic solution	2	
gentamicin sulfate ophthalmic solution	2	
INVELTYS OPTHALMIC SUSPENSION	4	
ketorolac tromethamine ophthalmic solution	2	
levofloxacin ophthalmic solution	2	
LOTEMAX SM OPTHALMIC GEL	4	
loteprednol etabonate ophthalmic gel	2	QL (20 GM per 365 days)
loteprednol etabonate ophthalmic suspension	2	
MAXIDEX OPTHALMIC SUSPENSION	4	
MAXITROL OPTHALMIC OINTMENT	4	
MAXITROL OPTHALMIC SUSPENSION 0.1 %	4	
MITOSOL OPTHALMIC KIT	4	
moxifloxacin hcl (2x day) ophthalmic solution	2	
moxifloxacin hcl ophthalmic solution	2	
NATACYN OPTHALMIC SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
neomycin-polymyxin-dexameth ophthalmic ointment	2	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	2	
neomycin-polymyxin-hc ophthalmic suspension	2	
OCUFLOX OPTHALMIC SOLUTION	4	
ofloxacin ophthalmic solution	2	
olopatadine hcl ophthalmic solution	2	
POVIDONE-IODINE OPTHALMIC SOLUTION	4	
PRED MILD OPTHALMIC SUSPENSION	4	
prednisolone acetate ophthalmic suspension	2	
prednisolone sodium phosphate ophthalmic solution	2	
PROLENSA OPTHALMIC SOLUTION	3	QL (12 ML per 365 days)
sulfacetamide sodium ophthalmic ointment	2	
sulfacetamide sodium ophthalmic solution	2	
TOBRADEX OPTHALMIC OINTMENT	4	
TOBRADEX ST OPTHALMIC SUSPENSION	4	
tobramycin ophthalmic solution	2	

Drug Name	Drug Tier	Requirements /Limits
tobramycin-dexamethasone ophthalmic suspension	2	
TOBREX OPTHALMIC OINTMENT	4	
trifluridine ophthalmic solution	2	
UPNEEQ OPTHALMIC SOLUTION	4	PA
ZIRGAN OPTHALMIC GEL	4	
ZYMAXID OPTHALMIC SOLUTION	4	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er oral capsule extended release 12 hour	1	
acetazolamide oral tablet	1	
ALPHAGAN P OPTHALMIC SOLUTION 0.1 %	3	
apraclonidine hcl ophthalmic solution	1	
betaxolol hcl ophthalmic solution	1	
BETIMOL OPTHALMIC SOLUTION	4	
bimatoprost ophthalmic solution	1	QL (0.1 ML per 1 day)
brimonidine tartrate ophthalmic solution	1	
brimonidine tartrate-timolol ophthalmic solution	1	
brinzolamide ophthalmic suspension	1	

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Drug Name	Drug Tier	Requirements /Limits
carteolol hcl ophthalmic solution	1	
dichlorphenamide oral tablet	2	PA; SP; QL (4 EA per 1 day)
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal ophthalmic solution	1	
dorzolamide hcl-timolol mal pf ophthalmic solution	1	
IOPIDINE OPHTHALMIC SOLUTION	4	
ISTALOL OPHTHALMIC SOLUTION	4	
KEVEYIS ORAL TABLET	4	PA; SP; QL (4 EA per 1 day)
latanoprost ophthalmic solution	1	
levobunolol hcl ophthalmic solution	1	
LUMIGAN OPHTHALMIC SOLUTION	3	QL (0.1 ML per 1 day)
methazolamide oral tablet	1	
pilocarpine hcl ophthalmic solution	1	
RHOPRESSA OPHTHALMIC SOLUTION	4	QL (0.1 ML per 1 day)
ROCKLATAN OPHTHALMIC SOLUTION	4	QL (0.1 ML per 1 day)
SIMBRINZA OPHTHALMIC SUSPENSION	3	

Drug Name	Drug Tier	Requirements /Limits
tafluprost (pf) ophthalmic solution	1	QL (1 EA per 1 day)
timolol maleate (once-daily) ophthalmic solution	1	
timolol maleate ocudose ophthalmic solution	1	
timolol maleate ophthalmic gel forming solution	1	
timolol maleate ophthalmic solution	1	
timolol maleate pf ophthalmic solution	1	
travoprost (bak free) ophthalmic solution	1	QL (0.1 ML per 1 day)
XELPROS OPHTHALMIC EMULSION	4	QL (0.1 ML per 1 day)
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
AKTEN OPHTHALMIC GEL	4	
ALCAINE OPHTHALMIC SOLUTION	4	
ALTACAINE OPHTHALMIC SOLUTION	4	
altafrin ophthalmic solution	2	
atropine sulfate ophthalmic ointment	2	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.025 %, 0.05 %	4	
atropine sulfate ophthalmic solution 1 %	2	

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Drug Name	Drug Tier	Requirements /Limits
bacitracin-polymyxin b ophthalmic ointment	2	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	2	
BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	SP
CIMERLI INTRAVITREAL SOLUTION	3	PA; SP
CYCLOGYL OPHTHALMIC SOLUTION	4	
CYCLOMYDRIL OPHTHALMIC SOLUTION	4	
cyclopentolate hcl ophthalmic solution	2	
cyclosporine ophthalmic emulsion	2	PA
CYSTADROPS OPHTHALMIC SOLUTION	4	SP; QL (0.72 ML per 1 day)
CYSTARAN OPHTHALMIC SOLUTION	4	SP; QL (2.15 ML per 1 day)
EYLEA INTRAVITREAL SOLUTION	4	PA; SP
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE	4	PA; SP
HOMATROPAIRE OPHTHALMIC SOLUTION	4	
ISOPTO ATROPINE OPHTHALMIC SOLUTION	4	
MIEBO OPHTHALMIC SOLUTION	4	PA; QL (0.4 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
neomycin-bacitracin zn-polymyx ophthalmic ointment	2	
neomycin-polymyxin-gramicidin ophthalmic solution	2	
neo-polycin hc ophthalmic ointment	2	
neo-polycin ophthalmic ointment	2	
OXERVATE OPHTHALMIC SOLUTION	4	PA; SP; QL (2 ML per 1 day)
phenylephrine hcl ophthalmic solution	2	
polycin ophthalmic ointment	2	
polymyxin b-trimethoprim ophthalmic solution	2	
proparacaine hcl ophthalmic solution	2	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION	3	PA
RESTASIS OPHTHALMIC EMULSION	3	PA
sulfacetamide-prednisolone ophthalmic solution	2	
SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION	4	PA; SP
SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION	4	PA; SP
SYFOVRE INTRAVITREAL SOLUTION	4	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
tetracaine hcl ophthalmic solution	2	
TROPICAMIDE-PHENYLEPHRINE OPHTHALMIC SOLUTION	4	
TYRVAYA NASAL SOLUTION	4	PA; QL (0.3 ML per 1 day)
VABYSMO INTRAVITREAL SOLUTION	4	PA; SP
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED	4	SP
XIIDRA OPHTHALMIC SOLUTION	3	PA
ZYLET OPHTHALMIC SUSPENSION	4	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic solution	2	
CETRAXAL OTIC SOLUTION	4	
ciprofloxacin hcl otic solution	2	
ciprofloxacin-dexamethasone otic suspension	2	
CORTISPORIN-TC OTIC SUSPENSION	4	
DERMOTIC OTIC OIL	4	
flac otic oil	2	
fluocinolone acetonide otic oil	2	
hydrocortisone-acetic acid otic solution	2	
neomycin-polymyxin-hc otic solution	2	
neomycin-polymyxin-hc otic suspension	2	
ofloxacin otic solution	2	

Drug Name	Drug Tier	Requirements /Limits
PRAMOTIC OTIC LIQUID	4	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal solution	2	QL (2 ML per 1 day)
azelastine-fluticasone nasal suspension	2	QL (0.77 GM per 1 day)
benzonatate oral capsule	2	
carbinoxamine maleate oral solution	2	
carbinoxamine maleate oral tablet	2	
CINQAIR INTRAVENOUS SOLUTION	4	PA; SP
clemastine fumarate oral syrup	2	
clemastine fumarate oral tablet 2.68 mg	2	
CUROSURF INTRATRACHEAL SUSPENSION	4	
cyproheptadine hcl oral syrup	2	
cyproheptadine hcl oral tablet	2	
diphenhydramine hcl injection solution	2	
diphenhydramine hcl oral elixir	2	
DYMISTA NASAL SUSPENSION	3	QL (0.77 GM per 1 day)
guaifenesin ac oral syrup	2	PA; QL (240 ML per 1 fill)
guaifenesin-codeine oral solution	2	PA; QL (240 ML per 1 fill)
HYCODAN ORAL SOLUTION	4	PA; QL (240 ML per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
HYCODAN ORAL TABLET	4	PA; QL (6 EA per 1 day)
hydrocod poli-chlorphe poli er oral suspension extended release	2	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral solution	2	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral tablet	2	PA; QL (6 EA per 1 day)
hydromet oral solution	2	PA; QL (240 ML per 1 fill)
HYPERSAL INHALATION NEBULIZATION SOLUTION	4	
INFASURF INTRATRACHEAL SUSPENSION	4	
ipratropium bromide nasal solution	2	
maxi-tuss ac oral solution	2	PA; QL (240 ML per 1 fill)
NEBUSAL INHALATION NEBULIZATION SOLUTION	4	
olopatadine hcl nasal solution	2	QL (1.02 GM per 1 day)
promethazine vc oral syrup	2	
promethazine vc/codeine oral syrup	2	PA; QL (240 ML per 1 fill)
promethazine-codeine oral solution	2	PA; QL (240 ML per 1 fill)
promethazine-codeine oral syrup	2	PA; QL (240 ML per 1 fill)
promethazine-dm oral syrup	2	
pseudoephedrine-bromphen-dm oral syrup	2	

Drug Name	Drug Tier	Requirements /Limits
PULMOSAL INHALATION NEBULIZATION SOLUTION	4	
RYALTRIS NASAL SUSPENSION	4	QL (1 GM per 1 day)
ryvent oral tablet	2	
sodium chloride inhalation nebulization solution	2	
SURVANTA INTRATRACHEAL SUSPENSION	4	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ACCOLATE ORAL TABLET	4	
acetylcysteine inhalation solution	2	
ADRENALIN INJECTION SOLUTION	4	
ADVAIR HFA INHALATION AEROSOL	2	QL (0.4 GM per 1 day)
albuterol sulfate hfa inhalation aerosol solution	2	QL (1.2 GM per 1 day)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	2	QL (18 ML per 1 day)
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	2	QL (12.5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	2	QL (5 EA per 1 day)
albuterol sulfate oral syrup	2	

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Drug Name	Drug Tier	Requirements /Limits
albuterol sulfate oral tablet	2	
aminophylline intravenous solution	2	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
arformoterol tartrate inhalation nebulization solution	1	QL (4 ML per 1 day)
ARNUIY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (1 EA per 1 day)
ATROVENT HFA INHALATION AEROSOL SOLUTION	4	QL (0.86 GM per 1 day)
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	4	QL (0.07 EA per 1 day)
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	4	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	QL (2 EA per 1 day)
breyana inhalation aerosol	1	QL (0.35 GM per 1 day)
BREZTRI AEROSPHERE INHALATION AEROSOL	3	QL (0.36 GM per 1 day)
budesonide inhalation suspension	1	QL (4 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
budesonide-formoterol fumarate inhalation aerosol	1	QL (0.35 GM per 1 day)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.27 GM per 1 day)
cromolyn sodium inhalation nebulization solution	2	
DALIRESP ORAL TABLET	4	PA
elixophyllin oral elixir	1	
epinephrine (anaphylaxis) injection solution	2	
epinephrine injection solution auto-injector	2	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	4	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL (2 EA per 1 day)
formoterol fumarate inhalation nebulization solution	1	QL (4 ML per 1 day)
GLASSIA INTRAVENOUS SOLUTION	4	PA; SP

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
ipratropium bromide inhalation solution	1	QL (10.42 ML per 1 day)
ipratropium-albuterol inhalation solution	1	QL (18 ML per 1 day)
isoproterenol hcl injection solution	2	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	2	QL (18 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	2	QL (3 EA per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	2	QL (9 ML per 1 day)
montelukast sodium oral packet	1	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	3	PA; SP; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL (0.02 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (0.11 EA per 1 day)
OFEV ORAL CAPSULE	4	PA; SP

Drug Name	Drug Tier	Requirements /Limits
PERFORMIST INHALATION NEBULIZATION SOLUTION	4	QL (4 ML per 1 day)
pirfenidone oral capsule	2	PA; SP
pirfenidone oral tablet	2	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION	4	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	3	QL (0.71 GM per 1 day)
roflumilast oral tablet	1	PA
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER	4	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)
SPIRIVA HANDIHALER INHALATION CAPSULE	3	QL (1 EA per 1 day)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.14 GM per 1 day)
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED	4	
STERITALC INTRAPLEURAL POWDER	4	

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Drug Name	Drug Tier	Requirements /Limits
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (0.14 GM per 1 day)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (4.2 GM per 30 days)
SYMBICORT INHALATION AEROSOL	4	QL (0.35 GM per 1 day)
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	4	
terbutaline sulfate injection solution	2	
terbutaline sulfate oral tablet	2	
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.07 ML per 1 day)
TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.07 ML per 1 day)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
theophylline er oral tablet extended release 12 hour	1	
theophylline er oral tablet extended release 24 hour	1	
theophylline oral elixir	1	
theophylline oral solution	2	
tiotropium bromide monohydrate inhalation capsule	1	QL (1 EA per 1 day)
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
wixela inhub inhalation aerosol powder breath activated	1	QL (2 EA per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
YUPELRI INHALATION SOLUTION	4	QL (3 ML per 1 day)
zafirlukast oral tablet	1	
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
KALYDECO ORAL PACKET	4	PA; SP
KALYDECO ORAL TABLET	4	PA; SP
ORKAMBI ORAL PACKET	4	PA; SP; QL (2 EA per 1 day)
ORKAMBI ORAL TABLET	4	PA; SP; QL (4 EA per 1 day)
PULMOZYME INHALATION SOLUTION	3	PA; SP
SYMDEKO ORAL TABLET THERAPY PACK	4	PA; SP; QL (2 EA per 1 day)
TOBI PODHALER INHALATION CAPSULE	4	SP; QL (224 EA per 40 days)
tobramycin inhalation nebulization solution	2	SP
TRIKAFTA ORAL TABLET THERAPY PACK	4	PA; SP; QL (3 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
TRIKAFTA ORAL THERAPY PACK	4	PA; SP; QL (2 EA per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADEMPAS ORAL TABLET	3	PA; SP; QL (3 EA per 1 day)
alyq oral tablet	2	PA; SP; QL (2 EA per 1 day)
ambrisentan oral tablet	2	PA; SP; QL (1 EA per 1 day)
bosentan oral tablet	2	PA; SP; QL (2 EA per 1 day)
epoprostenol sodium intravenous solution reconstituted	2	PA; SP
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
OPSUMIT ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	4	PA; SP; QL (336 EA per 365 days)
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	4	PA; SP; QL (672 EA per 365 days)
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	4	PA; SP; QL (504 EA per 365 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE	4	PA; SP
sildenafil citrate intravenous solution	2	PA; SP
sildenafil citrate oral suspension reconstituted	2	PA; SP; QL (7.5 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
sildenafil citrate oral tablet 20 mg	2	PA; SP; QL (3 EA per 1 day)
tadalafil (pah) oral tablet	2	PA; SP; QL (2 EA per 1 day)
TRACLEER 32 MG	4	PA; SP; QL (4 EA per 1 day)
treprostinil injection solution	2	PA; SP
TYVASO DPI MAINTENANCE KIT INHALATION POWDER	4	PA; SP; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT INHALATION POWDER	4	PA; SP; QL (2 EA per 365 days)
TYVASO INHALATION SOLUTION	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO REFILL INHALATION SOLUTION	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO STARTER INHALATION SOLUTION	4	PA; SP; QL (2.9 ML per 1 day)
UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
UPTRAVI ORAL TABLET	4	PA; SP; QL (2 EA per 1 day)
UPTRAVI ORAL TABLET THERAPY PACK	4	PA; SP; QL (400 EA per 365 days)
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	4	PA; SP
VENTAVIS INHALATION SOLUTION	4	PA; SP; QL (9 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral suspension	2	
baclofen oral tablet	2	
carisoprodol oral tablet	2	
chlorzoxazone oral tablet 500 mg	2	
cyclobenzaprine hcl er oral capsule extended release 24 hour	2	
cyclobenzaprine hcl oral tablet	2	
DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED	4	
DANTRIUM ORAL CAPSULE	4	
dantrolene sodium intravenous solution reconstituted	2	
dantrolene sodium oral capsule	2	
metaxalone oral tablet	2	
methocarbamol injection solution	2	
methocarbamol oral tablet 500 mg, 750 mg	2	
orphenadrine citrate er oral tablet extended release 12 hour	2	QL (2 EA per 1 day)
orphenadrine citrate injection solution	2	
revonto intravenous solution reconstituted	2	
ROBAXIN INJECTION SOLUTION	4	

Drug Name	Drug Tier	Requirements /Limits
RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED	4	
tizanidine hcl oral capsule	2	
tizanidine hcl oral tablet	2	
Sleep Disorder Agents		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	2	PA; QL (1 EA per 1 day)
armodafinil oral tablet 50 mg	2	PA; QL (2 EA per 1 day)
BELSOMRA ORAL TABLET	4	QL (1 EA per 1 day)
DAYVIGO ORAL TABLET	4	QL (1 EA per 1 day)
doxepin hcl oral tablet	2	QL (1 EA per 1 day)
eszopiclone oral tablet	2	QL (1 EA per 1 day)
flurazepam hcl oral capsule	2	PA; QL (1 EA per 1 day)
LUMRYZ ORAL PACKET	4	PA; SP; QL (1 EA per 1 day)
modafinil oral tablet	2	PA; QL (1 EA per 1 day)
ramelteon oral tablet	2	QL (1 EA per 1 day)
SODIUM OXYBATE ORAL SOLUTION	4	PA; SP; QL (18 ML per 1 day)
SUNOSI ORAL TABLET	3	PA; QL (1 EA per 1 day)
tasimelteon oral capsule	2	PA; SP; QL (1 EA per 1 day)
temazepam oral capsule	2	QL (1 EA per 1 day)
WAKIX ORAL TABLET	4	PA; SP; QL (2 EA per 1 day)
XYWAV ORAL SOLUTION	4	PA; SP; QL (18 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
zaleplon oral capsule 10 mg	2	QL (2 EA per 1 day)
zaleplon oral capsule 5 mg	2	QL (1 EA per 1 day)
zolpidem tartrate er oral tablet extended release	2	QL (1 EA per 1 day)
zolpidem tartrate oral tablet	2	QL (1 EA per 1 day)
zolpidem tartrate sublingual tablet sublingual	2	QL (1 EA per 1 day)

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