



# AlaskaCare Retiree DC Plan Medicare Part D and Non-Part D Drug Formulary

Effective Jan. 1, 2024

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

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

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## 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](https://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.

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

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

# Understanding your formulary

## What is the Comprehensive Formulary?

A formulary is the plan's drug list selected by AlaskaCare in consultation with Optum Rx and a team of healthcare providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. This includes both the Part D and supplemental wrap (non-Part D) medications. This plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, and other plan rules are followed. Please note: the amount you pay for a drug will depend on if the prescription is filled at an Optum Rx network pharmacy, or not. If you fill a prescription out-of-network, you may have to pay the full price of the drug, then submit a claim for reimbursement.

## Can the formulary (drug list) change?

Yes. If you are taking a drug on our 2024 formulary that is covered at the beginning of the year, we will continue coverage of the drug during the 2024 coverage year except when new adverse information about the safety or effectiveness of a drug is released.

If we make a change to our formulary (i.e. add prior authorization, quantity limit, and/or move a drug to a higher cost-sharing tier, if applicable), we must notify affected members. Members will receive a notice regarding the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug. The member will receive a 60-day supply of the drug. If the Food and Drug Administration (FDA) deems a drug on our formulary to be unsafe, or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.

The enclosed formulary is current as of Dec. 1, 2023. To get updated information about covered drugs, please contact Optum Rx. Our contact information is shown on the front and back cover pages. You may also visit our website at [optumrx.com](https://optumrx.com) where you will find the most up-to-date information about our list of covered drugs (formulary) by using the "Drug Information" tool (found under the "Member Tools" tab).



### About this formulary

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.

## How do I use the formulary?

There are 2 ways to find your drug within the formulary:

- **Medical condition**

The drugs in this formulary are grouped into categories depending on the type of medical condition(s) they are used to treat. For example, drugs used to treat a heart condition are listed under the category "Cardiovascular Agents." If you know what your drug is used for, look for the category name in the list. Then, look under the category name for your drug.

- **Alphabetical listing**

If you are not sure what category to look under, you should look for your drug in the Index. The Index provides an alphabetical list of all drugs included in this document. Both brand-name drugs and generic drugs are listed in the Index.

## Formulary design

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

Drug tier	Helpful tips
Tier 1	Most generic drugs are listed under Tier 1 and have the lowest copayments.
Tier 2	Drugs listed under Tier 2 generally include preferred brand-name drugs that have lower copayments than non-preferred brand-name drugs.
Tier 3	Drugs listed under Tier 3 generally have higher copayments than preferred brand-name drugs and may include some specialty or high-cost drugs*.

\* High-Cost (and some Specialty) drugs are those that cost \$830 or more for up to a 30-day maximum supply.

Please refer to your *Evidence of Coverage* for more information.

# Medication tips

## What are generic drugs?

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

## Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

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<b>Prior Authorization (PA)</b>	You or your physician may need to get prior authorization for certain drugs. This means you will need to get approval from Optum Rx before you fill your prescriptions. If you do not get approval, the drug may not be covered.
<b>Quantity Limits (QL)</b>	For certain drugs, there is a limit on the amount of the drug we will cover.

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To find out if your drug has any additional requirements or limits, look in the formulary. You can also get more information about restrictions applied to specific covered drugs by visiting our website or by calling Optum Rx at **1-855-409-6999**. Our contact information, along with the date we last updated the formulary, is shown on the front and back cover pages.

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

## What if my drug is not on the formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Optum Rx and ask if your drug is covered. Our contact information is shown on the front and back cover pages.

If your drug is not covered, you have 2 options:

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

AlaskaCare offers enhanced supplemental coverage on **some** prescription drugs not normally covered under Medicare Part D and/or Part B. This formulary includes those supplemental medications. Please contact Optum Rx for any questions regarding your enhanced supplemental benefits.

## How do I request an exception to the formulary?

You can ask Optum Rx to make an exception to the coverage rules. There are 2 types of exceptions that you can ask us to make:

- You can ask us to cover a drug even if it is not on our formulary. If approved, the drug will be covered at a predetermined cost-sharing level, and you will not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level. If approved, this would lower the amount you must pay for your drug.

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

Generally, we will only approve your request for an exception if the drug is included on the plan’s formulary, or if additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact Optum Rx for an initial coverage decision for a formulary, tier, or utilization restriction exception.

**When you request a formulary, tier, or utilization restriction exception, you must submit a statement from your doctor (or other prescriber) supporting your request.**

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

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

As a new or continuing member in the AlaskaCare Retiree Medicare Prescription Drug Plan, you may be taking drugs that are not on the formulary, not covered under the AlaskaCare enhanced supplemental benefits, or your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor (or other prescriber) to decide if you should switch to an alternative drug that is covered or request a formulary exception. While you talk to your doctor (or other prescriber) to determine the right course of action for you, the plan may cover your drug in certain cases during the first 90 days you are a member of the plan.

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

If you are a resident of a long-term care facility, the plan will allow you to refill your prescription until you have been provided with a 31-day transition supply, written for as many pills as necessary, unless you have a prescription written for fewer days. The plan will cover more than one refill of these drugs for the first 90 days you are a member of the plan.

The plan will cover a 31-day emergency supply of a drug (unless you have a prescription for fewer days) while you get a formulary exception for the following:

- If you need a drug that is not on the Part D formulary
- If you need a drug that is not covered under the AlaskaCare enhanced supplemental benefits
- If your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan

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

### For more information

For more detailed information about your prescription drug coverage, please review your other plan materials. If you have questions about the plan, please call Optum Rx at **1-855-409-6999**. Our contact information, along with the date we last updated the formulary, is shown on the front and back cover pages.



### Questions

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

# Reading your formulary

The formulary below provides coverage information about some of your covered drugs on both the Part D and Non-Part D (supplemental wrap) benefits. If you have trouble finding your drug in the list, turn to the Index for assistance.

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

Requirements/Limits	Helpful tips
<b>B/D</b>	This prescription drug has a Part B versus Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.
<b>PA</b>	Prior Authorization. Our plan requires you or your physician to get prior authorization for certain drugs. This means you will need to get approval from Optum Rx before you fill your prescriptions. If you do not get approval, your drug may not be covered.
<b>QL</b>	Quantity Limit. For certain drugs, our plan limits the amount of the drug that will be covered.
<b>PV</b>	Preventive medication. This medication may be available at zero copay.
<b>NDS</b>	Non-Extended Days’ Supply. This prescription drugs is not available for an extended days’ supply.

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Drug Name	Drug Tier	Requirements /Limits
<b>Analgesics</b>		
<b>Non-FRF</b>		
acetaminophen intravenous solution	1	
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
ACETYL SALICYLIC ACID POWDER	2	
adult aspirin regimen oral tablet delayed release	2	PV
ANAPROX DS ORAL TABLET	3	
ARTHROTEC ORAL TABLET DELAYED RELEASE	3	
aspirin 81 oral tablet delayed release	1	PV
aspirin adult low dose oral tablet delayed release	2	PV
aspirin adult low strength oral tablet delayed release	2	PV
aspirin childrens oral tablet chewable	2	PV
aspirin ec low dose oral tablet delayed release	2	PV
aspirin ec low strength oral tablet delayed release	2	PV
aspirin low dose oral tablet chewable	1	PV
aspirin low dose oral tablet delayed release	2	PV
aspirin oral tablet chewable	1	PV
aspirin oral tablet delayed release	2	PV
aspirin regimen oral tablet delayed release	1	PV

Drug Name	Drug Tier	Requirements /Limits
BAYER ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE	2	PV
CALDOLOR INTRAVENOUS SOLUTION	3	
CAMBIA ORAL PACKET	3	
CATAFLAM ORAL TABLET	3	
CELEBREX ORAL CAPSULE	3	
celecoxib oral capsule	1	
DAYPRO ORAL TABLET	3	
DICLOFENAC EPOLAMINE EXTERNAL PATCH	1	PA
DICLOFENAC ORAL CAPSULE	3	
diclofenac potassium oral capsule	1	
diclofenac potassium oral tablet	1	
diclofenac potassium(migraine) oral packet	1	
diclofenac sodium er oral tablet extended release 24 hour	1	
diclofenac sodium external gel	1	
diclofenac sodium external solution	1	
diclofenac sodium oral tablet delayed release	1	
diclofenac-misoprostol oral tablet delayed release	1	
DICLOFONO EXTERNAL GEL	2	

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

Drug Name	Drug Tier	Requirements /Limits
DICLONA EXTERNAL GEL	3	
diflunisal oral tablet	1	
DIFLUNISAL POWDER	2	
DUAL COMPLEX FORMULA 1 KIT EXTERNAL CREAM	2	
DUEXIS ORAL TABLET	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE	3	
ec-naproxen oral tablet delayed release	1	
ELYXYB ORAL SOLUTION	3	
ENOVARX-DICLOFENAC SODIUM EXTERNAL CREAM	2	
ENOVARX-IBUPROFEN EXTERNAL CREAM	2	
ENOVARX-NAPROXEN EXTERNAL CREAM	2	
etodolac er oral tablet extended release 24 hour	1	
etodolac oral capsule	1	
etodolac oral tablet	1	
FBL KIT EXTERNAL CREAM	2	
FELDENE ORAL CAPSULE	3	
fenoprofen calcium oral capsule	1	
fenoprofen calcium oral tablet	1	
FENOPROFEN CALCIUM POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
fenortho oral capsule	1	
FLECTOR EXTERNAL PATCH	3	PA
flurbiprofen oral tablet	1	
FLURBIPROFEN POWDER	2	
FROTEK EXTERNAL CREAM	2	
ft aspirin low dose oral tablet delayed release	1	PV
GABAPENTIN-NAPROXEN CMPD KIT EXTERNAL CREAM	2	
goodsense aspirin low dose oral tablet delayed release	2	PV
ibu oral tablet	1	
ibuprofen lysine intravenous solution	1	
ibuprofen oral suspension	1	
ibuprofen oral tablet	1	
IBUPROFEN POWDER	2	
ibuprofen-famotidine oral tablet	1	
INDOCIN ORAL SUSPENSION	3	
INDOCIN RECTAL SUPPOSITORY	3	
indomethacin er oral capsule extended release	1	
indomethacin oral capsule	1	
INDOMETHACIN POWDER	2	
indomethacin rectal suppository	1	

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Drug Name	Drug Tier	Requirements /Limits
indomethacin sodium intravenous solution reconstituted	1	
K.B.G.L IN TERODERM EXTERNAL CREAM	2	
KETOPHENE RAPIDPAQ EXTERNAL CREAM	2	
ketoprofen er oral capsule extended release 24 hour	1	
ketoprofen oral capsule	1	
ketorolac tromethamine injection solution	1	
ketorolac tromethamine intramuscular solution	1	
KETOROLAC TROMETHAMINE NASAL SOLUTION	1	
ketorolac tromethamine oral tablet	1	
LICART EXTERNAL PATCH 24 HOUR	3	
LODINE ORAL TABLET	3	
LOFENA ORAL TABLET	3	
meclofenamate sodium oral capsule	1	
MECLOFENAMATE SODIUM POWDER	2	
mefenamic acid oral capsule	1	
meloxicam oral capsule	1	
MELOXICAM ORAL SUSPENSION	3	
meloxicam oral tablet	1	
mm aspirin oral tablet delayed release	2	PV
MOBIC ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
nabumetone oral tablet	1	
NALFON ORAL CAPSULE	3	
NALFON ORAL TABLET	3	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
NAPRO EXTERNAL CREAM	2	
NAPROSYN ORAL SUSPENSION	3	
NAPROSYN ORAL TABLET	3	
naproxen dr oral tablet delayed release	1	
naproxen oral suspension	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
NAPROXEN POWDER	2	
naproxen sodium er oral tablet extended release 24 hour	1	
naproxen sodium oral tablet	1	
NAPROXEN SODIUM POWDER	2	
naproxen-esomeprazole mg oral tablet delayed release	1	
NEOPROFEN INTRAVENOUS SOLUTION	3	
oxaprozin oral tablet	1	
PENNSAID EXTERNAL SOLUTION	3	
PHENYLBUTAZONE POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
piroxicam oral capsule	1	
PIROXICAM POWDER	2	
RELAFEN DS ORAL TABLET	3	
RELAFEN ORAL TABLET	3	
salsalate oral tablet	1	
SPRIX NASAL SOLUTION	3	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE	2	PV
ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE	2	PV
sulindac oral tablet	1	
SULINDAC POWDER	2	
TIVORBEX ORAL CAPSULE	3	
tolmetin sodium oral capsule	1	
tolmetin sodium oral tablet	1	
TRIPLE COMPLEX FORMULA 3 KIT EXTERNAL CREAM	2	
VIMOVO ORAL TABLET DELAYED RELEASE	3	
VP FC KIT EXTERNAL CREAM	2	
VP GKL KIT EXTERNAL CREAM	2	
ZIPSOR ORAL CAPSULE	3	
ZORVOLEX ORAL CAPSULE	3	
<b>Opioid Analgesics, Long-acting</b>		
BELBUCA BUCCAL FILM	3	NDS

Drug Name	Drug Tier	Requirements /Limits
buprenorphine transdermal patch weekly	1	NDS
BUTRANS TRANSDERMAL PATCH WEEKLY	3	NDS
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	NDS
fentanyl transdermal patch 72 hour	1	NDS
hydrocodone bitartrate er oral capsule extended release 12 hour	1	NDS
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	1	NDS
hydromorphone hcl er oral tablet extended release 24 hour	1	NDS
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	3	NDS
INFUMORPH 200 INJECTION SOLUTION	3	B/D; NDS
INFUMORPH 500 INJECTION SOLUTION	3	B/D; NDS
levorphanol tartrate oral tablet	1	NDS
methadone hcl injection solution	1	NDS
methadone hcl intensol oral concentrate	1	NDS
methadone hcl oral concentrate	1	NDS
methadone hcl oral solution	1	NDS
methadone hcl oral tablet	1	NDS

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Drug Name	Drug Tier	Requirements /Limits
METHADONE HCL POWDER	2	
METHADONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
METHADONE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
METHADOSE ORAL CONCENTRATE	1	NDS
METHADOSE SUGAR-FREE ORAL CONCENTRATE	1	NDS
mitigo injection solution	1	B/D; NDS
morphine sulfate er beads oral capsule extended release 24 hour	1	NDS
morphine sulfate er oral capsule extended release 24 hour	1	NDS
morphine sulfate er oral tablet extended release	1	NDS
MS CONTIN ORAL TABLET EXTENDED RELEASE	3	NDS
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	2	NDS
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	1	NDS
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	3	NDS
oxymorphone hcl er oral tablet extended release 12 hour	1	NDS

Drug Name	Drug Tier	Requirements /Limits
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	1	NDS
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	NDS
tramadol hcl er oral tablet extended release 24 hour	1	NDS
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	2	NDS
<b>Opioid Analgesics, Short-acting</b>		
acetaminophen-codeine oral solution	1	NDS
acetaminophen-codeine oral tablet	1	NDS
ACTIQ BUCCAL LOZENGE ON A HANDLE	3	PA; NDS
alfentanil hcl intravenous solution	1	
APADAZ ORAL TABLET	3	NDS
apap-caff-dihydrocodeine oral capsule	1	NDS
apap-caff-dihydrocodeine oral tablet	1	NDS
ascomp-codeine oral capsule	1	NDS
BENZHYDROCODON E-ACETAMINOPHEN ORAL TABLET	1	NDS
butalbital-apap-caff-cod oral capsule	1	NDS
butalbital-asa-caff-codeine oral capsule	1	NDS

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Drug Name	Drug Tier	Requirements /Limits
butorphanol tartrate injection solution	1	NDS
butorphanol tartrate nasal solution	1	NDS
codeine sulfate oral tablet	1	NDS
DEMEROL INJECTION SOLUTION	3	NDS
DILAUDID INJECTION SOLUTION	3	NDS
DILAUDID ORAL LIQUID	3	NDS
DILAUDID ORAL TABLET	3	NDS
DURAMORPH INJECTION SOLUTION	1	NDS
endocet oral tablet	1	NDS
FENTANYL CITRATE (BULK) SOLUTION	2	
fentanyl citrate (pf) injection solution	1	B/D; NDS
fentanyl citrate buccal lozenge on a handle	1	PA; NDS
FENTANYL CITRATE BUCCAL TABLET	1	PA; NDS
FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE	1	B/D; NDS
fentanyl citrate pf injection solution prefilled syringe	1	B/D; NDS
FENTANYL CITRATE POWDER	2	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION	2	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION PREFILLED SYRINGE	2	
FENTORA BUCCAL TABLET	3	PA; NDS
FIORICET/CODEINE ORAL CAPSULE	3	NDS
hydrocodone-acetaminophen oral solution	1	NDS
hydrocodone-acetaminophen oral tablet	1	NDS
hydrocodone-ibuprofen oral tablet	1	NDS
HYDROMORPHONE HCL (BULK) SOLUTION	2	
hydromorphone hcl injection solution	1	NDS
HYDROMORPHONE HCL INTRAVENOUS SOLUTION	2	
hydromorphone hcl oral liquid	1	NDS
hydromorphone hcl oral tablet	1	NDS
hydromorphone hcl pf injection solution	1	NDS
HYDROMORPHONE HCL POWDER	2	
hydromorphone hcl rectal suppository	1	NDS
HYDROMORPHONE HCL-NACL INJECTION SOLUTION	2	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
LAZANDA NASAL SOLUTION	3	PA; NDS
LORTAB ORAL ELIXIR	3	NDS
meperidine hcl injection solution	1	NDS
meperidine hcl oral solution	1	NDS
meperidine hcl oral tablet	1	NDS
MEPERIDINE HCL POWDER	2	
MORPHINE SULFATE (BULK) SOLUTION	2	
morphine sulfate (concentrate) oral solution	1	NDS
morphine sulfate (pf) injection solution	1	NDS
morphine sulfate (pf) intravenous solution	1	NDS
morphine sulfate injection solution	1	NDS
MORPHINE SULFATE INTRAVENOUS SOLUTION	1	B/D; NDS
morphine sulfate oral solution	1	NDS
morphine sulfate oral tablet	1	NDS
MORPHINE SULFATE POWDER	2	
morphine sulfate rectal suppository	1	NDS
MORPHINE SULFATE-NACL INJECTION SOLUTION PREFILLED SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION	2	
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
nalbuphine hcl injection solution	1	NDS
NALOCET ORAL TABLET	3	NDS
NUCYNTA ORAL TABLET	3	NDS
OXAYDO ORAL TABLET	3	NDS
oxycodone hcl oral capsule	1	NDS
oxycodone hcl oral concentrate	1	NDS
oxycodone hcl oral solution	1	NDS
oxycodone hcl oral tablet	1	NDS
OXYCODONE HCL POWDER	2	
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION	1	NDS
oxycodone-acetaminophen oral tablet	1	NDS
oxymorphone hcl oral tablet	1	NDS
pentazocine-naloxone hcl oral tablet	1	NDS
PERCOCET ORAL TABLET	3	NDS
PROLATE ORAL SOLUTION	3	NDS
PROLATE ORAL TABLET	3	NDS

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Drug Name	Drug Tier	Requirements /Limits
QDOLO ORAL SOLUTION	3	NDS
remifentanil hcl intravenous solution reconstituted	1	
ROXICODONE ORAL TABLET	3	NDS
ROXYBOND ORAL TABLET ABUSE-DETERRENT	3	PA
SEGLENTIS ORAL TABLET	3	NDS
SUBSYS SUBLINGUAL LIQUID	3	PA; NDS
SUFENTANIL CITRATE (BULK) SOLUTION	2	
SYNAPRYN FUSEPAQ ORAL SUSPENSION RECONSTITUTED	2	
TRAMADOL HCL ORAL SOLUTION	1	NDS
tramadol hcl oral tablet	1	NDS
tramadol-acetaminophen oral tablet	1	NDS
TREZIX ORAL CAPSULE	3	NDS
ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED	2	
ULTRACET ORAL TABLET	3	NDS
ULTRAM ORAL TABLET	3	NDS
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
ANACAINE EXTERNAL OINTMENT	3	

Drug Name	Drug Tier	Requirements /Limits
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE	3	
bupivacaine fisiopharma injection solution	1	
BUPIVACAINE HCL (BULK) SOLUTION	2	
bupivacaine hcl (pf) injection solution	1	
bupivacaine hcl injection solution	1	
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	2	
BUPIVACAINE HCL POWDER	2	
bupivacaine in dextrose intrathecal solution	1	
bupivacaine spinal intrathecal solution	1	
bupivacaine-epinephrine (pf) injection solution	1	
bupivacaine-epinephrine injection solution	1	
CARBOCAINE INJECTION SOLUTION	3	
chloroprocaine hcl (pf) injection solution	1	
CLOROTEKAL INTRATHECAL SOLUTION	3	
COCAINE HCL NASAL SOLUTION	2	
DERMACINRX LIDOGEL EXTERNAL GEL	3	

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Drug Name	Drug Tier	Requirements /Limits
ENOVARX-LIDOCAINE HCL EXTERNAL CREAM	2	
ethyl chloride external aerosol	1	
EXPAREL INJECTION SUSPENSION	2	
GEBAUERS PAIN EASE EXTERNAL AEROSOL	2	
GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	2	
GEN7T EXTERNAL LOTION	3	
GEN7T EXTERNAL PATCH	3	
GEN7T PLUS EXTERNAL LOTION	3	
glydo external prefilled syringe	1	PA
L.E.T. EXTERNAL GEL	2	
L.E.T. EXTERNAL SOLUTION	2	
LETS KIT	2	
lidocaine external ointment	1	PA
lidocaine external patch	1	PA
LIDOCAINE HCL (BUFFERED) INJECTION SOLUTION PREFILLED SYRINGE	2	
lidocaine hcl (pf) injection solution	1	
lidocaine hcl external cream	1	
lidocaine hcl external lotion	1	
lidocaine hcl external solution	1	PA

Drug Name	Drug Tier	Requirements /Limits
lidocaine hcl injection solution	1	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	2	
lidocaine hcl urethral/mucosal external gel	1	PA
lidocaine hcl urethral/mucosal external prefilled syringe	1	PA
LIDOCAINE(BUFFERED)-EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE	2	
LIDOCAINE-EPINEPHRINE (3 ML) INJECTION SOLUTION PREFILLED SYRINGE	2	
lidocaine-epinephrine injection solution	1	
lidocaine-prilocaine external cream	1	PA
LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE	2	
LIDOCAINE-TETRACAINE EXTERNAL CREAM	1	PA
LIDOCAN EXTERNAL PATCH	3	PA
LIDODERM EXTERNAL PATCH	3	PA
LIDO-EPINEPHRINE-TETRACAINE EXTERNAL SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
LIDOMAR INJECTION SOLUTION	3	
lidopin external cream	1	
LIDO-RACEPINEPHRINE-TETRACAINE EXTERNAL GEL	2	
LIDOREX EXTERNAL GEL	3	
LIDORX EXTERNAL GEL	3	
LIDO-SORB EXTERNAL LOTION	3	
LIDOTRAL EXTERNAL CREAM	3	
LIDOTRAL-MENTHOL EXTERNAL LIQUID	2	
LIDOTRAN EXTERNAL CREAM	3	
LIDTOPIC MAX EXTERNAL CREAM	2	
LYDEXA EXTERNAL CREAM	3	
MARCAINE INJECTION SOLUTION	3	
MARCAINE PRESERVATIVE FREE INJECTION SOLUTION	3	
MARCAINE SPINAL INTRATHECAL SOLUTION	3	
MARCAINE/EPINEPHRINE INJECTION SOLUTION	3	
MARCAINE/EPINEPHRINE PF INJECTION SOLUTION	3	
NAROPIN INJECTION SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
NESACAINE INJECTION SOLUTION	3	
NESACAINE-MPF INJECTION SOLUTION	3	
ORABLOC INJECTION SOLUTION CARTRIDGE	3	
PLIAGLIS EXTERNAL CREAM	3	PA
POLOCAINE INJECTION SOLUTION	3	
POLOCAINE-MPF INJECTION SOLUTION	3	
PRAMOX EXTERNAL GEL	3	
premium lidocaine external ointment	1	PA
PREPIV SUPPLY COMBINATION KIT	2	
PROCAINE HCL POWDER	2	
QUTENZA (2 PATCH) EXTERNAL KIT	3	
QUTENZA (4 PATCH) EXTERNAL KIT	3	
QUTENZA EXTERNAL KIT	3	
ROPIVACAINE HCL EPIDURAL SOLUTION	2	
ropivacaine hcl injection solution	1	
ROPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE	2	
ROPIVACAINE HCL-NACL INJECTION SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
SENSORCAINE INJECTION SOLUTION	3	
SENSORCAINE/EPINEPHRINE INJECTION SOLUTION	3	
SENSORCAINE-MPF INJECTION SOLUTION	3	
SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	3	
STERILE TOPICAL L.E.T. GEL EXTERNAL GEL	2	
SYNERA EXTERNAL PATCH	3	
tetracaine hcl injection solution	1	
TOPICAL L.E.T. EXTERNAL GEL	2	
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	2	
XYLOCAINE INJECTION SOLUTION	3	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION	3	
XYLOCAINE-MPF INJECTION SOLUTION	3	
XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	3	
ZIONODIL 100 EXTERNAL LOTION	3	
ZIONODIL EXTERNAL LOTION	3	

Drug Name	Drug Tier	Requirements /Limits
ZTLIDO EXTERNAL PATCH	3	PA
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
acamprosate calcium oral tablet delayed release	1	
disulfiram oral tablet	1	
naltrexone hcl oral tablet	1	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
<b>Opioid Dependence</b>		
BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	NDS
BRIXADI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	NDS
BUPRENEX INJECTION SOLUTION	3	
buprenorphine hcl injection solution	1	
buprenorphine hcl sublingual tablet sublingual	1	
buprenorphine hcl-naloxone hcl sublingual film	1	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	

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Drug Name	Drug Tier	Requirements /Limits
LUCEMYRA ORAL TABLET	3	
methadone hcl oral tablet soluble	1	
methadose oral tablet soluble	1	
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
SUBOXONE SUBLINGUAL FILM	2	
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL	3	
<b>Opioid Reversal Agents</b>		
KLOXXADO NASAL LIQUID	3	
NALMEFENE HCL INJECTION SOLUTION	2	
naloxone hcl injection solution	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal liquid	1	
NARCAN NASAL LIQUID	2	
OPVEE NASAL SOLUTION	3	PA
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE	3	
<b>Smoking Cessation Agents</b>		
APO-VARENICLINE ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
bupropion hcl er (smoking det) oral tablet extended release 12 hour	1	PV
goodsense nicotine mouth/throat lozenge	2	PV; QL (20 EA per 1 day)
habitrol transdermal patch 24 hour	2	PV; QL (1 EA per 1 day)
NICORETTE MOUTH/THROAT GUM	2	PV; QL (24 EA per 1 day)
NICORETTE MOUTH/THROAT LOZENGE	2	PV; QL (20 EA per 1 day)
nicotine mini mouth/throat lozenge	1	PV; QL (20 EA per 1 day)
nicotine polacrilex mini mouth/throat lozenge	2	PV; QL (20 EA per 1 day)
nicotine polacrilex mouth/throat gum	1	PV; QL (24 EA per 1 day)
nicotine polacrilex mouth/throat lozenge	1	PV; QL (20 EA per 1 day)
nicotine step 1 transdermal patch 24 hour	2	PV; QL (1 EA per 1 day)
nicotine step 2 transdermal patch 24 hour	2	PV; QL (1 EA per 1 day)
nicotine step 3 transdermal patch 24 hour	2	PV; QL (1 EA per 1 day)
nicotine transdermal kit	2	PV; QL (1 EA per 1 day)
nicotine transdermal patch 24 hour	1	PV; QL (1 EA per 1 day)
NICOTROL INHALATION INHALER	3	PV
NICOTROL NS NASAL SOLUTION	2	PV

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Drug Name	Drug Tier	Requirements /Limits
varenicline tartrate (starter) oral tablet therapy pack	1	PV
varenicline tartrate oral tablet	1	PV
varenicline tartrate(continue) oral tablet	1	PV
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
amikacin sulfate injection solution	1	
ARIKAYCE INHALATION SUSPENSION	3	PA
gentamicin in saline intravenous solution	1	
gentamicin sulfate external cream	1	
gentamicin sulfate external ointment	1	
gentamicin sulfate injection solution	1	
HUMATIN ORAL CAPSULE	3	
neomycin sulfate oral tablet	1	
neomycin-polymyxin b gu irrigation solution	1	
streptomycin sulfate intramuscular solution reconstituted	1	
tobramycin sulfate injection solution	1	
tobramycin sulfate injection solution reconstituted	1	
TOBRAMYCIN SULFATE POWDER	2	
ZEMDRI INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
<b>Antibacterials, Other</b>		
AEMCOLO ORAL TABLET DELAYED RELEASE	3	
ALTABAX EXTERNAL OINTMENT	3	
AMZEEQ EXTERNAL FOAM	3	
AZACTAM INJECTION SOLUTION RECONSTITUTED	3	
aztreonam injection solution reconstituted	1	
bacitracin intramuscular solution reconstituted	1	
benzalkonium chloride external solution	1	
chloramphenicol sod succinate intravenous solution reconstituted	1	
CLEOCIN ORAL CAPSULE	3	
CLEOCIN ORAL SOLUTION RECONSTITUTED	3	
CLEOCIN PHOSPHATE INJECTION SOLUTION	3	
CLEOCIN VAGINAL CREAM	3	
CLEOCIN VAGINAL SUPPOSITORY	3	
clindacin etz external swab	1	
clindacin-p external swab	1	
clindamycin hcl oral capsule	1	
clindamycin palmitate hcl oral solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
clindamycin phosphate external swab	1	
clindamycin phosphate in d5w intravenous solution	1	
CLINDAMYCIN PHOSPHATE IN NAACL INTRAVENOUS SOLUTION	3	
clindamycin phosphate injection solution	1	
clindamycin phosphate vaginal cream	1	
colistimethate sodium (cba) injection solution reconstituted	1	
COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED	3	
CUBICIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED	3	
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	3	
daptomycin intravenous solution reconstituted	1	
DAPTOMYCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	1	
ESSENTRA WIPES 9X9" SHEET	2	

Drug Name	Drug Tier	Requirements /Limits
FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED	2	
FIRVANQ ORAL SOLUTION RECONSTITUTED	3	
FLAGYL ORAL CAPSULE	3	
fosfomycin tromethamine oral packet	1	
HIPREX ORAL TABLET	3	
hydrogen peroxide solution	1	
IMPAVIDO ORAL CAPSULE	3	
KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED	3	
LIKMEZ ORAL SUSPENSION	3	
LINCOCIN INJECTION SOLUTION	3	
lincomycin hcl injection solution	1	
linezolid in sodium chloride intravenous solution	1	
linezolid intravenous solution	1	
linezolid oral suspension reconstituted	1	
linezolid oral tablet	1	
LUGOLS STRONG IODINE EXTERNAL SOLUTION	2	
MACROBID ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
MACRODANTIN ORAL CAPSULE	3	
methenamine hippurate oral tablet	1	
methenamine mandelate oral tablet	1	
METRONIDAZOLE BENZO+SYRSPEND ORAL SUSPENSION RECONSTITUTED	2	
metronidazole intravenous solution	1	
metronidazole oral capsule	1	
metronidazole oral tablet	1	
metronidazole vaginal gel	1	
MONUROL ORAL PACKET	3	
nitrofurantoin macrocrystal oral capsule	1	
nitrofurantoin monohyd macro oral capsule	1	
nitrofurantoin oral suspension	1	
NUVESSA VAGINAL GEL	3	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	3	
PHENOL CRYSTALS	2	
PHENOL LIQUID	2	
polymyxin b sulfate injection solution reconstituted	1	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
SIVEXTRO ORAL TABLET	3	
SOLOSEC ORAL PACKET	3	
SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED	3	
THIMEROSAL POWDER	2	
tigecycline intravenous solution reconstituted	1	
tinidazole oral tablet	1	
trimethoprim oral tablet	1	
TRIMETHOPRIM POWDER	2	
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	3	
VANCOGIN ORAL CAPSULE	3	
vancomycin hcl in dextrose intravenous solution	1	
vancomycin hcl in nacl intravenous solution	1	
vancomycin hcl intravenous solution	1	
vancomycin hcl intravenous solution reconstituted	1	
vancomycin hcl oral capsule	1	
vancomycin hcl oral solution reconstituted	1	
VANCOMYCIN+SYRS PEND SF ORAL SUSPENSION	2	
VANDAZOLE VAGINAL GEL	3	

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Drug Name	Drug Tier	Requirements /Limits
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED	3	
VOQUEZNA DUAL PAK ORAL THERAPY PAK	3	
VOQUEZNA TRIPLE PAK ORAL THERAPY PAK	3	
XACDURO INTRAVENOUS SOLUTION RECONSTITUTED	3	
XACIATO VAGINAL GEL	3	
XENLETA INTRAVENOUS SOLUTION	3	
XENLETA ORAL TABLET	3	
ZYVOX INTRAVENOUS SOLUTION	3	
ZYVOX ORAL SUSPENSION RECONSTITUTED	3	
ZYVOX ORAL TABLET	3	
<b>Beta-lactam, Cephalosporins</b>		
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	3	
cefaclor er oral tablet extended release 12 hour	1	
cefaclor oral capsule	1	
cefaclor oral suspension reconstituted	1	
cefadroxil oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
cefadroxil oral suspension reconstituted	1	
cefadroxil oral tablet	1	
CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	2	
CEFAZOLIN SODIUM INJECTION SOLUTION PREFILLED SYRINGE	2	
cefazolin sodium injection solution reconstituted	1	
CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
cefazolin sodium intravenous solution reconstituted	1	
cefazolin sodium-dextrose intravenous solution	1	
cefazolin sodium-dextrose intravenous solution reconstituted	1	
cefdinir oral capsule	1	
cefdinir oral suspension reconstituted	1	
cefepime hcl injection solution reconstituted	1	
cefepime hcl intravenous solution	1	
cefepime hcl intravenous solution reconstituted	1	
cefepime-dextrose intravenous solution reconstituted	1	
cefixime oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
cefixime oral suspension reconstituted	1	
CEFOTAN INJECTION SOLUTION RECONSTITUTED	3	
CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED	1	
cefotetan disodium injection solution reconstituted	1	
cefotetan disodium-dextrose intravenous solution reconstituted	1	
cefoxitin sodium intravenous solution reconstituted	1	
CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED	3	
cefpodoxime proxetil oral suspension reconstituted	1	
cefpodoxime proxetil oral tablet	1	
cefprozil oral suspension reconstituted	1	
cefprozil oral tablet	1	
ceftazidime and dextrose intravenous solution reconstituted	1	
ceftazidime injection solution reconstituted	1	
ceftazidime intravenous solution reconstituted	1	
ceftriaxone sodium in dextrose intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
ceftriaxone sodium injection solution reconstituted	1	
ceftriaxone sodium intravenous solution reconstituted	1	
ceftriaxone sodium-dextrose intravenous solution reconstituted	1	
cefuroxime axetil oral tablet	1	
cefuroxime sodium injection solution reconstituted	1	
cefuroxime sodium intravenous solution reconstituted	1	
cephalexin oral capsule	1	
cephalexin oral suspension reconstituted	1	
cephalexin oral tablet	1	
FETROJA INTRAVENOUS SOLUTION RECONSTITUTED	3	
FORTAZ INJECTION SOLUTION RECONSTITUTED	3	
FORTAZ INTRAVENOUS SOLUTION RECONSTITUTED	3	
SUPRAX ORAL CAPSULE	3	
SUPRAX ORAL SUSPENSION RECONSTITUTED	3	
tazicef injection solution reconstituted	1	
TAZICEF INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
tazicef intravenous solution reconstituted	1	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	3	
<b>Beta-lactam, Penicillins</b>		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet chewable	1	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	1	
amoxicillin-pot clavulanate oral suspension reconstituted	1	
amoxicillin-pot clavulanate oral tablet	1	
amoxicillin-pot clavulanate oral tablet chewable	1	
ampicillin oral capsule	1	
ampicillin sodium injection solution reconstituted	1	
ampicillin sodium intravenous solution reconstituted	1	
ampicillin-sulbactam sodium injection solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
ampicillin-sulbactam sodium intravenous solution reconstituted	1	
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	3	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED	3	
AUGMENTIN ORAL TABLET	3	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	3	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	3	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
dicloxacillin sodium oral capsule	1	
NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	1	
nafcillin sodium injection solution reconstituted	1	
nafcillin sodium intravenous solution reconstituted	1	
OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	1	
oxacillin sodium injection solution reconstituted	1	
oxacillin sodium intravenous solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION	3	
penicillin g potassium injection solution reconstituted	1	
penicillin g procaine intramuscular suspension	1	
penicillin g sodium injection solution reconstituted	1	
penicillin v potassium oral solution reconstituted	1	
penicillin v potassium oral tablet	1	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED	3	
piperacillin sod-tazobactam so intravenous solution reconstituted	1	
UNASYN INJECTION SOLUTION RECONSTITUTED	3	
UNASYN INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZOSYN INTRAVENOUS SOLUTION	3	
<b>Carbapenems</b>		
ertapenem sodium injection solution reconstituted	1	
imipenem-cilastatin intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
INVANZ INJECTION SOLUTION RECONSTITUTED	3	
meropenem intravenous solution reconstituted	1	
MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	1	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED	3	
RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED	3	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	3	
<b>Macrolides</b>		
azithromycin intravenous solution reconstituted	1	
azithromycin oral packet	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet	1	
clarithromycin er oral tablet extended release 24 hour	1	
clarithromycin oral suspension reconstituted	1	
clarithromycin oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
DIFICID ORAL TABLET	3	
E.E.S. 400 ORAL TABLET	3	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	3	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	3	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	3	
ERY-TAB ORAL TABLET DELAYED RELEASE	3	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	3	
ERYTHROCIN STEARATE ORAL TABLET	3	
erythromycin base oral capsule delayed release particles	1	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	1	
ERYTHROMYCIN BASE POWDER	2	
erythromycin ethylsuccinate oral suspension reconstituted	1	
erythromycin ethylsuccinate oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
erythromycin lactobionate intravenous solution reconstituted	1	
erythromycin oral tablet delayed release	1	
ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZITHROMAX ORAL PACKET	3	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	3	
ZITHROMAX ORAL TABLET	3	
ZITHROMAX TRI-PAK ORAL TABLET	3	
ZITHROMAX Z-PAK ORAL TABLET	3	
<b>Quinolones</b>		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	3	
BAXDELA ORAL TABLET	3	
CIPRO ORAL SUSPENSION RECONSTITUTED	3	
CIPRO ORAL TABLET	3	
ciprofloxacin hcl oral tablet	1	
ciprofloxacin in d5w intravenous solution	1	
ciprofloxacin oral suspension reconstituted	1	
levofloxacin in d5w intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
levofloxacin intravenous solution	1	
levofloxacin oral solution	1	
levofloxacin oral tablet	1	
moxifloxacin hcl in nacl intravenous solution	1	
MOXIFLOXACIN HCL INTRAVENOUS SOLUTION	3	
moxifloxacin hcl oral tablet	1	
ofloxacin oral tablet	1	
<b>Sulfonamides</b>		
BACTRIM DS ORAL TABLET	3	
BACTRIM ORAL TABLET	3	
KLARON EXTERNAL LOTION	3	
sulfacetamide sodium (acne) external lotion	1	
SULFACETAMIDE SODIUM POWDER	2	
sulfadiazine oral tablet	1	
SULFADIAZINE SODIUM POWDER	2	
SULFAMETHOXAZOLE POWDER	2	
sulfamethoxazole-trimethoprim intravenous solution	1	
sulfamethoxazole-trimethoprim oral suspension	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric oral suspension	1	

Drug Name	Drug Tier	Requirements /Limits
<b>Tetracyclines</b>		
ACTICLATE ORAL TABLET	3	
avidoxy oral tablet	1	
coremino oral tablet extended release 24 hour	1	
demeclocycline hcl oral tablet	1	
DORYX MPC ORAL TABLET DELAYED RELEASE	3	
DORYX ORAL TABLET DELAYED RELEASE	3	
doxy 100 intravenous solution reconstituted	1	
doxycycline hyclate intravenous solution reconstituted	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
doxycycline hyclate oral tablet delayed release	1	
DOXYCYCLINE HYCLATE POWDER	2	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
doxycycline oral capsule delayed release	1	
LYMEPAK ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
minocycline hcl er oral tablet extended release 24 hour	1	
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	1	
MINOLIRA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
mondoxyne nl oral capsule	1	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	3	
NUZYRA ORAL TABLET	3	
ORACEA ORAL CAPSULE DELAYED RELEASE	3	
SEYSARA ORAL TABLET	3	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
TARGADOX ORAL TABLET	3	
tetracycline hcl oral capsule	1	
VIBRAMYCIN ORAL CAPSULE	3	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
XERAVA INTRAVENOUS SOLUTION RECONSTITUTED	3	
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		
BRIVIACT INTRAVENOUS SOLUTION	3	
BRIVIACT ORAL SOLUTION	3	
BRIVIACT ORAL TABLET	3	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
EPIDIOLEX ORAL SOLUTION	3	PA
EPRONTIA ORAL SOLUTION	3	
felbamate oral suspension	1	
felbamate oral tablet	1	
FELBATOL ORAL SUSPENSION	3	
FELBATOL ORAL TABLET	3	
FINTEPLA ORAL SOLUTION	3	PA
FYCOMPA ORAL SUSPENSION	3	
FYCOMPA ORAL TABLET	3	
KEPPRA INTRAVENOUS SOLUTION	3	
KEPPRA ORAL SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
KEPPRA ORAL TABLET	3	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
LAMICTAL ODT ORAL KIT	3	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	3	
LAMICTAL ORAL TABLET	3	
LAMICTAL ORAL TABLET CHEWABLE	3	
LAMICTAL STARTER ORAL KIT	3	
LAMICTAL XR ORAL KIT	3	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
lamotrigine er oral tablet extended release 24 hour	1	
lamotrigine oral kit	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
lamotrigine starter kit-blue oral kit	1	
lamotrigine starter kit-green oral kit	1	
lamotrigine starter kit-orange oral kit	1	
levetiracetam er oral tablet extended release 24 hour	1	
levetiracetam in nacl intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
levetiracetam intravenous solution	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
NAYZILAM NASAL SOLUTION	3	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	3	
roweepra oral tablet	1	
SEZABY INTRAVENOUS SOLUTION RECONSTITUTED	3	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	3	
subvenite oral tablet	1	
subvenite starter kit-blue oral kit	1	
subvenite starter kit-green oral kit	1	
subvenite starter kit-orange oral kit	1	
TOPAMAX ORAL TABLET	3	
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE	3	
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	

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Drug Name	Drug Tier	Requirements /Limits
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
valproate sodium intravenous solution	1	
valproic acid oral capsule	1	
valproic acid oral solution	1	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	
XCOPRI ORAL TABLET	3	
XCOPRI ORAL TABLET THERAPY PACK	3	
<b>Calcium Channel Modifying Agents</b>		
CELONTIN ORAL CAPSULE	3	
ethosuximide oral capsule	1	
ethosuximide oral solution	1	
methsuximide oral capsule	1	
ZARONTIN ORAL CAPSULE	3	
ZARONTIN ORAL SOLUTION	3	
<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
clobazam oral suspension	1	
clobazam oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
clonazepam oral tablet	1	
clonazepam oral tablet dispersible	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
DEPAKOTE ORAL TABLET DELAYED RELEASE	3	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	3	
DIACOMIT ORAL CAPSULE	3	PA
DIACOMIT ORAL PACKET	3	PA
DIASTAT ACUDIAL RECTAL GEL	3	
DIASTAT PEDIATRIC RECTAL GEL	3	
diazepam rectal gel	1	
divalproex sodium er oral tablet extended release 24 hour	1	
divalproex sodium oral capsule delayed release sprinkle	1	
divalproex sodium oral tablet delayed release	1	
FANATREX FUSEPAQ ORAL SUSPENSION	2	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet	1	
GABITRIL ORAL TABLET	3	
KLONOPIN ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
LYRICA ORAL CAPSULE	3	
LYRICA ORAL SOLUTION	3	
MYSOLINE ORAL TABLET	3	
NEURONTIN ORAL CAPSULE	3	
NEURONTIN ORAL SOLUTION	3	
NEURONTIN ORAL TABLET	3	
ONFI ORAL SUSPENSION	3	
ONFI ORAL TABLET	3	
phenobarbital oral elixir	1	
phenobarbital oral tablet	1	
PHENOBARBITAL POWDER	2	
phenobarbital sodium injection solution	1	
pregabalin oral capsule	1	
pregabalin oral solution	1	
primidone oral tablet	1	
SABRIL ORAL PACKET	3	PA
SABRIL ORAL TABLET	3	PA
SYMPAZAN ORAL FILM	3	
tiagabine hcl oral tablet	1	
VALTOCO 10 MG DOSE NASAL LIQUID	3	
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	3	
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	3	

Drug Name	Drug Tier	Requirements /Limits
VALTOCO 5 MG DOSE NASAL LIQUID	3	
vigabatrin oral packet	1	PA
vigabatrin oral tablet	1	PA
vigadrone oral packet	1	PA
vigadrone oral tablet	1	PA
<b>Sodium Channel Agents</b>		
APTiom ORAL TABLET	3	
BANZEL ORAL SUSPENSION	3	
BANZEL ORAL TABLET	3	
carbamazepine er oral capsule extended release 12 hour	1	
carbamazepine er oral tablet extended release 12 hour	1	
carbamazepine oral suspension	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
CEREBYX INJECTION SOLUTION	3	
DILANTIN INFATABS ORAL TABLET CHEWABLE	3	
DILANTIN ORAL CAPSULE	3	
DILANTIN ORAL SUSPENSION	3	
epitol oral tablet	1	
fosphenytoin sodium injection solution	1	

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Drug Name	Drug Tier	Requirements /Limits
lacosamide intravenous solution	1	
lacosamide oral solution	1	
lacosamide oral tablet	1	
MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
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	1	
rufinamide oral suspension	1	
rufinamide oral tablet	1	
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
TRILEPTAL ORAL SUSPENSION	3	
TRILEPTAL ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
VIMPAT INTRAVENOUS SOLUTION	3	
VIMPAT ORAL SOLUTION	3	
VIMPAT ORAL TABLET	3	
ZONEGRAN ORAL CAPSULE	3	
ZONISADE ORAL SUSPENSION	3	
zonisamide oral capsule	1	
<b>Antidementia Agents</b>		
<b>Antidementia Agents, Other</b>		
ergoloid mesylates oral tablet	1	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	3	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
<b>Cholinesterase Inhibitors</b>		
ADLARITY TRANSDERMAL PATCH WEEKLY	3	
ARICEPT ORAL TABLET	3	
donepezil hcl oral tablet	1	
donepezil hcl oral tablet dispersible	1	
EXELON TRANSDERMAL PATCH 24 HOUR	3	
galantamine hydrobromide er oral capsule extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
galantamine hydrobromide oral solution	1	
galantamine hydrobromide oral tablet	1	
RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
rivastigmine tartrate oral capsule	1	
rivastigmine transdermal patch 24 hour	1	
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
memantine hcl er oral capsule extended release 24 hour	1	
memantine hcl oral solution	1	
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET	3	
NAMENDA TITRATION PAK ORAL TABLET	3	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
<b>Antidepressants</b>		
<b>Antidepressants, Other</b>		
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
AUVELITY ORAL TABLET EXTENDED RELEASE	3	

Drug Name	Drug Tier	Requirements /Limits
bupropion hcl er (sr) oral tablet extended release 12 hour	1	
bupropion hcl er (xl) oral tablet extended release 24 hour	1	
bupropion hcl oral tablet	1	
chlordiazepoxide-amitriptyline oral tablet	1	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
mirtazapine oral tablet	1	
mirtazapine oral tablet dispersible	1	
olanzapine-fluoxetine hcl oral capsule	1	
perphenazine-amitriptyline oral tablet	1	
quetiapine fumarate oral tablet	1	
REMERON ORAL TABLET	3	
REMERON SOLTAB ORAL TABLET DISPERSIBLE	3	
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	3	PA
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	3	PA
SYMBYAX ORAL CAPSULE	3	
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
ZULRESSO INTRAVENOUS SOLUTION	2	
<b>Monoamine Oxidase Inhibitors</b>		
EMSAM TRANSDERMAL PATCH 24 HOUR	3	
MARPLAN ORAL TABLET	3	
NARDIL ORAL TABLET	3	
PARNATE ORAL TABLET	3	
phenelzine sulfate oral tablet	1	
tranylcypromine sulfate oral tablet	1	
<b>SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)</b>		
BRISDELLE ORAL CAPSULE	3	
CELEXA ORAL TABLET	3	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	1	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES	3	

Drug Name	Drug Tier	Requirements /Limits
DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	1	
desvenlafaxine succinate er oral tablet extended release 24 hour	1	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE	3	
duloxetine hcl oral capsule delayed release particles	1	
EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	3	
fluoxetine hcl (pmdd) oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate er oral capsule extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
fluvoxamine maleate oral tablet	1	
LEXAPRO ORAL TABLET	3	
nefazodone hcl oral tablet	1	
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	
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
PAXIL ORAL SUSPENSION	3	
PAXIL ORAL TABLET	3	
PEXEVA ORAL TABLET	3	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
PROZAC ORAL CAPSULE	3	
SERTRALINE HCL ORAL CAPSULE	1	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
trazodone hcl oral tablet	1	
TRINTELLIX ORAL TABLET	3	
VENLAFAXINE BESYLATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	1	

Drug Name	Drug Tier	Requirements /Limits
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	1	
venlafaxine hcl oral tablet	1	
VIIBRYD ORAL TABLET	3	
VIIBRYD STARTER PACK ORAL KIT	3	
vilazodone hcl oral tablet	1	
ZOLOFT ORAL CONCENTRATE	3	
ZOLOFT ORAL TABLET	3	
<b>Tricyclics</b>		
amitriptyline hcl oral tablet	1	
amoxapine oral tablet	1	
ANAFRANIL ORAL CAPSULE	3	
clomipramine hcl oral capsule	1	
desipramine hcl oral tablet	1	
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
imipramine hcl oral tablet	1	
IMIPRAMINE HCL POWDER	2	
imipramine pamoate oral capsule	1	
NORPRAMIN ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
nortriptyline hcl oral capsule	1	
nortriptyline hcl oral solution	1	
NORTRIPTYLINE HCL POWDER	2	
PAMELOR ORAL CAPSULE	3	
protriptyline hcl oral tablet	1	
trimipramine maleate oral capsule	1	
<b>Antiemetics</b>		
<b>Antiemetics, Other</b>		
ANTIVERT ORAL TABLET	3	
ANTIVERT ORAL TABLET CHEWABLE	3	
BARHEMSYS INTRAVENOUS SOLUTION	3	
BONJESTA ORAL TABLET EXTENDED RELEASE	3	
compro rectal suppository	1	
DICLEGIS ORAL TABLET DELAYED RELEASE	3	
dimenhydrinate injection solution	1	
doxylamine-pyridoxine oral tablet delayed release	1	
droperidol injection solution	1	
meclizine hcl oral tablet	1	
MECLIZINE HCL POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
PHENERGAN INJECTION SOLUTION	3	
prochlorperazine edisylate injection solution	1	
prochlorperazine maleate oral tablet	1	
PROCHLORPERAZINE MALEATE POWDER	2	
prochlorperazine rectal suppository	1	
promethazine hcl injection solution	1	
promethazine hcl oral solution	1	
promethazine hcl oral syrup	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal suppository	1	
promethegan rectal suppository	1	
scopolamine transdermal patch 72 hour	1	
TIGAN INTRAMUSCULAR SOLUTION	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	3	
trimethobenzamide hcl oral capsule	1	B/D
<b>Emetogenic Therapy Adjuncts</b>		
AKYNZEO (READY-TO-USE) INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
AKYNZEO (TO-BE-DILUTED) INTRAVENOUS SOLUTION	3	
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	3	
AKYNZEO ORAL CAPSULE	3	B/D
ANZEMET ORAL TABLET	3	B/D
APONVIE INTRAVENOUS EMULSION	3	
aprepitant oral	1	B/D
aprepitant oral capsule	1	B/D
CINVANTI INTRAVENOUS EMULSION	3	
dronabinol oral capsule	1	PA
EMEND INTRAVENOUS SOLUTION RECONSTITUTED	3	
EMEND ORAL CAPSULE	3	B/D
EMEND ORAL SUSPENSION RECONSTITUTED	3	B/D
EMEND TRI-PACK ORAL CAPSULE	3	B/D
fosaprepitant dimeglumine intravenous solution reconstituted	1	
granisetron hcl intravenous solution	1	
granisetron hcl oral tablet	1	B/D
MARINOL ORAL CAPSULE	3	PA

Drug Name	Drug Tier	Requirements /Limits
ondansetron hcl injection solution	1	
ondansetron hcl injection solution prefilled syringe	1	
ondansetron hcl oral solution	1	B/D
ondansetron hcl oral tablet	1	B/D
ondansetron oral tablet dispersible	1	B/D
palonosetron hcl intravenous solution	1	
palonosetron hcl intravenous solution prefilled syringe	1	
SANCUSO TRANSDERMAL PATCH	3	
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	3	
SYNDROS ORAL SOLUTION	3	PA
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	3	B/D
ZUPLENZ ORAL FILM	3	B/D
<b>Antifungals</b>		
ABELCET INTRAVENOUS SUSPENSION	3	B/D
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	3	B/D
amphotericin b intravenous solution reconstituted	1	B/D
ANCOBON ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	3	
casprofungin acetate intravenous solution reconstituted	1	
clotrimazole external cream	1	
clotrimazole external solution	1	
CRESEMBA ORAL CAPSULE	3	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3	
DIFLUCAN ORAL TABLET	3	
econazole nitrate external cream	1	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	3	
ERTACZO EXTERNAL CREAM	3	
EXELDERM EXTERNAL CREAM	3	
EXELDERM EXTERNAL SOLUTION	3	
EXTINA EXTERNAL FOAM	3	
fluconazole in sodium chloride intravenous solution	1	
fluconazole oral suspension reconstituted	1	
fluconazole oral tablet	1	
flucytosine oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
griseofulvin microsize oral suspension	1	
griseofulvin microsize oral tablet	1	
griseofulvin ultramicrosize oral tablet	1	
GYNAZOLE-1 VAGINAL CREAM	3	
itraconazole oral capsule	1	
itraconazole oral solution	1	
JUBLIA EXTERNAL SOLUTION	3	
KERYDIN EXTERNAL SOLUTION	3	
ketoconazole external cream	1	
ketoconazole external foam	1	
ketoconazole external shampoo	1	
ketoconazole oral tablet	1	
LULICONAZOLE EXTERNAL CREAM	3	
LUZU EXTERNAL CREAM	3	
miconazole 3 vaginal suppository	1	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	3	
naftifine hcl external cream	1	
NAFTIN EXTERNAL GEL	3	
NOXAFIL ORAL SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
NOXAFIL ORAL TABLET DELAYED RELEASE	3	
nyamyc external powder	1	
nystatin external cream	1	
nystatin external ointment	1	
nystatin external powder	1	
nystatin mouth/throat suspension	1	
nystatin oral tablet	1	
nystop external powder	1	
ORAVIG BUCCAL TABLET	3	
oxiconazole nitrate external cream	1	
OXISTAT EXTERNAL CREAM	3	
OXISTAT EXTERNAL LOTION	3	
posaconazole oral tablet delayed release	1	
SPORANOX ORAL CAPSULE	3	
SPORANOX ORAL SOLUTION	3	
terbinafine hcl oral tablet	1	
terconazole vaginal cream	1	
terconazole vaginal suppository	1	
TOLSURA ORAL CAPSULE	3	
VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
VFEND ORAL SUSPENSION RECONSTITUTED	3	
VFEND ORAL TABLET	3	
voriconazole intravenous solution reconstituted	1	PA
voriconazole oral suspension reconstituted	1	
voriconazole oral tablet	1	
<b>Non-FRF</b>		
amphotericin b liposome intravenous suspension reconstituted	1	B/D
BREXAFEMME ORAL TABLET	3	
CICLOPIROX OLAMINE POWDER	2	
CLOTRIMAZOLE CRYSTALS	2	
clotrimazole mouth/throat troche	1	
CLOTRIMAZOLE POWDER	2	
CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED	3	
CRESEMBA ORAL CAPSULE	3	
ECOZA EXTERNAL FOAM	3	
EXODERM EXTERNAL LOTION	3	
fluconazole in sodium chloride intravenous solution	1	
ketodan external foam	1	

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Drug Name	Drug Tier	Requirements /Limits
micafungin sodium intravenous solution reconstituted	1	
MICONAZOLE NITRATE POWDER	2	
MICONAZOLE POWDER	2	
MICONAZOLE-ZINC OXIDE-PETROLAT EXTERNAL OINTMENT	3	
naftifine hcl external gel	1	
NOXAFIL INTRAVENOUS SOLUTION	3	
NOXAFIL ORAL PACKET	3	
posaconazole intravenous solution	1	
posaconazole oral suspension	1	
REZZAYO INTRAVENOUS SOLUTION RECONSTITUTED	3	
SPORANOX PULSEPAK ORAL CAPSULE	3	
SULCONAZOLE NITRATE EXTERNAL CREAM	3	
SULCONAZOLE NITRATE EXTERNAL SOLUTION	1	
tavaborole external solution	1	
TOLNAFTATE POWDER	2	
VIVJOA ORAL CAPSULE THERAPY PACK	3	

Drug Name	Drug Tier	Requirements /Limits
VUSION EXTERNAL OINTMENT	3	
XOLEGEL COREPAK EXTERNAL KIT	3	
XOLEGEL DUO/HEAD & SHOULDERS EXTERNAL KIT	3	
XOLEGEL DUO/XOLEX EXTERNAL KIT	3	
XOLEGEL EXTERNAL GEL	3	
<b>Antigout Agents</b>		
allopurinol oral tablet	1	
COLCHICINE ORAL CAPSULE	1	
colchicine oral tablet	1	
colchicine-probenecid oral tablet	1	
COLCRYS ORAL TABLET	3	
febuxostat oral tablet	1	
MITIGARE ORAL CAPSULE	3	
probenecid oral tablet	1	
ULORIC ORAL TABLET	3	
ZYLOPRIM ORAL TABLET	3	
<b>Non-FRF</b>		
ALLOPURINOL ORAL TABLET	3	
allopurinol sodium intravenous solution reconstituted	1	
ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
KRYSTEXXA INTRAVENOUS SOLUTION	3	PA
<b>Antimigraine Agents</b>		
<b>Ergot Alkaloids</b>		
CAFERGOT ORAL TABLET	3	
D.H.E. 45 INJECTION SOLUTION	3	
DIHYDROERGOTAMINE MESYLATE CRYSTALS	2	
dihydroergotamine mesylate injection solution	1	
dihydroergotamine mesylate nasal solution	1	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	3	
ergotamine-caffeine oral tablet	1	
MIGERGOT RECTAL SUPPOSITORY	3	
MIGRANAL NASAL SOLUTION	3	
TRUDHESA NASAL AEROSOL SOLUTION	3	
<b>Prophylactic</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Requirements /Limits
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
NURTEC ORAL TABLET DISPERSIBLE	3	
QULIPTA ORAL TABLET	3	
timolol maleate oral tablet	1	
UBRELVY ORAL TABLET	3	
VYEPTI INTRAVENOUS SOLUTION	3	
ZAVZPRET NASAL SOLUTION	3	PA
<b>Serotonin (5-HT) Receptor Agonist</b>		
almotriptan malate oral tablet	1	
AMERGE ORAL TABLET	3	
eletriptan hydrobromide oral tablet	1	
FROVA ORAL TABLET	3	
frovatriptan succinate oral tablet	1	
IMITREX NASAL SOLUTION	3	
IMITREX ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
MAXALT ORAL TABLET	3	
MAXALT-MLT ORAL TABLET DISPERSIBLE	3	
naratriptan hcl oral tablet	1	
ONZETRA XSAIL NASAL EXHALER POWDER	3	
RELPAZ ORAL TABLET	3	
REYVOW ORAL TABLET	3	
rizatriptan benzoate oral tablet	1	
rizatriptan benzoate oral tablet dispersible	1	
sumatriptan nasal solution	1	
sumatriptan succinate oral tablet	1	
sumatriptan succinate refill subcutaneous solution cartridge	1	
sumatriptan succinate subcutaneous solution	1	
sumatriptan succinate subcutaneous solution auto-injector	1	
sumatriptan-naproxen sodium oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
TOSYMRA NASAL SOLUTION	3	
TREXIMET ORAL TABLET	3	
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
zolmitriptan nasal solution	1	
zolmitriptan oral tablet	1	
zolmitriptan oral tablet dispersible	1	
ZOMIG NASAL SOLUTION	3	
ZOMIG ORAL TABLET	3	
<b>Antimyasthenic Agents</b>		
<b>Parasympathomimetics</b>		
BLOXIVERZ INTRAVENOUS SOLUTION	2	
MESTINON ORAL SOLUTION	3	
MESTINON ORAL TABLET	3	
MESTINON ORAL TABLET EXTENDED RELEASE	3	
neostigmine methylsulfate intravenous solution	1	
neostigmine methylsulfate intravenous solution prefilled syringe	1	
pyridostigmine bromide oral tablet extended release	1	

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Drug Name	Drug Tier	Requirements /Limits
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	
REGONOL INTRAVENOUS SOLUTION	3	
<b>Antimycobacterials</b>		
<b>Antimycobacterials, Other</b>		
dapsone oral tablet	1	
MYCOBUTIN ORAL CAPSULE	3	
PRETOMANID ORAL TABLET	3	
rifabutin oral capsule	1	
ZILXI EXTERNAL FOAM	3	
<b>Antituberculars</b>		
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED	3	
cycloserine oral capsule	1	
ethambutol hcl oral tablet	1	
isoniazid injection solution	1	
isoniazid oral syrup	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET	3	
PASER ORAL PACKET	3	
PRIFTIN ORAL TABLET	3	
pyrazinamide oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
rifampin intravenous solution reconstituted	1	
rifampin oral capsule	1	
RIFAMPIN+SYRSPEN D SF ORAL SUSPENSION	2	
SIRTURO ORAL TABLET	3	
TRECTOR ORAL TABLET	3	
<b>Antineoplastics</b>		
<b>Alkylating Agents</b>		
ALKERAN INTRAVENOUS SOLUTION RECONSTITUTED	3	
ALKERAN ORAL TABLET	2	
BELRAPZO INTRAVENOUS SOLUTION	3	
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	3	
bendamustine hcl intravenous solution reconstituted	1	
BENDEKA INTRAVENOUS SOLUTION	3	
BICNU INTRAVENOUS SOLUTION RECONSTITUTED	3	
busulfan intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
BUSULFEX INTRAVENOUS SOLUTION	3	
carboplatin intravenous solution	1	
carmustine intravenous solution reconstituted	1	
cisplatin intravenous solution	1	
CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	1	
cyclophosphamide injection solution reconstituted	1	
CYCLOPHOSPHAMID E INTRAVENOUS SOLUTION	1	
cyclophosphamide oral capsule	1	B/D
CYCLOPHOSPHAMID E ORAL TABLET	1	B/D
dacarbazine intravenous solution reconstituted	1	
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	3	
GLEOSTINE ORAL CAPSULE	3	
IFEX INTRAVENOUS SOLUTION RECONSTITUTED	3	
ifosfamide intravenous solution	1	
ifosfamide intravenous solution reconstituted	1	
KEMOPLAT INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
LEUKERAN ORAL TABLET	3	
MATULANE ORAL CAPSULE	3	
melphalan hcl intravenous solution reconstituted	1	
melphalan oral tablet	1	
MYLERAN ORAL TABLET	2	
oxaliplatin intravenous solution	1	
oxaliplatin intravenous solution reconstituted	1	
paraplatin intravenous solution	1	
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	3	
TEMODAR ORAL CAPSULE	2	
temozolomide oral capsule	1	
TEPADINA INJECTION SOLUTION RECONSTITUTED	3	
thiotepa injection solution reconstituted	1	
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	3	
VALCHLOR EXTERNAL GEL	3	PA
VIVIMUSTA INTRAVENOUS SOLUTION	3	
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
<b>Antiandrogens</b>		
abiraterone acetate oral tablet	1	PA
bicalutamide oral tablet	1	
CASODEX ORAL TABLET	3	
ERLEADA ORAL TABLET	3	PA
EULEXIN ORAL CAPSULE	3	
flutamide oral capsule	1	
NILANDRON ORAL TABLET	3	
nilutamide oral tablet	1	
NUBEQA ORAL TABLET	3	PA
XTANDI ORAL CAPSULE	3	PA
XTANDI ORAL TABLET	3	PA
YONSA ORAL TABLET	3	PA
ZYTIGA ORAL TABLET	3	PA
<b>Antiangiogenic Agents</b>		
FOTIVDA ORAL CAPSULE	3	PA
lenalidomide oral capsule	1	PA
POMALYST ORAL CAPSULE	3	PA
QINLOCK ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
REVLIMID ORAL CAPSULE	3	PA
TABRECTA ORAL TABLET	3	PA
THALOMID ORAL CAPSULE	3	PA
<b>Antiestrogens/Modifiers</b>		
EMCYT ORAL CAPSULE	3	
FARESTON ORAL TABLET	3	
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
fulvestrant intramuscular solution prefilled syringe	1	
SOLTAMOX ORAL SOLUTION	3	PV
tamoxifen citrate oral tablet	1	
toremifene citrate oral tablet	1	
<b>Antimetabolites</b>		
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED	3	
ARRANON INTRAVENOUS SOLUTION	3	
capecitabine oral tablet	1	
cladribine intravenous solution	1	B/D
clofarabine intravenous solution	1	
CLOLAR INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
cytarabine (pf) injection solution	1	B/D
cytarabine injection solution	1	B/D
DROXIA ORAL CAPSULE	3	
floxuridine injection solution reconstituted	1	B/D
fluorouracil intravenous solution	1	B/D
FOLOTYN INTRAVENOUS SOLUTION	3	PA
gemcitabine hcl intravenous solution	1	
gemcitabine hcl intravenous solution reconstituted	1	
HYDREA ORAL CAPSULE	3	
hydroxyurea oral capsule	1	
INFUGEM INTRAVENOUS SOLUTION	3	
mercaptopurine oral tablet	1	
nelarabine intravenous solution	1	
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	3	
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	1	
pemetrexed disodium intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
PEMETREXED DITROMETHAMINE INTRAVENOUS SOLUTION RECONSTITUTED	1	
PEMETREXED INTRAVENOUS SOLUTION	1	
PEMFEXY INTRAVENOUS SOLUTION	3	
PRALATREXATE INTRAVENOUS SOLUTION	1	PA
PURIXAN ORAL SUSPENSION	3	
SIKLOS ORAL TABLET	3	
TABLOID ORAL TABLET	3	
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA
XELODA ORAL TABLET	2	
<b>Antineoplastics, Other</b>		
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	3	
adriamycin intravenous solution	1	B/D
adriamycin intravenous solution reconstituted	1	B/D
ADSTILADRIN INTRAVESICAL SUSPENSION	3	PA
AKEEGA ORAL TABLET	3	
arsenic trioxide intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
ASPARLAS INTRAVENOUS SOLUTION	3	
azacitidine injection suspension reconstituted	1	
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
bleomycin sulfate injection solution reconstituted	1	B/D
bortezomib injection solution reconstituted	1	PA
bortezomib intravenous solution	1	PA
BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED	1	PA
COLUMVI INTRAVENOUS SOLUTION	3	PA
COSMEGEN INTRAVENOUS SOLUTION RECONSTITUTED	3	
DACOGEN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
dactinomycin intravenous solution reconstituted	1	
daunorubicin hcl intravenous solution	1	
decitabine intravenous solution reconstituted	1	PA
docetaxel intravenous concentrate	1	
docetaxel intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
DOXIL INTRAVENOUS INJECTABLE	3	
doxorubicin hcl intravenous solution	1	B/D
doxorubicin hcl intravenous solution reconstituted	1	B/D
doxorubicin hcl liposomal intravenous injectable	1	
ELLENCE INTRAVENOUS SOLUTION	3	
ELREXFIO SUBCUTANEOUS SOLUTION	3	PA
ELZONRIS INTRAVENOUS SOLUTION	3	PA
EPKINLY SUBCUTANEOUS SOLUTION	3	PA
ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED	3	
fludarabine phosphate intravenous solution	1	
fludarabine phosphate intravenous solution reconstituted	1	
GAVRETO ORAL CAPSULE	3	PA
HALAVEN INTRAVENOUS SOLUTION	3	PA
IBRANCE ORAL TABLET	3	PA
IDAMYCIN PFS INTRAVENOUS SOLUTION	3	
idarubicin hcl intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
IDHIFA ORAL TABLET	3	PA
INREBIC ORAL CAPSULE	3	PA
ISTODAX (OVERFILL) INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED	3	
JEVTANA INTRAVENOUS SOLUTION	3	PA
KIMMTRAK INTRAVENOUS SOLUTION	3	PA
KISQALI FEMARA (200 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KRAZATI ORAL TABLET	3	PA
leucovorin calcium injection solution	1	
leucovorin calcium injection solution reconstituted	1	
leucovorin calcium oral tablet	1	
LEVAMISOLE HCL POWDER	2	
levoleucovorin calcium intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
levoleucovorin calcium pf intravenous solution	1	
LONSURF ORAL TABLET	3	PA
LUMAKRAS ORAL TABLET	3	PA
LUNSUMIO INTRAVENOUS SOLUTION	3	PA
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
MARQIBO INTRAVENOUS SUSPENSION	3	
mitomycin intravenous solution reconstituted	1	
mutamycin intravenous solution reconstituted	1	
NINLARO ORAL CAPSULE	3	PA
ONCASPAR INJECTION SOLUTION	3	
ONUREG ORAL TABLET	3	PA
ORSERDU ORAL TABLET	3	PA
paclitaxel intravenous concentrate	1	

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Drug Name	Drug Tier	Requirements /Limits
PACLITAXEL PROTEIN-BOUND PART INTRAVENOUS SUSPENSION RECONSTITUTED	1	
PEMAZYRE ORAL TABLET	3	PA
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	1	
PHESGO SUBCUTANEOUS SOLUTION	3	PA
PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
QUADRAMET INTRAVENOUS SOLUTION	3	
RETEVMO ORAL CAPSULE	3	PA
ROMIDEPSIN INTRAVENOUS SOLUTION	1	PA
romidepsin intravenous solution reconstituted	1	PA
RYLAZE INTRAMUSCULAR SOLUTION	3	
SCSEMBLIX ORAL TABLET	3	PA
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
TALVEY SUBCUTANEOUS SOLUTION	3	PA
TAZVERIK ORAL TABLET	3	PA
TECVAYLI SUBCUTANEOUS SOLUTION	3	PA
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	3	
TRISENOX INTRAVENOUS SOLUTION	3	
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
TUKYSA ORAL TABLET	3	PA
valrubicin intravesical solution	1	
VALSTAR INTRAVESICAL SOLUTION	3	
VELCADE INJECTION SOLUTION RECONSTITUTED	3	PA

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Drug Name	Drug Tier	Requirements /Limits
VIDAZA INJECTION SUSPENSION RECONSTITUTED	3	
vinblastine sulfate intravenous solution	1	B/D
vincasar pfs intravenous solution	1	B/D
vincristine sulfate intravenous solution	1	B/D
vinorelbine tartrate intravenous solution	1	
VONJO ORAL CAPSULE	3	PA
XOFIGO INTRAVENOUS SOLUTION	2	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA

Drug Name	Drug Tier	Requirements /Limits
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA
ZALTRAP INTRAVENOUS SOLUTION	3	PA
ZOLINZA ORAL CAPSULE	3	PA
<b>Aromatase Inhibitors, 3rd Generation</b>		
anastrozole oral tablet	1	
ARIMIDEX ORAL TABLET	3	
AROMASIN ORAL TABLET	3	
exemestane oral tablet	1	
FEMARA ORAL TABLET	3	
letrozole oral tablet	1	
<b>Enzyme Inhibitors</b>		
CAMPTOSAR INTRAVENOUS SOLUTION	3	
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	3	
etoposide intravenous solution	1	
etoposide oral capsule	1	
HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
HYCAMTIN ORAL CAPSULE	2	
irinotecan hcl intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ONIVYDE INTRAVENOUS INJECTABLE	3	
toposar intravenous solution	1	
topotecan hcl intravenous solution	1	
topotecan hcl intravenous solution reconstituted	1	
<b>Molecular Target Inhibitors</b>		
AFINITOR DISPERZ ORAL TABLET SOLUBLE	3	PA
AFINITOR ORAL TABLET	3	PA
ALECENSA ORAL CAPSULE	3	PA
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ALUNBRIG ORAL TABLET	3	PA
ALUNBRIG ORAL TABLET THERAPY PACK	3	PA
AYVAKIT ORAL TABLET	3	PA
BALVERSA ORAL TABLET	3	PA
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
BOSULIF ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
BRAFTOVI ORAL CAPSULE	3	PA
BRUKINSA ORAL CAPSULE	3	PA
CABOMETYX ORAL TABLET	3	PA
CALQUENCE ORAL CAPSULE	3	PA
CALQUENCE ORAL TABLET	3	PA
CAPRELSA ORAL TABLET	3	PA
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	3	PA
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	3	PA
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	3	PA
COPIKTRA ORAL CAPSULE	3	PA
COTELLIC ORAL TABLET	3	PA
DAURISMO ORAL TABLET	3	PA
ERIVEDGE ORAL CAPSULE	3	PA
erlotinib hcl oral tablet	1	PA
everolimus oral tablet	1	PA
everolimus oral tablet soluble	1	PA
EXKIVITY ORAL CAPSULE	3	PA
FARYDAK ORAL CAPSULE	3	
FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA

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Drug Name	Drug Tier	Requirements /Limits
gefitinib oral tablet	1	PA
GILOTRIF ORAL TABLET	3	PA
GLEEVEC ORAL TABLET	3	PA
IBRANCE ORAL CAPSULE	3	PA
ICLUSIG ORAL TABLET	3	PA
imatinib mesylate oral tablet	1	PA
IMBRUVICA ORAL CAPSULE	3	PA
IMBRUVICA ORAL SUSPENSION	3	PA
IMBRUVICA ORAL TABLET	3	PA
INLYTA ORAL TABLET	3	PA
INQOVI ORAL TABLET	3	PA
IRESSA ORAL TABLET	3	PA
JAKAFI ORAL TABLET	3	PA
JAYPIRCA ORAL TABLET	3	PA
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	3	PA
KOSELUGO ORAL CAPSULE	3	PA
lapatinib ditosylate oral tablet	1	PA
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA

Drug Name	Drug Tier	Requirements /Limits
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	3	PA
LORBRENA ORAL TABLET	3	PA
LYNPARZA ORAL TABLET	3	PA
MEKINIST ORAL SOLUTION RECONSTITUTED	3	PA
MEKINIST ORAL TABLET	3	PA
MEKTOVI ORAL TABLET	3	PA
NERLYNX ORAL TABLET	3	PA
NEXAVAR ORAL TABLET	3	PA

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Drug Name	Drug Tier	Requirements /Limits
ODOMZO ORAL CAPSULE	3	PA
OJJAARA ORAL TABLET	3	
pazopanib hcl oral tablet	1	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA
REZLIDHIA ORAL CAPSULE	3	PA
ROZLYTREK ORAL CAPSULE	3	PA
RUBRACA ORAL TABLET	3	PA
RYDAPT ORAL CAPSULE	3	PA
sorafenib tosylate oral tablet	1	PA
SPRYCEL ORAL TABLET	3	PA
STIVARGA ORAL TABLET	3	PA
sunitinib malate oral capsule	1	PA
SUTENT ORAL CAPSULE	3	PA
TAFINLAR ORAL CAPSULE	3	PA
TAFINLAR ORAL TABLET SOLUBLE	3	PA
TAGRISSE ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
TALZENNA ORAL CAPSULE	3	PA
TARCEVA ORAL TABLET	3	PA
TASIGNA ORAL CAPSULE	3	PA
temsirolimus intravenous solution	1	
TEPMETKO ORAL TABLET	3	PA
TIBSOVO ORAL TABLET	3	PA
TORISEL INTRAVENOUS SOLUTION	3	
TURALIO ORAL CAPSULE	3	PA
TYKERB ORAL TABLET	3	PA
VANFLYTA ORAL TABLET	3	PA
VENCLEXTA ORAL TABLET	2	PA
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	3	PA
VERZENIO ORAL TABLET	3	PA
VITRAKVI ORAL CAPSULE	3	PA
VITRAKVI ORAL SOLUTION	3	PA
VIZIMPRO ORAL TABLET	3	PA
VOTRIENT ORAL TABLET	3	PA
WELIREG ORAL TABLET	3	PA
XALKORI ORAL CAPSULE	3	PA

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Drug Name	Drug Tier	Requirements /Limits
XOSPATA ORAL TABLET	3	PA
ZEJULA ORAL CAPSULE	3	PA
ZEJULA ORAL TABLET	3	PA
ZELBORAF ORAL TABLET	3	PA
ZYDELIG ORAL TABLET	3	PA
ZYKADIA ORAL TABLET	3	PA
<b>Monoclonal Antibody/Antibody-Drug Conjugate</b>		
ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ALYMSYS INTRAVENOUS SOLUTION	3	PA
ARZERRA INTRAVENOUS CONCENTRATE	3	PA
AVASTIN INTRAVENOUS SOLUTION	3	PA
BAVENCIO INTRAVENOUS SOLUTION	3	PA
BESPONSА INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
BLENREP INTRAVENOUS SOLUTION RECONSTITUTED	2	
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
CYRAMZA INTRAVENOUS SOLUTION	3	PA
DANYELZA INTRAVENOUS SOLUTION	3	PA
DARZALEX FASPRO SUBCUTANEOUS SOLUTION	3	PA
DARZALEX INTRAVENOUS SOLUTION	3	PA
ELAHERE INTRAVENOUS SOLUTION	3	PA
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ERBITUX INTRAVENOUS SOLUTION	3	PA
GAZYVA INTRAVENOUS SOLUTION	3	PA
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	3	PA
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
IMFINZI INTRAVENOUS SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
IMJUDO INTRAVENOUS SOLUTION	3	PA
JEMPERLI INTRAVENOUS SOLUTION	3	PA
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
KEYTRUDA INTRAVENOUS SOLUTION	3	PA
LIBTAYO INTRAVENOUS SOLUTION	3	PA
LUMOXITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
MARGENZA INTRAVENOUS SOLUTION	3	PA
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
MVASI INTRAVENOUS SOLUTION	3	PA
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
OPDIVO INTRAVENOUS SOLUTION	3	PA
PADCEV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
PERJETA INTRAVENOUS SOLUTION	3	PA
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
PORTRAZZA INTRAVENOUS SOLUTION	3	PA
POTELIGEO INTRAVENOUS SOLUTION	3	PA
RIABNI INTRAVENOUS SOLUTION	3	PA
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	3	PA
RITUXAN INTRAVENOUS SOLUTION	3	PA
RUXIENCE INTRAVENOUS SOLUTION	3	PA
RYBREVANT INTRAVENOUS SOLUTION	3	PA
SARCLISA INTRAVENOUS SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
TECENTRIQ INTRAVENOUS SOLUTION	3	PA
TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
TRUXIMA INTRAVENOUS SOLUTION	3	PA
UNITUXIN INTRAVENOUS SOLUTION	3	
VECTIBIX INTRAVENOUS SOLUTION	3	
VEGZELMA INTRAVENOUS SOLUTION	3	PA
YERVOY INTRAVENOUS SOLUTION	3	PA
ZEVALIN Y-90 INTRAVENOUS KIT	3	
ZIRABEV INTRAVENOUS SOLUTION	3	PA
ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ZYNYZ INTRAVENOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
<b>Non-FRF</b>		
OPDUALAG INTRAVENOUS SOLUTION	3	PA
<b>Retinoids</b>		
bexarotene external gel	1	PA
bexarotene oral capsule	1	PA
PANRETIN EXTERNAL GEL	3	
TARGRETIN EXTERNAL GEL	3	PA
TARGRETIN ORAL CAPSULE	3	PA
tretinoin oral capsule	1	
<b>Treatment Adjuncts</b>		
dexrazoxane hcl intravenous solution reconstituted	1	
dexrazoxane intravenous solution reconstituted	1	
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	3	
KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED	3	
mesna intravenous solution	1	
MESNEX INTRAVENOUS SOLUTION	3	
MESNEX ORAL TABLET	3	
TOTECT INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED	3	
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
albendazole oral tablet	1	
ALBENZA ORAL TABLET	3	
BILTRICIDE ORAL TABLET	3	
EGATEN ORAL TABLET	2	
EMVERM ORAL TABLET CHEWABLE	3	
ivermectin oral tablet	1	PA
MEBENDAZOLE POWDER	2	
praziquantel oral tablet	1	
STROMEKTOL ORAL TABLET	3	PA
THIABENDAZOLE POWDER	2	
<b>Antiprotozoals</b>		
ALINIA ORAL SUSPENSION RECONSTITUTED	3	
ALINIA ORAL TABLET	3	
ARAKODA ORAL TABLET	3	
ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED	1	
atovaquone oral suspension	1	
atovaquone-proguanil hcl oral tablet	1	
BENZNIDAZOLE ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
chloroquine phosphate oral tablet	1	
COARTEM ORAL TABLET	3	
DARAPRIM ORAL TABLET	3	PA
hydroxychloroquine sulfate oral tablet	1	
IDOQUINOL POWDER	2	
KRINTAFEL ORAL TABLET	3	
LAMPIT ORAL TABLET	3	
MALARONE ORAL TABLET	3	
mefloquine hcl oral tablet	1	
MEPACRINE POWDER	2	
MEPRON ORAL SUSPENSION	3	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	3	B/D
nitazoxanide oral tablet	1	
PENTAM INJECTION SOLUTION RECONSTITUTED	3	
pentamidine isethionate inhalation solution reconstituted	1	B/D
pentamidine isethionate injection solution reconstituted	1	
PLAQUENIL ORAL TABLET	3	
primaquine phosphate oral tablet	1	
pyrimethamine oral tablet	1	PA

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Drug Name	Drug Tier	Requirements /Limits
PYRIMETHAMINE-LEUCOVORIN ORAL CAPSULE	2	
QUALAQUIN ORAL CAPSULE	3	PA
QUINACRINE HCL POWDER	2	
quinine sulfate oral capsule	1	PA
<b>Antiparkinson Agents</b>		
<b>Anticholinergics</b>		
benztropine mesylate injection solution	1	
benztropine mesylate oral tablet	1	
COGENTIN INJECTION SOLUTION	3	
trihexyphenidyl hcl oral solution	1	
trihexyphenidyl hcl oral tablet	1	
<b>Antiparkinson Agents, Other</b>		
carbidopa-levodopa-entacapone oral tablet	1	
COMTAN ORAL TABLET	3	
entacapone oral tablet	1	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
NOURIANZ ORAL TABLET	3	
ONGENTYS ORAL CAPSULE	3	
OSMOLEX ER ORAL TABLET ER 24 HOUR THERAPY PACK	3	

Drug Name	Drug Tier	Requirements /Limits
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
STALEVO 100 ORAL TABLET	3	
STALEVO 125 ORAL TABLET	3	
STALEVO 150 ORAL TABLET	3	
STALEVO 200 ORAL TABLET	3	
STALEVO 50 ORAL TABLET	3	
STALEVO 75 ORAL TABLET	3	
TASMAR ORAL TABLET	3	
tolcapone oral tablet	1	
<b>Dopamine Agonists</b>		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA
apomorphine hcl subcutaneous solution cartridge	1	PA
bromocriptine mesylate oral capsule	1	
bromocriptine mesylate oral tablet	1	
KYNMOBI SUBLINGUAL FILM	3	PA
KYNMOBI TITRATION KIT SUBLINGUAL KIT	3	PA
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
NEUPRO TRANSDERMAL PATCH 24 HOUR	3	
PARLODEL ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
PARLODEL ORAL TABLET	3	
pramipexole dihydrochloride er oral tablet extended release 24 hour	1	
pramipexole dihydrochloride oral tablet	1	
ropinirole hcl er oral tablet extended release 24 hour	1	
ropinirole hcl oral tablet	1	
<b>Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors</b>		
carbidopa oral tablet	1	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
carbidopa-levodopa oral tablet dispersible	1	
DHIVY ORAL TABLET	3	
DUOPA ENTERAL SUSPENSION	3	PA
INBRIJA INHALATION CAPSULE	3	PA
LODOSYN ORAL TABLET	3	
RYTARY ORAL CAPSULE EXTENDED RELEASE	3	
SINEMET ORAL TABLET	3	
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
AZILECT ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
rasagiline mesylate oral tablet	1	
selegiline hcl oral capsule	1	
selegiline hcl oral tablet	1	
SELEGILINE HCL POWDER	2	
XADAGO ORAL TABLET	3	
ZELAPAR ORAL TABLET DISPERSIBLE	3	
<b>Antipsychotics</b>		
<b>1st Generation/Typical</b>		
chlorpromazine hcl injection solution	1	
chlorpromazine hcl oral concentrate	1	
chlorpromazine hcl oral tablet	1	
fluphenazine decanoate injection solution	1	
fluphenazine hcl injection solution	1	
fluphenazine hcl oral concentrate	1	
fluphenazine hcl oral elixir	1	
fluphenazine hcl oral tablet	1	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION	3	
haloperidol decanoate intramuscular solution	1	
haloperidol lactate injection solution	1	
haloperidol lactate oral concentrate	1	

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Drug Name	Drug Tier	Requirements /Limits
haloperidol oral tablet	1	
loxapine succinate oral capsule	1	
molindone hcl oral tablet	1	
perphenazine oral tablet	1	
pimozide oral tablet	1	
thioridazine hcl oral tablet	1	
thiothixene oral capsule	1	
trifluoperazine hcl oral tablet	1	
<b>2nd Generation/Atypical</b>		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE	3	PA
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	3	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK	3	
ABILIFY MYCITE ORAL TABLET	3	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK	3	
ABILIFY ORAL TABLET	3	
aripiprazole oral solution	1	
aripiprazole oral tablet	1	
aripiprazole oral tablet dispersible	1	

Drug Name	Drug Tier	Requirements /Limits
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	3	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	3	
asenapine maleate sublingual tablet sublingual	1	
CAPLYTA ORAL CAPSULE	3	
FANAPT ORAL TABLET	3	
FANAPT TITRATION PACK ORAL TABLET	3	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
GEODON ORAL CAPSULE	3	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
LATUDA ORAL TABLET	3	
lurasidone hcl oral tablet	1	
LYBALVI ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
NUPLAZID ORAL CAPSULE	3	
NUPLAZID ORAL TABLET	3	
olanzapine intramuscular solution reconstituted	1	
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	1	
paliperidone er oral tablet extended release 24 hour	1	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	3	
quetiapine fumarate er oral tablet extended release 24 hour	1	
quetiapine fumarate oral tablet	1	
REXULTI ORAL TABLET	3	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
RISPERDAL ORAL SOLUTION	3	
RISPERDAL ORAL TABLET	3	
risperidone oral solution	1	
risperidone oral tablet	1	
risperidone oral tablet dispersible	1	
RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA

Drug Name	Drug Tier	Requirements /Limits
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	3	
SECUADO TRANSDERMAL PATCH 24 HOUR	3	
SEROQUEL ORAL TABLET	3	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	3	
VRAYLAR ORAL CAPSULE	3	
VRAYLAR ORAL CAPSULE THERAPY PACK	3	
ziprasidone hcl oral capsule	1	
ziprasidone mesylate intramuscular solution reconstituted	1	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
ZYPREXA ORAL TABLET	3	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE	3	
<b>Treatment-Resistant</b>		
clozapine oral tablet	1	
clozapine oral tablet dispersible	1	

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Drug Name	Drug Tier	Requirements /Limits
CLOZARIL ORAL TABLET	3	
VERSACLOZ ORAL SUSPENSION	3	
<b>Antispasticity Agents</b>		
baclofen oral tablet	1	
DANTRIUM ORAL CAPSULE	3	
dantrolene sodium oral capsule	1	
tizanidine hcl oral capsule	1	
tizanidine hcl oral tablet	1	
ZANAFLEX ORAL CAPSULE	3	
ZANAFLEX ORAL TABLET	3	
<b>Non-FRF</b>		
BACLOFEN (BULK) SOLUTION	2	
baclofen intrathecal solution	1	B/D
baclofen intrathecal solution prefilled syringe	1	B/D
BACLOFEN ORAL SOLUTION	1	
baclofen oral suspension	1	
BACLOFEN POWDER	2	
BOTOX INJECTION SOLUTION RECONSTITUTED	3	PA
DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED	3	
dantrolene sodium intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
FIRST-BACLOFEN ORAL SUSPENSION	2	
FLEQSUVY ORAL SUSPENSION	3	
GABLOFEN INTRATHECAL SOLUTION	3	B/D
GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE	3	B/D
LIORESAL INTRATHECAL SOLUTION	3	B/D
LYVISPAH ORAL PACKET	3	
MYOBLOC INTRAMUSCULAR SOLUTION	3	PA
OZOBAX DS ORAL SOLUTION	3	
OZOBAX ORAL SOLUTION	3	
revonto intravenous solution reconstituted	1	
RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED	2	
SOHONOS ORAL CAPSULE	3	
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA

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Drug Name	Drug Tier	Requirements /Limits
<b>Antivirals</b>		
<b>Anti-cytomegalovirus (CMV) Agents</b>		
cidofovir intravenous solution	1	
foscarnet sodium intravenous solution	1	B/D
FOSCAVIR INTRAVENOUS SOLUTION	3	B/D
GANCICLOVIR INTRAVENOUS SOLUTION	2	
ganciclovir sodium intravenous solution	1	B/D
ganciclovir sodium intravenous solution reconstituted	1	B/D
LIVTENCITY ORAL TABLET	3	
PREVYMIS INTRAVENOUS SOLUTION	3	
PREVYMIS ORAL TABLET	3	
VALCYTE ORAL SOLUTION RECONSTITUTED	3	
VALCYTE ORAL TABLET	3	
valganciclovir hcl oral solution reconstituted	1	
valganciclovir hcl oral tablet	1	
<b>Anti-hepatitis B (HBV) Agents</b>		
adefovir dipivoxil oral tablet	1	
BARACLUDE ORAL SOLUTION	3	
BARACLUDE ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
entecavir oral tablet	1	
EPIVIR HBV ORAL SOLUTION	3	
EPIVIR HBV ORAL TABLET	3	
HEPSERA ORAL TABLET	3	
lamivudine oral tablet	1	
VEMLIDY ORAL TABLET	3	
<b>Anti-hepatitis C (HCV) Agents</b>		
EPCLUSA ORAL PACKET	3	PA
EPCLUSA ORAL TABLET	3	PA
HARVONI ORAL PACKET	3	PA
HARVONI ORAL TABLET	3	PA
LEDIPASVIR-SOFOSBUVIR ORAL TABLET	1	PA
MAVYRET ORAL PACKET	3	PA
MAVYRET ORAL TABLET	3	PA
ribavirin oral capsule	1	
ribavirin oral tablet	1	
SOFOSBUVIR-VELPATASVIR ORAL TABLET	1	PA
SOVALDI ORAL PACKET	3	PA
SOVALDI ORAL TABLET	3	PA
VIEKIRA PAK ORAL TABLET THERAPY PACK	3	PA
VOSEVI ORAL TABLET	3	PA

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Drug Name	Drug Tier	Requirements /Limits
ZEPATIER ORAL TABLET	3	PA
<b>Antitherpetic Agents</b>		
acyclovir oral capsule	1	
acyclovir oral suspension	1	
acyclovir oral tablet	1	
acyclovir sodium intravenous solution	1	B/D
famciclovir oral tablet	1	
SITAVIG BUCCAL TABLET	3	
valacyclovir hcl oral tablet	1	
VALTREX ORAL TABLET	3	
ZOVIRAX ORAL SUSPENSION	3	
<b>Anti-HIV Agents, Integrase Inhibitors (INSTI)</b>		
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	3	PV
BIKTARVY ORAL TABLET	3	
CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	3	
DOVATO ORAL TABLET	3	
GENVOYA ORAL TABLET	3	
ISENTRESS HD ORAL TABLET	3	
ISENTRESS ORAL PACKET	3	
ISENTRESS ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
ISENTRESS ORAL TABLET CHEWABLE	2	
JULUCA ORAL TABLET	3	
STRIBILD ORAL TABLET	3	
TIVICAY ORAL TABLET	3	
TIVICAY PD ORAL TABLET SOLUBLE	3	
VOCABRIA ORAL TABLET	3	
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</b>		
COMPLERA ORAL TABLET	3	
DELSTRIGO ORAL TABLET	3	
EDURANT ORAL TABLET	3	
efavirenz oral capsule	1	
efavirenz oral tablet	1	
efavirenz-emtricitab-tenofo df oral tablet	1	
efavirenz-lamivudine-tenofovir oral tablet	1	
etravirine oral tablet	1	
INTELENCE ORAL TABLET	3	
nevirapine er oral tablet extended release 24 hour	1	
nevirapine oral suspension	1	
nevirapine oral tablet	1	
PIFELTRO ORAL TABLET	3	
SUSTIVA ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
SUSTIVA ORAL TABLET	3	
SYMFI LO ORAL TABLET	3	
SYMFI ORAL TABLET	3	
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</b>		
abacavir sulfate oral solution	1	
abacavir sulfate oral tablet	1	
abacavir sulfate-lamivudine oral tablet	1	
CIMDUO ORAL TABLET	3	
COMBIVIR ORAL TABLET	3	
DESCOVY ORAL TABLET	3	PV
emtricitabine oral capsule	1	
emtricitabine-tenofovir df oral tablet	1	PV
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	3	
EPIVIR ORAL SOLUTION	3	
EPIVIR ORAL TABLET	3	
EPZICOM ORAL TABLET	3	
lamivudine oral solution	1	
lamivudine oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
lamivudine-zidovudine oral tablet	1	
ODEFSEY ORAL TABLET	3	
RETROVIR INTRAVENOUS SOLUTION	3	
RETROVIR ORAL CAPSULE	3	
RETROVIR ORAL SYRUP	3	
stavudine oral capsule	1	
tenofovir disoproxil fumarate oral tablet	1	PV
TRIUMEQ ORAL TABLET	3	
TRIUMEQ PD ORAL TABLET SOLUBLE	3	
TRIZIVIR ORAL TABLET	3	
TRUVADA ORAL TABLET	3	
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET	3	
ZIAGEN ORAL SOLUTION	3	
ZIAGEN ORAL TABLET	3	
zidovudine oral capsule	1	
zidovudine oral syrup	1	
zidovudine oral tablet	1	
<b>Anti-HIV Agents, Other</b>		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	
maraviroc oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
SELZENTRY ORAL SOLUTION	3	
SELZENTRY ORAL TABLET	3	
SUNLENCA ORAL TABLET THERAPY PACK	3	
SUNLENCA SUBCUTANEOUS SOLUTION	3	
TROGARZO INTRAVENOUS SOLUTION	3	
TYBOST ORAL TABLET	3	
<b>Anti-HIV Agents, Protease Inhibitors (PI)</b>		
APTIVUS ORAL CAPSULE	3	
atazanavir sulfate oral capsule	1	
darunavir oral tablet	1	
EVOTAZ ORAL TABLET	3	
fosamprenavir calcium oral tablet	1	
KALETRA ORAL SOLUTION	3	
KALETRA ORAL TABLET	3	
LEXIVA ORAL SUSPENSION	3	
LEXIVA ORAL TABLET	3	
lopinavir-ritonavir oral solution	1	
lopinavir-ritonavir oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
NORVIR ORAL PACKET	3	
NORVIR ORAL SOLUTION	3	
NORVIR ORAL TABLET	3	
PREZCOBIX ORAL TABLET	3	
PREZISTA ORAL SUSPENSION	3	
PREZISTA ORAL TABLET	3	
REYATAZ ORAL CAPSULE	3	
REYATAZ ORAL PACKET	3	
ritonavir oral tablet	1	
SYMTUZA ORAL TABLET	3	
VIRACEPT ORAL TABLET	3	
<b>Anti-influenza Agents</b>		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
oseltamivir phosphate oral capsule	1	
oseltamivir phosphate oral suspension reconstituted	1	
RAPIVAB INTRAVENOUS SOLUTION	3	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	

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Drug Name	Drug Tier	Requirements /Limits
rimantadine hcl oral tablet	1	
TAMIFLU ORAL CAPSULE	3	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	3	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	2	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	2	
<b>Non-FRF</b>		
MODERNA COVID-19 VAC 6M-11Y INTRAMUSCULAR SUSPENSION	3	PV
NOVAVAX COVID-19 VACCINE INTRAMUSCULAR SUSPENSION	3	PV
PFIZER COVID-19 VAC-TRIS 5-11Y INTRAMUSCULAR SUSPENSION	3	PV
PFIZER COVID-19 VAC-TRIS 6M-4Y INTRAMUSCULAR SUSPENSION	3	PV
TEMBEXA ORAL SUSPENSION	2	
TEMBEXA ORAL TABLET	2	
TPOXX INTRAVENOUS SOLUTION	2	
TPOXX ORAL CAPSULE	2	

Drug Name	Drug Tier	Requirements /Limits
<b>Anxiolytics</b>		
<b>Anxiolytics, Other</b>		
buspirone hcl oral tablet	1	
meprobamate oral tablet	1	
<b>Benzodiazepines</b>		
alprazolam er oral tablet extended release 24 hour	1	
alprazolam intensol oral concentrate	1	
alprazolam oral tablet	1	
alprazolam oral tablet dispersible	1	
alprazolam xr oral tablet extended release 24 hour	1	
ATIVAN INJECTION SOLUTION	3	
ATIVAN ORAL TABLET	3	
chlordiazepoxide hcl oral capsule	1	
clorazepate dipotassium oral tablet	1	
diazepam injection solution	1	
diazepam intensol oral concentrate	1	
diazepam intramuscular solution auto-injector	1	
diazepam oral concentrate	1	
diazepam oral solution	1	
diazepam oral tablet	1	
lorazepam injection solution	1	
lorazepam intensol oral concentrate	1	

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Drug Name	Drug Tier	Requirements /Limits
lorazepam oral concentrate	1	
lorazepam oral tablet	1	
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE	3	
midazolam hcl (pf) injection solution	1	
midazolam hcl injection solution	1	
midazolam hcl oral syrup	1	
oxazepam oral capsule	1	
TRANXENE-T ORAL TABLET	3	
VALIUM ORAL TABLET	3	
XANAX ORAL TABLET	3	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<b>Bipolar Agents</b>		
<b>Mood Stabilizers</b>		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
lithium carbonate er oral tablet extended release	1	
lithium carbonate oral capsule	1	
lithium carbonate oral tablet	1	
lithium oral solution	1	
LITHOBID ORAL TABLET EXTENDED RELEASE	3	
<b>Blood Glucose Regulators</b>		
<b>Antidiabetic Agents</b>		
acarbose oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
ACTOPLUS MET ORAL TABLET	3	
ACTOS ORAL TABLET	3	
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT	3	
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
ALOGLIPTIN BENZOATE ORAL TABLET	1	
ALOGLIPTIN-METFORMIN HCL ORAL TABLET	1	
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET	1	
AMARYL ORAL TABLET	3	
BRENZAVVY ORAL TABLET	3	
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	3	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
CYCLOSET ORAL TABLET	3	
DUETACT ORAL TABLET	3	
FARXIGA ORAL TABLET	2	
glimepiride oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
glipizide er oral tablet extended release 24 hour	1	
glipizide oral tablet	1	
glipizide xl oral tablet extended release 24 hour	1	
glipizide-metformin hcl oral tablet	1	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
glyburide micronized oral tablet	1	
glyburide oral tablet	1	
GLYBURIDE POWDER	2	
glyburide-metformin oral tablet	1	
GLYNASE ORAL TABLET	3	
GLYXAMBI ORAL TABLET	2	
INPEFA ORAL TABLET	3	PA
INVOKAMET ORAL TABLET	3	
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
INVOKANA ORAL TABLET	3	
JANUMET ORAL TABLET	2	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
JANUVIA ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
JARDIANCE ORAL TABLET	2	
JENTADUETO ORAL TABLET	2	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
KAZANO ORAL TABLET	3	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
metformin hcl er (mod) oral tablet extended release 24 hour	1	
metformin hcl er (osm) oral tablet extended release 24 hour	1	
metformin hcl er oral tablet extended release 24 hour	1	
metformin hcl oral solution	1	
metformin hcl oral tablet	1	
miglitol oral tablet	1	
MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
nateglinide oral tablet	1	
NESINA ORAL TABLET	3	
ONGLYZA ORAL TABLET	3	
OSENI ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
pioglitazone hcl oral tablet	1	
pioglitazone hcl-glimepiride oral tablet	1	
pioglitazone hcl-metformin hcl oral tablet	1	
PRECOSE ORAL TABLET	3	
QTERN ORAL TABLET	3	
repaglinide oral tablet	1	
RIOMET ORAL SOLUTION	3	
RYBELSUS ORAL TABLET	2	
saxagliptin hcl oral tablet	1	
saxagliptin-metformin er oral tablet extended release 24 hour	1	
SEGLUROMET ORAL TABLET	3	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
STEGLATRO ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
STEGLUJAN ORAL TABLET	3	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
SYNJARDY ORAL TABLET	2	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
TRADJENTA ORAL TABLET	2	
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	

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Drug Name	Drug Tier	Requirements /Limits
<b>Glycemic Agents</b>		
BAQSIMI ONE PACK NASAL POWDER	2	
BAQSIMI TWO PACK NASAL POWDER	2	
dextrose intravenous solution	1	
diazoxide oral suspension	1	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	3	
glucagon emergency injection kit	1	
GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED	3	
GVOKE HYOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
GVOKE HYOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
GVOKE KIT SUBCUTANEOUS SOLUTION	2	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
potassium cl in dextrose 5% intravenous solution	1	
PROGLYCEM ORAL SUSPENSION	3	

Drug Name	Drug Tier	Requirements /Limits
<b>Insulins</b>		
ADMELOG INJECTION SOLUTION	3	
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
AFREZZA INHALATION POWDER	3	
APIDRA INJECTION SOLUTION	3	
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
FIASP INJECTION SOLUTION	3	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	
HUMALOG INJECTION SOLUTION	2	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	

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Drug Name	Drug Tier	Requirements /Limits
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMALOG TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	2	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
HUMULIN N SUBCUTANEOUS SUSPENSION	2	

Drug Name	Drug Tier	Requirements /Limits
HUMULIN R INJECTION SOLUTION	2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
INSULIN ASP PROT & ASP FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
INSULIN ASPART FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN ASPART INJECTION SOLUTION	3	
INSULIN ASPART PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	
INSULIN ASPART PROT & ASPART SUBCUTANEOUS SUSPENSION	3	
INSULIN DEGLUDEC FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN DEGLUDEC SUBCUTANEOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN GLARGINE SUBCUTANEOUS SOLUTION	3	
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION	3	
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN LISPRO INJECTION SOLUTION	1	
INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LANTUS SUBCUTANEOUS SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
LEVEMIR FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LEVEMIR SUBCUTANEOUS SOLUTION	2	
LYUMJEV INJECTION SOLUTION	2	
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
LYUMJEV TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
MYXREDLIN INTRAVENOUS SOLUTION	3	
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	2	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION	2	

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

Drug Name	Drug Tier	Requirements /Limits
NOVOLOG INJECTION SOLUTION	2	
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	2	
NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION	2	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION	2	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	2	
NOVOLOG RELION INJECTION SOLUTION	2	
REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION	3	PA
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
SEMGLEE SUBCUTANEOUS SOLUTION	3	PA
SEMGLEE SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA

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Drug Name	Drug Tier	Requirements /Limits
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
TRESIBA SUBCUTANEOUS SOLUTION	2	
<b>Blood Products and Modifiers</b>		
<b>Anticoagulants</b>		
ACD FORMULA A IN VITRO SOLUTION	2	
ACD-A NOCLOT-50 IN VITRO SOLUTION	2	
ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED	2	
ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION	2	
argatroban in sodium chloride intravenous solution	1	
argatroban intravenous solution	1	
ARIXTRA SUBCUTANEOUS SOLUTION	3	
bivalirudin trifluoroacetate intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
dabigatran etexilate mesylate oral capsule	1	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	
ELIQUIS ORAL TABLET	2	
enoxaparin sodium injection solution	1	
enoxaparin sodium injection solution prefilled syringe	1	
fondaparinux sodium subcutaneous solution	1	
FRAGMIN SUBCUTANEOUS SOLUTION	3	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
heparin (porcine) in nacl intravenous solution	1	
heparin sod (porcine) in d5w intravenous solution	1	
heparin sodium (porcine) injection solution	1	
heparin sodium (porcine) injection solution prefilled syringe	1	
heparin sodium (porcine) pf injection solution	1	
jantoven oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
LOVENOX INJECTION SOLUTION	3	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	3	
PRADAXA ORAL CAPSULE	3	PA
PRADAXA ORAL PACKET	3	PA
REGIOCIT EXTRACORPOREAL SOLUTION	3	
RETAVASE HALF-KIT INTRAVENOUS KIT	2	
RETAVASE INTRAVENOUS KIT	2	
SAVAYSA ORAL TABLET	3	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION	2	
THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED	2	
TISSEEL EXTERNAL KIT	3	
TISSEEL EXTERNAL SOLUTION	3	
TNKASE INTRAVENOUS KIT	2	
TRICITRASOL IN VITRO CONCENTRATE	2	
warfarin sodium oral tablet	1	
XARELTO ORAL SUSPENSION RECONSTITUTED	3	
XARELTO ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	2	
ZONTIVITY ORAL TABLET	3	
<b>Blood Products and Modifiers, Other</b>		
ADAKVEO INTRAVENOUS SOLUTION	3	PA
AGRYLIN ORAL CAPSULE	3	
anagrelide hcl oral capsule	1	
APHEXDA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION	3	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	3	PA
EPOGEN INJECTION SOLUTION	3	PA
FERRO-PLEX ORAL TABLET	2	
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
FYLNTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
GRANIX SUBCUTANEOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
JESDUVROQ ORAL TABLET	3	PA
LEUKINE INJECTION SOLUTION RECONSTITUTED	3	PA
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	3	
MOZOBIL SUBCUTANEOUS SOLUTION	3	
MUPLETA ORAL TABLET	3	PA
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
NEUPOGEN INJECTION SOLUTION	3	
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	3	
NIVESTYM INJECTION SOLUTION	3	
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	3	
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
OXBRYTA ORAL TABLET	3	PA
OXBRYTA ORAL TABLET SOLUBLE	3	PA
plerixafor subcutaneous solution	1	
PROCRIT INJECTION SOLUTION	3	PA
PROMACTA ORAL PACKET	3	PA
PROMACTA ORAL TABLET	3	PA
PYRUKYND ORAL TABLET	3	PA
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	3	PA
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
RELEUKO INJECTION SOLUTION	3	
RELEUKO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
RETACRIT INJECTION SOLUTION	3	PA
ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA

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Drug Name	Drug Tier	Requirements /Limits
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	3	
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
<b>Hemostasis Agents</b>		
ACCRUFER ORAL CAPSULE	2	
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
AFSTYLA INTRAVENOUS KIT	2	
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED	2	
ALTUVIIIO INTRAVENOUS SOLUTION RECONSTITUTED	2	

Drug Name	Drug Tier	Requirements /Limits
AMICAR ORAL SOLUTION	3	
AMICAR ORAL TABLET	3	
aminocaproic acid intravenous solution	1	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED	2	
ASTRINGYN EXTERNAL SOLUTION	2	
BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED	2	
BENEFIX INTRAVENOUS KIT	2	
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	2	
CORIFACT INTRAVENOUS KIT	2	
CYKLOKAPRON INTRAVENOUS SOLUTION	3	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED	2	
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED	2	
HEMLIBRA SUBCUTANEOUS SOLUTION	2	
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED	2	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED	2	
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	2	
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED	2	
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	2	
KCENTRA INTRAVENOUS KIT	2	
KOATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED	2	
KOGENATE FS INTRAVENOUS KIT	2	
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	2	
LYSTEDA ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED	2	
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	2	
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	2	
NUWIQ INTRAVENOUS KIT	2	
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	2	
OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED	2	
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED	2	
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	2	
protamine sulfate intravenous solution	1	
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	2	
RECOMBIMATE INTRAVENOUS SOLUTION RECONSTITUTED	2	
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	2	
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	2	
RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED	2	
SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED	2	
THROMBIN-JMI EPISTAXIS EXTERNAL KIT	2	
THROMBIN-JMI EXTERNAL KIT	2	
THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	2	
THROMBOGEN EXTERNAL KIT	2	
THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	2	
tranexamic acid intravenous solution	1	
tranexamic acid oral tablet	1	
TRANEXAMIC ACID-NACL INTRAVENOUS SOLUTION	3	
TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED	2	

Drug Name	Drug Tier	Requirements /Limits
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	2	
WILATE INTRAVENOUS KIT	2	
XYNTHA INTRAVENOUS KIT	2	
XYNTHA SOLOFUSE INTRAVENOUS KIT	2	
<b>Platelet Modifying Agents</b>		
AGGRASTAT INTRAVENOUS CONCENTRATE	2	
AGGRASTAT INTRAVENOUS SOLUTION	2	
aspirin-dipyridamole er oral capsule extended release 12 hour	1	
ASPIRIN- OMEPRAZOLE ORAL TABLET DELAYED RELEASE	1	
BRILINTA ORAL TABLET	2	
CABLIVI INJECTION KIT	3	PA
cilostazol oral tablet	1	
clopidogrel bisulfate oral tablet	1	
dipyridamole oral tablet	1	
DOPTELET ORAL TABLET	3	PA
DURLAZA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
EFFIENT ORAL TABLET	3	
eptifibatide intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	3	
PLAVIX ORAL TABLET	3	
prasugrel hcl oral tablet	1	
TAVALISSE ORAL TABLET	3	PA
tirofiban hcl in nacl intravenous solution	1	
YOSPRALA ORAL TABLET DELAYED RELEASE	3	
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
AKOVAZ INTRAVENOUS SOLUTION	2	
BIORPHEN INTRAVENOUS SOLUTION	3	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	3	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	3	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	3	
CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	1	
clonidine hcl oral tablet	1	
CLONIDINE HCL POWDER	2	
clonidine transdermal patch weekly	1	
droxidopa oral capsule	1	PA

Drug Name	Drug Tier	Requirements /Limits
ephedrine sulfate (pressors) intravenous solution	1	
guanfacine hcl oral tablet	1	
methyldopa oral tablet	1	
midodrine hcl oral tablet	1	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION	2	
NORTHERA ORAL CAPSULE	3	PA
phenylephrine hcl (pressors) intravenous solution	1	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION	2	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION	2	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
VAZCULEP INTRAVENOUS SOLUTION	3	
<b>Alpha-adrenergic Blocking Agents</b>		
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
DIBENZYLINE ORAL CAPSULE	3	
LABETALOL HCL- DEXTROSE INTRAVENOUS SOLUTION	3	
MINIPRESS ORAL CAPSULE	3	
phenoxybenzamine hcl oral capsule	1	
phentolamine mesylate injection solution reconstituted	1	
prazosin hcl oral capsule	1	
PRAZOSIN HCL POWDER	2	
<b>Angiotensin II Receptor Antagonists</b>		
ATACAND ORAL TABLET	3	
AVAPRO ORAL TABLET	3	
BENICAR ORAL TABLET	3	
candesartan cilexetil oral tablet	1	
COZAAR ORAL TABLET	3	
DIOVAN ORAL TABLET	3	
EDARBI ORAL TABLET	3	
irbesartan oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
losartan potassium oral tablet	1	
MICARDIS ORAL TABLET	3	
olmesartan medoxomil oral tablet	1	
telmisartan oral tablet	1	
VALSARTAN ORAL SOLUTION	1	
valsartan oral tablet	1	
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
ACCUPRIL ORAL TABLET	3	
ALTACE ORAL CAPSULE	3	
benazepril hcl oral tablet	1	
captopril oral tablet	1	
enalapril maleate oral solution	1	
enalapril maleate oral tablet	1	
enalaprilat intravenous injectable	1	
EPANED ORAL SOLUTION	3	
fosinopril sodium oral tablet	1	
lisinopril oral tablet	1	
LOTENSIN ORAL TABLET	3	
moexipril hcl oral tablet	1	
perindopril erbumine oral tablet	1	
QBRELIS ORAL SOLUTION	3	
quinapril hcl oral tablet	1	
ramipril oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
trandolapril oral tablet	1	
VASOTEC ORAL TABLET	3	
ZESTRIL ORAL TABLET	3	
<b>Antiarrhythmics</b>		
adenosine intravenous solution	1	
amiodarone hcl intravenous solution	1	
amiodarone hcl oral tablet	1	
BETAPACE AF ORAL TABLET	3	
BETAPACE ORAL TABLET	3	
CORVERT INTRAVENOUS SOLUTION	3	
digitek oral tablet	1	
digox oral tablet	1	
digoxin injection solution	1	
digoxin oral solution	1	
digoxin oral tablet	1	
disopyramide phosphate oral capsule	1	
dofetilide oral capsule	1	
flecainide acetate oral tablet	1	
ibutilide fumarate intravenous solution	1	
LANOXIN INJECTION SOLUTION	3	
LANOXIN ORAL TABLET	3	
LANOXIN PEDIATRIC INJECTION SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
lidocaine hcl (cardiac) intravenous solution prefilled syringe	1	
lidocaine hcl (cardiac) pf intravenous solution	1	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	1	
lidocaine in d5w intravenous solution	1	
mexiletine hcl oral capsule	1	
MULTAQ ORAL TABLET	2	
NEXTERONE INTRAVENOUS SOLUTION	3	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
NORPACE ORAL CAPSULE	3	
PACERONE ORAL TABLET	1	
procainamide hcl injection solution	1	
propafenone hcl er oral capsule extended release 12 hour	1	
propafenone hcl oral tablet	1	
quinidine gluconate er oral tablet extended release	1	
quinidine sulfate oral tablet	1	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	
sorine oral tablet	1	
sotalol hcl (af) oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
SOTALOL HCL INTRAVENOUS SOLUTION	1	
sotalol hcl oral tablet	1	
SOTYLIZE ORAL SOLUTION	3	
TIKOSYN ORAL CAPSULE	3	
<b>Beta-adrenergic Blocking Agents</b>		
acebutolol hcl oral capsule	1	
atenolol oral tablet	1	
ATENOLOL+SYRSPE ND SF ORAL SUSPENSION	2	
betaxolol hcl oral tablet	1	
bisoprolol fumarate oral tablet	1	
BREVIBLOC IN NACL INTRAVENOUS SOLUTION	3	
BREVIBLOC INTRAVENOUS SOLUTION	3	
BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION	3	
BREVIBLOC PREMIXED INTRAVENOUS SOLUTION	3	
BYSTOLIC ORAL TABLET	3	
carvedilol oral tablet	1	
carvedilol phosphate er oral capsule extended release 24 hour	1	
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	

Drug Name	Drug Tier	Requirements /Limits
COREG ORAL TABLET	3	
CORGARD ORAL TABLET	3	
esmolol hcl intravenous solution	1	
esmolol hcl-sodium chloride intravenous solution	1	
HEMANGEOL ORAL SOLUTION	3	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE	3	
labetalol hcl intravenous solution	1	
LABELTALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
labetalol hcl oral tablet	1	
LABELTALOL HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
LOPRESSOR ORAL TABLET	3	
metoprolol succinate er oral tablet extended release 24 hour	1	
metoprolol tartrate intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
metoprolol tartrate oral tablet	1	
METOPROLOL TARTRATE POWDER	2	
nadolol oral tablet	1	
nebivolol hcl oral tablet	1	
pindolol oral tablet	1	
propranolol hcl er oral capsule extended release 24 hour	1	
propranolol hcl intravenous solution	1	
propranolol hcl oral solution	1	
propranolol hcl oral tablet	1	
PROPRANOLOL HCL POWDER	2	
TENORMIN ORAL TABLET	3	
TIMOLOL MALEATE POWDER	2	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<b>Calcium Channel Blocking Agents, Dihydropyridines</b>		
AMLODIPINE BES+SYRSPEND SF ORAL SUSPENSION	2	
amlodipine besylate oral tablet	1	
CARDENE IV INTRAVENOUS SOLUTION	3	
CLEVIPREX INTRAVENOUS EMULSION	3	
CONJUPRI ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
felodipine er oral tablet extended release 24 hour	1	
isradipine oral capsule	1	
KATERZIA ORAL SUSPENSION	3	
LEVAMLODIPINE MALEATE ORAL TABLET	1	
NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION	3	
NICARDIPINE HCL IN NAACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
nicardipine hcl intravenous solution	1	
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	
NORLIQVA ORAL SOLUTION	3	
NORVASC ORAL TABLET	3	
NYMALIZE ORAL SOLUTION	3	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<b>Calcium Channel Blocking Agents, Nondihydropyridines</b>		
CALAN SR ORAL TABLET EXTENDED RELEASE	3	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
CARDIZEM ORAL TABLET	3	
cartia xt oral capsule extended release 24 hour	1	
diltiazem hcl er beads oral capsule extended release 24 hour	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	1	
diltiazem hcl er 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	1	
diltiazem hcl intravenous solution	1	
diltiazem hcl intravenous solution reconstituted	1	
diltiazem hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
DILTIAZEM HCL- DEXTROSE INTRAVENOUS SOLUTION	2	
DILTIAZEM HCL- SODIUM CHLORIDE INTRAVENOUS SOLUTION	2	
dilt-xr oral capsule extended release 24 hour	1	
matzim la oral tablet extended release 24 hour	1	
taztia xt oral capsule extended release 24 hour	1	
tiadyt er oral capsule extended release 24 hour	1	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
verapamil hcl er oral capsule extended release 24 hour	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl intravenous solution	1	
verapamil hcl oral tablet	1	
VERAPAMIL HCL POWDER	2	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
<b>Cardiovascular Agents, Other</b>		
ACCURETIC ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
acetazolamide sodium injection solution reconstituted	1	
ADRENALIN INJECTION SOLUTION	3	
AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
ALDACTAZIDE ORAL TABLET	3	
aliskiren fumarate oral tablet	1	
amiloride-hydrochlorothiazide oral tablet	1	
amlodipine besy-benazepril hcl oral capsule	1	
amlodipine besylate-valsartan oral tablet	1	
amlodipine-atorvastatin oral tablet	1	
amlodipine-olmesartan oral tablet	1	
amlodipine-valsartan-hctz oral tablet	1	
ASCLERA INTRAVENOUS SOLUTION	2	
ASPRUZYO SPRINKLE ORAL PACKET	3	
ATACAND HCT ORAL TABLET	3	
atenolol-chlorthalidone oral tablet	1	
AVALIDE ORAL TABLET	3	
AZOR ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
benazepril-hydrochlorothiazide oral tablet	1	
BENICAR HCT ORAL TABLET	3	
BIDIL ORAL TABLET	3	
bisoprolol-hydrochlorothiazide oral tablet	1	
CADUET ORAL TABLET	3	
CAMZYOS ORAL CAPSULE	3	PA
candesartan cilexetil-hctz oral tablet	1	
captopril-hydrochlorothiazide oral tablet	1	
CONSENSI ORAL TABLET	3	
CORLANOR ORAL SOLUTION	3	
CORLANOR ORAL TABLET	3	
DEFITELIO INTRAVENOUS SOLUTION	3	
DEMSEER ORAL CAPSULE	3	
DIOVAN HCT ORAL TABLET	3	
dobutamine hcl intravenous solution	1	B/D
dobutamine in d5w intravenous solution	1	B/D
dopamine hcl intravenous solution	1	B/D
dopamine in d5w intravenous solution	1	B/D
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
EDARBYCLOR ORAL TABLET	3	
EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
enalapril-hydrochlorothiazide oral tablet	1	
ENTRESTO ORAL TABLET	2	
EPHEDRINE SULFATE (PRESSORS) INJECTION SOLUTION PREFILLED SYRINGE	2	
EPHEDRINE SULFATE (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
EPHEDRINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
epinephrine (anaphylaxis) injection solution	1	
EPINEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION	2	
EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION	2	
epinephrine injection solution	1	
epinephrine injection solution prefilled syringe	1	

Drug Name	Drug Tier	Requirements /Limits
EPINEPHRINE INTRAVENOUS SOLUTION	2	
epinephrine intravenous solution prefilled syringe	1	
epinephrine pf injection solution	1	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION	2	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION	2	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
EVKEEZA INTRAVENOUS SOLUTION	3	PA
EXFORGE HCT ORAL TABLET	3	
EXFORGE ORAL TABLET	3	
fosinopril sodium-hctz oral tablet	1	
HYZAAR ORAL TABLET	3	
irbesartan-hydrochlorothiazide oral tablet	1	
isosorb dinitrate-hydralazine oral tablet	1	
KERENDIA ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
LEVOPHED INTRAVENOUS SOLUTION	3	
lisinopril-hydrochlorothiazide oral tablet	1	
losartan potassium-hctz oral tablet	1	
LOTENSIN HCT ORAL TABLET	3	
LOTREL ORAL CAPSULE	3	
mannitol intravenous solution	1	
MAXZIDE ORAL TABLET	3	
MAXZIDE-25 ORAL TABLET	3	
metoprolol-hydrochlorothiazide oral tablet	1	
metyrosine oral capsule	1	
MICARDIS HCT ORAL TABLET	3	
milrinone lactate in dextrose intravenous solution	1	B/D
milrinone lactate intravenous solution	1	B/D
norepinephrine bitartrate intravenous solution	1	
NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION	2	
olmesartan medoxomil-hctz oral tablet	1	
olmesartan-amlodipine-hctz oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
OSMITROL INTRAVENOUS SOLUTION	3	
pentoxifylline er oral tablet extended release	1	
PRESTALIA ORAL TABLET	3	
quinapril-hydrochlorothiazide oral tablet	1	
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
ranolazine er oral tablet extended release 12 hour	1	
REZIPRES INTRAVENOUS SOLUTION	2	
sodium tetradecyl sulfate intravenous solution	1	
SOTRADECOL INTRAVENOUS SOLUTION	3	
spironolactone-hctz oral tablet	1	
TEKTURNA HCT ORAL TABLET	3	
TEKTURNA ORAL TABLET	3	
telmisartan-amlodipine oral tablet	1	
telmisartan-hctz oral tablet	1	
TENORETIC 100 ORAL TABLET	3	
TENORETIC 50 ORAL TABLET	3	
trandolapril-verapamil hcl er oral tablet extended release	1	

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Drug Name	Drug Tier	Requirements /Limits
triamterene-hctz oral capsule	1	
triamterene-hctz oral tablet	1	
TRIBENZOR ORAL TABLET	3	
valsartan-hydrochlorothiazide oral tablet	1	
VARITHENA INTRAVENOUS FOAM	2	
VASERETIC ORAL TABLET	3	
VECAMYL ORAL TABLET	3	
VYNDAMAX ORAL CAPSULE	3	PA
ZESTORETIC ORAL TABLET	3	
ZIAC ORAL TABLET	3	
<b>Diuretics, Loop</b>		
bumetanide injection solution	1	
bumetanide oral tablet	1	
BUMEX ORAL TABLET	3	
EDECRIN ORAL TABLET	3	
ethacrynate sodium intravenous solution reconstituted	1	
ethacrynic acid oral tablet	1	
FUROSCIX SUBCUTANEOUS CARTRIDGE KIT	3	
FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
furosemide injection solution	1	
furosemide oral solution	1	
furosemide oral tablet	1	
FUROSEMIDE POWDER	2	
LASIX ORAL TABLET	3	
SOAANZ ORAL TABLET	3	
SODIUM EDECRIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
toremide oral tablet	1	
<b>Diuretics, Potassium-sparing</b>		
ALDACTONE ORAL TABLET	3	
amiloride hcl oral tablet	1	
CAROSPIR ORAL SUSPENSION	3	
DYRENIUM ORAL CAPSULE	3	
eplerenone oral tablet	1	
INSPRA ORAL TABLET	3	
spironolactone oral tablet	1	
SPIRONOLACTONE POWDER	2	
triamterene oral capsule	1	
<b>Diuretics, Thiazide</b>		
chlorothiazide sodium intravenous solution reconstituted	1	
chlorthalidone oral tablet	1	
DIURIL ORAL SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
hydrochlorothiazide oral capsule	1	
hydrochlorothiazide oral tablet	1	
HYDROCHLOROTHIAZIDE POWDER	2	
indapamide oral tablet	1	
metolazone oral tablet	1	
SODIUM DIURIL INTRAVENOUS SOLUTION RECONSTITUTED	3	
THALITONE ORAL TABLET	3	
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
ANTARA ORAL CAPSULE	3	
fenofibrate micronized oral capsule	1	
fenofibrate oral capsule	1	
fenofibrate oral tablet	1	
fenofibric acid oral capsule delayed release	1	
fenofibric acid oral tablet	1	
FENOGLIDE ORAL TABLET	3	
FIBRICOR ORAL TABLET	3	
gemfibrozil oral tablet	1	
GEMFIBROZIL POWDER	2	
LIPOFEN ORAL CAPSULE	3	
LOPID ORAL TABLET	3	
TRICOR ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
TRILIPIX ORAL CAPSULE DELAYED RELEASE	3	
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
ATORVALIQ ORAL SUSPENSION	3	
atorvastatin calcium oral tablet	1	
CRESTOR ORAL TABLET	3	
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	3	
FLOLIPID ORAL SUSPENSION	3	
fluvastatin sodium er oral tablet extended release 24 hour	1	
fluvastatin sodium oral capsule	1	
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
LIPITOR ORAL TABLET	3	
LIVALO ORAL TABLET	2	
lovastatin oral tablet	1	PV
pravastatin sodium oral tablet	1	
rosuvastatin calcium oral tablet	1	
simvastatin oral tablet	1	
ZOCOR ORAL TABLET	3	
ZYPITAMAG ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
<b>Dyslipidemics, Other</b>		
cholestyramine light oral packet	1	
cholestyramine light oral powder	1	
cholestyramine oral packet	1	
cholestyramine oral powder	1	
colesevelam hcl oral packet	1	
colesevelam hcl oral tablet	1	
COLESTID FLAVORED ORAL GRANULES	3	
COLESTID FLAVORED ORAL PACKET	3	
COLESTID ORAL GRANULES	3	
COLESTID ORAL PACKET	3	
COLESTID ORAL TABLET	3	
colestipol hcl oral granules	1	
colestipol hcl oral packet	1	
colestipol hcl oral tablet	1	
ezetimibe oral tablet	1	
EZETIMIBE-ROSUVASTATIN ORAL TABLET	1	
ezetimibe-simvastatin oral tablet	1	
icosapent ethyl oral capsule	1	
JUXTAPID ORAL CAPSULE	3	PA

Drug Name	Drug Tier	Requirements /Limits
LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
LOVAZA ORAL CAPSULE	3	
NEXLETOL ORAL TABLET	3	
NEXLIZET ORAL TABLET	3	
niacin (antihyperlipidemic) oral tablet	1	
niacin er (antihyperlipidemic) oral tablet extended release	1	
niacor oral tablet	1	
NIASPAN ORAL TABLET EXTENDED RELEASE	3	
omega-3-acid ethyl esters oral capsule	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
prevalite oral packet	1	
prevalite oral powder	1	
QUESTRAN LIGHT ORAL POWDER	3	
QUESTRAN ORAL PACKET	3	
QUESTRAN ORAL POWDER	3	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	2	

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Drug Name	Drug Tier	Requirements /Limits
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
ROSZET ORAL TABLET	3	
VASCEPA ORAL CAPSULE	2	
VYTORIN ORAL TABLET	3	
WELCHOL ORAL PACKET	3	
WELCHOL ORAL TABLET	3	
ZETIA ORAL TABLET	3	
<b>Vasodilators, Direct-acting Arterial</b>		
CORLOPAM INTRAVENOUS SOLUTION	3	
hydralazine hcl injection solution	1	
hydralazine hcl oral tablet	1	
minoxidil oral tablet	1	
papaverine hcl injection solution	1	
PAPAVERINE HCL POWDER	2	
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
GONITRO SUBLINGUAL PACKET	3	
ISORDIL TITRADOSE ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
isosorbide dinitrate oral tablet	1	
isosorbide mononitrate er oral tablet extended release 24 hour	1	
isosorbide mononitrate oral tablet	1	
NITRO-BID TRANSDERMAL OINTMENT	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	3	
nitroglycerin in d5w intravenous solution	1	
nitroglycerin intravenous solution	1	
nitroglycerin sublingual tablet sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	1	
NITROLINGUAL TRANSLINGUAL SOLUTION	3	
NITROMIST TRANSLINGUAL AEROSOL SOLUTION	3	
nitroprusside sodium intravenous solution	1	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	3	
NITRO-TIME ORAL CAPSULE EXTENDED RELEASE	3	
sodium nitroprusside intravenous solution	1	
VERQUVO ORAL TABLET	2	

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Drug Name	Drug Tier	Requirements /Limits
<b>Central Nervous System Agents</b>		
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
ADDERALL ORAL TABLET	3	
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	3	
amphetamine sulfate oral tablet	1	
amphetamine-dextroamphetamine oral capsule extended release 24 hour	1	
amphetamine-dextroamphetamine oral tablet	1	
amphet-dextroamphetamine 3-bead er oral capsule extended release 24 hour	1	
AZSTARYS ORAL CAPSULE	3	
DESOXYN ORAL TABLET	3	PA
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
dextroamphetamine sulfate er oral capsule extended release 24 hour	1	
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	3	
DYANAVEL XR ORAL TABLET CHEWABLE EXTENDED RELEASE	3	
EVEKEO ODT ORAL TABLET DISPERSIBLE	3	
EVEKEO ORAL TABLET	3	
lisdexamfetamine dimesylate oral capsule	1	
lisdexamfetamine dimesylate oral tablet chewable	1	
methamphetamine hcl oral tablet	1	PA
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
PROCENTRA ORAL SOLUTION	3	
VYVANSE ORAL CAPSULE	3	
VYVANSE ORAL TABLET CHEWABLE	3	
XELSTRYM TRANSDERMAL PATCH	3	
ZENZEDI ORAL TABLET	3	
<b>Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines</b>		
ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
atomoxetine hcl oral capsule	1	
clonidine hcl er oral tablet extended release 12 hour	1	
CONCERTA ORAL TABLET EXTENDED RELEASE	3	
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	3	
DAYTRANA TRANSDERMAL PATCH	3	
dexmethylphenidate hcl er oral capsule extended release 24 hour	1	
dexmethylphenidate hcl oral tablet	1	
FOCALIN ORAL TABLET	3	
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
guanfacine hcl er oral tablet extended release 24 hour	1	
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
METHYLIN ORAL SOLUTION	3	
methylphenidate hcl er (cd) oral capsule extended release	1	

Drug Name	Drug Tier	Requirements /Limits
methylphenidate hcl er (la) oral capsule extended release 24 hour	1	
methylphenidate hcl er (osm) oral tablet extended release	1	
methylphenidate hcl er (xr) oral capsule extended release 24 hour	1	
methylphenidate hcl er oral tablet extended release	1	
methylphenidate hcl er oral tablet extended release 24 hour	1	
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet chewable	1	
methylphenidate transdermal patch	1	
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE	3	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	3	
RELEXXII ORAL TABLET EXTENDED RELEASE	3	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
RITALIN ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
STRATTERA ORAL CAPSULE	3	
<b>Central Nervous System, Other</b>		
ADIPEX-P ORAL CAPSULE	2	
ADIPEX-P ORAL TABLET	2	
ALLZITAL ORAL TABLET	3	
AUSTEDO ORAL TABLET	3	PA
AUSTEDO PATIENT TITRATION KIT ORAL TABLET THERAPY PACK	2	
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA
bac oral tablet	1	
benzphetamine hcl oral tablet	1	
BUPAP ORAL TABLET	3	
BUTALBITAL-ACETAMINOPHEN ORAL CAPSULE	1	
butalbital-acetaminophen oral tablet	1	
butalbital-apap-caffeine oral capsule	1	
butalbital-apap-caffeine oral tablet	1	
butalbital-aspirin-caffeine oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
CAFCIT INTRAVENOUS SOLUTION	3	
CAFFEINE ANHYDROUS POWDER	2	
caffeine citrate intravenous solution	1	
caffeine citrate oral solution	1	
CAFFEINE-SODIUM BENZOATE INJECTION SOLUTION	3	
clonidine hcl (analgesia) epidural solution	1	B/D
CLONIDINE HCL (BULK) SOLUTION	2	
CONTRAIVE ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
DAYBUE ORAL SOLUTION	3	PA
diethylpropion hcl er oral tablet extended release 24 hour	1	
diethylpropion hcl oral tablet	1	
DOPRAM INTRAVENOUS SOLUTION	2	
DURACLON EPIDURAL SOLUTION	3	B/D
ESGIC ORAL CAPSULE	3	
ESGIC ORAL TABLET	3	
EXSERVAN ORAL FILM	3	
FIORICET ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
FIRDAPSE ORAL TABLET	3	PA
flumazenil intravenous solution	1	
GRALISE ORAL	3	PA
GRALISE ORAL TABLET	3	PA
HORIZANT ORAL TABLET EXTENDED RELEASE	3	
INGREZZA ORAL CAPSULE	3	PA
INGREZZA ORAL CAPSULE THERAPY PACK	3	PA
LOMAIRA ORAL TABLET	2	
NUDEXTA ORAL CAPSULE	3	PA
phendimetrazine tartrate er oral capsule extended release 24 hour	1	
phentermine hcl oral capsule	1	
phentermine hcl oral tablet	1	
PRIALT INTRATHECAL SOLUTION	3	B/D
QALSODY INTRATHECAL SOLUTION	3	PA
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
QUVIVIQ ORAL TABLET	3	
RADICAVA INTRAVENOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
RADICAVA ORS ORAL SUSPENSION	3	PA
RADICAVA ORS STARTER KIT ORAL SUSPENSION	3	PA
RELYVRIO ORAL PACKET	3	PA
RILUTEK ORAL TABLET	3	
riluzole oral tablet	1	
TENCON ORAL TABLET	1	
tetrabenazine oral tablet	1	PA
TIGLUTIK ORAL SUSPENSION	3	
VEOZAH ORAL TABLET	3	PA
VTOL LQ ORAL SOLUTION	3	
XENAZINE ORAL TABLET	3	PA
ZEBUTAL ORAL CAPSULE	3	
ZTALMY ORAL SUSPENSION	3	PA
<b>Fibromyalgia Agents</b>		
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
pregabalin er oral tablet extended release 24 hour	1	
SAVELLA ORAL TABLET	2	
SAVELLA TITRATION PACK ORAL	2	

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Drug Name	Drug Tier	Requirements /Limits
<b>Multiple Sclerosis Agents</b>		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA
AUBAGIO ORAL TABLET	3	PA
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	3	PA
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	3	PA
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	3	PA
BETASERON SUBCUTANEOUS KIT	3	PA
BRIUMVI INTRAVENOUS SOLUTION	3	PA
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
dalfampridine er oral tablet extended release 12 hour	1	PA
dimethyl fumarate oral capsule delayed release	1	PA
dimethyl fumarate starter pack oral	1	PA
EXTAVIA SUBCUTANEOUS KIT	3	PA
fingolimod hcl oral capsule	1	PA
GILENYA ORAL CAPSULE	3	PA
glatiramer acetate subcutaneous solution prefilled syringe	1	PA

Drug Name	Drug Tier	Requirements /Limits
glatopa subcutaneous solution prefilled syringe	1	PA
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	3	PA
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	3	PA
MAYZENT ORAL TABLET	3	PA
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	3	PA
mitoxantrone hcl intravenous concentrate	1	PA
OCREVUS INTRAVENOUS SOLUTION	3	PA
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PA

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Drug Name	Drug Tier	Requirements /Limits
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
PONVORY ORAL TABLET	3	PA
PONVORY STARTER PACK ORAL TABLET THERAPY PACK	3	PA
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
TASCENSO ODT ORAL TABLET DISPERSIBLE	3	PA

Drug Name	Drug Tier	Requirements /Limits
TECFIDERA ORAL	3	PA
TECFIDERA ORAL CAPSULE DELAYED RELEASE	3	PA
teriflunomide oral tablet	1	PA
TYSABRI INTRAVENOUS CONCENTRATE	3	PA
VUMERITY ORAL CAPSULE DELAYED RELEASE	3	PA
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	3	PA
ZEPOSIA ORAL CAPSULE	3	PA
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	3	PA
<b>Currently Undefined</b>		
<b>Non-FRF</b>		
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
AQUASOL A INTRAMUSCULAR SOLUTION	2	
EUA PATIENT ASSESSMENT	2	
SCENESSE SUBCUTANEOUS IMPLANT	2	
<b>Dental and Oral Agents</b>		
cevimeline hcl oral capsule	1	
chlorhexidine gluconate mouth/throat solution	1	
doxycycline hyclate oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
EVOXAC ORAL CAPSULE	3	
lidocaine viscous hcl mouth/throat solution	1	
pilocarpine hcl oral tablet	1	
SALAGEN ORAL TABLET	3	
triamcinolone acetone mouth/throat paste	1	
<b>Non-FRF</b>		
ACYCLONINE MUM MOUTH/THROAT AEROSOL POWDER	2	
AQUORAL MOUTH/THROAT SOLUTION	2	
ARESTIN DENTAL	3	
CHLORHEXIDINE GLUCONATE SOLUTION	2	
CLINPRO 5000 DENTAL PASTE	3	
DEBACTEROL MOUTH/THROAT SOLUTION	3	
DENTA 5000 PLUS DENTAL CREAM	3	
DENTAGEL DENTAL GEL	3	
easygel dental gel	1	
FIRST-MOUTHWASH BLM MOUTH/THROAT SUSPENSION	2	
fluoridex daily renewal mouth/throat concentrate	1	
FLUORIDEX DENTAL PASTE	3	

Drug Name	Drug Tier	Requirements /Limits
FLUORIDEX ENHANCED WHITENING DENTAL PASTE	3	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	3	
FLUORIMAX 5000 DENTAL PASTE	3	
FLUORIMAX 5000 SENSITIVE DENTAL PASTE	3	
JUST RIGHT 5000 DENTAL GEL	3	
JUST RIGHT 5000 DENTAL PASTE	3	
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	3	
kourzeq mouth/throat paste	1	
lidocaine hcl mouth/throat solution	1	
MI PASTE DENTAL PASTE	2	
MI PASTE PLUS DENTAL PASTE	2	
NAFRINSE DAILY ACIDULATED MOUTH/THROAT SOLUTION RECONSTITUTED	3	
NAFRINSE DAILY/NEUTRAL MOUTH/THROAT SOLUTION RECONSTITUTED	3	
NAFRINSE WEEKLY MOUTH/THROAT SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
oralone mouth/throat paste	1	
PERIDEX MOUTH/THROAT SOLUTION	3	
periogard mouth/throat solution	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	3	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	3	
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL	3	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE	3	
PREVIDENT 5000 PLUS DENTAL CREAM	3	
PREVIDENT 5000 SENSITIVE DENTAL GEL	3	
PREVIDENT DENTAL GEL	3	
PREVIDENT MOUTH/THROAT SOLUTION	3	
REMESENSE DENTAL	2	
sf 5000 plus dental cream	1	
sf dental gel	1	
sodium fluoride 5000 enamel dental gel	1	
sodium fluoride 5000 plus dental cream	1	
sodium fluoride 5000 ppm dental cream	1	
sodium fluoride 5000 ppm dental gel	1	

Drug Name	Drug Tier	Requirements /Limits
sodium fluoride 5000 ppm dental paste	1	
sodium fluoride 5000 sensitive dental gel	1	
sodium fluoride dental cream	1	
sodium fluoride dental gel	1	
sodium fluoride mouth/throat solution	1	
VANISH DENTAL LIQUID EXTENDED RELEASE	2	
<b>Dermatological Agents</b>		
<b>Acne and Rosacea Agents</b>		
ABSORICA LD ORAL CAPSULE	3	
ABSORICA ORAL CAPSULE	3	
ACANYA EXTERNAL GEL	3	
accutane oral capsule	1	
acitretin oral capsule	1	
adapalene external cream	1	
adapalene external gel	1	
ADAPALENE EXTERNAL PAD	1	
ADAPALENE EXTERNAL SOLUTION	1	
adapalene-benzoyl peroxide external gel	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	1	
AKLIEF EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
ALTRENO EXTERNAL LOTION	3	
amneesteem oral capsule	1	
ARAZLO EXTERNAL LOTION	3	
ATRALIN EXTERNAL GEL	3	
AVITA EXTERNAL CREAM	3	
AVITA EXTERNAL GEL	3	
azelaic acid external gel	1	
AZELEX EXTERNAL CREAM	3	
BENZACLIN EXTERNAL GEL	3	
BENZACLIN WITH PUMP EXTERNAL GEL	3	
BENZAMYCIN EXTERNAL GEL	3	
BENZOYL PEROX-HYDROCORTISONE EXTERNAL LOTION	1	
BENZOYL PEROXIDE FORTE- HC EXTERNAL LOTION	1	
benzoyl peroxide-erythromycin external gel	1	
brimonidine tartrate external gel	1	
claravis oral capsule	1	
clindamycin phos-benzoyl perox external gel	1	
clindamycin-tretinoin external gel	1	
DIFFERIN EXTERNAL CREAM	3	

Drug Name	Drug Tier	Requirements /Limits
DIFFERIN EXTERNAL GEL	3	
DIFFERIN EXTERNAL LOTION	3	
EPIDUO EXTERNAL GEL	3	
EPIDUO FORTE EXTERNAL GEL	3	
FABIOR EXTERNAL FOAM	3	
FINACEA EXTERNAL FOAM	2	
FINACEA EXTERNAL GEL	3	
INOVA EXTERNAL KIT	3	
isotretinoin oral capsule	1	
METROCREAM EXTERNAL CREAM	3	
METROGEL EXTERNAL GEL	3	
METROLOTION EXTERNAL LOTION	3	
metronidazole external cream	1	
metronidazole external gel	1	
metronidazole external lotion	1	
MIRVASO EXTERNAL GEL	3	
myorisan oral capsule	1	
neuac external gel	1	
NORITATE EXTERNAL CREAM	3	
ONEXTON EXTERNAL GEL	3	
OVACE PLUS EXTERNAL CREAM	3	
OVACE PLUS EXTERNAL FOAM	3	

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Drug Name	Drug Tier	Requirements /Limits
OVACE PLUS EXTERNAL LOTION	3	
OVACE PLUS EXTERNAL SHAMPOO	3	
OVACE PLUS WASH EXTERNAL GEL	3	
OVACE PLUS WASH EXTERNAL LIQUID	3	
OVACE WASH EXTERNAL LIQUID	3	
PLEXION NS EXTERNAL SHAMPOO	3	
RETIN-A EXTERNAL CREAM	3	
RETIN-A EXTERNAL GEL	3	
RETIN-A MICRO EXTERNAL GEL	3	
RETIN-A MICRO PUMP EXTERNAL GEL	3	
RHOFADE EXTERNAL CREAM	3	
rosadan external cream	1	
rosadan external gel	1	
selenium sulfide external shampoo	1	
sodium sulfacetamide external shampoo	1	
sodium sulfacetamide wash external liquid	1	
SODIUM SULFACETAMIDE-BAKUCHIOL EXTERNAL LIQUID	3	
sulfacetamide sodium (cleans) external gel	1	
sulfacetamide sodium external liquid	1	

Drug Name	Drug Tier	Requirements /Limits
tazarotene external cream	1	
TAZAROTENE EXTERNAL FOAM	3	
tazarotene external gel	1	
TAZORAC EXTERNAL CREAM	3	
TAZORAC EXTERNAL GEL	3	
tretinoin external cream	1	
tretinoin external gel	1	
tretinoin microsphere external gel	1	
tretinoin microsphere pump external gel	1	
TRETINOIN POWDER	2	
TWYNEO EXTERNAL CREAM	3	
VANOXIDE-HC EXTERNAL LOTION	3	
VELTIN EXTERNAL GEL	3	
ZACARE EXTERNAL KIT	3	
zenatane oral capsule	1	
ZIANA EXTERNAL GEL	3	
<b>Dermatitis and Pruitus Agents</b>		
ADVANCED ALLERGY COLLECTION EXTERNAL KIT	3	
ALA SCALP EXTERNAL LOTION	3	
ala-cort external cream	1	
alclometasone dipropionate external cream	1	
alclometasone dipropionate external ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
amcinonide external cream	1	
amcinonide external lotion	1	
amcinonide external ointment	1	
ammonium lactate external cream	1	
ammonium lactate external lotion	1	
APEXICON E EXTERNAL CREAM	3	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	1	
betamethasone dipropionate aug external lotion	1	
betamethasone dipropionate aug external ointment	1	
betamethasone dipropionate external cream	1	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	1	
betamethasone valerate external cream	1	
betamethasone valerate external foam	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	

Drug Name	Drug Tier	Requirements /Limits
BRYHALI EXTERNAL LOTION	3	
CAPEX EXTERNAL SHAMPOO	3	
CIBINQO ORAL TABLET	3	PA
clobetasol prop emollient base external cream	1	
clobetasol propionate e external cream	1	
clobetasol propionate emulsion external foam	1	
clobetasol propionate external cream	1	
clobetasol propionate external foam	1	
clobetasol propionate external gel	1	
clobetasol propionate external liquid	1	
clobetasol propionate external lotion	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
CLOBEX EXTERNAL LOTION	3	
CLOBEX EXTERNAL SHAMPOO	3	
CLOBEX SPRAY EXTERNAL LIQUID	3	
clocortolone pivalate external cream	1	
clodan external shampoo	1	
CLODERM EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
CORDRAN EXTERNAL CREAM	3	
CORDRAN EXTERNAL LOTION	3	
CORDRAN EXTERNAL OINTMENT	3	
CORDRAN EXTERNAL TAPE	3	
CUTIVATE EXTERNAL LOTION	3	
DERMA-SMOOTH/FS BODY EXTERNAL OIL	3	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL	3	
desonide external cream	1	
desonide external gel	1	
desonide external lotion	1	
desonide external ointment	1	
DESOWEN EXTERNAL CREAM	3	
desoximetasone external cream	1	
desoximetasone external gel	1	
desoximetasone external liquid	1	
desoximetasone external ointment	1	
desrx external gel	1	
diflorasone diacetate external cream	1	
diflorasone diacetate external ointment	1	
DIPROLENE AF EXTERNAL CREAM	3	

Drug Name	Drug Tier	Requirements /Limits
DIPROLENE EXTERNAL OINTMENT	3	
doxepin hcl external cream	1	
ELIDEL EXTERNAL CREAM	3	
EUCRISA EXTERNAL OINTMENT	3	
fluocinolone acetonide body external oil	1	
fluocinolone acetonide external cream	1	
fluocinolone acetonide external ointment	1	
fluocinolone acetonide external solution	1	
fluocinolone acetonide scalp external oil	1	
fluocinonide emulsified base external cream	1	
fluocinonide external cream	1	
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
flurandrenolide external cream	1	
flurandrenolide external lotion	1	
flurandrenolide external ointment	1	
fluticasone propionate external cream	1	
fluticasone propionate external lotion	1	
fluticasone propionate external ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
halcinonide external cream	1	
halobetasol propionate external cream	1	
HALOBETASOL PROPIONATE EXTERNAL FOAM	1	
halobetasol propionate external ointment	1	
HALOG EXTERNAL CREAM	3	
HALOG EXTERNAL OINTMENT	3	
HALOG EXTERNAL SOLUTION	3	
hydrocortisone butyr lipo base external cream	1	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	1	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone external cream	1	
hydrocortisone external lotion	1	
hydrocortisone external ointment	1	
hydrocortisone valerate external cream	1	
hydrocortisone valerate external ointment	1	
HYFTOR EXTERNAL GEL	3	
IMPEKLO EXTERNAL LOTION	3	

Drug Name	Drug Tier	Requirements /Limits
IMPOYZ EXTERNAL CREAM	3	
KENALOG EXTERNAL AEROSOL SOLUTION	3	
lactic acid external lotion	1	
LEXETTE EXTERNAL FOAM	3	
LOCOID EXTERNAL LOTION	3	
LOCOID LIPOCREAM EXTERNAL CREAM	3	
LUXIQ EXTERNAL FOAM	3	
mometasone furoate external cream	1	
mometasone furoate external ointment	1	
mometasone furoate external solution	1	
nolix external cream	1	
nolix external lotion	1	
NUCORT EXTERNAL LOTION	3	
OLUX EXTERNAL FOAM	3	
OLUX-E EXTERNAL FOAM	3	
OPZELURA EXTERNAL CREAM	3	
PANDEL EXTERNAL CREAM	3	
pimecrolimus external cream	1	
prednicarbate external ointment	1	
PROTOPIC EXTERNAL OINTMENT	3	
PRUDOXIN EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
selenium sulfide external lotion	1	
SERNIVO EXTERNAL EMULSION	3	
SPEVIGO INTRAVENOUS SOLUTION	3	PA
SYNALAR EXTERNAL CREAM	3	
SYNALAR EXTERNAL OINTMENT	3	
SYNALAR EXTERNAL SOLUTION	3	
tacrolimus external ointment	1	
TEMOVATE EXTERNAL CREAM	3	
TEMOVATE EXTERNAL OINTMENT	3	
TEXACORT EXTERNAL SOLUTION	3	
TOPICORT EXTERNAL CREAM	3	
TOPICORT EXTERNAL GEL	3	
TOPICORT EXTERNAL OINTMENT	3	
TOPICORT SPRAY EXTERNAL LIQUID	3	
tovet external foam	1	
triamcinolone acetonide external aerosol solution	1	
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment	1	

Drug Name	Drug Tier	Requirements /Limits
triamcinolone in absorbase external ointment	1	
TRIANEX EXTERNAL OINTMENT	3	
triderm external cream	1	
TRIDESILON EXTERNAL CREAM	3	
tritocin external ointment	1	
ULTRAVATE EXTERNAL LOTION	3	
VANOS EXTERNAL CREAM	3	
VERDESO EXTERNAL FOAM	3	
ZONALON EXTERNAL CREAM	3	
<b>Dermatological Agents, Other</b>		
A.A.G.C. KIT IN TERODERM EXTERNAL CREAM	2	
ACNESIC EXTERNAL GEL	3	
ALDARA EXTERNAL CREAM	3	
ALUMINUM CHLORIDE ANHYDROUS POWDER	2	
ALUMINUM CHLORIDE HEXAHYDRATE CRYSTALS	2	
ALUMINUM CHLORIDE HEXAHYDRATE POWDER	2	
ana-lex rectal kit	1	
AVAR CLEANSER EXTERNAL LIQUID	3	

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Drug Name	Drug Tier	Requirements /Limits
AVAR LS CLEANSER EXTERNAL LIQUID	3	
AVAR-E EMOLLIENT EXTERNAL CREAM	3	
AVAR-E GREEN EXTERNAL CREAM	3	
AVAR-E LS EXTERNAL CREAM	3	
BENSAL HP EXTERNAL OINTMENT	3	
bp 10-1 external emulsion	1	
bp cleansing wash external emulsion	1	
CALAMINE POWDER	2	
calcipotriene external cream	1	
CALCIPOTRIENE EXTERNAL FOAM	1	
calcipotriene external ointment	1	
calcipotriene external solution	1	
calcipotriene-betameth diprop external ointment	1	
calcipotriene-betameth diprop external suspension	1	
CALCITRENE EXTERNAL OINTMENT	3	
calcitriol external ointment	1	
CANTHARIDIN POWDER	2	
CARAC EXTERNAL CREAM	3	
CEM-UREA EXTERNAL SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
cerovel external lotion	1	
CLENIA PLUS EXTERNAL SUSPENSION	3	
CLINOIN EXTERNAL CREAM	2	
clotrimazole-betamethasone external cream	1	
clotrimazole-betamethasone external lotion	1	
CONDYLOX EXTERNAL GEL	3	
DERMACINRX UREA EXTERNAL CREAM	3	
diclofenac sodium external gel	1	
DOVONEX EXTERNAL CREAM	3	
DRITHO-CREME HP EXTERNAL CREAM	3	
DRYSOL EXTERNAL SOLUTION	3	
DUOBRII EXTERNAL LOTION	3	
EFUDEX EXTERNAL CREAM	3	
ENOVARX-TRAMADOL EXTERNAL CREAM	2	
ENSTILAR EXTERNAL FOAM	3	
EPIFOAM EXTERNAL FOAM	3	
FLUOROPLEX EXTERNAL CREAM	3	
fluorouracil external cream	1	
fluorouracil external solution	1	

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Drug Name	Drug Tier	Requirements /Limits
GORDOFILM EXTERNAL SOLUTION	2	
HYDRO 40 EXTERNAL FOAM	3	
hydrocortisone ace-pramoxine external cream	1	
HYDROCORTISONE ACE-PRAMOXINE RECTAL SUPPOSITORY	1	
HYDROQUINONE POWDER	2	
ICHTHAMMOL POWDER	2	
imiquimod external cream	1	
imiquimod pump external cream	1	
INOVA 4/1 ACNE CONTROL THERAPY EXTERNAL KIT	3	
INOVA 8/2 ACNE CONTROL THERAPY EXTERNAL KIT	3	
KERALYT EXTERNAL GEL	3	
KERALYT EXTERNAL SHAMPOO	3	
KERALYT SCALP EXTERNAL KIT	3	
KLISYRI EXTERNAL OINTMENT	3	
lactic acid e external cream	1	
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
lidocaine-hydrocort (perianal) external cream	1	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM	3	
LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3	
lidocaine-hydrocortisone ace rectal kit	1	
LIDOCORT EXTERNAL CREAM	3	
METHOXSALEN POWDER	2	
methoxsalen rapid oral capsule	1	
NEO-SYNALAR EXTERNAL CREAM	3	
NEURAPTINE EXTERNAL CREAM	2	
NUTRASEB EXTERNAL CREAM	3	
nystatin-triamcinolone external cream	1	
nystatin-triamcinolone external ointment	1	
OTEZLA ORAL TABLET	3	PA
PLEXION CLEANSER EXTERNAL LIQUID	3	
PLEXION CLEANSING CLOTH EXTERNAL PAD	3	
PLEXION EXTERNAL CREAM	3	
PLEXION EXTERNAL LOTION	3	

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Drug Name	Drug Tier	Requirements /Limits
PODOCON-25 EXTERNAL SOLUTION	3	
podofilox external solution	1	
PODOPHYLLUM RESIN POWDER	2	
PREMIUM SCAR EXTERNAL PATCH	3	
PROCTOFOAM HC EXTERNAL FOAM	3	
PROMISEB EXTERNAL CREAM	3	
PROTEXA EXTERNAL CREAM	3	
PYROGALLIC ACID EXTERNAL OINTMENT	2	
QBREXZA EXTERNAL PAD	3	
RADIAURA EXTERNAL CREAM	3	
REGENECARE EXTERNAL GEL	2	
REGRANEX EXTERNAL GEL	3	
SALEX EXTERNAL SHAMPOO	3	
SALICATE EXTERNAL LIQUID	2	
salicylic acid er external solution	1	
salicylic acid external foam	1	
salicylic acid external gel	1	
salicylic acid external ointment	1	
salicylic acid external shampoo	1	

Drug Name	Drug Tier	Requirements /Limits
salicylic acid external solution	1	
salicylic acid-cleanser external kit	1	
SALIMEZ EXTERNAL CREAM	3	
SALIMEZ FORTE EXTERNAL CREAM	3	
SALVAX EXTERNAL FOAM	3	
SANTYL EXTERNAL OINTMENT	3	
SILVADENE EXTERNAL CREAM	3	
silver sulfadiazine external cream	1	
SORILUX EXTERNAL FOAM	3	
SOTYKTU ORAL TABLET	3	PA
ssd external cream	1	
sss 10-5 external cream	1	
SSS 10-5 EXTERNAL FOAM	3	
sulfacetamide sodium-sulfur external cream	1	
sulfacetamide sodium-sulfur external liquid	1	
sulfacetamide sodium-sulfur external lotion	1	
sulfacetamide sodium-sulfur external pad	1	
sulfacetamide sodium-sulfur external suspension	1	
sulfacetamide sod-sulfur wash external liquid	1	
sulfacetamide-sulfur in urea external emulsion	1	

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Drug Name	Drug Tier	Requirements /Limits
SULFACLEANSE 8/4 EXTERNAL SUSPENSION	3	
sulfamez wash external emulsion	1	
SUMADAN WASH EXTERNAL LIQUID	3	
SUMAXIN EXTERNAL PAD	3	
TACLONEX EXTERNAL OINTMENT	3	
TACLONEX EXTERNAL SUSPENSION	3	
TOLAK EXTERNAL CREAM	3	
ULTRASAL-ER EXTERNAL SOLUTION	3	
UMECTA MOUSSE EXTERNAL FOAM	3	
URAMAXIN EXTERNAL GEL	3	
urea external cream	1	
UREA EXTERNAL FOAM	3	
urea external lotion	1	
urea hydrating external foam	1	
urea nail external gel	1	
uredeb external cream	1	
UREMEZ-40 EXTERNAL CREAM	3	
URESOL EXTERNAL CREAM	3	
UVADEX EXTRACORPOREAL SOLUTION	3	
VECTICAL EXTERNAL OINTMENT	3	

Drug Name	Drug Tier	Requirements /Limits
VEREGEN EXTERNAL OINTMENT	3	
VTAMA EXTERNAL CREAM	3	
WINLEVI EXTERNAL CREAM	3	
WYNZORA EXTERNAL CREAM	3	
XALIX EXTERNAL SOLUTION	3	
XERESE EXTERNAL CREAM	3	
xurea external cream	1	
ZITHRANOL EXTERNAL SHAMPOO	3	
ZORYVE EXTERNAL CREAM	3	
ZYCLARA EXTERNAL CREAM	3	
ZYCLARA PUMP EXTERNAL CREAM	3	
<b>Pediculicides/Scabicides</b>		
CROTAN EXTERNAL LOTION	3	
ivermectin external cream	1	
ivermectin external lotion	1	
malathion external lotion	1	
NATROBA EXTERNAL SUSPENSION	3	
OVIDE EXTERNAL LOTION	3	
permethrin external cream	1	
SOOLANTRA EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
spinosad external suspension	1	
sulfurated lime external solution	1	
<b>Topical Anti-infectives</b>		
acyclovir external cream	1	
acyclovir external ointment	1	
ACZONE EXTERNAL GEL	3	
BENZAC AC WASH EXTERNAL LIQUID	3	
BENZEPRO CREAMY WASH EXTERNAL LIQUID	3	
BENZEPRO EXTERNAL	3	
BENZEPRO EXTERNAL FOAM	3	
BENZEPRO EXTERNAL LIQUID	3	
BENZEPRO FOAMING CLOTHS EXTERNAL	3	
benzoyl peroxide external foam	1	
BENZOYL PEROXIDE EXTERNAL GEL	1	
CENTANY EXTERNAL OINTMENT	3	
ciclodan external solution	1	
ciclopirox external gel	1	
ciclopirox external shampoo	1	
ciclopirox external solution	1	
ciclopirox olamine external cream	1	

Drug Name	Drug Tier	Requirements /Limits
ciclopirox olamine external suspension	1	
CLEOCIN-T EXTERNAL LOTION	3	
clindacin external foam	1	
CLINDAGEL EXTERNAL GEL	3	
clindamycin phosphate external foam	1	
clindamycin phosphate external gel	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
CLINDESSE VAGINAL CREAM	3	
dapsone external gel	1	
DENAVIR EXTERNAL CREAM	3	
ENZOCLEAR EXTERNAL FOAM	3	
EPSOLAY EXTERNAL CREAM	3	
ery external pad	1	
ERYGEL EXTERNAL GEL	3	
erythromycin external gel	1	
erythromycin external solution	1	
EVOCLIN EXTERNAL FOAM	3	
LOPROX EXTERNAL CREAM	3	
LOPROX EXTERNAL SHAMPOO	3	
LOPROX EXTERNAL SUSPENSION	3	
mafenide acetate external packet	1	

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Drug Name	Drug Tier	Requirements /Limits
MENTAX EXTERNAL CREAM	3	
mupirocin calcium external cream	1	
mupirocin external ointment	1	
penciclovir external cream	1	
PR BENZOYL PEROXIDE EXTERNAL LIQUID	3	
PR BENZOYL PEROXIDE WASH EXTERNAL LIQUID	3	
SULFAMYLON EXTERNAL CREAM	3	
SULFAMYLON EXTERNAL PACKET	3	
XEPI EXTERNAL CREAM	3	
ZACLIR CLEANSING EXTERNAL LOTION	3	
ZOVIRAX EXTERNAL CREAM	3	
ZOVIRAX EXTERNAL OINTMENT	3	
<b>Electrolytes/Minerals/ Metals/Vitamins</b>		
<b>Electrolyte/Mineral Replacement</b>		
ACTIVE FE ORAL TABLET	2	
AMINO ACID INTRAVENOUS SOLUTION	2	
AMINO ACID-CALCIUM-HEP IN D10W INTRAVENOUS SOLUTION	2	
AMINOPROTECT INTRAVENOUS SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
AMINOSYN II INTRAVENOUS SOLUTION	3	B/D
AMINOSYN-PF 7% INTRAVENOUS SOLUTION	3	B/D
AMINOSYN-PF INTRAVENOUS SOLUTION	3	B/D
CALCIUM CARBONATE LIGHT POWDER	2	
CALCIUM CARBONATE POWDER	2	
CALCIUM CHLORIDE ANHYDROUS GRANULES	2	
CALCIUM CHLORIDE DIHYDRATE GRANULES	2	
CALCIUM CHLORIDE DIHYDRATE POWDER	2	
calcium chloride intravenous solution	1	
CALCIUM GLUCONATE ANHYDROUS POWDER	2	
calcium gluconate intravenous solution	1	
CALCIUM GLUCONATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
CALCIUM GLUCONATE MONOHYDRATE POWDER	2	
CALCIUM GLUCONATE POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
calcium gluconate-nacl intravenous solution	1	
CALCIUM LACTATE PENTAHYDRATE POWDER	2	
CALCIUM PHOSPHATE DIBASIC POWDER	2	
CALCIUM PHOSPHATE TRIBASIC POWDER	2	
CARBAGLU ORAL TABLET SOLUBLE	3	
carglumic acid oral tablet soluble	1	
CENTRATEX ORAL CAPSULE	2	
chromic chloride intravenous solution	1	
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	B/D

Drug Name	Drug Tier	Requirements /Limits
CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION	3	B/D
CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION	3	B/D
CLINISOL SF INTRAVENOUS SOLUTION	1	B/D
corvita 150 oral tablet	1	
CORVITE 150 ORAL TABLET	2	
cupric chloride intravenous solution	1	
DEXTROSE 5%/ELECTROLYTE #48 INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
dextrose in lactated ringers intravenous solution	1	
dextrose intravenous solution	1	
dextrose-nacl intravenous solution	1	
dextrose-sodium chloride intravenous solution	1	
effe-k oral tablet effervescent	1	
FERAHEME INTRAVENOUS SOLUTION	2	
ferocon oral capsule	1	
ferottrinsic oral capsule	1	
FERRALET 90 ORAL TABLET	2	
FERRAPLUS 90 ORAL TABLET	2	
FERRLECIT INTRAVENOUS SOLUTION	2	
ferrocite plus oral tablet	1	
ferumoxytol intravenous solution	1	
fluoritab oral solution	1	PV
FOLIVANE-F ORAL CAPSULE	2	
FOLIVANE-PLUS ORAL CAPSULE	2	
foltrin oral capsule	1	
GALZIN ORAL CAPSULE	2	
GLYCINE POWDER	2	
GLYCOPHOS INTRAVENOUS SOLUTION	3	
hematinic plus vit/minerals oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
hematinic/folic acid oral tablet	1	
HEMATOGEN FA ORAL CAPSULE	2	
HEMATRON-AF (WITH DOCUSATE) ORAL TABLET	2	
HEMOCYTE PLUS ORAL CAPSULE	2	
hemocyte-f oral tablet	1	
HYPERLYTE-CR INTRAVENOUS CONCENTRATE	3	
ICAR-C PLUS ORAL TABLET	2	
iferex 150 forte oral capsule	1	
INFED INJECTION SOLUTION	2	
INJECTAFER INTRAVENOUS SOLUTION	2	
INTEGRA F ORAL CAPSULE	2	
INTEGRA PLUS ORAL CAPSULE	2	
IONOSOL-MB IN D5W INTRAVENOUS SOLUTION	3	
IRON FOLATE PLUS ORAL CAPSULE	2	
IRON FOLATE-F ORAL CAPSULE	2	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	3	
ISOLYTE-S INTRAVENOUS SOLUTION	3	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
KABIVEN INTRAVENOUS EMULSION	3	B/D
kcl in dextrose-nacl intravenous solution	1	
kcl-lactated ringers-d5w intravenous solution	1	
klor-con 10 oral tablet extended release	1	
klor-con m10 oral tablet extended release	1	
klor-con m15 oral tablet extended release	1	
klor-con m20 oral tablet extended release	1	
klor-con oral packet	1	
klor-con oral tablet extended release	1	
klor-con/ef oral tablet effervescent	1	
K-PHOS NO 2 ORAL TABLET	3	
K-PHOS ORAL TABLET	3	
k-prime oral tablet effervescent	1	
K-TAB ORAL TABLET EXTENDED RELEASE	3	
k-tan plus oral capsule	1	
lactated ringers intravenous solution	1	
MAGNESIUM CARBONATE HEAVY POWDER	2	
MAGNESIUM CARBONATE POWDER	2	
MAGNESIUM CHLORIDE CRYSTALS	2	

Drug Name	Drug Tier	Requirements /Limits
magnesium chloride injection solution	1	
magnesium sulfate in d5w intravenous solution	1	
magnesium sulfate injection solution	1	
magnesium sulfate intravenous solution	1	
MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION	2	
MANGANESE CHLORIDE INTRAVENOUS SOLUTION	2	
MONOFERRIC INTRAVENOUS SOLUTION	2	
MULTIGEN FOLIC ORAL TABLET	2	
MULTIGEN ORAL TABLET	2	
MULTIGEN PLUS ORAL TABLET	2	
multiple electro type 1 ph 5.5 intravenous solution	1	
multiple electro type 1 ph 7.4 intravenous solution	1	
MULTRYS INTRAVENOUS SOLUTION	2	
na ferric gluc cplx in sucrose intravenous solution	1	
nafrinse drops oral solution	1	PV
nafrinse oral tablet chewable	1	PV

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Drug Name	Drug Tier	Requirements /Limits
NEOPHE ORAL TABLET	2	
NEPHRON FA ORAL TABLET	2	
NICAPRIN ORAL TABLET	2	
NORMOSOL-M IN D5W INTRAVENOUS SOLUTION	3	
NORMOSOL-R IN D5W INTRAVENOUS SOLUTION	3	
NORMOSOL-R INTRAVENOUS SOLUTION	3	
NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION	3	
ORACIT ORAL SOLUTION	3	
PERIKABIVEN INTRAVENOUS EMULSION	3	B/D
PHOSPHA 250 NEUTRAL ORAL TABLET	2	
phosphorous oral tablet	1	
phospho-trin 250 neutral oral tablet	1	
PHOSPHO-TRIN K500 ORAL TABLET	3	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	3	
PLASMA-LYTE A INTRAVENOUS SOLUTION	3	
PLENAMINE INTRAVENOUS SOLUTION	1	B/D
POKONZA ORAL PACKET	3	

Drug Name	Drug Tier	Requirements /Limits
poly-iron 150 forte oral capsule	1	
polysaccharide iron forte oral capsule	1	
pot & sod cit-cit ac oral solution	1	
potassium acetate intravenous solution	1	
potassium chloride crys er oral tablet extended release	1	
potassium chloride er oral capsule extended release	1	
potassium chloride er oral tablet extended release	1	
POTASSIUM CHLORIDE GRANULES	2	
potassium chloride in nacl intravenous solution	1	
potassium chloride intravenous solution	1	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
potassium chloride oral packet	1	
potassium chloride oral solution	1	
POTASSIUM CHLORIDE POWDER	2	
potassium citrate er oral tablet extended release	1	
potassium citrate-citric acid oral solution	1	

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Drug Name	Drug Tier	Requirements /Limits
potassium cl in dextrose 5% intravenous solution	1	
potassium phosphates intravenous solution	1	
potassium phosphates(66 meq k) intravenous solution	1	
potassium phosphates(71 meq k) intravenous solution	1	
PREMASOL INTRAVENOUS SOLUTION	3	B/D
PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION	2	
PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION	2	
PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION	2	
PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION	2	
PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION	2	
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION	2	
PROCALAMINE INTRAVENOUS SOLUTION	3	B/D
PROLEEVA ORAL CAPSULE	2	

Drug Name	Drug Tier	Requirements /Limits
PROLEVA ORAL TABLET	2	
PROSOL INTRAVENOUS SOLUTION	3	B/D
PROTEOLIN ORAL TABLET	2	
purevit dualfe plus oral capsule	1	
ringers intravenous solution	1	
saline bacteriostatic injection solution	1	
SALINE-PHENOL INJECTION SOLUTION	2	
se-tan plus oral capsule	1	
sod citrate-citric acid oral solution	1	
sodium acetate intravenous solution	1	
sodium bicarbonate intravenous solution	1	
SODIUM BICARBONATE-DEXTROSE INTRAVENOUS SOLUTION	1	
sodium chloride (pf) injection solution	1	
sodium chloride bacteriostatic injection solution	1	
sodium chloride injection solution	1	
sodium chloride intravenous solution	1	
SODIUM CITRATE GRANULES	2	
sodium fluoride oral solution	1	PV

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Drug Name	Drug Tier	Requirements /Limits
sodium fluoride oral tablet	1	PV
sodium fluoride oral tablet chewable	1	PV
sodium phosphates intravenous solution	1	
TANDEM PLUS ORAL CAPSULE	2	
TARON FORTE ORAL CAPSULE	2	
THAM INTRAVENOUS SOLUTION	2	
tl-hem 150 oral tablet	1	
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	3	
TRALEMENT INTRAVENOUS SOLUTION	2	
TRAVASOL INTRAVENOUS SOLUTION	3	B/D
TRI-AMINO INJECTION SOLUTION	2	
tricitrates oral solution	1	
TRICON ORAL CAPSULE	2	
TRIFERIC AVNU INTRAVENOUS SOLUTION	2	
TRIFERIC HEMODIALYSIS PACKET	2	
TRIFERIC HEMODIALYSIS SOLUTION	2	
trigels-f forte oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
TRISODIUM CITRATE/CRRT EXTRACORPOREAL SOLUTION	2	
TROMETHAMINE INTRAVENOUS SOLUTION	2	
TROPHAMINE INTRAVENOUS SOLUTION	3	B/D
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	3	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	3	
VENOFER INTRAVENOUS SOLUTION	2	
VIRT-FEFA PLUS ORAL CAPSULE	2	
virt-phos 250 neutral oral tablet	1	
wes-phos 250 neutral oral tablet	1	
WILZIN ORAL CAPSULE	2	
XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ZINC ACETATE CRYSTALS	2	
zinc chloride intravenous solution	1	
ZINC SULFATE HEPTAHYDRATE POWDER	2	
zinc sulfate intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
ZYVEXOL ORAL TABLET	2	
<b>Electrolyte/Mineral/Me tal Modifiers</b>		
CHEMET ORAL CAPSULE	3	
CUPRIMINE ORAL CAPSULE	3	PA
CUVRIOR ORAL TABLET	3	PA
deferasirox granules oral packet	1	
deferasirox oral packet	1	
deferasirox oral tablet	1	
deferasirox oral tablet soluble	1	
deferiprone oral tablet	1	
DEPEN TITRATABS ORAL TABLET	3	
EXJADE ORAL TABLET SOLUBLE	3	
FERRIPROX ORAL SOLUTION	3	
FERRIPROX ORAL TABLET	3	
FERRIPROX TWICE-A-DAY ORAL TABLET	3	
JADENU ORAL TABLET	3	
JADENU SPRINKLE ORAL PACKET	3	
JYNARQUE ORAL TABLET	3	PA
JYNARQUE ORAL TABLET THERAPY PACK	3	PA
penicillamine oral capsule	1	PA
penicillamine oral tablet	1	
SAMSCA ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
SYPRINE ORAL CAPSULE	3	PA
tolvaptan oral tablet	1	PA
trientine hcl oral capsule	1	PA
<b>Phosphate Binders</b>		
AURYXIA ORAL TABLET	3	PA
calcium acetate (phos binder) oral capsule	1	
calcium acetate (phos binder) oral tablet	1	
calcium acetate oral tablet	1	
FOSRENOL ORAL PACKET	3	
FOSRENOL ORAL TABLET CHEWABLE	3	
lanthanum carbonate oral tablet chewable	1	
PHOSLYRA ORAL SOLUTION	3	
RENAGEL ORAL TABLET	3	
REVELA ORAL PACKET	3	
REVELA ORAL TABLET	3	
sevelamer carbonate oral packet	1	
sevelamer carbonate oral tablet	1	
sevelamer hcl oral tablet	1	
VELPHORO ORAL TABLET CHEWABLE	3	
<b>Potassium Binders</b>		
LOKELMA ORAL PACKET	3	
sodium polystyrene sulfonate oral powder	1	

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Drug Name	Drug Tier	Requirements /Limits
SPS ORAL SUSPENSION	1	
VELTASSA ORAL PACKET	3	
<b>Vitamins</b>		
5-MTHF ORAL CAPSULE	2	
ABANEU-SL SUBLINGUAL TABLET SUBLINGUAL	2	
ADRENAL C FORMULA ORAL TABLET	2	
airavite oral tablet	1	
ASTAMED MYO ORAL CAPSULE	2	
ATABEX OB ORAL TABLET	3	
AZESCO ORAL TABLET	3	PA
BACMIN ORAL TABLET	2	
biocel oral tablet	1	
bp vit 3 oral capsule	1	
b-plex oral tablet	1	
b-plex plus oral tablet	1	
CALCIFOL ORAL WAFER	2	
CALCIUM PANTOTHENATE POWDER	2	
CENFOL ORAL TABLET	2	
CITRANATAL BLOOM ORAL TABLET	3	
CITRANATAL ESSENCE ORAL THERAPY PACK	3	
CITRANATAL MEDLEY ORAL CAPSULE	3	

Drug Name	Drug Tier	Requirements /Limits
cod liver oil oral oil	1	
CORVITA ORAL TABLET	2	
cyanocobalamin injection solution	1	
DERMACINRX PRETRATE ORAL TABLET	3	
DIALYVITE 3000 ORAL TABLET	2	
DIALYVITE 5000 ORAL TABLET	2	
DIALYVITE ORAL TABLET	2	
DIALYVITE SUPREME D ORAL TABLET	2	
DIALYVITE/ZINC ORAL TABLET	2	
DODEX INJECTION SOLUTION	2	
DRISDOL ORAL CAPSULE	2	
EB-N3 DR ORAL CAPSULE DELAYED RELEASE	2	
ELFOLATE ORAL TABLET	2	
ELITE-OB ORAL TABLET	3	
ENBRACE HR ORAL CAPSULE	3	
ergocalciferol oral capsule	1	
fabb oral tablet	1	
fa-vitamin b-6-vitamin b-12 oral tablet	1	
FOLAFY ER ORAL TABLET EXTENDED RELEASE	2	
folate oral tablet	2	PV
folbee oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
FOLBEE PLUS CZ ORAL TABLET	2	
folbee plus oral tablet	1	
FOLBIC ORAL TABLET	2	
FOLBIC RF ORAL TABLET	2	
FOLGARD OS ORAL TABLET	2	
FOLGARD RX ORAL TABLET	2	
folic acid injection solution	1	
folic acid oral tablet	1	
folplex 2.2 oral tablet	1	
FOLTANX ORAL TABLET	2	
FOLTRATE ORAL TABLET	2	
FOLTX ORAL TABLET	2	
FUSION PLUS ORAL CAPSULE	2	
hydroxocobalamin acetate intramuscular solution	1	
INFUVITE ADULT INTRAVENOUS INJECTABLE	2	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	2	
JENLIVA PRENATAL/POSTNATAL ORAL CAPSULE	3	
KEYLOSA ORAL TABLET	2	
l-methylfolate calcium oral tablet	1	
l-methylfolate oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
l-methylfolate-algae-b12-b6 oral capsule	1	
l-methylfolate-b6-b12 oral tablet	1	
l-methyl-mc nac oral tablet	1	
l-methyl-mc oral tablet	1	
lysiplex plus oral tablet	1	
MASONATAL ORAL TABLET	2	PV
MEPHYTON ORAL TABLET	2	
METAFOLBIC ORAL TABLET	2	
METAFOLBIC PLUS ORAL TABLET	2	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	2	
methylfol-algae-b12-acetylcyst oral tablet	1	
methyl-folate oral capsule	1	
M-NATAL PLUS ORAL TABLET	3	
MULTI-MAC ORAL TABLET	3	PA
mynephrocaps oral capsule	1	
MYNEPHRON ORAL CAPSULE	2	
NASCOBAL NASAL SOLUTION	2	
NATAL PNV ORAL TABLET	3	
NEONATAL + DHA ORAL	3	
NEONATAL 19 ORAL TABLET	3	PA

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Drug Name	Drug Tier	Requirements /Limits
NEONATAL COMPLETE ORAL TABLET	3	
NEONATAL FE ORAL TABLET	3	PA
NEONATAL PLUS ORAL TABLET	3	
NEONATAL PRENATAL ORAL TABLET	2	PV
NEOVITE ORAL TABLET	2	
NEPHPLEX RX ORAL TABLET	2	
nephronex oral tablet	1	
NESTABS ONE ORAL CAPSULE	3	
NESTABS ORAL TABLET	3	
NEURIN-SL SUBLINGUAL TABLET SUBLINGUAL	2	
NIACIN POWDER	2	
niva-fol oral tablet	1	
nufol oral tablet	1	
NUFOLA ORAL CAPSULE	2	
NUTRICAP ORAL TABLET	2	
nutrifac zx oral tablet	1	
NUTRIVIT ORAL LIQUID	2	
ONE VITE WOMENS ORAL TABLET	2	PV
ONE VITE WOMENS PLUS ORAL TABLET	3	
ONE-A-DAY WOMENS PRENATAL 1 ORAL CAPSULE	2	PV
phytonadione injection solution	1	

Drug Name	Drug Tier	Requirements /Limits
phytonadione oral tablet	1	
pnv prenatal plus multivit+dha oral	1	
PNV TABS 20-1 ORAL TABLET	3	
PODIAPN ORAL CAPSULE	2	
PREGEN DHA ORAL CAPSULE	3	PA
PREGENNA ORAL TABLET	3	PA
PREMESISRX ORAL TABLET	3	
PRENAISSANCE ORAL CAPSULE	3	
PRENARA ORAL CAPSULE	3	PA
prenatal multi +dha oral capsule	2	PV
prenatal oral tablet	1	
prenatal plus vitamin/mineral oral tablet	1	
prenatal vitamin plus low iron oral tablet	1	
prenatal/folic acid+dha oral capsule	2	PV
PRENATE DHA ORAL CAPSULE	3	
PRENATE ELITE ORAL TABLET	3	
PRENATE ENHANCE ORAL CAPSULE	3	
PRENATE ESSENTIAL ORAL CAPSULE	3	
PRENATE MINI ORAL CAPSULE	3	
PRENATE ORAL TABLET CHEWABLE	3	

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Drug Name	Drug Tier	Requirements /Limits
PRENATE PIXIE ORAL CAPSULE	3	
PRENATE RESTORE ORAL CAPSULE	3	
PRENATRIX ORAL TABLET	3	PA
PRENATRYL ORAL TABLET	3	PA
PRENATVITE COMPLETE ORAL TABLET	3	
PRENATVITE PLUS ORAL TABLET	3	
PRENATVITE RX ORAL TABLET	3	
preplus oral tablet	1	
PRETAB ORAL TABLET	3	
PRIMACARE ORAL CAPSULE	3	
PRO HERS RX ORAL CAPSULE	2	
PRO HIS RX ORAL CAPSULE	2	
PRO PCOS RX ORAL CAPSULE	2	
pyridoxine hcl injection solution	1	
PYRIDOXINE HCL POWDER	2	
RELNATE DHA ORAL CAPSULE	3	
RENAL ORAL CAPSULE	2	
RENATABS ORAL TABLET	2	
RENATABS WITH IRON ORAL	2	
SELECT-OB ORAL TABLET CHEWABLE	3	

Drug Name	Drug Tier	Requirements /Limits
SIDEROL ORAL TABLET	2	
SODIUM ASCORBATE POWDER	2	
STROVITE FORTE ORAL SYRUP	2	
SUPERVITE ORAL LIQUID	2	
SUPPORT ORAL LIQUID	2	
thiamine hcl injection solution	1	
THIAMINE HCL POWDER	2	
THIAMINE MONONITRATE POWDER	2	
TRINATE ORAL TABLET	3	
triphrocaps oral capsule	1	
TRISTART DHA ORAL CAPSULE	3	
TRISTART FREE ORAL CAPSULE	3	PA
TRISTART ONE ORAL CAPSULE	3	
UDAMIN SP ORAL TABLET	2	
urosex oral tablet	1	
v-c forte oral capsule	1	
vic-forte oral capsule	1	
VINATE ONE ORAL TABLET	3	
virt-caps oral capsule	1	
virt-gard oral tablet	1	
VIT B12-METHIONINE-INOS-CHOL INTRAMUSCULAR SOLUTION	2	
vita s forte oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
vitacel oral tablet	1	
VITAFOL FE+ ORAL CAPSULE	3	
VITAFOL STRIPS ORAL FILM	3	
VITAFOL-NANO ORAL TABLET	3	
VITAFOL-OB+DHA ORAL	3	
VITAL-D RX ORAL TABLET	2	
VITALIPID N INFANT INTRAVENOUS EMULSION	2	
VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE	3	
vitamin d (ergocalciferol) oral capsule	1	
vitamin k1 injection solution	1	
VITAPEARL ORAL CAPSULE EXTENDED RELEASE	3	
VITAROCA PLUS ORAL TABLET	2	
VITATHELY WITH GINGER ORAL TABLET	3	
VITLIPID N ADULT INTRAVENOUS EMULSION	2	
VITLIPID N INFANT INTRAVENOUS EMULSION	2	
vp-pnv-dha oral capsule	1	
vp-vite rx oral tablet	1	
WESCAP-C DHA ORAL CAPSULE	3	

Drug Name	Drug Tier	Requirements /Limits
WESCAP-PN DHA ORAL CAPSULE	3	
wescaps oral capsule	1	
WESNATAL DHA COMPLETE ORAL	3	
WESNATE DHA ORAL CAPSULE	3	
WESTAB MAX ORAL TABLET	2	
westab mini oral tablet	1	
westab one oral tablet	1	
WESTAB PLUS ORAL TABLET	3	
WESTGEL DHA ORAL CAPSULE	3	
XAQUIL XR ORAL TABLET EXTENDED RELEASE	2	
yl folic acid oral tablet	2	PV
ZALVIT ORAL TABLET	3	PA
ZIPHEX ORAL TABLET	3	
<b>Gastrointestinal Agents</b>		
<b>Anti-Constipation Agents</b>		
AMITIZA ORAL CAPSULE	2	
BASE D POLYETHYL GLYCOL 4600 GRANULES	2	
bisacodyl ec oral tablet delayed release	2	PV
bisacodyl oral tablet delayed release	1	PV
BISACODYL POWDER	2	
citroma oral solution	2	PV
clearlax oral powder	2	PV
constulose oral solution	1	

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Drug Name	Drug Tier	Requirements /Limits
DOCUSATE SODIUM POWDER	2	
enulose oral solution	1	
ft clearlax oral powder	1	PV
ft laxative oral tablet delayed release	1	PV
ft magnesium citrate oral solution	1	PV
gavilax oral powder	2	PV
generlac oral solution	1	
gentle laxative oral tablet delayed release	2	PV
gentlelax oral powder	2	PV
GIALAX ORAL KIT	2	
glycolax oral powder	2	PV
IBSRELA ORAL TABLET	3	
KRISTALOSE ORAL PACKET	3	
lactulose encephalopathy oral solution	1	
lactulose oral packet	1	
lactulose oral solution	1	
LINZESS ORAL CAPSULE	2	
lubiprostone oral capsule	1	
magnesium citrate oral solution	2	PV
MINERAL OIL HEAVY OIL	2	
mineral oil heavy oral oil	1	
MINERAL OIL LIGHT OIL	2	
MINERAL OIL OIL	2	
mm clearlax oral powder	2	PV

Drug Name	Drug Tier	Requirements /Limits
MOTEGRITY ORAL TABLET	2	
MOVANTIK ORAL TABLET	3	
MURI-LUBE OIL	2	
OSMOPREP ORAL TABLET	3	
POLYETHYLENE GLYCOL 1450 FLAKES	2	
POLYETHYLENE GLYCOL 300 LIQUID	2	
polyethylene glycol 3350 oral powder	1	PV
POLYETHYLENE GLYCOL 3350 POWDER	2	
POLYETHYLENE GLYCOL 4500 POWDER	2	
qc magnesium citrate oral solution	2	PV
RELISTOR ORAL TABLET	3	
RELISTOR SUBCUTANEOUS SOLUTION	3	
SYMPROIC ORAL TABLET	3	
TRULANCE ORAL TABLET	3	
<b>Anti-Diarrheal Agents</b>		
alosetron hcl oral tablet	1	
diphenoxylate-atropine oral liquid	1	
diphenoxylate-atropine oral tablet	1	
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
LOPERAMIDE HCL POWDER	2	
LOTRONEX ORAL TABLET	3	
MOTOFEN ORAL TABLET	3	
MYTESI ORAL TABLET DELAYED RELEASE	3	
VIBERZI ORAL TABLET	3	
XERMELO ORAL TABLET	3	PA
<b>Antispasmodics, Gastrointestinal</b>		
ANASPAZ ORAL TABLET DISPERSIBLE	3	
belladonna alkaloids-opium rectal suppository	1	NDS
BENTYL INTRAMUSCULAR SOLUTION	3	
chlordiazepoxide-clidinium oral capsule	1	
CUVPOSA ORAL SOLUTION	3	
DARTISLA ODT ORAL TABLET DISPERSIBLE	3	
dicyclomine hcl intramuscular solution	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution	1	
dicyclomine hcl oral tablet	1	
ED-SPAZ ORAL TABLET DISPERSIBLE	3	

Drug Name	Drug Tier	Requirements /Limits
GLYCATE ORAL TABLET	3	
glycopyrrolate injection solution	1	
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE	2	
GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
glycopyrrolate oral solution	1	
glycopyrrolate oral tablet	1	
glycopyrrolate pf injection solution prefilled syringe	1	
GLYRX-PF INJECTION SOLUTION	3	
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	2	
hyoscyamine sulfate er oral tablet extended release 12 hour	1	
hyoscyamine sulfate injection solution	1	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral solution	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl sublingual tablet sublingual	1	

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Drug Name	Drug Tier	Requirements /Limits
hyoscyamine sulfate sublingual tablet sublingual	1	
LEVBIID ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
LEVSIN INJECTION SOLUTION	3	
LEVSIN ORAL TABLET	3	
LEVSIN/SL SUBLINGUAL TABLET SUBLINGUAL	3	
LIBRAX ORAL CAPSULE	3	
methscopolamine bromide oral tablet	1	
NULEV ORAL TABLET DISPERSIBLE	3	
OSCIMIN ORAL TABLET	3	
OSCIMIN SUBLINGUAL TABLET SUBLINGUAL	3	
PROPANTHELINE BROMIDE POWDER	2	
ROBINUL ORAL TABLET	3	
ROBINUL-FORTE ORAL TABLET	3	
<b>Gastrointestinal Agents, Other</b>		
alvimopan oral capsule	1	
amoxicill-clarithro-lansopraz oral therapy pack	1	
BIO-KULT INFANTIS ORAL PACKET	2	
bis subcit-metronid-tetracyc oral capsule	1	
bismuth/metronidaz/tetracyclin oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	3	PA
BYLVAY ORAL CAPSULE	3	PA
CALCIUM DISODIUM VERSENATE INJECTION SOLUTION	1	
CHARCOAL ACTIVATED POWDER	2	
CHENODAL ORAL TABLET	3	PA
CLENPIQ ORAL SOLUTION	2	
CULTURELLE ABDOMINAL SUPPORT ORAL PACKET	2	
CULTURELLE KIDS GROW THRIVE ORAL PACKET	2	
DEXPANTHENOL INJECTION SOLUTION	2	
EDETATE CALCIUM DISODIUM INJECTION SOLUTION	1	
ENTEREG ORAL CAPSULE	2	
FLORATUMMYS KIDS ORAL PACKET	2	
GATTEX SUBCUTANEOUS KIT	3	PA
gavilyte-c oral solution reconstituted	1	PV
gavilyte-g oral solution reconstituted	1	PV
gavilyte-n with flavor pack oral solution reconstituted	1	PV

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Drug Name	Drug Tier	Requirements /Limits
GIMOTI NASAL SOLUTION	3	
GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE	2	
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	2	
GOLYTELY ORAL SOLUTION RECONSTITUTED	3	
HELIDAC THERAPY ORAL	3	
L-GLUTAMIC ACID HCL POWDER	2	
metoclopramide hcl injection solution	1	
METOCLOPRAMIDE HCL MONOHYDRATE POWDER	2	
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	1	
MOVIPREP ORAL SOLUTION RECONSTITUTED	3	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
na sulfate-k sulfate-mg sulf oral solution	1	PV
NULYTELY LEMON-LIME ORAL SOLUTION RECONSTITUTED	3	
OCALIVA ORAL TABLET	3	PA

Drug Name	Drug Tier	Requirements /Limits
OMECLAMOX-PAK ORAL	3	
OMNI-BIOTIC AB 10 ORAL PACKET	2	
OMNI-BIOTIC BALANCE ORAL PACKET	2	
OMNI-BIOTIC HETOX ORAL PACKET	2	
OMNI-BIOTIC PANDA ORAL PACKET	2	
OMNI-BIOTIC STRESS RELEASE ORAL PACKET	2	
opium oral tincture	1	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	1	PV
peg-3350/electrolytes oral solution reconstituted	1	PV
peg-3350/electrolytes/ascorbic acid oral solution reconstituted	1	
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	1	
PEG-PREP ORAL KIT	3	
PLENVU ORAL SOLUTION RECONSTITUTED	3	
PROBIOMAX 350 DF ORAL PACKET	2	
PROBIOMAX PLUS DF ORAL PACKET	2	
PYLERA ORAL CAPSULE	3	
REBYOTA RECTAL SUSPENSION	2	
RECTIV RECTAL OINTMENT	3	

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Drug Name	Drug Tier	Requirements /Limits
REGLAN ORAL TABLET	3	
RELTONE ORAL CAPSULE	3	
RESTORA RX ORAL CAPSULE	2	
RESTORE ORAL PACKET	2	
SIMILAC PROBIOTIC TRI-BLEND ORAL PACKET	2	
sodium bicarbonate oral powder	1	
SUFLAVE ORAL SOLUTION RECONSTITUTED	3	PA
SUPREP BOWEL PREP KIT ORAL SOLUTION	2	
SUTAB ORAL TABLET	2	
TALICIA ORAL CAPSULE DELAYED RELEASE	3	
URSO 250 ORAL TABLET	3	
URSO FORTE ORAL TABLET	3	
ursodiol oral capsule	1	
ursodiol oral tablet	1	
URSODIOL+SYRSPE ND SF ORAL SUSPENSION	2	
VOWST ORAL CAPSULE	3	PA
VSL#3 DS ORAL PACKET	2	
VSL#3 ORAL PACKET	2	
XIFAXAN ORAL TABLET	3	
ZELNORM ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
ZINPLAVA INTRAVENOUS SOLUTION	3	
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
<b>Histamine2 (H2) Receptor Antagonists</b>		
cimetidine hcl oral solution	1	
cimetidine oral tablet	1	
CIMETIDINE POWDER	2	
famotidine (pf) intravenous solution	1	
famotidine intravenous solution	1	
famotidine oral suspension reconstituted	1	
famotidine oral tablet	1	
famotidine premixed intravenous solution	1	
nizatidine oral capsule	1	
nizatidine oral solution	1	
PEPCID ORAL TABLET	3	
<b>Protectants</b>		
CARAFATE ORAL SUSPENSION	3	
CARAFATE ORAL TABLET	3	
CYTOTEC ORAL TABLET	3	
misoprostol oral tablet	1	
sucralfate oral suspension	1	
sucralfate oral tablet	1	
SUCRALFATE POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
<b>Proton Pump Inhibitors</b>		
ACIPHEX ORAL TABLET DELAYED RELEASE	3	
ACIPHEX SPRINKLE ORAL CAPSULE SPRINKLE	3	
DEXILANT ORAL CAPSULE DELAYED RELEASE	2	
dexlansoprazole oral capsule delayed release	1	
esomeprazole magnesium oral capsule delayed release	1	
esomeprazole magnesium oral packet	1	
esomeprazole sodium intravenous solution reconstituted	1	
ESOMEPRAZOLE STRONTIUM ORAL CAPSULE DELAYED RELEASE	3	
FIRST PANTOPRAZOLE ORAL SUSPENSION	2	
FIRST-LANSOPRAZOLE ORAL SUSPENSION	2	
FIRST-OMEPRAZOLE ORAL SUSPENSION	2	
KONVOMEF ORAL SUSPENSION RECONSTITUTED	3	
lansoprazole oral capsule delayed release	1	

Drug Name	Drug Tier	Requirements /Limits
lansoprazole oral tablet delayed release dispersible	1	
NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED	3	
NEXIUM ORAL CAPSULE DELAYED RELEASE	3	
NEXIUM ORAL PACKET	3	
omeprazole oral capsule delayed release	1	
OMEPRAZOLE+SYRS PEND SF ALKA ORAL SUSPENSION	2	
omeprazole-sodium bicarbonate oral capsule	1	
omeprazole-sodium bicarbonate oral packet	1	
pantoprazole sodium intravenous solution reconstituted	1	
pantoprazole sodium oral packet	1	
pantoprazole sodium oral tablet delayed release	1	
PREVACID ORAL CAPSULE DELAYED RELEASE	3	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	3	
PRIOLOSEC ORAL PACKET	3	

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Drug Name	Drug Tier	Requirements /Limits
PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROTONIX ORAL PACKET	3	
PROTONIX ORAL TABLET DELAYED RELEASE	3	
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	1	
rabeprazole sodium oral tablet delayed release	1	
ZEGERID ORAL CAPSULE	3	
ZEGERID ORAL PACKET	3	
<b>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</b>		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
BUPHENYL ORAL POWDER	3	
BUPHENYL ORAL TABLET	3	
CERDELGA ORAL CAPSULE	3	PA
CHOLBAM ORAL CAPSULE	3	PA
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
cromolyn sodium oral concentrate	1	
CYSTADANE ORAL POWDER	3	

Drug Name	Drug Tier	Requirements /Limits
CYSTAGON ORAL CAPSULE	3	
ENDARI ORAL PACKET	3	
GALAFOLD ORAL CAPSULE	3	PA
GASTROCROM ORAL CONCENTRATE	3	
GLASSIA INTRAVENOUS SOLUTION	3	PA
KEVEYIS ORAL TABLET	3	PA
KUVAN ORAL PACKET	3	PA
miglustat oral capsule	1	PA
NITYR ORAL TABLET	3	
ORFADIN ORAL CAPSULE	3	
ORFADIN ORAL SUSPENSION	3	
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
RAVICTI ORAL LIQUID	3	PA
sodium phenylbutyrate oral powder	1	
sodium phenylbutyrate oral tablet	1	
SUCRAID ORAL SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
VIKACE ORAL TABLET	3	
VYNDAQEL ORAL CAPSULE	3	PA
XURIDEN ORAL PACKET	3	PA
ZAVESCA ORAL CAPSULE	3	PA
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
<b>Non-FRF</b>		
ALDURAZIME INTRAVENOUS SOLUTION	3	PA
AMONDYS 45 INTRAVENOUS SOLUTION	3	PA
AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
betaine oral powder	1	
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
CRYSVITA SUBCUTANEOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
dichlorphenamide oral tablet	1	PA
ELAPRASE INTRAVENOUS SOLUTION	3	PA
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ELFABRIO INTRAVENOUS SOLUTION	3	PA
EVRYSDI ORAL SOLUTION RECONSTITUTED	3	PA
EXONDYS 51 INTRAVENOUS SOLUTION	3	PA
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
JAVYGTOR ORAL PACKET	3	PA
JAVYGTOR ORAL TABLET	3	PA
KANUMA INTRAVENOUS SOLUTION	3	PA
KUVAN ORAL TABLET	3	PA
LAMZEDE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
MEPSEVII INTRAVENOUS SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
NAGLAZYME INTRAVENOUS SOLUTION	3	PA
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
nitisinone oral capsule	1	
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK	3	PA
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK	3	PA
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK	3	PA
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK	3	PA
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK	3	PA
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK	3	PA
ONPATTRO INTRAVENOUS SOLUTION	3	PA
OPFOLDA ORAL CAPSULE	3	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PHEBURANE ORAL PELLET	3	

Drug Name	Drug Tier	Requirements /Limits
POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROCYSBI ORAL CAPSULE DELAYED RELEASE	3	PA
PROCYSBI ORAL PACKET	3	PA
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA
REVCOVI INTRAMUSCULAR SOLUTION	3	PA
sapropterin dihydrochloride oral packet	1	PA
sapropterin dihydrochloride oral tablet	1	PA
SPINRAZA INTRATHECAL SOLUTION	3	PA
STRENSIQ SUBCUTANEOUS SOLUTION	3	PA
VILTEPSO INTRAVENOUS SOLUTION	3	PA
VIMIZIM INTRAVENOUS SOLUTION	3	PA
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
VYONDYS 53 INTRAVENOUS SOLUTION	3	PA
XIAFLEX INJECTION SOLUTION RECONSTITUTED	3	PA
yargesa oral capsule	1	PA

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Drug Name	Drug Tier	Requirements /Limits
<b>Genitourinary Agents</b>		
<b>Antispasmodics, Urinary</b>		
darifenacin hydrobromide er oral tablet extended release 24 hour	1	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
DETROL ORAL TABLET	3	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
fesoterodine fumarate er oral tablet extended release 24 hour	1	
flavoxate hcl oral tablet	1	
GELNIQUE TRANSDERMAL GEL	3	
GEMTESA ORAL TABLET	3	
HYOPHEN ORAL TABLET	3	
me/naphos/mb/hyo1 oral tablet	1	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er oral tablet extended release 24 hour	1	
oxybutynin chloride oral solution	1	
oxybutynin chloride oral syrup	1	
oxybutynin chloride oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	3	
PHOSPHASAL ORAL TABLET	3	
solifenacin succinate oral tablet	1	
tolterodine tartrate er oral capsule extended release 24 hour	1	
tolterodine tartrate oral tablet	1	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
tropium chloride er oral capsule extended release 24 hour	1	
tropium chloride oral tablet	1	
uretron d/s oral tablet	1	
URIBEL ORAL CAPSULE	3	
URIMAR-T ORAL CAPSULE	3	
URIMAR-T ORAL TABLET	3	
urin ds oral tablet	1	
URNEVA ORAL CAPSULE	3	
URO-458 ORAL TABLET	3	
UROGESIC-BLUE ORAL TABLET	3	
URO-MP ORAL CAPSULE	3	
URO-SP ORAL CAPSULE	3	
USTELL ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
UTIRA-C ORAL TABLET	3	
VESICARE LS ORAL SUSPENSION	3	
VESICARE ORAL TABLET	3	
VILAMIT MB ORAL CAPSULE	3	
VILEVEV MB ORAL TABLET	3	
<b>Benign Prostatic Hypertrophy Agents</b>		
alfuzosin hcl er oral tablet extended release 24 hour	1	
AVODART ORAL CAPSULE	3	
CARDURA ORAL TABLET	3	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
CIALIS ORAL TABLET	2	PA
doxazosin mesylate oral tablet	1	
dutasteride oral capsule	1	
dutasteride-tamsulosin hcl oral capsule	1	
ENTADFI ORAL CAPSULE	3	
finasteride oral tablet	1	
FLOMAX ORAL CAPSULE	3	
JALYN ORAL CAPSULE	3	
PROSCAR ORAL TABLET	3	
RAPAFLO ORAL CAPSULE	3	
silodosin oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
tadalafil oral tablet	1	PA
tamsulosin hcl oral capsule	1	
terazosin hcl oral capsule	1	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<b>Genitourinary Agents, Other</b>		
acetic acid irrigation solution	1	
bethanechol chloride oral tablet	1	
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED	2	PA
ELMIRON ORAL CAPSULE	3	
ENCARE VAGINAL SUPPOSITORY	2	PV; QL (12 EA per 23 days)
GLYCINE INJECTION SOLUTION	2	
glycine irrigation solution	1	
glycine urologic irrigation solution	1	
LITHOSTAT ORAL TABLET	3	
MUSE URETHRAL PELLETT	2	PA
OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL	2	PV; QL (85.5 GM per 23 days)
phenazo oral tablet	1	
phenazopyridine hcl oral tablet	1	
PHENAZOPYRIDINE HCL POWDER	2	
PHEXXI VAGINAL GEL	3	PV

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Drug Name	Drug Tier	Requirements /Limits
PYRIDIUM ORAL TABLET	3	
RENACIDIN IRRIGATION SOLUTION	3	
RIMSO-50 INTRAVESICAL SOLUTION	3	
sildenafil citrate oral tablet	1	PA
STENDRA ORAL TABLET	2	PA
THIOLA EC ORAL TABLET DELAYED RELEASE	3	
THIOLA ORAL TABLET	3	
tiopronin oral tablet	1	
TODAY SPONGE VAGINAL	2	PV; QL (12 EA per 23 days)
varденаfil hcl oral tablet	1	PA
varденаfil hcl oral tablet dispersible	1	PA
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM	2	PV; QL (12 EA per 23 days)
VCF VAGINAL CONTRACEPTIVE VAGINAL GEL	2	PV; QL (2.7 GM per 23 days)
VIAGRA ORAL TABLET	2	PA
<b>Hormonal Agents, Stimulant/Replaceme nt/Modifying (Adrenal)</b>		
ACTHAR INJECTION GEL	3	PA
CORTEF ORAL TABLET	3	
CORTISONE ACETATE ORAL TABLET	1	

Drug Name	Drug Tier	Requirements /Limits
dexamethasone intensol oral concentrate	1	
dexamethasone oral elixir	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	1	
EMFLAZA ORAL SUSPENSION	3	PA
EMFLAZA ORAL TABLET	3	PA
fludrocortisone acetate oral tablet	1	
hydrocortisone oral tablet	1	
INTRAROSA VAGINAL INSERT	3	PA
MEDROL ORAL TABLET	3	
MEDROL ORAL TABLET THERAPY PACK	3	
methylprednisolone oral tablet	1	
methylprednisolone oral tablet therapy pack	1	
MILLIPRED ORAL TABLET	3	
ORAPRED ODT ORAL TABLET DISPERSIBLE	3	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution	1	
prednisolone sodium phosphate oral tablet dispersible	1	
prednisone intensol oral concentrate	1	

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Drug Name	Drug Tier	Requirements /Limits
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
RAYOS ORAL TABLET DELAYED RELEASE	3	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK	3	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK	3	
<b>Non-FRF</b>		
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE	3	
BETAMETHASONE COMBO INJECTION SUSPENSION	3	
BETAMETHASONE DIPROPIONATE POWDER	2	
betamethasone sod phos & acet injection suspension	1	
BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION	2	
BETAMETHASONE VALERATE POWDER	2	
CELESTONE SOLUSPAN INJECTION SUSPENSION	3	
CLOBETASOL PROPIONATE POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
CORTISONE ACETATE POWDER	2	
CORTROPHIN INJECTION GEL	3	PA
DECADRON ORAL TABLET	3	
DEPO-MEDROL INJECTION SUSPENSION	3	
DEXABLISS ORAL TABLET THERAPY PACK	3	
DEXAMETHASONE (LA) INJECTION SUSPENSION	3	
DEXAMETHASONE ACE & SOD PHOS INJECTION SUSPENSION	3	
dexamethasone oral solution	1	
DEXAMETHASONE SOD PHOS-NACL INTRAVENOUS SOLUTION	2	
dexamethasone sod phosphate pf injection solution	1	
dexamethasone sod phosphate pf injection solution prefilled syringe	1	
dexamethasone sodium phosphate injection solution	1	
DEXONTO 0.4% IONTOPHORESIS SOLUTION	3	
DXEVO 11-DAY ORAL TABLET THERAPY PACK	3	
FLUDROCORTISONE ACETATE POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
FLUOCINOLONE ACETONIDE POWDER	2	
FLUOCINONIDE POWDER	2	
HEMADY ORAL TABLET	3	
HEXATRIONE INTRA-ARTICULAR SUSPENSION	3	
HIDEX 6-DAY ORAL TABLET THERAPY PACK	3	
HYDROCORTISONE MICRONIZED POWDER	2	
KENALOG INJECTION SUSPENSION	3	
KENALOG-80 INJECTION SUSPENSION	3	
methylprednisolone acetate injection suspension	1	
METHYLPREDNISOLONE ACETATE POWDER	2	
methylprednisolone sodium succ injection solution reconstituted	1	
METHYLPREDNISOLONE-BUPIVACAINE INJECTION SUSPENSION	2	
PEDIAPRED ORAL SOLUTION	3	
PREDNISOLONE ACETATE POWDER	2	
prednisolone oral tablet	1	
PREDNISOLONE POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
prednisolone sodium phosphate oral solution	1	
PREDNISOLONE SODIUM PHOSPHATE POWDER	2	
PREDNISON POWDER	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED	3	
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED	3	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK	3	
triamcinolone acetate injection suspension	1	
TRIAMCINOLONE ACETONIDE POWDER	2	
TRIAMCINOLONE DIACET MICRONIZE POWDER	2	
TRIAMCINOLONE DIACETATE INJECTION SUSPENSION	3	
TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION	2	
ZCORT 7-DAY ORAL TABLET THERAPY PACK	3	

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Drug Name	Drug Tier	Requirements /Limits
ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER	3	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</b>		
DDAVP ORAL TABLET	3	
desmopressin ace spray refrig nasal solution	1	
desmopressin acetate oral tablet	1	
INCRELEX SUBCUTANEOUS SOLUTION	3	PA
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL	3	
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
SAIZEN INJECTION SOLUTION RECONSTITUTED	3	PA
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	3	PA
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
STIMATE NASAL SOLUTION	3	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
<b>Non-FRF</b>		
CHORIONIC GONADOTROPIN INTRAMUSCULAR SOLUTION RECONSTITUTED	1	PA
DDAVP INJECTION SOLUTION	3	
DDAVP PF INJECTION SOLUTION	3	
desmopressin acetate injection solution	1	
DESMOPRESSIN ACETATE NASAL SOLUTION	1	
desmopressin acetate pf injection solution	1	
desmopressin acetate spray nasal solution	1	
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	3	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	3	PA
GENOTROPIN SUBCUTANEOUS CARTRIDGE	3	PA
HUMATROPE INJECTION CARTRIDGE	3	PA
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT	3	PA
NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA

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Drug Name	Drug Tier	Requirements /Limits
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
SKYTROFA SUBCUTANEOUS CARTRIDGE	3	PA
SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
VAPRISOL INTRAVENOUS SOLUTION	2	
vasopressin +rfid intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
vasopressin intravenous solution	1	
VASOSTRICT INTRAVENOUS SOLUTION	3	
ZOMACTON (FOR ZOMA-JET 10) SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</b>		
KORLYM ORAL TABLET	3	PA
<b>Non-FRF</b>		
alprostadil injection solution	1	
carboprost tromethamine intramuscular solution	1	
CARBOPROST TROMETHAMINE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	1	
CERVIDIL VAGINAL INSERT	3	
HEMABATE INTRAMUSCULAR SOLUTION	3	
MIFEPREX ORAL TABLET	3	
mifepristone oral tablet	1	
PREPIDIL VAGINAL GEL	3	
PROSTIN VR INJECTION SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
<b>Anabolic Steroids</b>		
oxandrolone oral tablet	1	
<b>Androgens</b>		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	
ANDROGEL PUMP TRANSDERMAL GEL	3	
ANDROGEL TRANSDERMAL GEL	3	
AVEED INTRAMUSCULAR SOLUTION	3	
danazol oral capsule	1	
DANAZOL POWDER	2	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	3	
EC-RX TESTOSTERONE TRANSDERMAL CREAM	2	
FORTESTA TRANSDERMAL GEL	3	
JATENZO ORAL CAPSULE	3	
KYZATREX ORAL CAPSULE	3	
METHITEST ORAL TABLET	3	
methyltestosterone oral capsule	1	
METHYLTESTOSTERONE POWDER	2	
NATESTO NASAL GEL	3	

Drug Name	Drug Tier	Requirements /Limits
TESTIM TRANSDERMAL GEL	3	
TESTOPEL IMPLANT PELLETT	3	
TESTOSTERONE CYPIONATE INJECTION SOLUTION	3	
testosterone cypionate intramuscular solution	1	
testosterone enanthate intramuscular solution	1	
TESTOSTERONE IMPLANT PELLETT	3	
testosterone transdermal gel	1	
testosterone transdermal solution	1	
TLANDO ORAL CAPSULE	3	PA
VOGELXO PUMP TRANSDERMAL GEL	3	
VOGELXO TRANSDERMAL GEL	3	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
<b>Estrogens</b>		
ACTIVELLA ORAL TABLET	3	
afirmelle oral tablet	1	PV
ALORA TRANSDERMAL PATCH TWICE WEEKLY	3	
altavera oral tablet	1	PV
alyacen 1/35 oral tablet	1	PV
alyacen 7/7/7 oral tablet	1	PV
amabelz oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
amethia oral tablet	1	PV
amethyst oral tablet	1	PV
ANGELIQ ORAL TABLET	3	
ANNOVERA VAGINAL RING	3	PV
apri oral tablet	1	PV
aranelle oral tablet	1	PV
ashlyna oral tablet	1	PV
aubra eq oral tablet	1	PV
aubra 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	3	PV
balziva oral tablet	1	PV
BEYAZ ORAL TABLET	3	PV
BIJUVA ORAL CAPSULE	3	
blisovi 24 fe oral tablet	1	PV
blisovi fe 1.5/30 oral tablet	1	PV
blisovi fe 1/20 oral tablet	1	PV
briellyn oral tablet	1	PV
camrese lo oral tablet	1	PV
camrese oral tablet	1	PV
caziant oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
charlotte 24 fe oral tablet chewable	1	PV
chateal eq oral tablet	1	PV
chateal oral tablet	1	PV
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	3	
CLIMARA TRANSDERMAL PATCH WEEKLY	3	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	3	
cryselle-28 oral tablet	1	PV
cyclafem 1/35 oral tablet	1	PV
cyclafem 7/7/7 oral tablet	1	PV
cyred eq oral tablet	1	PV
cyred oral tablet	1	PV
dasetta 1/35 oral tablet	1	PV
dasetta 7/7/7 oral tablet	1	PV
daysee oral tablet	1	PV
DELESTROGEN INTRAMUSCULAR OIL	3	
delyla oral tablet	1	PV
DEPO-ESTRADIOL INTRAMUSCULAR OIL	3	
desogestrel-ethinyl estradiol oral tablet	1	PV
DIVIGEL TRANSDERMAL GEL	3	
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

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Drug Name	Drug Tier	Requirements /Limits
EC-RX ESTRADIOL TRANSDERMAL CREAM	2	
ELESTRIN TRANSDERMAL GEL	3	
elimest oral tablet	1	PV
eluryng vaginal ring	1	PV
emoquette oral tablet	1	PV
enilloring vaginal ring	1	PV
enpresse-28 oral tablet	1	PV
enskyce oral tablet	1	PV
estarylla oral tablet	1	PV
ESTRACE ORAL TABLET	3	
ESTRACE VAGINAL CREAM	3	
estradiol oral tablet	1	
estradiol transdermal gel	1	
estradiol transdermal patch twice weekly	1	
estradiol transdermal patch weekly	1	
estradiol vaginal cream	1	
estradiol vaginal tablet	1	
estradiol valerate intramuscular oil	1	
estradiol-norethindrone acet oral tablet	1	
ESTRING VAGINAL RING	3	
ESTROGEL TRANSDERMAL GEL	3	
ESTROSTEP FE ORAL TABLET	3	PV
ethynodiol diac-eth estradiol oral tablet	1	PV
etonogestrel-ethinyl estradiol vaginal ring	1	PV

Drug Name	Drug Tier	Requirements /Limits
EVAMIST TRANSDERMAL SOLUTION	3	
falmina oral tablet	1	PV
fayosim oral tablet	1	PV
FEMHRT ORAL TABLET	3	
FEMRING VAGINAL RING	3	
femynor oral tablet	1	PV
finzala oral tablet chewable	1	PV
fyavolv oral tablet	1	
gemmily oral capsule	1	PV
GENERESS FE ORAL TABLET CHEWABLE	3	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
iclevia oral tablet	1	PV
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	2	PA
IMVEXXY STARTER PACK VAGINAL INSERT	2	PA
introvale oral tablet	1	PV
isibloom oral tablet	1	PV
jaimiess oral tablet	1	PV
jasmiel oral tablet	1	PV
jinteli oral tablet	1	
jolessa oral tablet	1	PV
joyeaux oral tablet	1	PV
juleber oral tablet	1	PV
junel 1.5/30 oral tablet	1	PV

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Drug Name	Drug Tier	Requirements /Limits
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
larin 1.5/30 oral tablet	1	PV
larin 1/20 oral tablet	1	PV
larin 24 fe oral tablet	1	PV
larin fe 1.5/30 oral tablet	1	PV
larin fe 1/20 oral tablet	1	PV
larissia 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
levonorgest-eth estrad 91-day oral tablet	1	PV
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
lillow oral tablet	1	PV
LO LOESTRIN FE ORAL TABLET	3	PV

Drug Name	Drug Tier	Requirements /Limits
LOESTRIN 1.5/30 (21) ORAL TABLET	3	PV
LOESTRIN 1/20 (21) ORAL TABLET	3	PV
LOESTRIN FE 1.5/30 ORAL TABLET	3	PV
LOESTRIN FE 1/20 ORAL TABLET	3	PV
lojaimiess oral tablet	1	PV
loryna oral tablet	1	PV
LOSEASONIQUE ORAL TABLET	3	PV
low-ogestrel oral tablet	1	PV
lo-zumandimine oral tablet	1	PV
lutra oral tablet	1	PV
lyllana transdermal patch twice weekly	1	
marlissa oral tablet	1	PV
MENEST ORAL TABLET	3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	3	
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	

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Drug Name	Drug Tier	Requirements /Limits
MINASTRIN 24 FE ORAL TABLET CHEWABLE	3	PV
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY	3	
MIRCETTE ORAL TABLET	3	PV
mono-lynyah oral tablet	1	PV
NATAZIA ORAL TABLET	3	PV
necon 0.5/35 (28) oral tablet	1	PV
NEXTSTELLIS ORAL TABLET	3	PV
nikki 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 acet-ethinyl est 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
norgestim-eth estrad triphasic oral tablet	1	PV
nortrel 0.5/35 (28) oral tablet	1	PV
nortrel 1/35 (21) oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
nortrel 1/35 (28) oral tablet	1	PV
nortrel 7/7/7 oral tablet	1	PV
NUVARING VAGINAL RING	3	PV
nylia 1/35 oral tablet	1	PV
nylia 7/7/7 oral tablet	1	PV
nymyo oral tablet	1	PV
ocella oral tablet	1	PV
orsythia oral tablet	1	PV
philith oral tablet	1	PV
pimtrea oral tablet	1	PV
pirmella 1/35 oral tablet	1	PV
pirmella 7/7/7 oral tablet	1	PV
portia-28 oral tablet	1	PV
PREFEST ORAL TABLET	3	
PREMARIN INJECTION SOLUTION RECONSTITUTED	3	
PREMARIN ORAL TABLET	3	
PREMARIN VAGINAL CREAM	2	
PREMPHASE ORAL TABLET	3	
PREMPRO ORAL TABLET	3	
previfem oral tablet	1	PV
QUARTETTE ORAL TABLET	3	PV
reclipsen oral tablet	1	PV
rivelsa oral tablet	1	PV
SAFYRAL ORAL TABLET	3	PV
SEASONIQUE ORAL TABLET	3	PV

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Drug Name	Drug Tier	Requirements /Limits
setlakin oral tablet	1	PV
simliya oral tablet	1	PV
simpesse oral tablet	1	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
tarina fe 1/20 oral tablet	1	PV
taysofy oral capsule	1	PV
TAYTULLA ORAL CAPSULE	3	PV
tilia fe oral tablet	1	PV
tri femynor 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-previfem 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
TWIRLA TRANSDERMAL PATCH WEEKLY	3	PV
TYBLUME ORAL TABLET CHEWABLE	1	PV
tydemy oral tablet	1	PV
VAGIFEM VAGINAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
velivet oral tablet	1	PV
vestura oral tablet	1	PV
vienva oral tablet	1	PV
viorele oral tablet	1	PV
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY	3	
volnea oral tablet	1	PV
vyfemla oral tablet	1	PV
vylibra oral tablet	1	PV
wera oral tablet	1	PV
wymzya fe oral tablet chewable	1	PV
xulane transdermal patch weekly	1	PV
YASMIN 28 ORAL TABLET	3	PV
YAZ ORAL TABLET	3	PV
yuvaferm vaginal tablet	1	
zafemy transdermal patch weekly	1	PV
zarah oral tablet	1	PV
zovia 1/35 (28) oral tablet	1	PV
zovia 1/35e (28) oral tablet	1	PV
zumandimine oral tablet	1	PV
<b>Progestins</b>		
AYGESTIN ORAL TABLET	3	
camila oral tablet	1	PV
CRINONE VAGINAL GEL	3	PA
deblitane oral tablet	1	PV
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	3	PV

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Drug Name	Drug Tier	Requirements /Limits
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	3	PV
EC-RX PROGESTERONE TRANSDERMAL CREAM	2	
ENDOMETRIN VAGINAL INSERT	3	PA
errin oral tablet	1	PV
FIRST-PROGESTERONE VGS VAGINAL SUPPOSITORY	2	
heather oral tablet	1	PV
hydroxyprogesterone caproate intramuscular oil	1	PA
HYDROXYPROGESTERONE CAPROATE INTRAMUSCULAR SOLUTION	1	PA
incassia oral tablet	1	PV
jencycla oral tablet	1	PV
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	3	PV
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	3	PV
lyleq oral tablet	1	PV
lyza oral tablet	1	PV
MAKENA INTRAMUSCULAR OIL	3	PA

Drug Name	Drug Tier	Requirements /Limits
MAKENA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
medroxyprogesterone acetate intramuscular suspension	1	PV
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	PV
medroxyprogesterone acetate oral tablet	1	
megestrol acetate oral suspension	1	
megestrol acetate oral tablet	1	
MEGESTROL ACETATE POWDER	2	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	3	PV
NEXPLANON SUBCUTANEOUS IMPLANT	3	PV
nora-be oral tablet	1	PV
norethindrone acetate oral tablet	1	
norethindrone oral tablet	1	PV
norlyda oral tablet	1	PV
norlyroc oral tablet	1	PV
progesterone intramuscular oil	1	
PROGESTERONE MICRONIZED TRANSDERMAL CREAM	2	
progesterone oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
PROMETRIUM ORAL CAPSULE	3	
PROVERA ORAL TABLET	3	
sharobel oral tablet	1	PV
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	3	PV
SLYND ORAL TABLET	3	PV
tulana oral tablet	1	PV
<b>Selective Estrogen Receptor Modifying Agents</b>		
CLOMID ORAL TABLET	1	PA
clomiphene citrate oral tablet	1	PA
DUAVEE ORAL TABLET	3	
EVISTA ORAL TABLET	3	
OSPHENA ORAL TABLET	2	PA
raloxifene hcl oral tablet	1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
CYTOMEL ORAL TABLET	3	
levo-t oral tablet	1	
levothyroxine sodium oral tablet	1	
levoxyl oral tablet	1	
liothyronine sodium oral tablet	1	
SYNTHROID ORAL TABLET	3	
TIROSINT ORAL CAPSULE	3	

Drug Name	Drug Tier	Requirements /Limits
TIROSINT-SOL ORAL SOLUTION	3	
unithroid oral tablet	1	
<b>Non-FRF</b>		
ADTHYZA ORAL TABLET	3	
ARMOUR THYROID ORAL TABLET	3	
ERMEZA ORAL SOLUTION	3	
euthyrox oral tablet	1	
levothyroxine sodium intravenous solution	1	
levothyroxine sodium intravenous solution reconstituted	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
liothyronine sodium intravenous solution	1	
NIVA THYROID ORAL TABLET	3	
np thyroid oral tablet	1	
THYQUIDITY ORAL SOLUTION	3	
thyroid oral tablet	1	
THYROID POWDER	2	
TIROSINT ORAL CAPSULE	3	
TIROSINT-SOL ORAL SOLUTION	3	
TRIOSTAT INTRAVENOUS SOLUTION	3	
unithroid oral tablet	1	
<b>Hormonal Agents, Suppressant (Adrenal)</b>		
LYSODREN ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
<b>Non-FRF</b>		
ISTURISA ORAL TABLET	3	PA
RECORLEV ORAL TABLET	3	PA
<b>Hormonal Agents, Suppressant (Pituitary)</b>		
cabergoline oral tablet	1	
ELIGARD SUBCUTANEOUS KIT	3	PA
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
leuprolide acetate injection kit	1	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	3	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	3	PA
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	3	PA
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	3	PA
octreotide acetate injection solution	1	PA
ORILISSA ORAL TABLET	3	
SANDOSTATIN INJECTION SOLUTION	3	PA
SIGNIFOR SUBCUTANEOUS SOLUTION	3	PA
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
SYNAREL NASAL SOLUTION	3	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PA
<b>Non-FRF</b>		
CAMCEVI SUBCUTANEOUS PREFILLED SYRINGE	3	PA
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
LANREOTIDE ACETATE SUBCUTANEOUS SOLUTION	1	PA
LEUPROLIDE ACETATE (3 MONTH) INTRAMUSCULAR INJECTABLE	1	PA
LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION	2	
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT	3	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT	3	PA
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	3	PA
MYFEMBREE ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
octreotide acetate subcutaneous solution prefilled syringe	1	PA
ORGOVYX ORAL TABLET	3	PA
ORIAHNN ORAL CAPSULE THERAPY PACK	3	
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	3	PA
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA
SUPPRELIN LA SUBCUTANEOUS KIT	3	PA
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA
ZOLADEX SUBCUTANEOUS IMPLANT	3	
<b>Hormonal Agents, Suppressant (Thyroid)</b>		
<b>Antithyroid Agents</b>		
methimazole oral tablet	1	
propylthiouracil oral tablet	1	
SODIUM IODIDE I-131 ORAL SOLUTION	2	
<b>Immunological Agents</b>		
<b>Angioedema Agents</b>		
BERINERT INTRAVENOUS KIT	3	PA
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
icatibant acetate subcutaneous solution prefilled syringe	1	PA
KALBITOR SUBCUTANEOUS SOLUTION	3	PA
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
sajazir subcutaneous solution prefilled syringe	1	PA
TAKHZYRO SUBCUTANEOUS SOLUTION	3	PA
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
<b>Immunoglobulins</b>		
ASCENIV INTRAVENOUS SOLUTION	3	PA
ATGAM INTRAVENOUS INJECTABLE	3	
BAMLANIVIMAB INTRAVENOUS SOLUTION	2	
BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV

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Drug Name	Drug Tier	Requirements /Limits
BIVIGAM INTRAVENOUS SOLUTION	3	PA
CASIRIVIMAB INJECTION SOLUTION	2	
CNJ-016 INTRAVENOUS SOLUTION	2	
CUTAQUIG SUBCUTANEOUS SOLUTION	3	PA
CUVITRU SUBCUTANEOUS SOLUTION	3	PA
CYTOGAM INTRAVENOUS INJECTABLE	3	PA
ETESEVIMAB INTRAVENOUS SOLUTION	2	
EVUSHELD INTRAMUSCULAR SOLUTION	2	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	3	PA
GAMASTAN INTRAMUSCULAR INJECTABLE	2	PA
GAMMAGARD INJECTION SOLUTION	3	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
GAMMAKED INJECTION SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
GAMMAPLEX INTRAVENOUS SOLUTION	3	PA
GAMUNEX-C INJECTION SOLUTION	3	PA
HEPAGAM B INJECTION SOLUTION	3	B/D
HIZENTRA SUBCUTANEOUS SOLUTION	3	PA
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
HYPERHEP B INTRAMUSCULAR SOLUTION	3	B/D
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	B/D
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
HYQVIA SUBCUTANEOUS KIT	3	PA
IMDEVIMAB INJECTION SOLUTION	2	
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
NABI-HB INTRAMUSCULAR SOLUTION	3	B/D
OCTAGAM INTRAVENOUS SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
PANZYGA INTRAVENOUS SOLUTION	3	PA
PRIVIGEN INTRAVENOUS SOLUTION	3	PA
REGEN-COV INJECTION SOLUTION	2	
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	3	
SOTROVIMAB INTRAVENOUS SOLUTION	2	
SYNAGIS INTRAMUSCULAR SOLUTION	3	
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
VARIZIG INTRAMUSCULAR SOLUTION	3	
WINRHO SDF INJECTION SOLUTION	3	
XEMBIFY SUBCUTANEOUS SOLUTION	3	PA
<b>Immunological Agents, Other</b>		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA

Drug Name	Drug Tier	Requirements /Limits
ACTEMRA INTRAVENOUS SOLUTION	3	PA
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
COSENTYX INTRAVENOUS SOLUTION	3	PA
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA

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Drug Name	Drug Tier	Requirements /Limits
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
EMPAVELI SUBCUTANEOUS SOLUTION	3	PA
ENJAYMO INTRAVENOUS SOLUTION	3	PA
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
ENTYVIO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
GAMIFANT INTRAVENOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
IDACIO FOR CROHNS DISEASE/UC SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
IDACIO FOR PLAQUE PSORIASIS SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
IDACIO SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
IDACIO SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
ILARIS SUBCUTANEOUS SOLUTION	3	PA
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
JOENJA ORAL TABLET	3	PA
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
LEMTRADA INTRAVENOUS SOLUTION	3	PA
LITFULO ORAL CAPSULE	3	PA
OLUMIANT ORAL TABLET	3	PA

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Drug Name	Drug Tier	Requirements /Limits
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
OTEZLA ORAL TABLET THERAPY PACK	3	PA
PROVENGE INTRAVENOUS SUSPENSION	3	
RIDAURA ORAL CAPSULE	3	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
RYSTIGGO SUBCUTANEOUS SOLUTION	3	PA
SAPHNELO INTRAVENOUS SOLUTION	3	PA
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	3	
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
SKYRIZI INTRAVENOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
SOLIRIS INTRAVENOUS SOLUTION	3	PA
STELARA INTRAVENOUS SOLUTION	3	PA
STELARA SUBCUTANEOUS SOLUTION	3	PA
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA

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Drug Name	Drug Tier	Requirements /Limits
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
TZIELD INTRAVENOUS SOLUTION	3	PA
ULTOMIRIS INTRAVENOUS SOLUTION	3	PA
UPLIZNA INTRAVENOUS SOLUTION	2	
VELSIPITY ORAL TABLET	3	
VEOPOZ INJECTION SOLUTION	3	PA
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	PA
VYVGART INTRAVENOUS SOLUTION	3	PA
XELJANZ ORAL SOLUTION	3	PA
XELJANZ ORAL TABLET	3	PA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
<b>Immunostimulants</b>		
ACTIMMUNE SUBCUTANEOUS SOLUTION	3	PA
ALFERON N INJECTION SOLUTION	3	
INTRON A INJECTION SOLUTION RECONSTITUTED	3	PA
PEGASYS SUBCUTANEOUS SOLUTION	3	PA
<b>Immunosuppressants</b>		
ABRILADA SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
ABRILADA SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ADALIMUMAB-ADBM SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
ADALIMUMAB-ADBM SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
ADALIMUMAB-FKJP SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
ADALIMUMAB-FKJP SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA

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Drug Name	Drug Tier	Requirements /Limits
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ARAVA ORAL TABLET	3	
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	B/D
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
AZASAN ORAL TABLET	3	B/D
azathioprine oral tablet	1	B/D
AZATHIOPRINE POWDER	2	
azathioprine sodium injection solution reconstituted	1	B/D
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED	3	B/D
CELLCEPT ORAL CAPSULE	3	B/D
CELLCEPT ORAL SUSPENSION RECONSTITUTED	3	B/D
CELLCEPT ORAL TABLET	3	B/D

Drug Name	Drug Tier	Requirements /Limits
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
CIMZIA SUBCUTANEOUS KIT	3	PA
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
cyclosporine intravenous solution	1	
cyclosporine modified oral capsule	1	B/D
cyclosporine modified oral solution	1	B/D
cyclosporine oral capsule	1	B/D
CYLTEZO SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
CYLTEZO SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
CYLTEZO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA
ENBREL SUBCUTANEOUS SOLUTION	3	PA

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Drug Name	Drug Tier	Requirements /Limits
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	B/D
everolimus oral tablet	1	B/D
gengraf oral capsule	1	B/D
gengraf oral solution	1	B/D
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
HULIO SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
HULIO SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	3	PA

Drug Name	Drug Tier	Requirements /Limits
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	3	PA
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	3	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	3	PA
HUMIRA PEN-PSOR/UEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	3	PA
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
HYRIMOZ-CROHNS/UC STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
HYRIMOZ-PED CROHNS STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA

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Drug Name	Drug Tier	Requirements /Limits
HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
IMURAN ORAL TABLET	3	B/D
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED	1	PA
leflunomide oral tablet	1	
LUPKYNIS ORAL CAPSULE	3	PA
METHOTREXATE POWDER	2	
methotrexate sodium (pf) injection solution	1	
methotrexate sodium injection solution	1	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral tablet	1	
mycophenolate mofetil hcl intravenous solution reconstituted	1	B/D
mycophenolate mofetil intravenous solution reconstituted	1	B/D
mycophenolate mofetil oral capsule	1	B/D
mycophenolate mofetil oral suspension reconstituted	1	B/D
mycophenolate mofetil oral tablet	1	B/D

Drug Name	Drug Tier	Requirements /Limits
mycophenolate sodium oral tablet delayed release	1	B/D
MYFORTIC ORAL TABLET DELAYED RELEASE	3	B/D
NEORAL ORAL CAPSULE	3	B/D
NEORAL ORAL SOLUTION	3	B/D
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	3	
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
PROGRAF INTRAVENOUS SOLUTION	3	
PROGRAF ORAL CAPSULE	3	B/D
PROGRAF ORAL PACKET	3	B/D
RAPAMUNE ORAL SOLUTION	3	B/D
RAPAMUNE ORAL TABLET	3	B/D
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	

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Drug Name	Drug Tier	Requirements /Limits
REDITREX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
RENFLXIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
REZUROCK ORAL TABLET	3	PA
SANDIMMUNE INTRAVENOUS SOLUTION	3	
SANDIMMUNE ORAL CAPSULE	3	B/D
SANDIMMUNE ORAL SOLUTION	3	B/D
SIMPONI ARIA INTRAVENOUS SOLUTION	3	PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
sirolimus oral solution	1	B/D
sirolimus oral tablet	1	B/D
tacrolimus oral capsule	1	B/D
TREXALL ORAL TABLET	3	
XATMEP ORAL SOLUTION	3	
YUFLYMA 1-PEN KIT SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA

Drug Name	Drug Tier	Requirements /Limits
YUFLYMA 2-PEN KIT SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA
YUFLYMA 2-SYRINGE KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA
YUSIMRY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
ZORTRESS ORAL TABLET	3	B/D
<b>Vaccines</b>		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PV
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PV
ADACEL INTRAMUSCULAR SUSPENSION	2	PV
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	3	PV
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
BIOTHRAX INTRAMUSCULAR SUSPENSION	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION	2	PV
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
COMIRNATY INTRAMUSCULAR SUSPENSION	3	PV
COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
DAPTACEL INTRAMUSCULAR SUSPENSION	2	PV
DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED	2	PV
DIPHThERIA- TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION	2	PV
ENGERIX-B INJECTION SUSPENSION	2	B/D; PV
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	2	B/D; PV
FLUAD QUADRIVALENT INTRAMUSCULAR PREFILLED SYRINGE	3	PV

Drug Name	Drug Tier	Requirements /Limits
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	3	PV
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUMIST QUADRIVALENT NASAL SUSPENSION	3	PV
FLUZONE HIGH- DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION	3	PV
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
GARDASIL 9 INTRAMUSCULAR SUSPENSION	2	PV

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Drug Name	Drug Tier	Requirements /Limits
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
HAVRIX INTRAMUSCULAR SUSPENSION	2	PV
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	B/D; PV
HIBERIX INJECTION SOLUTION RECONSTITUTED	2	PV
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	B/D
INFANRIX INTRAMUSCULAR SUSPENSION	2	PV
IPOL INJECTION INJECTABLE	2	PV
IXIARO INTRAMUSCULAR SUSPENSION	2	
JYNNEOS SUBCUTANEOUS SUSPENSION	3	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
MENACTRA INTRAMUSCULAR SOLUTION	2	PV
MENQUADFI INTRAMUSCULAR SOLUTION	2	PV
MENVEO INTRAMUSCULAR SOLUTION	2	PV

Drug Name	Drug Tier	Requirements /Limits
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	2	PV
M-M-R II INJECTION SOLUTION RECONSTITUTED	2	PV
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
PEDVAX HIB INTRAMUSCULAR SUSPENSION	2	PV
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	PV
PNEUMOVAX 23 INJECTION INJECTABLE	2	PV
PREHEVBRIO INTRAMUSCULAR SUSPENSION	2	B/D; PV
PREVNAR 13 INTRAMUSCULAR SUSPENSION	2	PV
PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	2	PV
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	2	PV
QUADRACEL INTRAMUSCULAR SUSPENSION	2	PV

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Drug Name	Drug Tier	Requirements /Limits
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	B/D
RECOMBIVAX HB INJECTION SUSPENSION	2	B/D; PV
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	2	B/D; PV
ROTARIX ORAL SUSPENSION	2	PV
ROTARIX ORAL SUSPENSION RECONSTITUTED	2	PV
ROTATEQ ORAL SOLUTION	2	PV
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	PV
SPIKEVAX INTRAMUSCULAR SUSPENSION	3	PV
SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
STAMARIL INJECTION SUSPENSION RECONSTITUTED	2	
TDVAX INTRAMUSCULAR SUSPENSION	2	PV
TENIVAC INTRAMUSCULAR INJECTABLE	2	PV

Drug Name	Drug Tier	Requirements /Limits
TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION	2	PV
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
TYPHIM VI INTRAMUSCULAR SOLUTION	2	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	
VAQTA INTRAMUSCULAR SUSPENSION	2	PV
VARIVAX SUBCUTANEOUS INJECTABLE	2	PV
VAXCHORA ORAL SUSPENSION RECONSTITUTED	3	
VAXELIS INTRAMUSCULAR SUSPENSION	2	PV
VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV
VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	PV

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Drug Name	Drug Tier	Requirements /Limits
VIVOTIF ORAL CAPSULE DELAYED RELEASE	3	
YF-VAX SUBCUTANEOUS INJECTABLE	2	
<b>Inflammatory Bowel Disease Agents</b>		
<b>Aminosalicylates</b>		
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
ASACOL HD ORAL TABLET DELAYED RELEASE	3	
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	3	
AZULFIDINE ORAL TABLET	3	
balsalazide disodium oral capsule	1	
CANASA RECTAL SUPPOSITORY	3	
COLAZAL ORAL CAPSULE	3	
DELZICOL ORAL CAPSULE DELAYED RELEASE	3	
DIPENTUM ORAL CAPSULE	3	
LIALDA ORAL TABLET DELAYED RELEASE	3	
mesalamine er oral capsule extended release	1	
mesalamine er oral capsule extended release 24 hour	1	
mesalamine oral capsule delayed release	1	

Drug Name	Drug Tier	Requirements /Limits
mesalamine oral tablet delayed release	1	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	
mesalamine-cleanser rectal kit	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE	3	
ROWASA RECTAL KIT	3	
SFROWASA RECTAL ENEMA	3	
sulfasalazine oral tablet	1	
sulfasalazine oral tablet delayed release	1	
SULFASALAZINE POWDER	2	
<b>Glucocorticoids</b>		
ANUSOL-HC EXTERNAL CREAM	3	
budesonide er oral tablet extended release 24 hour	1	
budesonide oral capsule delayed release particles	1	
budesonide rectal foam	1	
CORTENEMA RECTAL ENEMA	3	
CORTIFOAM EXTERNAL FOAM	3	
ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
hydrocortisone (perianal) external cream	1	
hydrocortisone rectal enema	1	

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Drug Name	Drug Tier	Requirements /Limits
ORTIKOS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
PROCTOCORT EXTERNAL CREAM	3	
procto-med hc external cream	1	
proctosol hc external cream	1	
proctozone-hc external cream	1	
TARPEYO ORAL CAPSULE DELAYED RELEASE	3	PA
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
UCERIS RECTAL FOAM	3	
<b>Metabolic Bone Disease Agents</b>		
ACTONEL ORAL TABLET	3	
alendronate sodium oral solution	1	
alendronate sodium oral tablet	1	
ATELVIA ORAL TABLET DELAYED RELEASE	3	
BINOSTO ORAL TABLET EFFERVESCENT	3	
BONIVA ORAL TABLET	3	
calcitonin (salmon) nasal solution	1	
calcitriol oral capsule	1	
calcitriol oral solution	1	
cinacalcet hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
doxercalciferol oral capsule	1	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
FOSAMAX ORAL TABLET	3	
FOSAMAX PLUS D ORAL TABLET	3	
ibandronate sodium oral tablet	1	
NATPARA SUBCUTANEOUS CARTRIDGE	3	PA
paricalcitol oral capsule	1	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	3	
risedronate sodium oral tablet	1	
risedronate sodium oral tablet delayed release	1	
ROCALTROL ORAL CAPSULE	3	
ROCALTROL ORAL SOLUTION	3	
SENSIPAR ORAL TABLET	3	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
XGEVA SUBCUTANEOUS SOLUTION	3	PA
ZEMPLAR ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
<b>Non-FRF</b>		
calcitonin (salmon) injection solution	1	
calcitriol intravenous solution	1	
doxercalciferol intravenous solution	1	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
HECTOROL INTRAVENOUS SOLUTION	3	
ibandronate sodium intravenous solution	1	
MIACALCIN INJECTION SOLUTION	3	
pamidronate disodium intravenous solution	1	
paricalcitol intravenous solution	1	
PARSABIV INTRAVENOUS SOLUTION	2	
RECLAST INTRAVENOUS SOLUTION	3	
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	PA
ZEMPLAR INTRAVENOUS SOLUTION	3	
zoledronic acid intravenous concentrate	1	
zoledronic acid intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
<b>Miscellaneous Therapeutic Agents</b>		
CARNITOR ORAL SOLUTION	3	
CARNITOR ORAL TABLET	3	
EXEL COMFORT POINT PEN NEEDLE	2	
INTRALIPID INTRAVENOUS EMULSION	3	B/D
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
NUTRILIPID INTRAVENOUS EMULSION	3	B/D
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	3	
PREFERRED PLUS INSULIN SYRINGE	2	
sodium chloride irrigation solution	1	
<b>Non-FRF</b>		
1ST TIER UNIFINE PENTIPS	2	
1ST TIER UNIFINE PENTIPS PLUS	2	
1ST TIER UNILET COMFORTOUCH	2	
ABOUTTIME PEN NEEDLE	2	
ACCU-CHEK AVIVA IN VITRO SOLUTION	2	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	2	
ACCU-CHEK AVIVA PLUS KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
ACCU-CHEK FASTCLIX LANCET KIT	2	
ACCU-CHEK FASTCLIX LANCETS	2	
ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	2	
ACCU-CHEK GUIDE IN VITRO STRIP	2	
ACCU-CHEK GUIDE KIT	2	
ACCU-CHEK GUIDE ME KIT	2	
ACCU-CHEK SAFE-T PRO LANCETS	2	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	2	
ACCU-CHEK SMARTVIEW IN VITRO STRIP	2	
ACCU-CHEK SOFTCLIX LANCET DEV KIT	2	
ACCU-CHEK SOFTCLIX LANCETS	2	
ACCU-CHEK ULTRAFLEX INF SET	2	
ACETADOTE INTRAVENOUS SOLUTION	3	
acetylcysteine intravenous solution	1	
ACTI-LANCE 28G	2	
ACTI-LANCE LITE LANCETS 28G	2	
ACTI-LANCE SPECIAL LANCETS 17G	2	
ACTI-LANCE UNIVERSAL 23G	2	

Drug Name	Drug Tier	Requirements /Limits
ADVANCED MOBILE LANCET	2	
ADVOCATE LANCETS	2	
ADVOCATE LANCETS 30G	2	
ADVOCATE SAFETY LANCETS	2	
ADVOCATE SAFETY LANCETS 26G	2	
AEROCHAMBER MINI CHAMBER DEVICE	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER W/FLOWSIGNAL	2	
AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION	2	
AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION	2	
AGAMATRIX PRESTO TEST IN VITRO STRIP	2	
AGAMATRIX ULTRA-THIN LANCETS	2	
AIMSCO TWIST LANCETS 32G	2	
AIMSCO TWIST LANCETS 33G	2	
ALANINE POWDER	2	
ALBUKED 25 INTRAVENOUS SOLUTION	2	
ALBUKED 5 INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
ALBUMIN HUMAN INTRAVENOUS SOLUTION	2	
ALBUMINEX INTRAVENOUS SOLUTION	2	
ALBUMIN-ZLB INTRAVENOUS SOLUTION	2	
ALBURX INTRAVENOUS SOLUTION	2	
ALBUTEIN INTRAVENOUS SOLUTION	2	
ALCOHOL PADS PAD	1	
ALCOHOL PREP PAD	1	
ALCOHOL PREP PADS PAD	1	
ALCOHOL SWABSTICK PAD	1	
ALPHA-LIPOIC ACID INJECTION SOLUTION	2	
AMD FOAM DRESSING PAD	2	
AMD FOAM DRESSING TOPSHEET PAD	2	
AMMONUL INTRAVENOUS SOLUTION	3	
AMPHADASE INJECTION SOLUTION	2	
ANECTINE INJECTION SOLUTION	3	
ANHYDROUS BASE CREAM	2	
AQ INSULIN SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
AQINJECT PEN NEEDLE	2	
AQUACEL AG BURN EXTERNAL PAD	2	
AQUALANCE LANCETS 30G	2	
ARGININE HCL INJECTION SOLUTION	2	
ARGYLE STERILE SALINE IRRIGATION SOLUTION	3	
argyle sterile water irrigation solution	1	
ASPARTAME (FOR COMPOUNDING) POWDER	2	
ASPARTAME (NUTRASWEET) POWDER	2	
ASSURE COMFORT LANCETS 28G	2	
ASSURE HAEMOLANCE PLUS HIGH	2	
ASSURE HAEMOLANCE PLUS LOW	2	
ASSURE HAEMOLANCE PLUS MICRO	2	
ASSURE HAEMOLANCE PLUS NORMAL	2	
ASSURE HAEMOLANCE PLUS PED	2	
ASSURE ID INSULIN SAFETY SYR	2	
ASSURE ID SAFETY PEN NEEDLES	2	

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Drug Name	Drug Tier	Requirements /Limits
ASSURE LANCE LANCETS	2	
ASSURE LANCE LANCETS 21G	2	
ASSURE LANCE PLUS SAFETY 25G	2	
ASSURE LANCE PLUS SAFETY 30G	2	
ASSURE LANCE SAFETY LANCET 28G	2	
ASSURE PLATINUM IN VITRO STRIP	2	
atracurium besylate intravenous solution	1	
ATRAPRO DERMAL SPRAY EXTERNAL LIQUID	2	
ATROPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR	3	
atropine sulfate injection solution	1	
atropine sulfate injection solution prefilled syringe	1	
atropine sulfate intravenous solution	1	
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
AUM INSULIN SAFETY PEN NEEDLE	2	
AUM MINI INSULIN PEN NEEDLE	2	
AUM PEN NEEDLE	2	
AUM READYGARD DUO PEN NEEDLE	2	
AUM SAFETY PEN NEEDLE	2	

Drug Name	Drug Tier	Requirements /Limits
AURORA LANCET SUPER THIN 30G	2	
AURORA LANCET THIN 23G	2	
AURORA PEN NEEDLES	2	
AUTOLET II CLINISAFE KIT	2	
AUTOLET LANCING DEVICE	2	
AUTOSOFT 30 INFUSION SET	2	
AUTOSOFT 90 INFUSION SET	2	
AUTOSOFT XC INFUSION SET	2	
AVAILNEX ORAL TABLET CHEWABLE	2	
AXONA ORAL PACKET	2	
B & C EXTERNAL OINTMENT	2	
BACTERIOSTATIC WATER(BENZ ALC) INJECTION SOLUTION	2	
bal in oil intramuscular solution	1	
balsam peru-castor oil external ointment	1	
BD AUTOSHIELD DUO	2	
BD ECLIPSE LUER-LOK NEEDLE	2	
BD ECLIPSE NEEDLE	2	
BD ECLIPSE SYRINGE/NEEDLE	2	
BD FILTER NEEDLE	2	
BD INSULIN SYR ULTRAFINE II	2	
BD INSULIN SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
BD INSULIN SYRINGE U/F	2	
BD INSULIN SYRINGE U/F 1/2UNIT	2	
BD INSULIN SYRINGE U-500	2	
BD MICROTAINER LANCETS	2	
BD PEN NEEDLE MICRO U/F	2	
BD PEN NEEDLE MINI U/F	2	
BD PEN NEEDLE NANO 2ND GEN	2	
BD PEN NEEDLE NANO U/F	2	
BD PEN NEEDLE ORIGINAL U/F	2	
BD PEN NEEDLE SHORT U/F	2	
BD SAFETYGLIDE NEEDLE	2	
BD SYRINGE LUER-LOK	2	
BD VEO INSULIN SYR U/F 1/2UNIT	2	
BD VEO INSULIN SYRINGE U/F	2	
BEEF TYPE FLAVOR OS LIQUID	2	
BIOGUARD GAUZE SPONGES PAD	2	
BIOGUARD ISLAND DRESSINGS PAD	2	
BIOGUARD NON-ADHERENT DRESSING PAD	2	
BIOTEL CARE BLOOD GLUCOSE KIT	2	
BIOTEL CARE BLOOD GLUCOSE SYST KIT	2	

Drug Name	Drug Tier	Requirements /Limits
BITTER-BLOC PURE POWDER	2	
BITTER-BLOC WS CONCENTRATE POWDER	2	
BITTER-BLOC WS/OS LIQUID CONCENTRATE	2	
BLOOD GLUCOSE MONITORING 333 DEVICE	2	
BLOOD GLUCOSE TEST IN VITRO STRIP	2	
BLOOD GLUCOSE TEST STRIPS 333 IN VITRO STRIP	2	
BLULINK CONTROL HIGH & LOW IN VITRO LIQUID	2	
BLULINK GLUCOSE MONITORING SYS DEVICE	2	
BLULINK GLUCOSE TEST IN VITRO STRIP	2	
boric acid external granules	1	
BPCO EXTERNAL OINTMENT	2	
BREATHE COMFORT CHAMBER/ADULT DEVICE	2	
BREATHE COMFORT CHAMBER/CHILD DEVICE	2	
BREATHE EASE LARGE DEVICE	2	
BREATHE EASE MEDIUM DEVICE	2	
BREATHE EASE SMALL DEVICE	2	

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Drug Name	Drug Tier	Requirements /Limits
BREATHERITE VALVED MDI CHAMBER DEVICE	2	
BRIDION INTRAVENOUS SOLUTION	2	
BROMELAIN POWDER	2	
CAMPHOR CRYSTALS	2	
CAPSORAL W/DYNAMIC STATIC GRD POWDER	2	
CAPSUBLEND-H POWDER	2	
CAPSULE #0 CLEAR/CLEAR VEG CAPSULE	2	
CAPSULE #0 WHITE/WHITE OPQ VEG CAPSULE	2	
CAPSULE #1 CLEAR/CLEAR VEG CAPSULE	2	
CAPSULE #1 WHITE/WHITE OPQ VEG CAPSULE	2	
CAPSULE #3 CLEAR/CLEAR VEG CAPSULE	2	
CAPSULE #3 WHITE/WHITE OPQ VEG CAPSULE	2	
CAPSULE CONI-SNAP #0 PURPLE CAPSULE	2	
CAREFINE PEN NEEDLES	2	
CAREONE UNIFINE PENTIPS PLUS	2	
CAREPOINT POLY HUB NEEDLE	2	

Drug Name	Drug Tier	Requirements /Limits
CAREPOINT SAFETY 1ST NEEDLE	2	
CAREPOINT SAFETY1ST SYR/NEEDLE	2	
CAREPOINT SYRINGE CATHETER TIP	2	
CAREPOINT SYRINGE LUER LOCK	2	
CAREPOINT SYRINGE LUER SLIP	2	
CAREPOINT TUBERCLN SYR/LUER SL	2	
CARESENS CONTROL SOLUTION A/B IN VITRO SOLUTION	2	
CARESENS LANCETS	2	
CARESENS LANCETS 30G	2	
CARESENS N FELIZ BT DEVICE	2	
CARESENS N FELIZ DEVICE	2	
CARETOUCH ALCOHOL PREP PAD	1	
CARETOUCH CATHETER TIP SYRINGE	2	
CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID	2	
CARETOUCH HYPODERMIC NEEDLE	2	
CARETOUCH LANCING/EJECTOR	2	
CARETOUCH LUER LOCK	2	

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Drug Name	Drug Tier	Requirements /Limits
CARETOUCH LUER LOCK SYR/NEEDLE	2	
CARETOUCH LUER SLIP	2	
CARETOUCH PEN NEEDLES	2	
CARETOUCH SAFETY LANCETS	2	
CARETOUCH SAFETY LANCETS 26G	2	
CARETOUCH TEST IN VITRO STRIP	2	
CARETOUCH TWIST LANCETS 28G	2	
CARETOUCH TWIST LANCETS 30G	2	
CARETOUCH TWIST LANCETS 33G	2	
CARETOUCH TWIST MC LANCETS 30G	2	
CARNITOR INTRAVENOUS SOLUTION	3	
CARNITOR SF ORAL SOLUTION	3	
CAYA VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
CEQR SIMPLICITY 2U DEVICE	3	
CEQR SIMPLICITY INSERTER	3	
CETYLCIDE-G CONCENTRATE	2	
CHEMSTRIP BG LOG BOOK	2	
CHEMSTRIP K IN VITRO STRIP	2	
CHEMSTRIP UGK IN VITRO STRIP	2	
CHOLEXMAX ORAL POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
CHOLEXTRA T/F ORAL POWDER	2	
CHOLINE BITARTRATE POWDER	2	
cisatracurium besylate (pf) intravenous solution	1	
cisatracurium besylate intravenous solution	1	
CLEVER CHEK LANCETS	2	
CLEVER CHOICE COMFORT EZ	2	
CLEVER CHOICE HOLDING CHAMBER DEVICE	2	
CLEVER CHOICE LANCETS 21G	2	
CLEVER CHOICE LANCETS 23G	2	
CLEVER CHOICE LANCETS 28G	2	
CLICKFINE PEN NEEDLES	2	
CLINOLIPID INTRAVENOUS EMULSION	3	B/D
coal tar external solution	1	
COMFORT ASSURED LANCETS 28G	2	
COMFORT ASSURED LANCETS 33G	2	
COMFORT EZ INSULIN SYRINGE	2	
COMFORT EZ MICRO PEN NEEDLES	2	
COMFORT EZ PEN NEEDLES	2	
COMFORT EZ PRO PEN NEEDLES	2	

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Drug Name	Drug Tier	Requirements /Limits
COMFORT EZ SHORT PEN NEEDLES	2	
COMFORT TOUCH ALCOHOL PREP PAD	1	
COMFORT TOUCH INSULIN PEN NEED	2	
COMFORT TOUCH LANCETS 31G	2	
COMFORT TOUCH PLUS LANCETS 28G	2	
COMFORT TOUCH PLUS LANCETS 30G	2	
COMPACT SPACE CHAMBER DEVICE	2	
COMPACT SPACE CHAMBER/LG MASK DEVICE	2	
COMPACT SPACE CHAMBER/MED MASK DEVICE	2	
COMPACT SPACE CHAMBER/SM MASK DEVICE	2	
CONDOMS	2	PV
CONTOUR BLOOD GLUCOSE SYSTEM KIT	2	
CONTOUR CONTROL IN VITRO LIQUID	2	
CONTOUR MONITOR DEVICE	2	
CONTOUR NEXT CONTROL IN VITRO SOLUTION	2	
CONTOUR NEXT EZ KIT	2	
CONTOUR NEXT GEN MONITOR DEVICE	2	
CONTOUR NEXT GEN MONITOR KIT	2	
CONTOUR NEXT LINK KIT	2	

Drug Name	Drug Tier	Requirements /Limits
CONTOUR NEXT MONITOR KIT	2	
CONTOUR NEXT ONE DEVICE	2	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT TEST IN VITRO STRIP	2	
CONTOUR TEST IN VITRO STRIP	2	
COSELA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
CREAM BASE EXTERNAL CREAM	2	
CULTURELLE IBS COMPLETE ORAL PACKET	2	
CURITY AMD ANTIMICROBIAL SPNGE PAD	2	
CURITY AMD ANTIMICROBIAL STRIP	2	
CURITY IODOFORM PACKING STRIP	2	
CURITY STERILE SALINE IRRIGATION SOLUTION	3	
CVS KETONE CARE IN VITRO STRIP	2	
CVS LANCETS MICRO THIN 33G	2	
CVS LANCETS THIN 26G	2	
CVS LANCETS ULTRA-THIN 30G	2	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED	2	

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Drug Name	Drug Tier	Requirements /Limits
CYTOTINE ORAL POWDER	2	
DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
deferoxamine mesylate injection solution reconstituted	1	B/D
DEFLUX METAL NEEDLE	2	
DEHYDRATED ALCOHOL SOLUTION	2	
DENOVO PLUS B12 ORAL CAPSULE	2	
DEPLIN 15 ORAL CAPSULE	2	
DEPLIN 7.5 ORAL CAPSULE	2	
DESFERAL INJECTION SOLUTION RECONSTITUTED	3	B/D
DEXCOM G4 PLAT PED RCV/SHARE DEVICE	2	
DEXCOM G4 PLAT PED RECEIVER DEVICE	2	
DEXCOM G4 PLATINUM RCV/SHARE DEVICE	2	
DEXCOM G4 PLATINUM RECEIVER DEVICE	2	
DEXCOM G4 PLATINUM TRANSMITTER	2	
DEXCOM G5 MOB/G4 PLAT SENSOR	2	
DEXCOM G5 MOBILE RECEIVER DEVICE	2	

Drug Name	Drug Tier	Requirements /Limits
DEXCOM G5 MOBILE TRANSMITTER	2	
DEXCOM G5 RECEIVER KIT DEVICE	2	
DEXCOM G6 RECEIVER DEVICE	2	
DEXCOM G6 SENSOR	2	
DEXCOM G6 TRANSMITTER	2	
DEXCOM G7 RECEIVER DEVICE	2	
DEXCOM G7 SENSOR	2	
DIASCREEN 10	2	
DIASCREEN 1B	2	
DIASCREEN 1G STRIP	2	
DIASCREEN 1K	2	
DIASCREEN 1K STRIP	2	
DIASCREEN 2GK STRIP	2	
DIASCREEN 2GP	2	
DIASCREEN 3	2	
DIASCREEN 4NL	2	
DIASCREEN 4OBL	2	
DIASCREEN 4PH	2	
DIASCREEN 5	2	
DIASCREEN 6	2	
DIASCREEN 7	2	
DIASCREEN 8	2	
DIASCREEN 9	2	
DIASCREEN LIQUID URINE CONTROL	2	
DIATHRIVE BLOOD GLUCOSE METER DEVICE	2	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP	2	

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Drug Name	Drug Tier	Requirements /Limits
DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID	2	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP	2	
DIATHRIVE LANCET ULTRA THIN 30	2	
DIATHRIVE LANCETS	2	
DIATHRIVE LANCING DEVICE	2	
DIATHRIVE PEN NEEDLE	2	
DIATHRIVE+ GLUCOSE MONITOR DEVICE	2	
DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP	2	
digestive support oral capsule extended release	1	
DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	2	
DILUENT FOR LEFAMULIN INTRAVENOUS SOLUTION	2	
diluent for treprostinil intravenous solution	1	
DL-ALANINE POWDER	2	
DL-LEUCINE POWDER	2	
DL-METHIONINE POWDER	2	
DL-PHENYLALANINE POWDER	2	
DOJOLVI ORAL LIQUID	3	
d-ribose oral powder	1	

Drug Name	Drug Tier	Requirements /Limits
DROPLET GENTEEL LANCING DEVICE	2	
DROPLET INSULIN SYRINGE	2	
DROPLET LANCETS ULTRA THIN 30G	2	
DROPLET MICRON	2	
DROPLET PEN NEEDLES	2	
DROPLET PERSONAL LANCETS 30G	2	
DROPSAFE ALCOHOL PREP PAD	1	
DROPSAFE SAFETY PEN NEEDLES	2	
DROPSAFE SAFETY SYRINGE/NEEDLE	2	
DRUG MART LANCETS THIN 26G	2	
DRUG MART ON-THE-GO LANCET 30G	2	
DRUG MART UNILET LANCETS 28G	2	
DRUG MART UNILET LANCETS 30G	2	
DRUG MART UNILET LANCETS 33G	2	
DUODOTE INTRAMUSCULAR SOLUTION AUTO-INJECTOR	3	
DURABASE ADVANCED EXTERNAL CREAM	2	
DURABASE EXTERNAL CREAM	2	
DUREX EXTRA SENSITIVE THIN DEVICE	2	PV
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
EASIVENT	2	
EASY COMFORT ALCOHOL PADS PAD	1	
EASY COMFORT INSULIN SYRINGE	2	
EASY COMFORT LANCETS	2	
EASY COMFORT LANCETS TWIST TOP	2	
EASY COMFORT PEN NEEDLES	2	
EASY GLIDE CATH TIP SYRINGE	2	
EASY GLIDE LUER LOCK SYRINGE	2	
EASY GLIDE SLIP LOCK SYRINGE	2	
EASY TALK PLUS II CONTROL IN VITRO SOLUTION	2	
EASY TALK PLUS II TEST STRIPS IN VITRO STRIP	2	
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP	2	
EASY TOUCH HEALTHPRO GLUCOSE KIT	2	
EASY TOUCH HYPODERMIC NEEDLE	2	
EASY TOUCH INSULIN SYRINGE	2	
EASY TOUCH LANCETS 21G	2	
EASY TOUCH LANCETS 23G	2	
EASY TOUCH LANCETS 26G	2	

Drug Name	Drug Tier	Requirements /Limits
EASY TOUCH LANCETS 28G	2	
EASY TOUCH LANCETS 28G/TWIST	2	
EASY TOUCH LANCETS 30G	2	
EASY TOUCH LANCETS 30G/TWIST	2	
EASY TOUCH LANCETS 32G	2	
EASY TOUCH LANCETS 32G/TWIST	2	
EASY TOUCH LANCETS 33G/TWIST	2	
EASY TOUCH LANCING DEVICE	2	
EASY TOUCH PEN NEEDLES	2	
EASY TOUCH SAFETY LANCETS 21G	2	
EASY TOUCH SAFETY LANCETS 23G	2	
EASY TOUCH SAFETY LANCETS 26G	2	
EASY TOUCH SAFETY LANCETS 28G	2	
EASY TOUCH SAFETY PEN NEEDLES	2	
EASY TOUCH SYRINGE BARREL	2	
EASY TRAK II BLOOD GLUCOSE SYS DEVICE	2	
EASY TRAK II CONTROL IN VITRO LIQUID	2	

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Drug Name	Drug Tier	Requirements /Limits
EASY TRAK II GLUCOSE TEST IN VITRO STRIP	2	
EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID	2	
EASYMAX CONTROL IN VITRO SOLUTION	2	
EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID	2	
EASYPPOINT NEEDLE	2	
EASYPPOINT NEEDLE/SYRINGE	2	
EC-RX DHEA EXTERNAL CREAM	2	
ECTOSEAL P2G POWDER	2	
EDETATE DISODIUM INTRAVENOUS SOLUTION	2	
ELCYS INTRAVENOUS SOLUTION	3	
ELLA ORAL TABLET	2	PV
EMBRACE EVO GLUCOSE MONITOR DEVICE	2	
EMBRACE LANCETS ULTRA THIN 30G	2	
EMBRACE LANCING DEVICE/EJECTOR	2	
EMBRACE PEN NEEDLES	2	
EMBRACE PRESSURE ACTIVATED 21G	2	
EMBRACE PRESSURE ACTIVATED 28G	2	

Drug Name	Drug Tier	Requirements /Limits
EMBRACE TALK BLOOD GLUCOSE DEVICE	2	
EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION	2	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	2	
EMBRACE TALK MONITORING SYSTEM KIT	2	
EMBRACE WAVE BLOOD GLUCOSE DEVICE	2	
EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP	2	
EMBRACE WAVE GLUCOSE METER DEVICE	2	
EMOLLIENT BASE EXTERNAL CREAM	2	
EMPTY CAPSULE SIZE 0 CLEAR CAPSULE	2	
EMPTY CAPSULE SIZE 0 WHITE/OPA CAPSULE	2	
EMPTY CAPSULE SIZE 1 CLEAR CAPSULE	2	
EMPTY CAPSULE SIZE 1 WHITE/OPA CAPSULE	2	
EMPTY CAPSULE SIZE 3 CLEAR CAPSULE	2	
EMPTY CAPSULE SIZE 3 WHITE/OPA CAPSULE	2	
ENLITE GLUCOSE SENSOR	2	

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Drug Name	Drug Tier	Requirements /Limits
EQL COLOR LANCETS MICRO 33G	2	
ETHAMOLIN INTRAVENOUS SOLUTION	2	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
EXCILON AMD DRAIN SPONGES PAD	2	
EXTENDED INFUSION SET 23"/6MM	2	
EXTENDED INFUSION SET 23"/9MM	2	
EXTENDED INFUSION SET 32"/9MM	2	
EXTENDED RESERVOIR 3ML	2	
E-Z JECT LANCET MICRO-THIN 33G	2	
E-Z JECT LANCETS 21G	2	
EZ-LETS LANCETS 30G	2	
FAVIPIRAVIR ORAL TABLET	3	
FC2 FEMALE CONDOM	2	PV; QL (12 EA per 23 days)
FDGARD ORAL CAPSULE	2	
FEMCAP VAGINAL DEVICE	2	PV; QL (1 EA per 365 days)
FIFTY50 SAFETY SEAL LANCETS	2	
FIFTY50 UNILET LANCETS 33G	2	
FILSPARI ORAL TABLET	3	PA
FINE 30	2	

Drug Name	Drug Tier	Requirements /Limits
FINGERSTIX LANCETS	2	
FIXED OIL SUSPENSION LIQUID	2	
FLEXBUMIN INTRAVENOUS SOLUTION	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
FLEXICHAMBER DEVICE	2	
fomepizole intravenous solution	1	
FOOD COLOR BLUE POWDER	2	
FORA 6 CONNECT IN VITRO STRIP	2	
FORA 6 CONNECT/GTEL TEST IN VITRO STRIP	2	
FORA D40G GLUCOSE/PRESSURE DEVICE	2	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	2	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	2	
FORA LANCETS	2	
FORA TN'G ADVANCE PRO IN VITRO STRIP	2	
formaldehyde external solution	1	
FORTISCARE CONTROL IN VITRO SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
FORTISCARE G1 TEST STRIP IN VITRO STRIP	2	
FORTISCARE T1 GLUCOSE SYSTEM DEVICE	2	
FREDS PHARMACY UNILET LANC 28G	2	
FREDS PHARMACY UNILET LANC 30G	2	
FREESTYLE FREEDOM LITE KIT	2	
FREESTYLE INSULINX TEST IN VITRO STRIP	2	
FREESTYLE LANCETS	2	
FREESTYLE LIBRE 14 DAY READER DEVICE	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	
FREESTYLE LIBRE 2 READER DEVICE	2	
FREESTYLE LIBRE 2 SENSOR	2	
FREESTYLE LIBRE 3 SENSOR	2	
FREESTYLE LIBRE READER DEVICE	2	
FREESTYLE LITE TEST IN VITRO STRIP	2	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	2	
FREESTYLE TEST IN VITRO STRIP	2	
FREESTYLE UNISTICK II LANCETS	2	
GALAXTRA ORAL POWDER	2	
GAUZE PADS PAD	2	

Drug Name	Drug Tier	Requirements /Limits
GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE	2	
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
GEN7T PLUS EXTERNAL PATCH	3	
GENTEEL BUTTERFLY TOUCH LANCET	2	
GENTEEL LANCING KIT (BLUE) KIT	2	
GENTLE-LET LANCETS	2	
GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
GHT BLOOD GLUCOSE MONITOR KIT	2	
GIVLAARI SUBCUTANEOUS SOLUTION	3	PA
GLOBAL EASY GLIDE INSULIN SYR	2	
GLOBAL INJECT EASE LANCETS 28G	2	
GLOBAL INJECT EASE LANCETS 30G	2	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP	2	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP	2	
GLUCOCARD SHINE CONNEX KIT	2	
GLUCOCARD SHINE EXPRESS KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
GLUCOCARD SHINE TEST IN VITRO STRIP	2	
GLUCOCARD VITAL TEST IN VITRO STRIP	2	
GLUCOCOM LANCETS 30G	2	
GLUCOCOM LANCETS 33G	2	
GLUCOPRO INSULIN SYRINGE	2	
GLUTAMINE POWDER	2	
glutaraldehyde external solution	1	
GLUTATHIONE INJECTION SOLUTION	2	
GLUTATHIONE INTRAVENOUS SOLUTION	2	
GLUTATHIONE POWDER	2	
GLUTATHIONE-L POWDER	2	
GLUTATHIONE-L REDUCED POWDER	2	
GNP LANCETS 21G	2	
GNP LANCETS THIN 26G	2	
GNP STERILE LANCETS 28G	2	
GNP STERILE LANCETS 30G	2	
GNP STERILE LANCETS 33G	2	
GOHIBIC INTRAVENOUS SOLUTION	2	
GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP	2	

Drug Name	Drug Tier	Requirements /Limits
GOJJI BLOOD TEST STRIP/LANCETS IN VITRO STRIP	2	
GOJJI CONTROL IN VITRO SOLUTION	2	
GOJJI LANCING DEVICE/CLEAR CAP	2	
GOJJI STERILE LANCETS	2	
GOODSENSE COLOR LANCETS 33G	2	
GOODSENSE LANCETS 26G UNIV	2	
GOODSENSE LANCETS 30G	2	
GOODSENSE LANCETS 30G UNIV	2	
GOODSENSE LANCETS 33G	2	
GOODSENSE LANCETS 33G UNIV	2	
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	3	
GUARDIAN 4 GLUCOSE SENSOR	2	
GUARDIAN 4 TRANSMITTER	2	
GUARDIAN LINK 3 TRANSMITTER	2	
GUARDIAN SENSOR (3)	2	
GUARDIAN SENSOR 3	2	
HAEMOLANCE	2	
HAEMOLANCE PLUS	2	
HEALTHWISE INSULIN SYR/NEEDLE	2	
HEALTHWISE MICRON PEN NEEDLES	2	

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Drug Name	Drug Tier	Requirements /Limits
HEALTHWISE SHORT PEN NEEDLES	2	
HEALTHY ACCENTS UNILET LANCETS	2	
H-E-B INCONTROL LANCETS 28G	2	
H-E-B INCONTROL LANCETS 30G	2	
H-E-B INCONTROL LANCETS 33G	2	
H-E-B INCONTROL PEN NEEDLES	2	
H-E-B INCONTROL UNIFINE PENTIP	2	
HESPAN INTRAVENOUS SOLUTION	2	
hetastarch-nacl intravenous solution	1	
HEXTEND INTRAVENOUS SOLUTION	2	
HRT BOTANICAL CREAM	2	
HRT CREAM BASE CREAM	2	
HRT CREAM CREAM	2	
HRT HEAVY CREAM	2	
HUMAN ALBUMIN GRIFOLS INTRAVENOUS SOLUTION	2	
HUMATROPEN FOR 12MG DEVICE	2	
HUMATROPEN FOR 24MG DEVICE	2	
HUMATROPEN FOR 6MG DEVICE	2	
HW EMBRACE PRO GLUCOSE METER DEVICE	2	

Drug Name	Drug Tier	Requirements /Limits
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	2	
HW EMBRACE TALK BLOOD GLUCOSE DEVICE	2	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	2	
HYALGAN INTRA-ARTICULAR SOLUTION	2	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
HYLENEX INJECTION SOLUTION	2	
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
IGALMI SUBLINGUAL FILM	3	
ILET CONTACT DETACH KIT	2	
ILET INSET KIT	2	
ILET INSULIN PUMP KIT	2	
IMCIVREE SUBCUTANEOUS SOLUTION	2	
IN TOUCH STERILE LANCETS 30G	2	
INCONTROL ULTICARE PEN NEEDLES	2	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP	2	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	

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Drug Name	Drug Tier	Requirements /Limits
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	
INSPIREASE RESERVOIR BAGS	2	
INSULIN SYRINGE-NEEDLE U-100	2	
INSUPEN PEN NEEDLES	2	
iodine strong oral solution	1	
IV STABILIZER FOR LUMOXITI INTRAVENOUS SOLUTION	2	
J-TIP KIT W/VIAL ADAPTERS KIT	2	
JUVAZIN EXTERNAL GEL	2	
KEDBUMIN INTRAVENOUS SOLUTION	2	
KERLIX AMD ANTIMICROBIAL	2	
KERLIX AMD SUPER SPONGES PAD	2	
KETO-DIASTIX IN VITRO STRIP	2	
KETONE TEST IN VITRO STRIP	2	

Drug Name	Drug Tier	Requirements /Limits
KETOSTIX IN VITRO STRIP	2	
KORSUVA INTRAVENOUS SOLUTION	3	PA; NDS
KROGER HEALTHPRO GLUCOSE TEST IN VITRO STRIP	2	
KROGER HEALTHPRO LANCET 26G	2	
KROGER LANCETS 21G	2	
KROGER LANCETS MICRO THIN 33G	2	
KROGER LANCETS THIN 26G	2	
KROGER LANCETS ULTRATHIN 30G	2	
KROGER PEN NEEDLES	2	
K-Y ME & YOU EXTRA LUBRICATED DEVICE	2	PV
K-Y ME & YOU INTENSE DEVICE	2	PV
lactated ringers irrigation solution	1	
LAGEVRIO ORAL CAPSULE	2	
L-ALANINE POWDER	2	
LANCETS	2	
LANCETS 30G	2	
LANCETS 33G	2	
LANCETS MICRO THIN 33G	2	
LANCETS SUPER THIN 28G	2	
LANCETS THIN	2	
LANCETS ULTRA THIN	2	

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Drug Name	Drug Tier	Requirements /Limits
LANCETS ULTRA THIN 30G	2	
L-ARGININE POWDER	2	
L-CYSTINE POWDER	2	
LDL CARE ORAL POWDER	2	
LEADER UNIFINE PENTIPS PLUS	2	
LECITHIN GRANULES	2	
LEVOCARNITINE INJECTION SOLUTION	2	
levocarnitine intravenous solution	1	
levocarnitine sf oral solution	1	
L-GLUTAMIC ACID POWDER	2	
L-GLUTAMINE CRYSTALS	2	
L-GLUTAMINE POWDER	2	
L-HISTIDINE MONOHYDROCHLORIDE CRYSTALS	2	
L-HISTIDINE MONOHYDROCHLORIDE POWDER	2	
L-HISTIDINE POWDER	2	
LIBERTY MEDICAL LANCETS	2	
LIDOTHOL EXTERNAL PATCH	3	
LIMBREL ORAL CAPSULE	2	
LIMBREL250 ORAL CAPSULE	2	
LIMBREL500 ORAL CAPSULE	2	

Drug Name	Drug Tier	Requirements /Limits
LIPO INTRAMUSCULAR SOLUTION	2	
LIPO-C INTRAMUSCULAR SOLUTION	2	
LIPOCREAM BASE EXTERNAL CREAM	2	
LIPOSOMAL HEAVY EXTERNAL CREAM	2	
L-ISOLEUCINE POWDER	2	
LITETOUCH INSULIN SYRINGE	2	
LITETOUCH LANCETS	2	
LITETOUCH PEN NEEDLES	2	
LIVE BETTER LANCET SUPER THIN	2	
LIVE BETTER LANCET ULTRA THIN	2	
LIVMARLI ORAL SOLUTION	3	PA
L-LEUCINE POWDER	2	
LMD IN D5W INTRAVENOUS SOLUTION	2	
LMD IN NAACL INTRAVENOUS SOLUTION	2	
L-MESITRAN SOFT WOUND EXTERNAL GEL	2	
L-METHIONINE POWDER	2	
l-methylfolate forte oral capsule	1	
l-methylfolate-algae oral capsule	1	
LODOCO ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
L-PHENYLALANINE POWDER	2	
L-PROLINE POWDER	2	
L-THREONINE CRYSTALS	2	
L-TRYPTOPHAN POWDER	2	
L-TYROSINE POWDER	2	
LUXAMEND EXTERNAL CREAM	2	
L-VALINE CRYSTALS	2	
L-VALINE POWDER	2	
LYSINE HCL INJECTION SOLUTION	2	
MAXICOMFORT II PEN NEEDLE	2	
MAXI-COMFORT INSULIN SYRINGE	2	
MAXI-COMFORT SAFETY PEN NEEDLE	2	
MAXICOMFORT SYR 27G X 1/2"	2	
MEDACTIV ORAL TABLET	2	
MEDICINE SHOPPE PEN NEEDLES	2	
MEDIHONEY WOUND & BURN DRESSING EXTERNAL PASTE	2	
MEDIHONEY WOUND/BURN DRESSING EXTERNAL GEL	2	
MEDLANCE EXTRA 21G	2	
MEDLANCE LITE 25G	2	
MEDLANCE PLUS EXTRA 21G	2	

Drug Name	Drug Tier	Requirements /Limits
MEDLANCE PLUS LANCETS	2	
MEDLANCE PLUS LITE 25G	2	
MEDLANCE PLUS SPECIAL 0.8MM	2	
MEDLANCE PLUS SUPERLITE 30G	2	
MEDLANCE PLUS UNIVERSAL 21G	2	
MEDLANCE UNIVERSAL 21G	2	
MEIJER LANCETS UNIVERSAL 33G	2	
methergine oral tablet	1	
METHIONINE POWDER	2	
methylergonovine maleate injection solution	1	
methylergonovine maleate oral tablet	1	
METOPIRONE ORAL CAPSULE	3	
MICROCHAMBER DEVICE	2	
MICROCYN EXTERNAL LIQUID	2	
MICRODOT PEN NEEDLE	2	
MICRODOT TEST IN VITRO STRIP	2	
MICROLET LANCETS	2	
MICROLET NEXT LANCING DEVICE	2	
MINIMED 770G INSULIN PUMP SYS KIT	2	
MINIMED 780G INSULIN PUMP KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
MINIMED MIO ADVANCE INFUSE SET	2	
MINIMED PUMP RESERVOIR 3ML	2	
MINIMED QUICK SET INF SET 18"	2	
MINIMED QUICK SET INF SET 23"	2	
MINIMED QUICK SET INF SET 32"	2	
MINIMED QUICK SET INF SET 43"	2	
MINIMED SILHOUETTE INF SET 32"	2	
MINIMED SILHOUETTE INF SET 43"	2	
MM PEN NEEDLES	2	
MM TWIST LANCETS	2	
MONOJECT HYPODERMIC NEEDLE	2	
MONOLET LANCETS	2	
MONOLET OPD LANCETS	2	
MONOLETTOR SAFETY LANCETS	2	
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
MPD SAFETY LANCET 21G	2	
MPD SAFETY LANCET 23G	2	
MPD SAFETY LANCET 28G	2	
MPD SAFETY LANCET 30G	2	

Drug Name	Drug Tier	Requirements /Limits
MULTIBASE EXTERNAL CREAM	2	
MULTI-PHASIC PENETRATING CMPD EXTERNAL CREAM	2	
MYGLUCOHEALTH LANCETS 30G	2	
NEOKE ALCAR ORAL POWDER	2	
NEOKE BCAA4 ORAL POWDER	2	
NEOKE BHB ORAL POWDER	2	
NEOKE RA LIPOIC ORAL POWDER	2	
NEOPHE ORAL POWDER	2	
NEXAVIR INJECTION SOLUTION	2	
NEXTOL SF	2	
NIMBEX INTRAVENOUS SOLUTION	2	
NITHIODOLE INTRAVENOUS KIT	3	
NON GELATIN CAPSULES (EMPTY) CAPSULE	2	
NORDIPEN 5 INJECTION DEVICE	2	
NORM-JECT LUER SLIP SYRINGE	2	
NOVA SAFETY LANCETS 23G	2	
NOVA SAFETY LANCETS 28G	2	
NOVA SUREFLEX LANCETS	2	
NOVAFILM GEL	2	

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Drug Name	Drug Tier	Requirements /Limits
NOVOFINE AUTOCOVER PEN NEEDLE	2	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
NOVOPEN ECHO DEVICE	3	
NOVOTWIST PEN NEEDLE	2	
OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION	2	
OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION	2	
OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION	2	
OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION	2	
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	3	
OMEGAVEN INTRAVENOUS EMULSION	3	B/D
OMNIBASE EXTERNAL CREAM	2	
OMNIPOD 5 G6 INTRO (GEN 5) KIT	2	
OMNIPOD 5 G6 POD (GEN 5)	2	
OMNIPOD CLASSIC PDM (GEN 3) KIT	2	
OMNIPOD CLASSIC PODS (GEN 3)	2	

Drug Name	Drug Tier	Requirements /Limits
OMNIPOD DASH INTRO (GEN 4) KIT	2	
OMNIPOD DASH PDM (GEN 4) KIT	2	
OMNIPOD DASH PODS (GEN 4)	2	
OMNIPOD GO KIT	2	
ONE DROP BLOOD GLUCOSE MONITOR KIT	2	
ONE DROP TEST IN VITRO STRIP	2	
ONETOUCH DELICA LANCETS 30G	2	
ONETOUCH DELICA LANCETS 33G	2	
ONETOUCH DELICA LANCING DEV	2	
ONETOUCH DELICA PLUS LANCET30G	2	
ONETOUCH DELICA PLUS LANCET33G	2	
ONETOUCH DELICA PLUS LANCING	2	
ONETOUCH DELICA SAFETY LANCING	2	
ONETOUCH FINEPOINT LANCETS	2	
ONETOUCH SOLUTIONS STARTER KIT KIT	2	
ONETOUCH ULTRA 2 KIT	2	
ONETOUCH ULTRA IN VITRO LIQUID	2	
ONETOUCH ULTRA IN VITRO STRIP	2	
ONETOUCH ULTRASOFT 2 LANCETS	2	

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Drug Name	Drug Tier	Requirements /Limits
ONETOUCH ULTRASOFT LANCETS	2	
ONETOUCH VERIO FLEX SYSTEM DEVICE	2	
ONETOUCH VERIO FLEX SYSTEM KIT	2	
ONETOUCH VERIO IN VITRO SOLUTION	2	
ONETOUCH VERIO IN VITRO STRIP	2	
ONETOUCH VERIO IQ SYSTEM KIT	2	
ONETOUCH VERIO KIT	2	
ONETOUCH VERIO REFLECT KIT	2	
OPTICHAMBER DIAMOND	2	
OPTICHAMBER DIAMOND-LG MASK DEVICE	2	
OPTICHAMBER DIAMOND-MD MASK	2	
OPTICHAMBER DIAMOND-SM MASK	2	
ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	3	
ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	3	
ORAPENN SD ANHYD SWEETENED ORAL LIQUID	2	
ORLADEYO ORAL CAPSULE	3	PA
ORLISTAT ORAL CAPSULE	1	PA

Drug Name	Drug Tier	Requirements /Limits
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
OXLUMO SUBCUTANEOUS SOLUTION	3	PA
oxytocin injection solution	1	
OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION	2	
OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	2	
PALFORZIA (12 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (120 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (160 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (20 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (200 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (240 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (3 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET	3	PA
PALFORZIA (300 MG TITRATION) ORAL PACKET	3	PA
PALFORZIA (40 MG DAILY DOSE) ORAL	3	PA
PALFORZIA (6 MG DAILY DOSE) ORAL	3	PA

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Drug Name	Drug Tier	Requirements /Limits
PALFORZIA (80 MG DAILY DOSE) ORAL	3	PA
PALFORZIA INITIAL ESCALATION ORAL	3	PA
PANDA MASK LARGE	2	
PANDA MASK MEDIUM	2	
PANDA MASK SMALL	2	
PARAGARD INTRAUTERINE COPPER INTRAUTERINE DEVICE	3	PV
PARI VORTEX ADULT MASK	2	
PASSION FRUIT FLAVOR POWDER	2	
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	2	
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	2	
PC UNIFINE PENTIPS	2	
PCCA CUSTOM TROCHE BASE (LS) POWDER	2	
PCCA ELLAGE VAGINAL CREAM	2	
PCCA HYDRABASE SB CUSTOM BASE EXTERNAL CREAM	2	
PEDIATRIC PANDA MASK	2	
PEDMARK INTRAVENOUS SOLUTION	3	
PEN NEEDLES	2	

Drug Name	Drug Tier	Requirements /Limits
PENTETATE CALCIUM TRISODIUM COMBINATION SOLUTION	3	
PENTETATE ZINC TRISODIUM COMBINATION SOLUTION	3	
PENTIPS	2	
PETROLEUM GAUZE NON-WOVEN 3X9" EXTERNAL	2	
phendimetrazine tartrate oral tablet	1	
PHOTREXA VISCOUS OPHTHALMIC SOLUTION PREFILLED SYRINGE	2	
PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE	2	
PHYSIOLYTE IRRIGATION SOLUTION	3	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	3	
PHYSOSTIGMINE SALICYLATE INJECTION SOLUTION	3	
PIP BLOOD GLUCOSE MONITORING DEVICE	2	
PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP	2	
PIP GLUCOSE CONTROL SOLUTION IN VITRO LIQUID	2	

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Drug Name	Drug Tier	Requirements /Limits
PIP PEN NEEDLES 31G X 5MM	2	
PIP PEN NEEDLES 32G X 4MM	2	
PITOCIN INJECTION SOLUTION	3	
PLASBUMIN-25 INTRAVENOUS SOLUTION	2	
PLASBUMIN-5 INTRAVENOUS SOLUTION	2	
PLASMANATE INTRAVENOUS SOLUTION	2	
PLO GEL - MEDIFLO 30 EXTERNAL KIT	2	
PLO GEL - MEDIFLO 30 PRE-MIXED EXTERNAL GEL	2	
PLO20 FLOWABLE EXTERNAL GEL	2	
PLO20 NON-FLOWABLE EXTERNAL GEL	2	
PLURONIC GEL	2	
POCKET SPACER DEVICE	2	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE	2	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST	2	
POLOXAMER 407 POWDER	2	
POLYMAC PROGEL GEL	2	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	2	

Drug Name	Drug Tier	Requirements /Limits
PREFERRED PLUS UNIFINE PENTIPS	2	
pregnenolone oral tablet	1	
PREMIUM CONDOMS LUBRICATED	2	PV
PREVDUO INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
PREVENT DROPSAFE PEN NEEDLES	2	
PREVENT SAFETY PEN NEEDLES	2	
PRO COMFORT SAFETY LANCETS 30G	2	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT DEVICE	2	
PROCAP 90 CAPSULE EXCIPIENT POWDER	2	
PROCARE SPACER/ADULT MASK DEVICE	2	
PROCARE SPACER/CHILD MASK DEVICE	2	
PRODIGY NO CODING BLOOD GLUC KIT	2	
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROVAYBLUE INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
PTS PANELS EGLU TEST IN VITRO STRIP	2	
PURE COMFORT ALCOHOL PREP PAD	1	
PURE COMFORT PEN NEEDLE	2	
PURE COMFORT SAFETY PEN NEEDLE	2	
PURE COMFORT SPACER CHAMBER DEVICE	2	
PURIFIED WATER ORAL LIQUID	2	
QUELICIN INJECTION SOLUTION	3	
RADIAPLEXRX EXTERNAL GEL	2	
RADIOGARDASE ORAL CAPSULE	2	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	3	
RAPPORT RLS KIT	2	
RAPPORT VTD KIT	2	
RAYA SURE PEN NEEDLE	2	
RELION INSULIN SYRINGE	2	
RELION LANCET DEVICES 30G	2	
RELION LANCETS THIN 26G	2	
RELION LANCETS ULTRA-THIN 30G	2	
RELION PEN NEEDLES	2	
RELION PREMIER CLASSIC DEVICE	2	
RELION PREMIER TEST IN VITRO STRIP	2	

Drug Name	Drug Tier	Requirements /Limits
RELION ULTRA THIN LANCETS 30G	2	
RELION ULTRA THIN PLUS LANCETS	2	
REMDESIVIR INTRAVENOUS SOLUTION RECONSTITUTED	1	
RENEWCREAM HRT CREAM	2	
REXALL LANCETS ULTRA THIN 30G	2	
RIGHTEST GL300 LANCETS	2	
RIGHTEST GT333 BLOOD GLUCOSE DEVICE	2	
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP	2	
RIGHTEST GT333 GLUCOSE TEST IN VITRO STRIP	2	
ringers irrigation irrigation solution	1	
rocuronium bromide intravenous solution	1	
ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
RYPLAZIM INTRAVENOUS SOLUTION RECONSTITUTED	2	
SACCHARIN POWDER	2	
SAFE-T-LANCE	2	
SAFETY LANCET 30G/PRESSURE ACT	2	

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Drug Name	Drug Tier	Requirements /Limits
SAFETY LANCETS 21G	2	
SAFETY LANCETS 23G	2	
SAFETY LANCETS 28G	2	
SAFETY PEN NEEDLES	2	
SALT STABLE LS ADVANCED EXTERNAL CREAM	2	
SALTSTABLE LO EXTERNAL CREAM	2	
SAPS HEALTH CARE ALCOHOL PREP PAD	1	
SAPS HEALTH PLUS LANCETS	2	
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
SECURESAFE HYPODERMIC NEEDLE	2	
SECURESAFE INSULIN SYRINGE	2	
SECURESAFE SAFETY PEN NEEDLES	2	
SECURESAFE SYRINGE/NEEDLE	2	
SILHOUETTE 23" INFUSION SET	2	
SILHOUETTE 43" INFUSION SET	2	
SILHOUETTE INFUSION SET 18"	2	
SILIGENTLE FOAM DRESSING PAD	2	
SKYCLARYS ORAL CAPSULE	3	PA

Drug Name	Drug Tier	Requirements /Limits
SMOFLIPID INTRAVENOUS EMULSION	3	B/D
sod benz-sod phenylacet intravenous solution	1	
SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE	2	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION	2	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
SODIUM LAURYL SULFATE POWDER	2	
sodium nitrite intravenous solution	1	
sodium saccharin granules	1	
sodium saccharin powder	1	
sodium thiosulfate intravenous solution	1	
SORBIC ACID POWDER	2	
SORBITOL CANDY BASE	2	
SORBITOL IRRIGATION SOLUTION	2	
sorbitol-mannitol irrigation solution	1	
STEARIC ACID POWDER	2	
STERILANCE TL	2	

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Drug Name	Drug Tier	Requirements /Limits
STERILE DILUENT FLOLAN PH 12 INTRAVENOUS SOLUTION	2	
sterile diluent/epoprostenol intravenous solution	1	
sterile water for injection injection solution	1	
sterile water for irrigation irrigation solution	1	
succinylcholine chloride injection solution	1	
SUCCINYLCHELINE CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE	2	
SUCCINYLCHELINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
SURE COMFORT ALCOHOL PREP PAD	1	
SURE COMFORT LANCETS 18G	2	
SURE COMFORT LANCETS 21G	2	
SURE COMFORT LANCETS 23G	2	
SURE COMFORT LANCETS 28G	2	
SURE COMFORT LANCETS 30G	2	
SURE COMFORT PEN NEEDLES	2	

Drug Name	Drug Tier	Requirements /Limits
SURE T INFUSION SET 18"/6MM	2	
SURE T INFUSION SET 23"/10MM	2	
SURE T INFUSION SET 23"/6MM	2	
SURE T INFUSION SET 23"/8MM	2	
SURE T INFUSION SET 32"/10MM	2	
SURE T INFUSION SET 32"/6MM	2	
SURE T INFUSION SET 32"/8MM	2	
SURE-LANCE FLAT LANCETS	2	
SURE-LANCE LANCETS 26G	2	
SURE-LANCE THIN LANCETS 28G	2	
SURELITE LANCETS	2	
SURE-TOUCH LANCETS UNIVERSAL	2	
SUSPENDRX W/BITTERBLOC SWEET ORAL SUSPENSION	2	
SUSPENDRX W/BITTERBLOC UNSWEET ORAL SUSPENSION	2	
SWEETENING ENHANCER LIQUID	2	
SYNOJOYNT INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	

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Drug Name	Drug Tier	Requirements /Limits
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
SYRINGE LUER LOCK	2	
SYRINGE LUER SLIP	2	
T: SLIM X2 INS PMP/CONTROL 7.4 DEVICE	2	
T:SLIM X2 3ML CARTRIDGE	2	
T:SLIM X2 BASAL-IQ PUMP DEVICE	2	
T:SLIM X2 CONTROL-IQ PUMP DEVICE	2	
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	2	
T:SLIM X2/BASAL-IQ/ACC/INSTR	2	
T:SLIM X2/CONTROL-IQ/ACC/INSTR	2	
TACHOSIL EXTERNAL PATCH	3	
TANGERINE FLAVOR OIL	2	
TAURINE INJECTION SOLUTION	2	
TAURINE LIQUID	2	
TAURINE POWDER	2	
TAVNEOS ORAL CAPSULE	3	PA
TECHLITE LANCETS	2	
TECHLITE LANCETS 30G	2	
TECHNA 20 SF TROCHE BASE FLAKES	2	
TECHNA 20 TROCHE BASE POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
TELFA AMD ISLAND DRESSING PAD	2	
TELFA AMD NON-ADHERENT PAD	2	
TEMPO REFILL KIT	2	
TEMPO SMART BUTTON	2	
TEMPO WELCOME KIT	2	
TGT LANCET MICRO THIN 33G	2	
TGT LANCET THIN 26G	2	
TGT LANCET ULTRA THIN 30G	2	
THE LIQUILIFT TRACE INTRAVENOUS KIT	2	
THREONINE POWDER	2	
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA
TIS-U-SOL IRRIGATION SOLUTION	3	
TODAYS HEALTH THIN LANCETS 28G	2	
TODAYS HEALTH THIN LANCETS 30G	2	
TOPCARE LANCETS MICRO-THIN 33G	2	
TRAVEL LANCETS	2	
TRAVEL LANCETS ADVANCED 28G	2	
TRICHOSOL EXTERNAL SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
TROCHE BASE POWDER	2	
TROCHE BASE SF W/BITTER-BLOC GRANULES	2	
TRUE COMFORT ALCOHOL PREP PADS PAD	1	
TRUE COMFORT PEN NEEDLES	2	
TRUE COMFORT PRO ALCOHOL PREP PAD	1	
TRUE COMFORT PRO INSULIN SYR	2	
TRUE COMFORT PRO PEN NEEDLES	2	
TRUE COMFORT SAFETY LANCETS	2	
TRUE COMFORT TWIST TOP LANCETS	2	
TRUE FOCUS BLOOD GLUCOSE METER DEVICE	2	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP	2	
TRUE METRIX LEVEL 1 IN VITRO SOLUTION	2	
TRUE METRIX LEVEL 2 IN VITRO SOLUTION	2	
TRUE METRIX LEVEL 3 IN VITRO SOLUTION	2	
TRUE METRIX METER KIT	2	

Drug Name	Drug Tier	Requirements /Limits
TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP	2	
TRUEPLUS 5-BEVEL PEN NEEDLES	2	
TRUEPLUS INSULIN SYRINGE	2	
TRUEPLUS LANCETS 26G	2	
TRUEPLUS LANCETS 28G	2	
TRUEPLUS LANCETS 30G	2	
TRUEPLUS LANCETS 33G	2	
TRUEPLUS PEN NEEDLES	2	
TRUEPLUS SAFETY LANCETS 28G	2	
TRUETRACK TEST IN VITRO STRIP	2	
TRUSTEEL INFUSION SET	2	
TRYPTOPHAN POWDER	2	
TWIST TOP LANCETS 30G	2	
TYRVAYA NASAL SOLUTION	3	
ULTICARE MICRO PEN NEEDLES	2	
ULTICARE MINI PEN NEEDLES	2	
ULTICARE SHORT PEN NEEDLES	2	
ULTIGUARD SAFEPACK PEN NEEDLE	2	
ULTIGUARD SAFEPACK SYR/NEEDLE	2	

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Drug Name	Drug Tier	Requirements /Limits
ULTILET CLASSIC LANCETS	2	
ULTILET LANCETS	2	
ULTILET SAFETY LANCETS	2	
ULTILET SAFETY LANCETS 23G	2	
ULTRA FLO INSULIN PEN NEEDLES	2	
ULTRA FLO INSULIN SYRINGE	2	
ULTRA THIN LANCETS 31G	2	
ULTRACARE INSULIN SYRINGE	2	
ULTRA-CARE LANCETS 30G	2	
ULTRACARE PEN NEEDLES	2	
ULTRA-THIN II AUTO LANCET	2	
ULTRA-THIN II INS SYR SHORT	2	
ULTRA-THIN II INSULIN SYRINGE	2	
ULTRA-THIN II LANCETS	2	
ULTRA-THIN II MINI PEN NEEDLE	2	
ULTRA-THIN II PEN NEEDLE SHORT	2	
ULTRA-THIN II PEN NEEDLES	2	
UNIFINE PEN NEEDLES	2	
UNIFINE PENTIPS	2	
UNIFINE PENTIPS PLUS	2	
UNIFINE SAFECONTROL PEN NEEDLE	2	

Drug Name	Drug Tier	Requirements /Limits
UNIFINE ULTRA PEN NEEDLE	2	
UNILET COMFORTOUCH LANCET	2	
UNILET EXCELITE II	2	
UNILET G.P. LANCET	2	
UNILET G.P. SUPERLITE LANCET	2	
UNILET LANCET	2	
UNILET MICRO-THIN 33G	2	
UNILET SUPERLITE LANCET	2	
UNILET SUPER-THIN 30G	2	
UNILET ULTRA-THIN 28G	2	
UNISPEND ANHYDROUS SWEETENED ORAL SUSPENSION	2	
UNISTIK 1	2	
UNISTIK 2	2	
UNISTIK 2 EXTRA	2	
UNISTIK 2 SUPER	2	
UNISTIK 3	2	
UNISTIK 3 GENTLE	2	
UNISTIK PRO SAFETY LANCET	2	
UNISTIK SAFETY LANCETS 28G	2	
UNISTIK SAFETY LANCETS 30G	2	
UNISTIK TOUCH SAFETY LANC 21G	2	
UNISTIK TOUCH SAFETY LANC 23G	2	
UNISTIK TOUCH SAFETY LANC 28G	2	

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Drug Name	Drug Tier	Requirements /Limits
UNISTIK TOUCH SAFETY LANC 30G	2	
UNISTRIP CONTROL IN VITRO SOLUTION	2	
UNIVERSAL 1 LANCETS THIN 26G	2	
UNIVERSAL 1 LANCETS THIN 33G	2	
UNIVERSAL 1 LANCETS ULTRA THIN	2	
UNIVERSAL WATER GEL	2	
URESTA STARTER KIT	2	
VALINE POWDER	2	
VALUE PLUS LANCET STANDARD 21G	2	
VALUE PLUS LANCETS THIN 26G	2	
VALUMARK LANCET SUPER THIN 30G	2	
VALUMARK LANCET ULTRA THIN 28G	2	
VALUMARK PEN NEEDLES	2	
VANISHING EXTERNAL CREAM	2	
VANISHPOINT SAFETY SYRINGE	2	
VARISOFT INFUSION SET	2	
VASCAZEN ORAL CAPSULE	2	
VB6 P5P ORAL POWDER	2	
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	

Drug Name	Drug Tier	Requirements /Limits
vecuronium bromide intravenous solution reconstituted	1	
VEKLURY INTRAVENOUS SOLUTION	3	
VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED	3	
VENELEX EXTERNAL OINTMENT	2	
VERIFINE INSULIN PEN NEEDLE	2	
VERIFINE INSULIN SYRINGE	2	
VERIFINE PLUS PEN NEEDLE	2	
VERIFINE SAFE LANCET MINI 21G	2	
VERIFINE SAFE LANCET MINI 23G	2	
VERIFINE SAFE LANCET MINI 28G	2	
VERIFINE SAFE LANCET MINI 30G	2	
VERIFINE UNIVERSAL LANCETS 28G	2	
VERIFINE UNIVERSAL LANCETS 30G	2	
VERIFINE UNIVERSAL LANCETS 33G	2	
VERSABASE CREAM	2	
VERSABASE FOAM	2	
VERSABASE LOTION	2	
VERSABASE SHAMPOO	2	
VERSAPRO ANHYDROUS BASE GEL	2	
V-GO 20 KIT	2	

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Drug Name	Drug Tier	Requirements /Limits
V-GO 30 KIT	2	
V-GO 40 KIT	2	
VIDA MIA UNILET LANCETS 28G	2	
VIDA MIA UNILET LANCETS 30G	2	
VIJOICE ORAL TABLET THERAPY PACK	3	PA
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	
VISTOGARD ORAL PACKET	3	
VITATROCHE PLUS BASE SF GRANULES	2	
VITRASE INJECTION SOLUTION	2	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	2	
VIVAGUARD INO GLUCOSE METER DEVICE	2	
VIVAGUARD INO SMART GLUC METER DEVICE	2	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	2	
VIVAGUARD LANCETS	2	
VIVAGUARD LANCING DEVICE	2	
VORTEX VALVED HOLDING CHAMBER DEVICE	2	
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
VYJUVEK EXTERNAL GEL	3	PA
WALGREENS ADV TRAVEL LANCETS	2	
WALGREENS LANCETS MICRO THIN	2	
WALGREENS LANCETS SUPER THIN	2	
water for irrigation, sterile irrigation solution	1	
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)

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Drug Name	Drug Tier	Requirements /Limits
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM	2	PV; QL (1 EA per 365 days)
WILD CHERRY SD FLAVOR POWDER	2	
WITEPSOL PELLETT	2	
XENICAL ORAL CAPSULE	3	PA
XEROFORM OCCLUSIVE GAUZE PATCH EXTERNAL PAD	2	
XEROFORM OIL EMULSION 2"X2" EXTERNAL PAD	2	
XEROFORM OIL EMULSION GAUZE EXTERNAL PAD	2	
XEROFORM OIL EMULSION STRIP EXTERNAL	2	
XEROFORM OIL ROLL 4"X9' EXTERNAL	2	
XEROFORM PETROLAT GAUZE 1"X8" EXTERNAL	2	
XEROFORM PETROLAT GAUZE 5"X9" EXTERNAL	2	
XEROFORM PETROLAT PATCH 2"X2" EXTERNAL PAD	2	
XEROFORM PETROLAT PATCH 4"X4" EXTERNAL PAD	2	
XEROFORM PETROLATUM DRES 4"X4" EXTERNAL PAD	2	
XEROFORM PETROLATUM DRES 5"X9" EXTERNAL PAD	2	

Drug Name	Drug Tier	Requirements /Limits
XEROFORM PETROLATUM ROLL 4"X9' EXTERNAL	2	
ZERUVIA EXTERNAL PATCH	3	
ZEVX INSULIN SYRINGE	2	
ZEVX PEN NEEDLES	2	
ZEVX STERILE ALCOHOL PREP PAD PAD	1	
ZEVX TWIST TOP LANCETS 30G	2	
ZOKINVY ORAL CAPSULE	3	PA
<b>Ophthalmic Agents</b>		
<b>Ophthalmic Agents, Other</b>		
ak-poly-bac ophthalmic ointment	1	
AKTEN OPHTHALMIC GEL	3	
ALCAINE OPHTHALMIC SOLUTION	3	
ALTACAIN OPHTHALMIC SOLUTION	3	
altafrin ophthalmic solution	1	
atropine sulfate ophthalmic ointment	1	
atropine sulfate ophthalmic solution	1	
bacitracin-polymyxin b ophthalmic ointment	1	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
BEOVU INTRAVITREAL SOLUTION	3	PA
BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA
BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE	2	
BLEPHAMIDE OPHTHALMIC SUSPENSION	3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	3	
brimonidine tartrate-timolol ophthalmic solution	1	
BYOOVIZ INTRAVITREAL SOLUTION	3	PA
CEQUA OPHTHALMIC SOLUTION	3	
CIMERLI INTRAVITREAL SOLUTION	3	PA
COMBIGAN OPHTHALMIC SOLUTION	2	
COSOPT OPHTHALMIC SOLUTION	3	
COSOPT PF OPHTHALMIC SOLUTION	3	
CYCLOGYL OPHTHALMIC SOLUTION	3	
CYCLOMYDRIL OPHTHALMIC SOLUTION	2	

Drug Name	Drug Tier	Requirements /Limits
cyclopentolate hcl ophthalmic solution	1	
CYCLOSPORINE IN KLARITY OPHTHALMIC EMULSION	1	
cyclosporine ophthalmic emulsion	1	
CYSTADROPS OPHTHALMIC SOLUTION	3	
CYSTARAN OPHTHALMIC SOLUTION	3	
dorzolamide hcl-timolol mal ophthalmic solution	1	
dorzolamide hcl-timolol mal pf ophthalmic solution	1	
DOUBLE PM OPHTHALMIC SOLUTION RECONSTITUTED	2	
EPINEPHRINE HCL INTRAOCULAR SOLUTION PREFILLED SYRINGE	2	
EYLEA HD INTRAVITREAL SOLUTION	3	PA
EYLEA INTRAVITREAL SOLUTION	3	PA
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA
HOMATROPAIRE OPHTHALMIC SOLUTION	3	
IHEEZO OPHTHALMIC GEL	3	

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Drug Name	Drug Tier	Requirements /Limits
ISOPTO ATROPINE OPHTHALMIC SOLUTION	3	
IZERVAY INTRAVITREAL SOLUTION	3	PA
LACRISERT OPHTHALMIC INSERT	3	
LUCENTIS INTRAVITREAL SOLUTION	3	PA
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA
MAXITROL OPHTHALMIC OINTMENT	3	
MAXITROL OPHTHALMIC SUSPENSION	3	
MEMBRANEBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE	2	
MIEBO OPHTHALMIC SOLUTION	3	PA
MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED	3	
neomycin-bacitracin zn-polymyx ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension	1	
neomycin-polymyxin-gramicidin ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
neomycin-polymyxin-hc ophthalmic suspension	1	
neo-polycin hc ophthalmic ointment	1	
neo-polycin ophthalmic ointment	1	
OXERVATE OPHTHALMIC SOLUTION	3	PA
PHENYLEPHRINE HCL INTRAOCULAR SOLUTION PREFILLED SYRINGE	2	
phenylephrine hcl ophthalmic solution	1	
polycin ophthalmic ointment	1	
polymyxin b-trimethoprim ophthalmic solution	1	
POLYTRIM OPHTHALMIC SOLUTION	3	
PRED-G OPHTHALMIC SUSPENSION	3	
PRED-G S.O.P. OPHTHALMIC OINTMENT	3	
PREDNISOLONE-MOXIFLOXACIN OPHTHALMIC SOLUTION	3	
proparacaine hcl ophthalmic solution	1	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION	2	
RESTASIS OPHTHALMIC EMULSION	2	

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Drug Name	Drug Tier	Requirements /Limits
ROCKLATAN OPTHALMIC SOLUTION	2	
SIMBRINZA OPTHALMIC SUSPENSION	2	
sulfacetamide-prednisolone ophthalmic solution	1	
SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION	3	PA
SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION	3	PA
SYFOVRE INTRAVITREAL SOLUTION	3	PA
tetracaine hcl ophthalmic solution	1	
TOBRADEX OPTHALMIC OINTMENT	3	
TOBRADEX OPTHALMIC SUSPENSION	3	
TOBRADEX ST OPTHALMIC SUSPENSION	3	
tobramycin-dexamethasone ophthalmic suspension	1	
TRIPLE PMB OPTHALMIC SOLUTION RECONSTITUTED	2	
TRIPLE PMK OPTHALMIC SOLUTION RECONSTITUTED	2	

Drug Name	Drug Tier	Requirements /Limits
TROPICAMIDE POWDER	2	
TROPICAMIDE-CYCLOPENTOLATE-PE OPTHALMIC SOLUTION	2	
TROPICAMIDE-PHENYLEPHRINE OPTHALMIC SOLUTION	2	
UPNEEQ OPTHALMIC SOLUTION	3	
VABYSMO INTRAVITREAL SOLUTION	3	PA
VERKAZIA OPTHALMIC EMULSION	3	
VISIONBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE	2	
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED	3	
XIIDRA OPTHALMIC SOLUTION	3	
ZYLET OPTHALMIC SUSPENSION	3	
<b>Ophthalmic Anti-allergy Agents</b>		
ALOCRILO OPTHALMIC SOLUTION	3	
ALOMIDE OPTHALMIC SOLUTION	3	
azelastine hcl ophthalmic solution	1	
bepotastine besilate ophthalmic solution	1	

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Drug Name	Drug Tier	Requirements /Limits
BEPREVE OPTHALMIC SOLUTION	3	
cromolyn sodium ophthalmic solution	1	
epinastine hcl ophthalmic solution	1	
LASTACAFT OPTHALMIC SOLUTION	3	
olopatadine hcl ophthalmic solution	1	
ZERVIATE OPTHALMIC SOLUTION	3	
<b>Ophthalmic Anti-Infectives</b>		
AZASITE OPTHALMIC SOLUTION	3	
bacitracin ophthalmic ointment	1	
BESIVANCE OPTHALMIC SUSPENSION	3	
BETADINE OPTHALMIC PREP OPTHALMIC SOLUTION	2	
BLEPH-10 OPTHALMIC SOLUTION	3	
CILOXAN OPTHALMIC OINTMENT	3	
CILOXAN OPTHALMIC SOLUTION	3	
ciprofloxacin hcl ophthalmic solution	1	
erythromycin ophthalmic ointment	1	

Drug Name	Drug Tier	Requirements /Limits
gatifloxacin ophthalmic solution	1	
GENTAK OPTHALMIC OINTMENT	1	
gentamicin sulfate ophthalmic solution	1	
KLARITY-A OPTHALMIC SOLUTION	3	
levofloxacin ophthalmic solution	1	
MITOSOL OPTHALMIC KIT	2	
MOXEZA OPTHALMIC SOLUTION	3	
moxifloxacin hcl (2x day) ophthalmic solution	1	
MOXIFLOXACIN HCL INTRAOCULAR SOLUTION PREFILLED SYRINGE	2	
moxifloxacin hcl ophthalmic solution	1	
MOXIFLOXACIN HCL-BSS INTRAVITREAL SOLUTION	3	
NATACYN OPTHALMIC SUSPENSION	3	
OCUFLOX OPTHALMIC SOLUTION	3	
ofloxacin ophthalmic solution	1	
POVIDONE-IODINE OPTHALMIC SOLUTION	2	
sulfacetamide sodium ophthalmic ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
sulfacetamide sodium ophthalmic solution	1	
tobramycin ophthalmic solution	1	
TOBREX OPTHALMIC OINTMENT	3	
TOBREX OPTHALMIC SOLUTION	3	
trifluridine ophthalmic solution	1	
VANCOMYCIN HCL OPTHALMIC SOLUTION PREFILLED SYRINGE	2	
VIGAMOX OPTHALMIC SOLUTION	3	
XDEMVIY OPTHALMIC SOLUTION	3	PA
ZIRGAN OPTHALMIC GEL	3	
ZYMAXID OPTHALMIC SOLUTION	3	
<b>Ophthalmic Anti-inflammatories</b>		
ACULAR LS OPTHALMIC SOLUTION	3	
ACULAR OPTHALMIC SOLUTION	3	
ACUVAIL OPTHALMIC SOLUTION	3	
ALREX OPTHALMIC SUSPENSION	3	
bromfenac sodium (once-daily) ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
BROMSITE OPTHALMIC SOLUTION	3	
dexamethasone sodium phosphate ophthalmic solution	1	
DEXTENZA OPTHALMIC INSERT	3	
DEXYCU INTRAOCULAR SUSPENSION	3	
diclofenac sodium ophthalmic solution	1	
difluprednate ophthalmic emulsion	1	
DUREZOL OPTHALMIC EMULSION	3	
EYSUVIS OPTHALMIC SUSPENSION	3	
FLAREX OPTHALMIC SUSPENSION	2	
fluorometholone ophthalmic suspension	1	
flurbiprofen sodium ophthalmic solution	1	
FML FORTE OPTHALMIC SUSPENSION	2	
FML LIQUIFILM OPTHALMIC SUSPENSION	3	
FML OPTHALMIC OINTMENT	2	
ILEVRO OPTHALMIC SUSPENSION	3	
ILUVIEN INTRAVITREAL IMPLANT	3	

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Drug Name	Drug Tier	Requirements /Limits
INVELTYS OPTHALMIC SUSPENSION	3	
ketorolac tromethamine ophthalmic solution	1	
LOTEMAX OPTHALMIC GEL	3	
LOTEMAX OPTHALMIC OINTMENT	3	
LOTEMAX OPTHALMIC SUSPENSION	3	
LOTEMAX SM OPTHALMIC GEL	3	
loteprednol etabonate ophthalmic gel	1	
loteprednol etabonate ophthalmic suspension	1	
MAXIDEX OPTHALMIC SUSPENSION	3	
NEVANAC OPTHALMIC SUSPENSION	3	
OZURDEX INTRAVITREAL IMPLANT	3	
PRED FORTE OPTHALMIC SUSPENSION	3	
PRED MILD OPTHALMIC SUSPENSION	2	
prednisolone acetate ophthalmic suspension	1	
PREDNISOLONE ACETATE P-F OPTHALMIC SUSPENSION	3	
prednisolone sodium phosphate ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
PROLENSA OPTHALMIC SOLUTION	3	
RETISERT INTRAVITREAL IMPLANT	3	
TRIESENCE INTRAOCULAR SUSPENSION	3	
XIPERE INTRAOCULAR SUSPENSION	3	
YUTIQ INTRAVITREAL IMPLANT	3	
<b>Ophthalmic Beta-Adrenergic Blocking Agents</b>		
betaxolol hcl ophthalmic solution	1	
BETIMOL OPTHALMIC SOLUTION	3	
BETOPTIC-S OPTHALMIC SUSPENSION	3	
carteolol hcl ophthalmic solution	1	
ISTALOL OPTHALMIC SOLUTION	3	
levobunolol hcl ophthalmic solution	1	
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	

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Drug Name	Drug Tier	Requirements /Limits
timolol maleate pf ophthalmic solution	1	
TIMOPTIC OCUDOSE OPTHALMIC SOLUTION	3	
TIMOPTIC OPTHALMIC SOLUTION	3	
TIMOPTIC-XE OPTHALMIC GEL FORMING SOLUTION	3	
<b>Ophthalmic Intraocular Pressure Lowering Agents, Other</b>		
acetazolamide er oral capsule extended release 12 hour	1	
acetazolamide oral tablet	1	
ALPHAGAN P OPTHALMIC SOLUTION	2	
apraclonidine hcl ophthalmic solution	1	
AZOPT OPTHALMIC SUSPENSION	3	
brimonidine tartrate ophthalmic solution	1	
brinzolamide ophthalmic suspension	1	
dorzolamide hcl ophthalmic solution	1	
IOPIDINE OPTHALMIC SOLUTION	3	
ISOPTO CARPINE OPTHALMIC SOLUTION	3	
methazolamide oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
PHOSPHOLINE IODIDE OPTHALMIC SOLUTION RECONSTITUTED	3	
pilocarpine hcl ophthalmic solution	1	
RHOPRESSA OPTHALMIC SOLUTION	2	
TRUSOPT OPTHALMIC SOLUTION	3	
VUITY OPTHALMIC SOLUTION	3	
<b>Ophthalmic Prostaglandin and Prostanoid Analogs</b>		
bimatoprost ophthalmic solution	1	
DURYSTA INTRAOCULAR IMPLANT	3	
IYUZEH OPTHALMIC SOLUTION	3	
latanoprost ophthalmic solution	1	
LUMIGAN OPTHALMIC SOLUTION	2	
tafluprost (pf) ophthalmic solution	1	
TRAVATAN Z OPTHALMIC SOLUTION	3	
travoprost (bak free) ophthalmic solution	1	
VYZULTA OPTHALMIC SOLUTION	3	
XALATAN OPTHALMIC SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
XELPROS OPTHALMIC EMULSION	3	
ZIOPTAN OPTHALMIC SOLUTION	3	
<b>Otic Agents</b>		
acetic acid otic solution	1	
CETRAXAL OTIC SOLUTION	3	
CIPRO HC OTIC SUSPENSION	3	
CIPRODEX OTIC SUSPENSION	3	
ciprofloxacin hcl otic solution	1	
flac otic oil	1	
fluocinolone acetonide otic oil	1	
hydrocortisone-acetic acid otic solution	1	
neomycin-polymyxin-hc otic solution	1	
neomycin-polymyxin-hc otic suspension	1	
ofloxacin otic solution	1	
OTOVEL OTIC SOLUTION	3	
<b>Non-FRF</b>		
ciprofloxacin-dexamethasone otic suspension	1	
CIPROFLOXACIN-FLUOCINOLONE PF OTIC SOLUTION	3	
CORTISPORIN-TC OTIC SUSPENSION	3	
DERMOTIC OTIC OIL	3	
neomycin-polymyxin-hc otic solution	1	

Drug Name	Drug Tier	Requirements /Limits
OTIPRIO INTRATYMPANIC SUSPENSION	2	
PRAMOTIC OTIC LIQUID	3	
<b>Respiratory Tract/Pulmonary Agents</b>		
<b>Antihistamines</b>		
azelastine hcl nasal solution	1	
azelastine-fluticasone nasal suspension	1	
BROMPHENIRAMINE MALEATE INTRAMUSCULAR SOLUTION	3	
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet	1	
cetirizine hcl oral solution	1	
CLARINEX ORAL TABLET	3	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
clemastine fumarate oral syrup	1	
clemastine fumarate oral tablet	1	
cyproheptadine hcl oral syrup	1	
cyproheptadine hcl oral tablet	1	
desloratadine oral tablet	1	
desloratadine oral tablet dispersible	1	

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Drug Name	Drug Tier	Requirements /Limits
DICOPANOL FUSEPAQ ORAL SUSPENSION RECONSTITUTED	2	
DICOPANOL RAPIDPAQ ORAL SUSPENSION RECONSTITUTED	2	
diphenhydramine hcl injection solution	1	
diphenhydramine hcl oral elixir	1	
DIPHENHYDRAMINE HCL POWDER	2	
DOXYLAMINE SUCCINATE POWDER	2	
DYMISTA NASAL SUSPENSION	3	
hydroxyzine hcl intramuscular solution	1	
hydroxyzine hcl oral syrup	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral capsule	1	
HYDROXYZINE PAMOATE POWDER	2	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	3	
levocetirizine dihydrochloride oral solution	1	
levocetirizine dihydrochloride oral tablet	1	
olopatadine hcl nasal solution	1	
PATANASE NASAL SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
RYALTRIS NASAL SUSPENSION	3	PA
RYCLORA ORAL SOLUTION	3	
ryvent oral tablet	1	
TRIPLENNAMINE HCL POWDER	2	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	2	
VISTARIL ORAL CAPSULE	3	
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
ALVESCO INHALATION AEROSOL SOLUTION	3	
ARMONAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ARNUIITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	

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Drug Name	Drug Tier	Requirements /Limits
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX HFA INHALATION AEROSOL	3	
BECONASE AQ NASAL SUSPENSION	3	
BREZTRI AEROSPHERE INHALATION AEROSOL	2	
budesonide inhalation suspension	1	B/D
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	PA
FLOVENT HFA INHALATION AEROSOL	3	PA
flunisolide nasal solution	1	
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL	3	PA
fluticasone propionate nasal suspension	1	
mometasone furoate nasal suspension	1	

Drug Name	Drug Tier	Requirements /Limits
OMNARIS NASAL SUSPENSION	3	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
PULMICORT INHALATION SUSPENSION	3	B/D
QNASL CHILDRENS NASAL AEROSOL SOLUTION	3	
QNASL NASAL AEROSOL SOLUTION	3	
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	3	
XHANCE NASAL EXHALER SUSPENSION	3	
ZETONNA NASAL AEROSOL SOLUTION	3	
<b>Antileukotrienes</b>		
ACCOLATE ORAL TABLET	3	
montelukast sodium oral packet	1	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	3	
SINGULAIR ORAL TABLET CHEWABLE	3	
zafirlukast oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
zileuton er oral tablet extended release 12 hour	1	
ZYFLO ORAL TABLET	3	
<b>Bronchodilators, Anticholinergic</b>		
ATROVENT HFA INHALATION AEROSOL SOLUTION	3	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ipratropium bromide inhalation solution	1	B/D
ipratropium bromide nasal solution	1	
LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION	3	
LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION	3	
SPIRIVA HANDIHALER INHALATION CAPSULE	2	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	2	
tiotropium bromide monohydrate inhalation capsule	2	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	3	

Drug Name	Drug Tier	Requirements /Limits
YUPELRI INHALATION SOLUTION	3	B/D
<b>Bronchodilators, Sympathomimetic</b>		
AIRSUPRA INHALATION AEROSOL	3	PA
albuterol sulfate hfa inhalation aerosol solution	1	
albuterol sulfate inhalation nebulization solution	1	B/D
albuterol sulfate oral syrup	1	
albuterol sulfate oral tablet	1	
arformoterol tartrate inhalation nebulization solution	1	B/D
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	3	
BROVANA INHALATION NEBULIZATION SOLUTION	3	B/D
epinephrine injection solution auto-injector	1	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	2	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	2	
formoterol fumarate inhalation nebulization solution	1	B/D
isoproterenol hcl injection solution	1	

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Drug Name	Drug Tier	Requirements /Limits
ISUPREL INJECTION SOLUTION	3	
levalbuterol hcl inhalation nebulization solution	1	B/D
LEVALBUTEROL TARTRATE INHALATION AEROSOL	1	
PERFORMIST INHALATION NEBULIZATION SOLUTION	3	B/D
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
PROAIR HFA INHALATION AEROSOL SOLUTION	3	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
PROVENTIL HFA INHALATION AEROSOL SOLUTION	3	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	3	
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE	3	
terbutaline sulfate injection solution	1	
terbutaline sulfate oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
VENTOLIN HFA INHALATION AEROSOL SOLUTION	3	
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION	3	B/D
XOPENEX HFA INHALATION AEROSOL	3	
XOPENEX INHALATION NEBULIZATION SOLUTION	3	B/D
<b>Cystic Fibrosis Agents</b>		
BETHKIS INHALATION NEBULIZATION SOLUTION	3	B/D
CAYSTON INHALATION SOLUTION RECONSTITUTED	3	PA
KALYDECO ORAL PACKET	3	PA
KALYDECO ORAL TABLET	3	PA
KITABIS PAK INHALATION NEBULIZATION SOLUTION	3	B/D
ORKAMBI ORAL PACKET	3	PA
ORKAMBI ORAL TABLET	3	PA
PULMOZYME INHALATION SOLUTION	3	PA
SYMDEKO ORAL TABLET THERAPY PACK	3	PA

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Drug Name	Drug Tier	Requirements /Limits
TOBI INHALATION NEBULIZATION SOLUTION	3	B/D
TOBI PODHALER INHALATION CAPSULE	3	
tobramycin inhalation nebulization solution	1	B/D
TRIKAFTA ORAL TABLET THERAPY PACK	3	PA
TRIKAFTA ORAL THERAPY PACK	3	PA
<b>Mast Cell Stabilizers</b>		
cromolyn sodium inhalation nebulization solution	1	B/D
CROMOLYN SODIUM POWDER	2	
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
AMINOPHYLLINE ANHYDROUS POWDER	2	
aminophylline intravenous solution	1	
DALIRESP ORAL TABLET	3	
elixophyllin oral elixir	1	
roflumilast oral tablet	1	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
theophylline er oral tablet extended release 12 hour	1	
theophylline er oral tablet extended release 24 hour	1	
theophylline oral elixir	1	

Drug Name	Drug Tier	Requirements /Limits
theophylline oral solution	1	
THEOPHYLLINE-ETHYLENEDIAMINE POWDER	2	
<b>Pulmonary Antihypertensives</b>		
ADCIRCA ORAL TABLET	3	PA
ADEMPAS ORAL TABLET	3	PA
alyq oral tablet	1	PA
ambrisentan oral tablet	1	PA
bosentan oral tablet	1	PA
epoprostenol sodium intravenous solution reconstituted	1	PA
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
LETAIRIS ORAL TABLET	3	PA
LIQREV ORAL SUSPENSION	3	PA
OPSUMIT ORAL TABLET	3	PA
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA
ORENITRAM ORAL TABLET EXTENDED RELEASE	3	PA

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Drug Name	Drug Tier	Requirements /Limits
REMODULIN INJECTION SOLUTION	3	PA
REVATIO INTRAVENOUS SOLUTION	3	PA
REVATIO ORAL SUSPENSION RECONSTITUTED	3	PA
REVATIO ORAL TABLET	3	PA
sildenafil citrate intravenous solution	1	PA
sildenafil citrate oral suspension reconstituted	1	PA
sildenafil citrate oral tablet	1	PA
tadalafil (pah) oral tablet	1	PA
TADLIQ ORAL SUSPENSION	3	PA
TRACLEER ORAL TABLET	3	PA
TRACLEER ORAL TABLET SOLUBLE	3	PA
treprostinil injection solution	1	PA
TYVASO DPI MAINTENANCE KIT INHALATION POWDER	3	PA
TYVASO DPI TITRATION KIT INHALATION POWDER	3	PA
TYVASO INHALATION SOLUTION	3	PA
TYVASO REFILL INHALATION SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
TYVASO STARTER INHALATION SOLUTION	3	PA
UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
UPTRAVI ORAL TABLET	3	PA
UPTRAVI ORAL TABLET THERAPY PACK	3	PA
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
VENTAVIS INHALATION SOLUTION	3	PA
<b>Pulmonary Fibrosis Agents</b>		
ESBRIET ORAL CAPSULE	3	PA
ESBRIET ORAL TABLET	3	PA
OFEV ORAL CAPSULE	3	PA
pirfenidone oral capsule	1	PA
pirfenidone oral tablet	1	PA
<b>Respiratory Tract Agents, Other</b>		
acetylcysteine inhalation solution	1	B/D
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ADVAIR HFA INHALATION AEROSOL	3	

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Drug Name	Drug Tier	Requirements /Limits
AIRDUO DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
benzonatate oral capsule	1	
BEVESPI AEROSPHERE INHALATION AEROSOL	2	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
breyna inhalation aerosol	3	PA
BROMFED DM ORAL SYRUP	2	
BRONCHITOL INHALATION CAPSULE	3	
budesonide-formoterol fumarate inhalation aerosol	3	PA
CINQAIR INTRAVENOUS SOLUTION	3	PA

Drug Name	Drug Tier	Requirements /Limits
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	2	
CUROSURF INTRATRACHEAL SUSPENSION	2	
DEXTROMETHORPHAN HBR MONOHYD POWDER	2	
DULERA INHALATION AEROSOL	3	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED	3	PA
FLUTICASONE-SALMETEROL INHALATION AEROSOL	3	PA
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED	1	
GILPHEX TR ORAL TABLET	2	
guaiaatussin ac oral syrup	1	
guaifenesin ac oral syrup	1	
GUAIFENESIN POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
guaifenesin-codeine oral solution	1	
HYCODAN ORAL SOLUTION	2	
HYCODAN ORAL TABLET	2	
hydrocod poli-chlorphe poli er oral suspension extended release	1	
hydrocodone bit-homatrop mbr oral solution	1	
hydrocodone bit-homatrop mbr oral tablet	1	
hydromet oral solution	1	
HYPERSAL INHALATION NEBULIZATION SOLUTION	2	
INFASURF INTRATRACHEAL SUSPENSION	2	
ipratropium-albuterol inhalation solution	1	B/D
maxi-tuss ac oral solution	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION	2	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA

Drug Name	Drug Tier	Requirements /Limits
PHENYLEPHRINE HCL POWDER	2	
promethazine vc oral syrup	1	
promethazine vc/codeine oral syrup	1	
promethazine-codeine oral solution	1	
promethazine-codeine oral syrup	1	
promethazine-dm oral syrup	1	
promethazine-phenyleph-codeine oral syrup	1	
promethazine-phenylephrine oral syrup	1	
pseudoeph-bromphen-dm oral syrup	1	
PSEUDOEPHEDRINE HCL CRYSTALS	2	
PULMOSAL INHALATION NEBULIZATION SOLUTION	2	
ribavirin inhalation solution reconstituted	1	
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER	2	
sodium chloride inhalation nebulization solution	1	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED	2	
STERITALC INTRAPLEURAL POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	3	
SURVANTA INTRATRACHEAL SUSPENSION	2	
SYMBICORT INHALATION AEROSOL	3	PA
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA
TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
VIRAZOLE INHALATION SOLUTION RECONSTITUTED	3	
virtussin ac w/alc oral liquid	1	
wixela inhub inhalation aerosol powder breath activated	1	
<b>Skeletal Muscle Relaxants</b>		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
carisoprodol oral tablet	1	PA
carisoprodol-aspirin-codeine oral tablet	1	PA; NDS
chlorzoxazone oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
cyclobenzaprine hcl er oral capsule extended release 24 hour	1	
cyclobenzaprine hcl oral tablet	1	
FEXMID ORAL TABLET	3	
LORZONE ORAL TABLET	3	
metaxalone oral tablet	1	
methocarbamol oral tablet	1	
orphenadrine citrate er oral tablet extended release 12 hour	1	
SKELAXIN ORAL TABLET	3	
SOMA ORAL TABLET	3	PA
<b>Non-FRF</b>		
chlorzoxazone oral tablet	1	
cisatracurium besylate (pf) intravenous solution	1	
CYCLOPHENE RAPIDPAQ TRANSDERMAL CREAM	2	
ENOVARX-BACLOFEN EXTERNAL CREAM	2	
ENOVARX-CYCLOBENZAPRINE HCL TRANSDERMAL CREAM	2	
methocarbamol injection solution	1	
methocarbamol oral tablet	1	
NIMBEX INTRAVENOUS SOLUTION	2	

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Drug Name	Drug Tier	Requirements /Limits
NORGESIC FORTE ORAL TABLET	3	
NORGESIC ORAL TABLET	3	
orphenadrine citrate injection solution	1	
ORPHENADRINE CITRATE POWDER	2	
orphenadrine-aspirin-caffeine oral tablet	1	
ORPHENGESIC FORTE ORAL TABLET	3	
ROBAXIN INJECTION SOLUTION	3	
TABRADOL FUSEPAQ ORAL SUSPENSION	2	
TABRADOL RAPIDPAQ ORAL SUSPENSION	2	
VANADOM ORAL TABLET	3	PA
<b>Sleep Disorder Agents</b>		
<b>Sleep Promoting Agents</b>		
AMBIEN CR ORAL TABLET EXTENDED RELEASE	3	
AMBIEN ORAL TABLET	3	
AMYTAL SODIUM INJECTION SOLUTION RECONSTITUTED	3	
BELSOMRA ORAL TABLET	2	
DAYVIGO ORAL TABLET	3	
dexmedetomidine hcl in nacl intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
DEXMEDETOMIDINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	2	
dexmedetomidine hcl intravenous solution	1	
DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION	2	
DORAL ORAL TABLET	3	
doxepin hcl oral tablet	1	
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	3	
estazolam oral tablet	1	
eszopiclone oral tablet	1	
flurazepam hcl oral capsule	1	
HALCION ORAL TABLET	3	
HETLIOZ LQ ORAL SUSPENSION	3	PA
HETLIOZ ORAL CAPSULE	3	PA
LUNESTA ORAL TABLET	3	
NEMBUTAL INJECTION SOLUTION	3	
pentobarbital sodium injection solution	1	
PRECEDEX INTRAVENOUS SOLUTION	2	
quazepam oral tablet	1	
ramelteon oral tablet	1	
RESTORIL ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
ROZEREM ORAL TABLET	3	
SILENOR ORAL TABLET	3	
tasimelteon oral capsule	1	PA
temazepam oral capsule	1	
triazolam oral tablet	1	
zaleplon oral capsule	1	
zolpidem tartrate er oral tablet extended release	1	
ZOLPIDEM TARTRATE ORAL CAPSULE	1	
zolpidem tartrate oral tablet	1	
zolpidem tartrate sublingual tablet sublingual	1	
ZOLPIMIST ORAL SOLUTION	3	
<b>Wakefulness Promoting Agents</b>		
armodafinil oral tablet	1	PA
LUMRYZ ORAL PACKET	3	PA
modafinil oral tablet	1	PA
NUVIGIL ORAL TABLET	3	PA
PROVIGIL ORAL TABLET	3	PA
SODIUM OXYBATE ORAL SOLUTION	1	PA
SUNOSI ORAL TABLET	3	
WAKIX ORAL TABLET	3	PA
XYREM ORAL SOLUTION	3	PA
XYWAV ORAL SOLUTION	3	PA

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## Multi-language interpreter services

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

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**AlaskaCare DC Plan - Medicare Part D & Wrap**