



AlaskaCare Retiree DB Opt-Out Plan Prescription Drug Formulary

Effective Jan. 1, 2026

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

Optum Rx Member Services



Phone (toll-free): **1-855-409-6999**

TTY users: **711**

Hours of operation: 24 hours a day, 7 days a week



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

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

Understanding your formulary

What is a formulary?

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

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

How do I use my formulary?

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

What are tiers?

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

When does the formulary change?

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

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

Why are some medications excluded from coverage?

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

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

You or your authorized representative and your doctor can ask for a coverage request by calling Optum Rx at **1-855-409-6999**.



About this formulary

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

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

Reading your formulary

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

Tier information

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

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



Over-the-counter medications

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

Drug list information

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

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

AlaskaCare Retiree

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Drug Name	Drug Tier	Requirements /Limits
Analgesics - Drugs for Pain		
acetaminophen intravenous solution	1	
acetaminophen-codeine oral solution	1	QL (30 day supply per 1 fill)
acetaminophen-codeine oral tablet	1	QL (30 day supply per 1 fill)
ALLZITAL ORAL TABLET	3	
apap-caff-dihydrocodeine oral capsule	1	QL (30 day supply per 1 fill)
ascomp-codeine oral capsule	1	QL (30 day supply per 1 fill)
bac (butalbital-acetamin-caff) oral tablet	1	
BELBUCA BUCCAL FILM	2	QL (30 day supply per 1 fill)
buprenorphine hcl injection solution	1	
buprenorphine transdermal patch weekly	1	QL (30 day supply per 1 fill)
butalbital-acetaminophen oral capsule	1	
butalbital-acetaminophen oral tablet	1	
butalbital-apap-caff-cod oral capsule	1	QL (30 day supply per 1 fill)
butalbital-apap-caffeine oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
BUTALBITAL-APAP-CAFFEINE ORAL SOLUTION	3	
butalbital-apap-caffeine oral tablet	1	
butalbital-asa-caff-codeine oral capsule	1	QL (30 day supply per 1 fill)
butalbital-aspirin-caffeine oral capsule	1	
butorphanol tartrate injection solution	1	QL (30 day supply per 1 fill)
butorphanol tartrate nasal solution	1	QL (30 day supply per 1 fill)
BUTRANS TRANSDERMAL PATCH WEEKLY	3	QL (30 day supply per 1 fill)
clonidine hcl (analgesia) epidural solution	1	
codeine sulfate oral tablet	1	QL (30 day supply per 1 fill)
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	QL (30 day supply per 1 fill)
DEMEROL INJECTION SOLUTION	3	QL (30 day supply per 1 fill)
DILAUDID INJECTION SOLUTION 0.2 MG/ML	3	
DILAUDID INJECTION SOLUTION 1 MG/ML, 2 MG/ML	3	QL (30 day supply per 1 fill)
DILAUDID ORAL LIQUID	3	QL (30 day supply per 1 fill)
DILAUDID ORAL TABLET	3	QL (30 day supply per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
DURACLON EPIDURAL SOLUTION	3	
DURAMORPH INJECTION SOLUTION	3	QL (30 day supply per 1 fill)
endocet oral tablet	1	QL (30 day supply per 1 fill)
FENTANYL CITRATE (BULK) SOLUTION	3	
FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE 250 MCG/5ML	3	
fentanyl citrate solution prefilled syringe 100 mcg/2ml injection	1	QL (30 day supply per 1 fill)
FENTANYL CITRATE SOLUTION PREFILLED SYRINGE 100 MCG/2ML INJECTION	3	QL (30 day supply per 1 fill)
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/100ML-%, 1.25-0.9 MG/250ML-%, 2-0.9 MG/100ML-%, 2.5-0.9 MG/250ML-%	3	QL (30 day supply per 1 fill)
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/50ML-%, 2.5-0.9 MG/50ML-%, 5-0.9 MG/100ML-%	3	

Drug Name	Drug Tier	Requirements /Limits
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 10-0.9 MCG/ML-%, 5-0.9 MCG/ML-%, 500-0.9 MCG/50ML-%, 550-0.9 MCG/55ML-%	3	QL (30 day supply per 1 fill)
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1000-0.9 MCG/50ML-%	3	
FENTANYL CIT-ROPIVACAINE-NACL EPIDURAL SOLUTION 0.2-0.1-0.9 MG/100ML-%	3	
fentanyl transdermal patch 72 hour	1	QL (30 day supply per 1 fill)
FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION 0.2-0.0625-0.9 MG/100ML-%	3	
FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION PREFILLED SYRINGE	3	
FIORICET ORAL CAPSULE	3	
hydrocodone bitartrate er oral capsule extended release 12 hour	1	QL (30 day supply per 1 fill)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	1	QL (30 day supply per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL (30 day supply per 1 fill)
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	1	
hydrocodone-acetaminophen oral tablet	1	QL (30 day supply per 1 fill)
hydrocodone-ibuprofen oral tablet	1	QL (30 day supply per 1 fill)
HYDROMORPHONE HCL (BULK) SOLUTION	3	
hydromorphone hcl er oral tablet extended release 24 hour	1	QL (30 day supply per 1 fill)
hydromorphone hcl injection solution 0.25 mg/0.5ml	1	
HYDROMORPHONE HCL INJECTION SOLUTION 0.5 MG/ML	3	
hydromorphone hcl injection solution 2 mg/ml, 4 mg/ml	1	QL (30 day supply per 1 fill)
HYDROMORPHONE HCL INTRAVENOUS SOLUTION	3	
hydromorphone hcl oral liquid	1	QL (30 day supply per 1 fill)
hydromorphone hcl oral tablet	1	QL (30 day supply per 1 fill)

Drug Name	Drug Tier	Requirements /Limits
hydromorphone hcl pf injection solution	1	QL (30 day supply per 1 fill)
hydromorphone hcl solution 0.2 mg/ml injection	1	
HYDROMORPHONE HCL SOLUTION 0.2 MG/ML INJECTION	3	
HYDROMORPHONE HCL SOLUTION 1 MG/ML INJECTION	3	QL (30 day supply per 1 fill)
hydromorphone hcl solution 1 mg/ml injection	1	QL (30 day supply per 1 fill)
HYDROMORPHONE HCL-NACL INJECTION SOLUTION 10-0.9 MG/50ML-%, 50-0.9 MG/50ML-%	3	
HYDROMORPHONE HCL-NACL INJECTION SOLUTION 20-0.9 MG/100ML-%	3	QL (30 day supply per 1 fill)
HYDROMORPHONE HCL-NACL INJECTION SOLUTION PREFILLED SYRINGE	3	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 10-0.9 MG/50ML-%, 100-0.9 MG/50ML-%, 20-0.9 MG/100ML-%, 25-0.9 MG/50ML-%, 30-0.9 MG/30ML-%, 50-0.9 MG/50ML-%, 6-0.9 MG/30ML-%	3	QL (30 day supply per 1 fill)
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 50-0.79 MG/100ML-%	3	

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Drug Name	Drug Tier	Requirements /Limits
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	QL (30 day supply per 1 fill)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	2	QL (30 day supply per 1 fill)
INFUMORPH 200 INJECTION SOLUTION	3	QL (30 day supply per 1 fill)
INFUMORPH 500 INJECTION SOLUTION	3	QL (30 day supply per 1 fill)
JOURNAVX ORAL TABLET	3	
levorphanol tartrate oral tablet 2 mg	1	QL (30 day supply per 1 fill)
levorphanol tartrate oral tablet 3 mg	1	
meperidine hcl injection solution	1	QL (30 day supply per 1 fill)
meperidine hcl oral solution	1	QL (30 day supply per 1 fill)
meperidine hcl oral tablet	1	QL (30 day supply per 1 fill)
methadone hcl injection solution	1	QL (30 day supply per 1 fill)
methadone hcl intensol oral concentrate	1	QL (30 day supply per 1 fill)
methadone hcl oral concentrate	1	QL (30 day supply per 1 fill)
methadone hcl oral solution	1	QL (30 day supply per 1 fill)

Drug Name	Drug Tier	Requirements /Limits
methadone hcl oral tablet	1	QL (30 day supply per 1 fill)
methadone hcl oral tablet soluble	1	QL (30 day supply per 1 fill)
METHADONE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/ML-%, 5-0.9 MG/5ML-%	3	
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL (30 day supply per 1 fill)
methadose oral tablet soluble	1	QL (30 day supply per 1 fill)
METHADOSE SUGAR-FREE ORAL CONCENTRATE	3	QL (30 day supply per 1 fill)
mitigo injection solution	1	QL (30 day supply per 1 fill)
MORPHINE SULFATE (BULK) SOLUTION	3	
morphine sulfate (concentrate) oral solution 100 mg/5ml	1	QL (30 day supply per 1 fill)
morphine sulfate (pf) injection solution	1	QL (30 day supply per 1 fill)
morphine sulfate (pf) intravenous solution 1 mg/ml	1	
morphine sulfate (pf) intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml	1	QL (30 day supply per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
morphine sulfate er beads oral capsule extended release 24 hour	1	QL (30 day supply per 1 fill)
morphine sulfate er oral capsule extended release 24 hour	1	QL (30 day supply per 1 fill)
morphine sulfate er oral tablet extended release	1	QL (30 day supply per 1 fill)
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	3	QL (30 day supply per 1 fill)
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	1	QL (30 day supply per 1 fill)
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML	3	QL (30 day supply per 1 fill)
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 50 mg/ml, 8 mg/ml	1	QL (30 day supply per 1 fill)
morphine sulfate intravenous solution 2 mg/ml	1	
morphine sulfate oral solution	1	QL (30 day supply per 1 fill)
morphine sulfate oral tablet	1	QL (30 day supply per 1 fill)
MORPHINE SULFATE-NACL INJECTION SOLUTION PREFILLED SYRINGE	3	
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/ML-%	3	

Drug Name	Drug Tier	Requirements /Limits
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 100-0.9 MG/100ML-%, 50-0.9 MG/50ML-%, 500-0.9 MG/100ML-%	3	QL (30 day supply per 1 fill)
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/ML-%	3	
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 150-0.9 MG/30ML-%, 2-0.9 MG/ML-%, 30-0.9 MG/30ML-%, 4-0.9 MG/ML-%, 50-0.9 MG/50ML-%, 55-0.9 MG/55ML-%	3	QL (30 day supply per 1 fill)
MS CONTIN ORAL TABLET EXTENDED RELEASE	3	QL (30 day supply per 1 fill)
nalbuphine hcl injection solution	1	QL (30 day supply per 1 fill)
NALOCET ORAL TABLET	3	QL (30 day supply per 1 fill)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	3	QL (30 day supply per 1 fill)
NUCYNTA ORAL TABLET	3	QL (30 day supply per 1 fill)
oxycodone hcl oral capsule	1	QL (30 day supply per 1 fill)
oxycodone hcl oral concentrate	1	QL (30 day supply per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
oxycodone hcl oral solution	1	QL (30 day supply per 1 fill)
oxycodone hcl oral tablet	1	QL (30 day supply per 1 fill)
OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT 10 MG, 5 MG	3	
OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG	3	QL (30 day supply per 1 fill)
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	3	
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	3	QL (30 day supply per 1 fill)
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL (30 day supply per 1 fill)
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL (30 day supply per 1 fill)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	2	QL (30 day supply per 1 fill)
oxymorphone hcl er oral tablet extended release 12 hour	1	QL (30 day supply per 1 fill)
oxymorphone hcl oral tablet	1	QL (30 day supply per 1 fill)

Drug Name	Drug Tier	Requirements /Limits
pentazocine-naloxone hcl oral tablet	1	QL (30 day supply per 1 fill)
PERCOCET ORAL TABLET	3	QL (30 day supply per 1 fill)
PRIALT INTRATHECAL SOLUTION	2	SP
PROLATE ORAL SOLUTION	3	
PROLATE ORAL TABLET	3	QL (30 day supply per 1 fill)
remifentanyl hcl intravenous solution reconstituted	1	QL (30 day supply per 1 fill)
ROXICODONE ORAL TABLET	3	QL (30 day supply per 1 fill)
ROXYBOND ORAL TABLET ABUSE-DETERRENT 10 MG, 5 MG	3	
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG	3	QL (30 day supply per 1 fill)
SYNAPRYN FUSEPAQ ORAL SUSPENSION RECONSTITUTED	3	QL (30 day supply per 1 fill)
TENCON ORAL TABLET	3	
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	QL (30 day supply per 1 fill)
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	QL (30 day supply per 1 fill)

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Drug Name	Drug Tier	Requirements /Limits
tramadol hcl er oral tablet extended release 24 hour	1	QL (30 day supply per 1 fill)
TRAMADOL HCL ORAL SOLUTION	3	
tramadol hcl oral tablet 100 mg, 25 mg, 75 mg	1	
tramadol hcl oral tablet 50 mg	1	QL (30 day supply per 1 fill)
tramadol-acetaminophen oral tablet	1	QL (30 day supply per 1 fill)
TREZIX ORAL CAPSULE	3	QL (30 day supply per 1 fill)
ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED	3	QL (30 day supply per 1 fill)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	2	QL (30 day supply per 1 fill)
Analgesics - Drugs for Pain and Inflammation		
ARTHROTEC ORAL TABLET DELAYED RELEASE	3	
CALDOLOR INTRAVENOUS SOLUTION	3	
CELEBREX ORAL CAPSULE	3	
celecoxib oral capsule	1	
COMBOGESIC INTRAVENOUS SOLUTION	3	
COMBOGESIC ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
COXANTO ORAL CAPSULE	3	
DICLOFENAC PATCH EXTERNAL PATCH	3	
diclofenac potassium oral capsule	1	
diclofenac potassium oral tablet	1	
diclofenac sodium er oral tablet extended release 24 hour	1	
diclofenac sodium external solution	1	
diclofenac sodium oral tablet delayed release	1	
diclofenac-misoprostol oral tablet delayed release	1	
diflunisal oral tablet	1	
DOLOBID ORAL TABLET	3	
DUAL COMPLEX FORMULA 1 KIT EXTERNAL CREAM	3	
ELYXYB ORAL SOLUTION	3	
ENOVARX-DICLOFENAC SODIUM EXTERNAL CREAM	3	
ENOVARX-IBUPROFEN EXTERNAL CREAM	3	
ENOVARX-NAPROXEN EXTERNAL CREAM	3	
etodolac er oral tablet extended release 24 hour	1	
etodolac oral capsule	1	
etodolac oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
FBL KIT EXTERNAL CREAM	3	
fenoprofen calcium oral capsule	1	
FENOPRON ORAL CAPSULE	3	
FLECTOR EXTERNAL PATCH	3	
flurbiprofen oral tablet	1	
FROTEK EXTERNAL CREAM	3	
ibuprofen lysine intravenous solution	1	
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	1	
ibuprofen oral tablet 300 mg, 400 mg, 600 mg, 800 mg	1	
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 oral suspension	1	
indomethacin rectal suppository 50 mg	1	
indomethacin sodium intravenous solution reconstituted	1	
K.B.G.L IN TERODERM EXTERNAL CREAM	3	

Drug Name	Drug Tier	Requirements /Limits
ketoprofen er oral capsule extended release 24 hour	1	
ketoprofen oral capsule	1	
ketorolac tromethamine +rfd injection solution	1	
ketorolac tromethamine injection solution 15 mg/ml	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
ketorolac tromethamine oral tablet	1	
ketorolac tromethamine solution 30 mg/ml injection	1	
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
LICART EXTERNAL PATCH 24 HOUR	3	
LODINE ORAL TABLET	3	
LOFENA ORAL TABLET	3	
LURBIRO ORAL TABLET	3	
meclofenamate sodium oral capsule	1	
mefenamic acid oral capsule	1	
meloxicam oral capsule	1	
MELOXICAM ORAL SUSPENSION	3	
meloxicam oral tablet	1	
nabumetone oral tablet	1	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
NAPRO EXTERNAL CREAM	3	
naproxen dr oral tablet delayed release	1	
naproxen oral suspension	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium er oral tablet extended release 24 hour	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen-esomeprazole mg oral tablet delayed release	1	
NEOPROFEN INTRAVENOUS SOLUTION	3	
OXAPROZIN ORAL CAPSULE	3	
oxaprozin oral tablet	1	
PENNSAID EXTERNAL SOLUTION	3	
piroxicam oral capsule	1	
RELAFEN DS ORAL TABLET	3	
SPRIX NASAL SOLUTION	3	
sulindac oral tablet	1	
TOLECTIN 600 ORAL TABLET	3	
tolmetin sodium oral capsule	1	
tolmetin sodium oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
TRIPLE COMPLEX FORMULA 3 KIT EXTERNAL CREAM	3	
VIMOVO ORAL TABLET DELAYED RELEASE 500-20 MG	3	
VP FC KIT EXTERNAL CREAM	3	
VP GKL KIT EXTERNAL CREAM	3	
VYSCOXAL ORAL SUSPENSION	3	
ZIPSOR ORAL CAPSULE	3	
ZYNRELEF INJECTION SOLUTION	3	
Anesthetics		
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE	3	
bupivacaine fisionorm injection solution	1	
BUPIVACAINE HCL (BULK) SOLUTION	3	
bupivacaine hcl (pf) injection solution	1	
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.25 % (10 ML)	3	
bupivacaine hcl solution 0.25 % injection	1	
BUPIVACAINE HCL SOLUTION 0.25 % INJECTION	3	
bupivacaine hcl solution 0.5 % injection	1	

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Drug Name	Drug Tier	Requirements /Limits
BUPIVACAINE HCL SOLUTION 0.5 % INJECTION	3	
bupivacaine in dextrose intrathecal solution	1	
bupivacaine spinal intrathecal solution	1	
bupivacaine-epinephrine (pf) injection solution	1	
bupivacaine-epinephrine solution 0.25% -1:200000 injection	1	
BUPIVACAINE-EPINEPHRINE SOLUTION 0.25% - 1:200000 INJECTION	3	
bupivacaine-epinephrine solution 0.5% -1:200000 injection	1	
BUPIVACAINE-EPINEPHRINE SOLUTION 0.5% - 1:200000 INJECTION	3	
chloroprocaine hcl (pf) injection solution	1	
COCAINE HCL NASAL SOLUTION	3	
ENOVARX-LIDOCAINE HCL EXTERNAL CREAM	3	
ethyl chloride external aerosol	1	
EXPAREL INJECTION SUSPENSION	3	
GEBAUERS PAIN EASE EXTERNAL AEROSOL	3	

Drug Name	Drug Tier	Requirements /Limits
GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	3	
glydo external prefilled syringe	1	
HURRI-FREEZE MEDIUM STREAM EXTERNAL AEROSOL	3	
HURRI-FREEZE MIST SPRAY EXTERNAL AEROSOL	3	
L.E.T. (RACEPINEPHRINE) EXTERNAL GEL	3	
L.E.T. (RACEPINEPHRINE) EXTERNAL SOLUTION	3	
L.E.T. EXTERNAL GEL	3	
LETS KIT	3	
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
LIDOCAINE HCL (BUFFERED) INJECTION SOLUTION PREFILLED SYRINGE	3	
LIDOCAINE HCL (CARDIAC) INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML, 100 MG/5ML, 200 MG/10ML, 60 MG/3ML	3	
lidocaine hcl (cardiac) intravenous solution prefilled syringe 50 mg/5ml	1	

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Drug Name	Drug Tier	Requirements /Limits
lidocaine hcl (cardiac) pf intravenous solution	1	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	1	
lidocaine hcl (pf) injection solution	1	
lidocaine hcl external solution	1	
lidocaine hcl injection solution 0.5 %	1	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/10ML, 200 MG/10ML, 9 MG/ML	3	
LIDOCAINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
lidocaine hcl solution 1 % injection	1	
LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
lidocaine hcl solution 2 % injection	1	
LIDOCAINE HCL SOLUTION 2 % INJECTION	3	
lidocaine hcl solution prefilled syringe 100 mg/5ml injection	1	
LIDOCAINE HCL SOLUTION PREFILLED SYRINGE 100 MG/5ML INJECTION	3	

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

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Drug Name	Drug Tier	Requirements /Limits
lidocaine-prilocaine external cream	1	
LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE	3	
LIDOCAN EXTERNAL PATCH	3	
LIDODERM EXTERNAL PATCH	3	
LIDO-RACEPINEPHRINE-TETRACAINE EXTERNAL GEL	3	
LIDO-RACEPINEPHRINE-TETRACAINE EXTERNAL SOLUTION	3	
LIDTOPIC MAX 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 10 MG/ML, 5 MG/ML, 7.5 MG/ML	3	

Drug Name	Drug Tier	Requirements /Limits
NESACAINE INJECTION SOLUTION	3	
NESACAINE-MPF INJECTION SOLUTION	3	
ORABLOC INJECTION SOLUTION CARTRIDGE	3	
POLOCAINE INJECTION SOLUTION	3	
POLOCAINE-MPF INJECTION SOLUTION	3	
PREPIV SUPPLY COMBINATION KIT	3	
ROPIVACAINE HCL EPIDURAL SOLUTION	3	
ropivacaine hcl injection solution	1	
ROPIVACAINE HCL-NACL INJECTION SOLUTION 0.2-0.9 %	3	
ROPIVACAINE HCL-NACL INJECTION SOLUTION PREFILLED SYRINGE 0.5-0.9 %	3	
SENSORCAINE INJECTION SOLUTION	3	
SENSORCAINE/EPINEPHRINE INJECTION SOLUTION	3	
SENSORCAINE-MPF INJECTION SOLUTION	3	
SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
STERILE TOPICAL L.E.T. GEL EXTERNAL GEL	3	
TOPICAL L.E.T. EXTERNAL GEL	3	
TRIDACAINE II EXTERNAL PATCH	3	
TRIDACAINE III EXTERNAL PATCH	3	
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	3	
XYLOCAINE INJECTION SOLUTION	3	
XYLOCAINE MPF +RFID INJECTION SOLUTION	3	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION	3	
XYLOCAINE-MPF +RFID INJECTION SOLUTION	3	
XYLOCAINE-MPF INJECTION SOLUTION	3	
XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION	3	
ZTLIDO EXTERNAL PATCH	3	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium oral tablet delayed release	1	

Drug Name	Drug Tier	Requirements /Limits
BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	SP
BRIXADI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	SP
buprenorphine hcl sublingual tablet sublingual	1	
buprenorphine hcl-naloxone hcl sublingual film	1	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	
bupropion hcl er (smoking det) oral tablet extended release 12 hour	1	PV
CHANTIX CONTINUING MONTH PAK ORAL TABLET	3	
CHANTIX ORAL TABLET	3	
CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK	3	
disulfiram oral tablet	1	
ft naloxone hcl nasal liquid	1	
KLOXXADO NASAL LIQUID	2	
lofexidine hcl oral tablet	1	
LUCEMYRA ORAL TABLET	3	
NALMEFENE HCL INJECTION SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
naloxone hcl injection solution	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal liquid	1	
naltrexone hcl oral tablet	1	
NARCAN NASAL LIQUID	2	
NICOTROL NS NASAL SOLUTION	3	PV
OPVEE NASAL SOLUTION	2	
REXTOVY NASAL LIQUID	2	
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	SP
SUBOXONE SUBLINGUAL FILM	3	
varenicline tartrate (starter) oral tablet therapy pack	1	PV
varenicline tartrate oral tablet	1	PV
varenicline tartrate(continue) oral tablet	1	PV
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	SP
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML	3	

Drug Name	Drug Tier	Requirements /Limits
ZUBSOLV SUBLINGUAL TABLET	2	
ZURNAI INJECTION SOLUTION AUTO-INJECTOR	3	
Antibacterials		
amikacin sulfate injection solution	1	
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet chewable	1	
amoxicillin-potassium clavulanate er oral tablet extended release 12 hour	1	
amoxicillin-potassium clavulanate oral suspension reconstituted	1	
amoxicillin-potassium clavulanate oral tablet	1	
ampicillin oral capsule	1	
ampicillin sodium injection solution reconstituted	1	
ampicillin sodium intravenous solution reconstituted	1	
ampicillin-sulbactam sodium injection solution reconstituted	1	
ampicillin-sulbactam sodium intravenous solution reconstituted	1	
ARIKAYCE INHALATION SUSPENSION	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	3	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED	3	
AVIDOXY ORAL TABLET	3	
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	3	
AZACTAM INJECTION SOLUTION RECONSTITUTED	3	
azithromycin intravenous solution reconstituted	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet	1	
aztreonam injection solution reconstituted	1	
BACTRIM DS ORAL TABLET	3	
BACTRIM ORAL TABLET	3	
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	3	
BAXDELA ORAL TABLET	3	
benzalkonium chloride external solution	1	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	3	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	3	

Drug Name	Drug Tier	Requirements /Limits
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
BLUJEPA ORAL TABLET	3	
cefaclor er oral tablet extended release 12 hour	1	
cefaclor oral capsule	1	
cefaclor oral suspension reconstituted	1	
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
cefadroxil oral tablet	1	
CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
CEFAZOLIN SODIUM INJECTION SOLUTION PREFILLED SYRINGE	3	
cefazolin sodium injection solution reconstituted	1	
CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
cefazolin sodium intravenous solution reconstituted	1	
cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%, 3-4 gm/150ml-%	1	

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Drug Name	Drug Tier	Requirements /Limits
CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION 2-5 GM/100ML-%	3	
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 2 gm	1	
cefepime-dextrose intravenous solution reconstituted	1	
cefixime oral capsule	1	
cefixime oral suspension reconstituted	1	
CEFOTAN INJECTION SOLUTION RECONSTITUTED	3	
CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED	3	
cefotetan disodium injection solution reconstituted	1	
cefoxitin sodium intravenous solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
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 injection solution reconstituted	1	
ceftazidime intravenous solution reconstituted	1	
ceftriaxone sodium in dextrose intravenous solution	1	
ceftriaxone sodium injection solution reconstituted	1	
ceftriaxone sodium intravenous solution reconstituted	1	
ceftriaxone sodium-dextrose intravenous solution reconstituted	1	
cefuroxime axetil oral tablet	1	
cefuroxime sodium injection solution reconstituted	1	
cefuroxime sodium intravenous solution reconstituted	1	
cephalexin oral capsule	1	
cephalexin oral suspension reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
cephalexin oral tablet	1	
chloramphenicol sod succinate intravenous solution reconstituted	1	
CIPRO ORAL SUSPENSION RECONSTITUTED	3	
CIPRO ORAL TABLET	3	
ciprofloxacin hcl oral tablet	1	
ciprofloxacin in d5w intravenous solution	1	
clarithromycin er oral tablet extended release 24 hour	1	
clarithromycin oral suspension reconstituted	1	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE	3	
CLEOCIN ORAL SOLUTION RECONSTITUTED	3	
CLEOCIN PHOSPHATE INJECTION SOLUTION	3	
CLEOCIN VAGINAL CREAM	3	
CLEOCIN VAGINAL SUPPOSITORY	3	
clindamycin hcl oral capsule	1	
clindamycin palmitate hcl oral solution reconstituted	1	
clindamycin phosphate in d5w intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
CLINDAMYCIN PHOSPHATE IN NACL INTRAVENOUS SOLUTION	3	
clindamycin phosphate injection solution	1	
clindamycin phosphate vaginal cream	1	
CLINDESSE VAGINAL CREAM	3	
colistimethate sodium (cba) injection solution reconstituted	1	
COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED	3	
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	3	
daptomycin intravenous solution reconstituted	1	
DAPTOMYCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
demeclocycline hcl oral tablet	1	
dicloxacillin sodium oral capsule	1	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
DIFICID ORAL TABLET	3	
DORYX MPC ORAL TABLET DELAYED RELEASE	3	
doxy 100 intravenous solution reconstituted	1	

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Drug Name	Drug Tier	Requirements /Limits
doxycycline hyclate intravenous solution reconstituted	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	1	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
E.E.S. 400 ORAL TABLET	3	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	3	
EMBLAVEO INTRAVENOUS SOLUTION RECONSTITUTED	3	
ertapenem sodium injection solution reconstituted	1	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	3	
erythromycin base oral capsule delayed release particles	1	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
erythromycin lactobionate intravenous solution reconstituted	1	
erythromycin oral tablet delayed release	1	
EXTENCILLINE INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
FETROJA INTRAVENOUS SOLUTION RECONSTITUTED	3	
fidaxomicin oral tablet	1	
FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED	3	
FIRVANQ ORAL SOLUTION RECONSTITUTED	3	
fosfomycin tromethamine oral packet	1	

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Drug Name	Drug Tier	Requirements /Limits
gentamicin in saline intravenous solution	1	
gentamicin sulfate external cream	1	
gentamicin sulfate external ointment	1	
gentamicin sulfate injection solution	1	
HIPREX ORAL TABLET	3	
HUMATIN ORAL CAPSULE	2	
hydrogen peroxide solution	1	
imipenem-cilastatin intravenous solution reconstituted	1	
KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED	3	
LENTOCILIN INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
levofloxacin in d5w intravenous solution	1	
levofloxacin intravenous solution	1	
levofloxacin oral solution	1	
levofloxacin oral tablet	1	
LIKMEZ ORAL SUSPENSION	3	
LINCOCIN INJECTION SOLUTION	3	
lincomycin hcl injection solution	1	
linezolid in sodium chloride intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
linezolid intravenous solution	1	
linezolid oral suspension reconstituted	1	
linezolid oral tablet	1	
LUGOLS STRONG IODINE EXTERNAL SOLUTION	3	
MACROBID ORAL CAPSULE	3	
MACRODANTIN ORAL CAPSULE	3	
meropenem intravenous solution reconstituted	1	
MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	3	
methenamine hippurate oral tablet	1	
metronidazole intravenous solution	1	
metronidazole oral capsule	1	
metronidazole oral tablet	1	
metronidazole vaginal gel	1	
MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
minocycline hcl er oral tablet extended release 24 hour	1	
minocycline hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
minocycline hcl oral tablet	1	
MONDOXYNE NL ORAL CAPSULE	3	
moxifloxacin hcl in nacl intravenous solution	1	
MOXIFLOXACIN HCL INTRAVENOUS SOLUTION	3	
moxifloxacin hcl oral tablet	1	
mupirocin calcium external cream	1	
mupirocin external ointment	1	
NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	3	
nafcillin sodium injection solution reconstituted	1	
nafcillin sodium intravenous solution reconstituted	1	
neomycin sulfate oral tablet	1	
neomycin-polymyxin b gu irrigation solution	1	
nitrofurantoin macrocrystal oral capsule	1	
nitrofurantoin monohydrate macrocrystals oral capsule	1	
nitrofurantoin oral suspension 25 mg/5ml	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	3	

Drug Name	Drug Tier	Requirements /Limits
NUVESSA VAGINAL GEL	3	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	3	
NUZYRA ORAL TABLET	3	
ofloxacin oral tablet	1	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	3	
ORLYNVAH ORAL TABLET	3	
OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	3	
oxacillin sodium injection solution reconstituted	1	
oxacillin sodium intravenous solution reconstituted	1	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION	3	
penicillin g potassium injection solution reconstituted	1	
penicillin g sodium injection solution reconstituted	1	
penicillin v potassium oral solution reconstituted	1	
penicillin v potassium oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
PFIZERPEN INJECTION SOLUTION RECONSTITUTED	3	
piperacillin sod-tazobactam so intravenous solution reconstituted	1	
PIPERACILLIN-TAZOBACTAM-NACL INTRAVENOUS SOLUTION RECONSTITUTED	3	
polymyxin b sulfate injection solution reconstituted	1	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED	3	
RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED	3	
SEYSARA ORAL TABLET	3	
SILVADENE EXTERNAL CREAM	3	
silver sulfadiazine external cream	1	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	3	
SIVEXTRO ORAL TABLET	3	
SOLOSEC ORAL PACKET	3	
ssd external cream	1	
streptomycin sulfate intramuscular solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
sulfadiazine oral tablet	1	
sulfamethoxazole-trimethoprim intravenous solution	1	
sulfamethoxazole-trimethoprim oral suspension	1	
sulfamethoxazole-trimethoprim oral tablet	1	
SULFAMYLON EXTERNAL CREAM	3	
sulfatrim pediatric oral suspension	1	
TARGADOX ORAL TABLET	3	
tazicef injection solution reconstituted	1	
TAZICEF INTRAVENOUS SOLUTION	3	
tazicef intravenous solution reconstituted	1	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	3	
tetracycline hcl oral capsule	1	
TETRACYCLINE HCL ORAL TABLET	3	
tigecycline intravenous solution reconstituted	1	
tinidazole oral tablet	1	
tobramycin sulfate injection solution	1	
tobramycin sulfate injection solution reconstituted	1	
trimethoprim oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	3	
TYZAVAN INTRAVENOUS SOLUTION	3	
UNASYN INJECTION SOLUTION RECONSTITUTED	3	
UNASYN INTRAVENOUS SOLUTION RECONSTITUTED	3	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	3	
VANCOCIN ORAL CAPSULE	3	
VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION 1.5-5 GM/250ML-%	3	
vancomycin hcl in dextrose intravenous solution 1-5 gm/200ml- %, 1.5-5 gm/300ml-%, 500-5 mg/100ml-%, 750-5 mg/150ml-%	1	
vancomycin hcl in dextrose solution 1.25- 5 gm/250ml-% intravenous	1	
VANCOMYCIN HCL IN DEXTROSE SOLUTION 1.25-5 GM/250ML-% INTRAVENOUS	3	

Drug Name	Drug Tier	Requirements /Limits
vancomycin hcl in nacl intravenous solution 1- 0.9 gm/200ml-%, 500- 0.9 mg/100ml-%	1	
VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1-0.9 GM/250ML-%, 1.25-0.9 GM/250ML-%, 1.5-0.9 GM/250ML-%, 1.5-0.9 GM/500ML-%, 1.75-0.9 GM/250ML-%, 1.75-0.9 GM/500ML-%, 2-0.9 GM/500ML-%, 750-0.9 MG/250ML-%	3	
VANCOMYCIN HCL IN NACL SOLUTION 750- 0.9 MG/150ML-% INTRAVENOUS	3	
vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous	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	3	
VANDAZOLE VAGINAL GEL	3	
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
XACDURO INTRAVENOUS SOLUTION RECONSTITUTED	3	
XACIATO VAGINAL GEL	3	
XERAVA INTRAVENOUS SOLUTION RECONSTITUTED	3	
XIFAXAN ORAL TABLET	3	
ZEMDRI INTRAVENOUS SOLUTION	3	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZEVTERA INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	3	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	3	
ZITHROMAX ORAL TABLET	3	
ZITHROMAX TRI-PAK ORAL TABLET	3	
ZITHROMAX Z-PAK ORAL TABLET	3	
ZOSYN INTRAVENOUS SOLUTION	3	
ZYVOX INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
ZYVOX ORAL SUSPENSION RECONSTITUTED	3	
Anticoagulants		
ACD FORMULA A IN VITRO SOLUTION	3	
ACD-A NOCLOT-50 IN VITRO SOLUTION	3	
ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION	3	
argatroban intravenous solution 50 mg/50ml	1	
ARIXTRA SUBCUTANEOUS SOLUTION	3	
bivalirudin trifluoroacetate intravenous solution reconstituted	1	
dabigatran etexilate mesylate oral capsule	1	
DEFENCATH IN VITRO SOLUTION	3	
ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE	2	
ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE	2	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	
ELIQUIS ORAL CAPSULE SPRINKLE	2	
ELIQUIS ORAL TABLET	2	
ELIQUIS ORAL TABLET SOLUBLE	2	

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Drug Name	Drug Tier	Requirements /Limits
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 (PORCINE) IN NACL INTRAVENOUS SOLUTION 2500-0.9 UT/500ML-%, 30000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%, 5000-0.9 UT/500ML-%	3	
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	
LOVENOX INJECTION SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	3	
PRADAXA ORAL CAPSULE	2	
PRADAXA ORAL PACKET	3	
rivaroxaban oral tablet	1	
rivaroxaban suspension reconstituted 1 mg/ml oral	1	
rivaroxaban suspension reconstituted 1 mg/ml oral	1	QL (1 ML per 1 day)
SAVAYSA ORAL TABLET	3	
SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE	3	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION	3	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION	3	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
TNKASE INTRAVENOUS KIT	3	
TRICITRASOL IN VITRO CONCENTRATE	3	

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Drug Name	Drug Tier	Requirements /Limits
warfarin sodium oral tablet	1	
XARELTO ORAL SUSPENSION RECONSTITUTED	2	
XARELTO ORAL TABLET	2	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	2	
Anticonvulsants - Drugs for Seizures		
APTOM ORAL TABLET	3	
BANZEL ORAL SUSPENSION	3	
BANZEL ORAL TABLET	3	
BRIVIACT INTRAVENOUS SOLUTION	3	
BRIVIACT ORAL SOLUTION	3	
BRIVIACT 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	

Drug Name	Drug Tier	Requirements /Limits
CELONTIN ORAL CAPSULE	3	
CEREBYX INJECTION SOLUTION	3	
clobazam oral suspension 2.5 mg/ml	1	
clobazam oral tablet	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; SP
DIACOMIT ORAL PACKET	3	PA; SP
diazepam rectal gel	1	
DILANTIN INFATABS ORAL TABLET CHEWABLE	3	
DILANTIN ORAL CAPSULE	3	
DILANTIN-125 ORAL SUSPENSION	3	
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	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
EPIDIOLEX ORAL SOLUTION	3	PA; SP
EPRONTIA ORAL SOLUTION	3	
eslicarbazepine acetate oral tablet	1	
ethosuximide oral capsule	1	
ethosuximide oral solution	1	
FANATREX FUSEPAQ ORAL SUSPENSION	3	
felbamate oral suspension	1	
felbamate oral tablet	1	
FELBATOL ORAL TABLET	3	
FINTEPLA ORAL SOLUTION	3	PA; SP
fosphenytoin sodium injection solution	1	
FYCOMPA ORAL SUSPENSION	3	
FYCOMPA ORAL TABLET	3	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
GABARONE ORAL TABLET	3	
KEPPRA INTRAVENOUS SOLUTION	3	
KEPPRA ORAL SOLUTION	3	
KEPPRA ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
lacosamide intravenous solution	1	
lacosamide oral solution	1	
lacosamide oral tablet	1	
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	

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Drug Name	Drug Tier	Requirements /Limits
levetiracetam er oral tablet extended release 24 hour	1	
levetiracetam in nacl intravenous solution	1	
levetiracetam intravenous solution	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE	3	
methsuximide oral capsule	1	
MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
MYSOLINE ORAL TABLET	3	
NAYZILAM NASAL SOLUTION	3	
NEURONTIN ORAL CAPSULE	3	
NEURONTIN ORAL SOLUTION	3	
NEURONTIN ORAL TABLET	3	
ONFI ORAL SUSPENSION	3	
ONFI ORAL TABLET	3	
oxcarbazepine er oral tablet extended release 24 hour	1	
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
pentobarbital sodium injection solution	1	
perampanel oral tablet	1	
phenobarbital oral elixir	1	
phenobarbital oral tablet	1	
phenobarbital sodium injection solution	1	
phenytek oral capsule	1	
phenytoin infatabs oral tablet chewable	1	
phenytoin oral suspension 125 mg/5ml	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended oral capsule	1	
phenytoin sodium injection solution	1	
primidone oral tablet	1	
roweepra oral tablet	1	
rufinamide oral suspension	1	
rufinamide oral tablet	1	
SABRIL ORAL PACKET	3	PA; SP
SABRIL ORAL TABLET	3	PA; SP
SEZABY INTRAVENOUS SOLUTION RECONSTITUTED	3	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	3	
subvenite oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
subvenite starter kit-blue oral kit	1	
subvenite starter kit-green oral kit	1	
subvenite starter kit-orange oral kit	1	
SYMPAZAN ORAL FILM	3	
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
tiagabine hcl oral tablet	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 solution	1	
topiramate oral tablet	1	
TRILEPTAL ORAL SUSPENSION	3	
TRILEPTAL ORAL TABLET	3	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
valproate sodium intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
valproic acid oral capsule	1	
valproic acid oral solution	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	
VALTOCO 5 MG DOSE NASAL LIQUID	3	
vigabatrin oral packet	1	PA; SP
vigabatrin oral tablet	1	PA; SP
VIGADRONE ORAL PACKET	3	PA; SP
VIGADRONE ORAL TABLET	3	PA; SP
VIGAFYDE ORAL SOLUTION	3	PA; SP
VIMPAT INTRAVENOUS SOLUTION	3	
VIMPAT ORAL SOLUTION	3	
VIMPAT ORAL TABLET	3	
XCOPRI ORAL TABLET	3	
XCOPRI ORAL TABLET THERAPY PACK	3	
ZARONTIN ORAL CAPSULE	3	
ZARONTIN ORAL SOLUTION	3	
ZONEGRAN ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
ZONISADE ORAL SUSPENSION	3	
zonisamide oral capsule	1	
ZTALMY ORAL SUSPENSION	3	PA; SP
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
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	
galantamine hydrobromide oral solution	1	
galantamine hydrobromide oral tablet	1	
LEQEMBI IQLIK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.26 ML per 1 day)
memantine hcl er oral capsule extended release 24 hour	1	
memantine hcl oral solution	1	
memantine hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
memantine hcl-donepezil hcl oral capsule extended release 24 hour	1	
NAMENDA TITRATION PAK ORAL TABLET 28 X 5 MG & 21 X 10 MG	3	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
rivastigmine tartrate oral capsule	1	
rivastigmine transdermal patch 24 hour	1	
ZUNVEYL ORAL TABLET DELAYED RELEASE	3	
Antidepressants		
amitriptyline hcl oral tablet	1	
amoxapine oral tablet	1	
ANAFRANIL ORAL CAPSULE	3	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
AUVELITY ORAL TABLET EXTENDED RELEASE	3	
bupropion hcl er (sr) oral tablet extended release 12 hour	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	

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Drug Name	Drug Tier	Requirements /Limits
bupropion hcl oral tablet	1	
CELEXA ORAL TABLET	3	
chlordiazepoxide-amitriptyline oral tablet	1	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral capsule	1	
desipramine hcl oral tablet	1	
DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
desvenlafaxine succinate er oral tablet extended release 24 hour	1	
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	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	

Drug Name	Drug Tier	Requirements /Limits
EMSAM TRANSDERMAL PATCH 24 HOUR	3	
ESCITALOPRAM OXALATE ORAL CAPSULE	3	
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
EXXUA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
EXXUA TITRATION PACK ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
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	
fluvoxamine maleate oral tablet	1	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
imipramine hcl oral tablet	1	
imipramine pamoate oral capsule	1	
LEXAPRO ORAL TABLET	3	
MARPLAN ORAL TABLET	3	
mirtazapine oral tablet	1	
mirtazapine oral tablet dispersible	1	
NARDIL ORAL TABLET	3	
nefazodone hcl oral tablet	1	
NORPRAMIN ORAL TABLET	3	
nortriptyline hcl oral capsule	1	
nortriptyline hcl oral solution	1	
olanzapine-fluoxetine hcl oral capsule	1	
PAMELOR ORAL CAPSULE	3	
PARNATE ORAL TABLET	3	
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 TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
perphenazine-amitriptyline oral tablet	1	
phenelzine sulfate oral tablet	1	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
protriptyline hcl oral tablet	1	
RALDESY ORAL SOLUTION	3	
REMERON ORAL TABLET	3	
REMERON SOLTAB ORAL TABLET DISPERSIBLE	3	
sertraline hcl oral capsule	1	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	3	PA; SP
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	3	PA; SP
SYMBYAX ORAL CAPSULE	3	
tranylcypromine sulfate oral tablet	1	
trazodone hcl oral tablet	1	
trimipramine maleate oral capsule	1	
TRINTELLIX ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
VENLAFAXINE BESYLATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
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	
vilazodone hcl oral tablet	1	
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
ZOLOFT ORAL CONCENTRATE	3	
ZOLOFT ORAL TABLET	3	
ZURZUVAE ORAL CAPSULE	3	
Antiemetics - Drugs for Nausea and Vomiting		
AKYNZEO (READY- TO-USE) INTRAVENOUS SOLUTION	3	
AKYNZEO (TO-BE- DILUTED) INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	3	
AKYNZEO ORAL CAPSULE	3	
ANZEMET ORAL TABLET	3	
APONVIE INTRAVENOUS EMULSION	3	
aprepitant oral capsule	1	
BARHEMSYS INTRAVENOUS SOLUTION	3	
BONJESTA ORAL TABLET EXTENDED RELEASE	3	
CINVANTI INTRAVENOUS EMULSION	3	
COMPRO RECTAL SUPPOSITORY	3	
DICLEGIS ORAL TABLET DELAYED RELEASE	3	
dimenhydrinate injection solution	1	
doxylamine-pyridoxine oral tablet delayed release	1	
dronabinol oral capsule	1	
droperidol injection solution	1	
EMEND BIPACK ORAL CAPSULE	3	
EMEND INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
EMEND ORAL SUSPENSION RECONSTITUTED	3	
EMEND TRIPACK ORAL CAPSULE	3	
FOCINVEZ INTRAVENOUS SOLUTION	3	
fosaprepitant dimeglumine intravenous solution reconstituted	1	
GIMOTI NASAL SOLUTION	3	
granisetron hcl intravenous solution	1	
granisetron hcl oral tablet	1	
MARINOL ORAL CAPSULE	3	
meclizine hcl oral tablet	1	
metoclopramide hcl injection solution	1	
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	1	
ondansetron hcl +rfd injection solution	1	
ondansetron hcl injection solution	1	
ondansetron hcl injection solution prefilled syringe	1	
ondansetron hcl oral solution	1	
ondansetron hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
ondansetron odt oral tablet dispersible	1	
palonosetron hcl intravenous solution	1	
palonosetron hcl intravenous solution prefilled syringe	1	
perphenazine oral tablet	1	
PHENERGAN INJECTION SOLUTION	3	
POSFREA INTRAVENOUS SOLUTION	3	
prochlorperazine edisylate injection solution	1	
prochlorperazine maleate oral tablet	1	
prochlorperazine rectal suppository	1	
promethazine hcl injection solution	1	
promethazine hcl oral solution 6.25 mg/5ml	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal suppository	1	
PROMETHEGAN RECTAL SUPPOSITORY	3	
REGLAN ORAL TABLET	3	
SANCUSO TRANSDERMAL PATCH	3	
scopolamine transdermal patch 72 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	3	
SYNDROS ORAL SOLUTION	3	
TIGAN INTRAMUSCULAR SOLUTION	3	
trimethobenzamide hcl oral capsule	1	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	3	
Antifungals		
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	3	
amphotericin b intravenous solution reconstituted	1	
amphotericin b liposome intravenous suspension reconstituted	1	
ANCOBON ORAL CAPSULE	3	
BREXAFEMME ORAL TABLET	3	
caspofungin acetate intravenous solution reconstituted	1	
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	
CICLOPIROX OLAMINE POWDER	3	
clotrimazole external cream	1	
clotrimazole external solution	1	
clotrimazole mouth/throat troche	1	
CLOTRIMAZOLE POWDER	3	
clotrimazole-betamethasone external cream	1	
clotrimazole-betamethasone external lotion	1	
CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED	3	
CRESEMBA ORAL CAPSULE	3	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3	
econazole nitrate external cream	1	
ECONAZOLE NITRATE EXTERNAL FOAM	3	
ECOZA EXTERNAL FOAM	3	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	3	
ERTACZO EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
EXELDERM EXTERNAL CREAM	3	
EXELDERM EXTERNAL SOLUTION	3	
EXODERM EXTERNAL LOTION	3	
fluconazole in sodium chloride intravenous solution	1	
fluconazole oral suspension reconstituted	1	
fluconazole oral tablet	1	
flucytosine oral capsule	1	
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	
ketoconazole external cream	1	
ketoconazole external foam	1	
ketoconazole external shampoo	1	
ketoconazole oral tablet	1	
ketodan external foam	1	
klayesta external powder	1	

Drug Name	Drug Tier	Requirements /Limits
LULICONAZOLE EXTERNAL CREAM	3	
LUZU EXTERNAL CREAM	3	
micafungin sodium intravenous solution reconstituted	1	
MICAFUNGIN SODIUM-NACL INTRAVENOUS SOLUTION	3	
miconazole 3 vaginal suppository	1	
MICONAZOLE-ZINC OXIDE-PETROLAT EXTERNAL OINTMENT	3	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG	3	
naftifine hcl external cream	1	
naftifine hcl external gel	1	
NAFTIN EXTERNAL GEL	3	
NOXAFIL INTRAVENOUS SOLUTION	3	
NOXAFIL ORAL PACKET	3	
NOXAFIL ORAL SUSPENSION	3	
nyamyc external powder	1	
nystatin external cream	1	
nystatin external ointment	1	
nystatin external powder	1	

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Drug Name	Drug Tier	Requirements /Limits
nystatin mouth/throat suspension	1	
nystatin oral tablet	1	
nystatin-triamcinolone external cream	1	
nystatin-triamcinolone external ointment	1	
nystop external powder	1	
ORAVIG BUCCAL TABLET	3	
oxiconazole nitrate external cream	1	
OXISTAT EXTERNAL LOTION	3	
posaconazole intravenous solution	1	
posaconazole oral suspension	1	
posaconazole oral tablet delayed release	1	
REZZAYO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
SPORANOX ORAL CAPSULE	3	
SULCONAZOLE NITRATE EXTERNAL CREAM	3	
SULCONAZOLE NITRATE EXTERNAL SOLUTION	3	
tavaborole external solution	1	
terbinafine hcl oral tablet	1	
terconazole vaginal cream	1	
terconazole vaginal suppository	1	

Drug Name	Drug Tier	Requirements /Limits
TOLNAFTATE POWDER	3	
TOLSURA ORAL CAPSULE	3	
VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	3	
VFEND ORAL SUSPENSION RECONSTITUTED	3	
VIVJOA ORAL CAPSULE THERAPY PACK	3	
voriconazole intravenous solution reconstituted	1	
voriconazole oral suspension reconstituted	1	
voriconazole oral tablet	1	
VUSION EXTERNAL OINTMENT	3	
Antigout Agents		
allopurinol oral tablet	1	
allopurinol sodium intravenous solution reconstituted	1	
ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED	3	
colchicine oral capsule	1	
colchicine oral tablet	1	
colchicine-probenecid oral tablet	1	
febuxostat oral tablet	1	
GLOPERBA ORAL SOLUTION	3	
MITIGARE ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
probenecid oral tablet	1	
ULORIC ORAL TABLET	3	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
almotriptan malate oral tablet	1	
BREKIYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
CAMBIA ORAL PACKET	3	
diclofenac potassium(migraine) oral packet	1	
dihydroergotamine mesylate injection solution	1	
dihydroergotamine mesylate nasal solution	1	
eletriptan hydrobromide oral tablet	1	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	2	QL (1 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	2	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	3	
ergotamine-caffeine oral tablet	1	
FROVA ORAL TABLET	3	
frovatriptan succinate oral tablet	1	
IMITREX ORAL TABLET	3	
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	
MIGERGOT RECTAL SUPPOSITORY	3	
naratriptan hcl oral tablet	1	
NURTEC ORAL TABLET DISPERSIBLE	2	
ONZETRA XSAIL NASAL EXHALER POWDER	3	

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Drug Name	Drug Tier	Requirements /Limits
QULIPTA ORAL TABLET	2	
RELPAK 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 subcutaneous solution cartridge	1	
sumatriptan succinate subcutaneous solution	1	
sumatriptan succinate subcutaneous solution auto-injector	1	
sumatriptan-naproxen sodium oral tablet	1	
SYMBRAVO ORAL TABLET	3	
TOSYMRA NASAL SOLUTION	3	
TREXIMET ORAL TABLET	3	
TRUDHESA NASAL AEROSOL SOLUTION	3	
UBRELVEY ORAL TABLET	2	
VYEPTI INTRAVENOUS SOLUTION	3	
ZAVZPRET NASAL SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	3	
zolmitriptan nasal solution 5 mg	1	
zolmitriptan oral tablet	1	
zolmitriptan oral tablet dispersible	1	
ZOMIG NASAL SOLUTION	3	
ZOMIG ORAL TABLET	3	
Antimyasthenic Agents		
BLOXIVERZ INTRAVENOUS SOLUTION	3	
BLOXIVERZ INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
MESTINON ORAL SOLUTION	3	
MESTINON ORAL TABLET	3	
MESTINON ORAL TABLET EXTENDED RELEASE	3	
neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml	1	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 3 MG/3ML, 5 MG/5ML	3	

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Drug Name	Drug Tier	Requirements /Limits
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 2 MG/2ML, 4 MG/4ML, 5 MG/5ML	3	
neostigmine methylsulfate rfid intravenous solution	1	
neostigmine methylsulfate rfid intravenous solution prefilled syringe	1	
neostigmine methylsulfate solution prefilled syringe 3 mg/3ml intravenous	1	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 3 MG/3ML INTRAVENOUS	3	
pyridostigmine bromide er oral tablet extended release	1	
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	
REGONOL INTRAVENOUS SOLUTION	3	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	PA; SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.8 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
VYVGART INTRAVENOUS SOLUTION	3	PA; SP
Antimycobacterials		
cycloserine oral capsule	1	
dapsone oral tablet	1	
ethambutol hcl oral tablet	1	
isoniazid injection solution	1	
isoniazid oral syrup	1	
isoniazid oral tablet	1	
PRETOMANID ORAL TABLET	3	
PRIFTIN ORAL TABLET	3	
pyrazinamide oral tablet	1	
rifabutin oral capsule	1	
RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
rifampin intravenous solution reconstituted	1	
rifampin oral capsule	1	
RIFAMPIN+SYRSPEND SF ORAL SUSPENSION	3	
SIRTURO ORAL TABLET	3	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet	1	PA; SP
abirtega oral tablet	1	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	3	SP
ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
adriamycin intravenous solution reconstituted	1	SP
AFINITOR DISPERZ ORAL TABLET SOLUBLE	3	PA; SP
AFINITOR ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
AKEEGA ORAL TABLET	3	PA; SP
ALECENSA ORAL CAPSULE	2	PA; SP
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ALUNBRIG ORAL TABLET 180 MG, 90 MG	2	PA; SP; QL (1 EA per 1 day)
ALUNBRIG ORAL TABLET 30 MG	2	PA; SP; QL (4 EA per 1 day)
ALUNBRIG ORAL TABLET THERAPY PACK	2	PA; SP; QL (30 EA per 365 days)
ALYMSYS INTRAVENOUS SOLUTION	3	PA; SP
anastrozole oral tablet	1	
ANKTIVA INTRAVESICAL SOLUTION	3	PA; SP
ARIMIDEX ORAL TABLET	3	
AROMASIN ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
ARRANON INTRAVENOUS SOLUTION	3	SP
arsenic trioxide intravenous solution	1	SP
ARZERRA INTRAVENOUS CONCENTRATE	2	PA; SP
ASPARLAS INTRAVENOUS SOLUTION	3	SP
AUGTYRO ORAL CAPSULE	3	PA; SP
AVASTIN INTRAVENOUS SOLUTION	3	PA; SP
AVGEMSI INTRAVENOUS SOLUTION	3	SP
AVMAPKI FAKZYNJA CO-PACK ORAL THERAPY PACK	3	PA; SP
AXTLE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
AYVAKIT ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
azacitidine injection suspension reconstituted	1	SP
BALVERSA ORAL TABLET	3	PA; SP
BAVENCIO INTRAVENOUS SOLUTION	3	PA; SP
BEIZRAY INTRAVENOUS SOLUTION	3	SP

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Drug Name	Drug Tier	Requirements /Limits
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
BELRAPZO INTRAVENOUS SOLUTION	3	PA; SP
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	3	PA; SP
bendamustine hcl intravenous solution reconstituted	1	PA; SP
BENDEKA INTRAVENOUS SOLUTION	3	PA; SP
BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
bexarotene external gel	1	PA; SP
bexarotene oral capsule	1	PA; SP
bicalutamide oral tablet	1	
BIZENGRI (750 MG DOSE) INTRAVENOUS SOLUTION THERAPY PACK	3	PA; SP
bleomycin sulfate injection solution reconstituted	1	SP
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
bortezomib injection solution reconstituted	1	PA; SP

Drug Name	Drug Tier	Requirements /Limits
BORUZU INJECTION SOLUTION	3	PA; SP
BOSULIF ORAL CAPSULE	3	PA; SP
BOSULIF ORAL TABLET	3	PA; SP
BRAFTOVI ORAL CAPSULE	3	PA; SP
BRUKINSA ORAL CAPSULE	3	PA; SP
BRUKINSA ORAL TABLET	3	PA; SP
busulfan intravenous solution	1	SP
BUSULFEX INTRAVENOUS SOLUTION	3	SP
CABOMETYX ORAL TABLET 20 MG	2	PA; SP; QL (1 EA per 1 day)
CABOMETYX ORAL TABLET 40 MG, 60 MG	2	PA; SP
CALQUENCE ORAL TABLET	3	PA; SP
CAMCEVI SUBCUTANEOUS PREFILLED SYRINGE	3	PA; SP; QL (0.006 EA per 1 day)
CAMPTOSAR INTRAVENOUS SOLUTION	3	SP
capecitabine oral tablet	1	SP
CAPRELSA ORAL TABLET 100 MG	2	PA; SP; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	2	PA; SP
carboplatin intravenous solution	1	SP
carmustine intravenous solution reconstituted	1	SP
CASODEX ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml	1	SP
CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
cisplatin solution 50 mg/50ml intravenous	1	SP
CISPLATIN SOLUTION 50 MG/50ML INTRAVENOUS	3	SP
cladribine intravenous solution	1	SP
clofarabine intravenous solution	1	SP
COLUMVI INTRAVENOUS SOLUTION	3	PA; SP
COMETRIQ ORAL KIT	3	PA; SP
COPIKTRA ORAL CAPSULE	3	PA; SP
COSELA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
COTELLIC ORAL TABLET	3	PA; SP
cyclophosphamide injection solution reconstituted	1	SP
CYCLOPHOSPHAMID E INTRAVENOUS SOLUTION	3	SP
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMID E ORAL TABLET	2	
CYRAMZA INTRAVENOUS SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
cytarabine (pf) injection solution	1	SP
cytarabine injection solution	1	SP
dacarbazine intravenous solution reconstituted	1	SP
dactinomycin intravenous solution reconstituted	1	SP
DANYELZA INTRAVENOUS SOLUTION	3	PA; SP
DANZITEN ORAL TABLET	3	PA; SP
DARZALEX FASPRO SUBCUTANEOUS SOLUTION	3	PA; SP
DARZALEX INTRAVENOUS SOLUTION	3	PA; SP
dasatinib oral tablet	1	PA; SP
DATROWAY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
daunorubicin hcl intravenous solution	1	SP
DAURISMO ORAL TABLET	3	PA; SP
decitabine intravenous solution reconstituted	1	SP
dexrazoxane hcl intravenous solution reconstituted	1	SP
dexrazoxane intravenous solution reconstituted	1	SP
docetaxel intravenous concentrate	1	SP

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Drug Name	Drug Tier	Requirements /Limits
docetaxel intravenous solution	1	SP
DOCIVYX INTRAVENOUS SOLUTION	3	SP
DOXIL INTRAVENOUS SUSPENSION	3	SP
doxorubicin hcl intravenous solution	1	SP
doxorubicin hcl intravenous solution reconstituted	1	SP
doxorubicin hcl liposomal intravenous suspension	1	SP
DROXIA ORAL CAPSULE	3	
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ELLECE INTRAVENOUS SOLUTION	3	SP
ELREXFIO SUBCUTANEOUS SOLUTION	3	PA; SP
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
EMRELIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ENSACOVE ORAL CAPSULE	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
EPKINLY SUBCUTANEOUS SOLUTION	3	PA; SP
ERBITUX INTRAVENOUS SOLUTION	2	PA; SP
eribulin mesylate intravenous solution	1	PA; SP
ERIVEDGE ORAL CAPSULE	3	PA; SP
ERLEADA ORAL TABLET	3	PA; SP
erlotinib hcl oral tablet 100 mg, 150 mg	1	PA; SP
erlotinib hcl oral tablet 25 mg	1	PA; SP; QL (3 EA per 1 day)
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
etoposide intravenous solution	1	SP
etoposide oral capsule	1	SP
EULEXIN ORAL CAPSULE	3	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; SP; QL (1 EA per 1 day)
everolimus oral tablet soluble	1	PA; SP
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
exemestane oral tablet	1	
FARESTON ORAL TABLET	3	
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	SP

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Drug Name	Drug Tier	Requirements /Limits
FEMARA ORAL TABLET	3	
floxuridine injection solution reconstituted	1	SP
fludarabine phosphate intravenous solution	1	SP
fludarabine phosphate intravenous solution reconstituted	1	SP
fluorouracil intravenous solution	1	SP
FOLOTYN INTRAVENOUS SOLUTION	3	PA; SP
FOTIVDA ORAL CAPSULE	3	PA; SP
FRINDOVYX INTRAVENOUS SOLUTION	3	SP
FRUZAQLA ORAL CAPSULE	3	PA; SP
fulvestrant intramuscular solution prefilled syringe	1	SP
FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA; SP
GAVRETO ORAL CAPSULE	3	PA; SP
GAZYVA INTRAVENOUS SOLUTION	3	PA; SP
gefitinib oral tablet	1	PA; SP
gemcitabine hcl intravenous solution	1	SP
gemcitabine hcl intravenous solution reconstituted	1	SP
GILOTRIF ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
GLEEVEC ORAL TABLET	3	PA; SP
GLEOSTINE ORAL CAPSULE	3	SP
GOMEKLI ORAL CAPSULE	3	PA; SP
GOMEKLI ORAL TABLET SOLUBLE	3	PA; SP
GRAFAPEX INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
HALAVEN INTRAVENOUS SOLUTION	3	PA; SP
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	3	PA; SP
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
HERCESSI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
HERNEXEOS ORAL TABLET	3	PA; SP
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
HYCAMTIN ORAL CAPSULE	3	SP
HYDREA ORAL CAPSULE	3	

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

Drug Name	Drug Tier	Requirements /Limits
IMDELLTRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
IMFINZI INTRAVENOUS SOLUTION	3	PA; SP
IMJUDO INTRAVENOUS SOLUTION	3	PA; SP
IMKELDI ORAL SOLUTION	3	PA; SP
INLEXZO INTRAVESICAL DEVICE 225 MG	3	SP
INLURIYO ORAL TABLET	3	SP
INLYTA ORAL TABLET	3	PA; SP
INQOVI ORAL TABLET	3	PA; SP
INREBIC ORAL CAPSULE	3	PA; SP
IRESSA ORAL TABLET	3	PA; SP
irinotecan hcl intravenous solution	1	SP
ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ITOVEBI ORAL TABLET 3 MG	3	PA; SP; QL (2 EA per 1 day)
ITOVEBI ORAL TABLET 9 MG	3	PA; SP
IVRA INTRAVENOUS SOLUTION	3	SP
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
JAKAFI ORAL TABLET 10 MG, 5 MG	2	PA; SP; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	2	PA; SP
JAYPIRCA ORAL TABLET 100 MG	3	PA; SP
JAYPIRCA ORAL TABLET 50 MG	3	PA; SP; QL (1 EA per 1 day)
JEMPERLI INTRAVENOUS SOLUTION	3	PA; SP
JEVTANA INTRAVENOUS SOLUTION	2	PA; SP
JOBEVNE INTRAVENOUS SOLUTION	3	PA; SP
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
KEYTRUDA INTRAVENOUS SOLUTION	3	PA; SP
KEYTRUDA QLEX SUBCUTANEOUS SOLUTION	3	PA; SP
KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
KIMMTRAK INTRAVENOUS SOLUTION	3	PA; SP
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	3	PA; SP
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	3	PA; SP
KOSELUGO ORAL CAPSULE	3	PA; SP
KOSELUGO ORAL CAPSULE SPRINKLE	3	PA; SP
KRAZATI ORAL TABLET	3	PA; SP
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
KYXATA INTRAVENOUS SOLUTION	3	SP
lapatinib ditosylate oral tablet	1	PA; SP
LAZCLUZE ORAL TABLET 240 MG	3	PA; SP
LAZCLUZE ORAL TABLET 80 MG	3	PA; SP; QL (2 EA per 1 day)
lenalidomide oral capsule	1	PA; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; SP
letrozole oral tablet	1	
leucovorin calcium injection solution	1	
leucovorin calcium injection solution reconstituted	1	
leucovorin calcium oral tablet	1	
LEUKERAN ORAL TABLET	2	SP

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Drug Name	Drug Tier	Requirements /Limits
levoleucovorin calcium intravenous solution reconstituted	1	SP
levoleucovorin calcium pf intravenous solution	1	SP
LIBTAYO INTRAVENOUS SOLUTION	3	PA; SP
LONSURF ORAL TABLET	3	PA; SP
LOQTORZI INTRAVENOUS SOLUTION	3	PA; SP
LORBRENA ORAL TABLET	3	PA; SP
LUMAKRAS ORAL TABLET	3	PA; SP
LUNSUMIO INTRAVENOUS SOLUTION	3	PA; SP
LYNOZYFIC INTRAVENOUS SOLUTION	3	PA; SP
LYNPARZA ORAL TABLET	2	PA; SP
LYSODREN ORAL TABLET	2	
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; SP
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; SP
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; SP
MARGENZA INTRAVENOUS SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
MATULANE ORAL CAPSULE	2	SP
MEKINIST ORAL SOLUTION RECONSTITUTED	3	PA; SP
MEKINIST ORAL TABLET	3	PA; SP
MEKTOVI ORAL TABLET	3	PA; SP
melphalan hcl intravenous solution reconstituted	1	SP
mercaptopurine oral suspension	1	SP
mercaptopurine oral tablet	1	
mesna intravenous solution	1	SP
mesna oral tablet	1	SP
MESNEX INTRAVENOUS SOLUTION	3	SP
MESNEX ORAL TABLET	3	SP
mitomycin intravenous solution reconstituted	1	PA; SP
mitoxantrone hcl intravenous concentrate	1	PA; SP
MODEYSO ORAL CAPSULE	3	PA; SP
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
MUTAMYCIN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
MVASI INTRAVENOUS SOLUTION	2	PA; SP
MYLERAN ORAL TABLET	2	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
nelarabine intravenous solution	1	SP
NERLYNX ORAL TABLET	3	PA; SP; QL (6 EA per 1 day)
NEXAVAR ORAL TABLET	3	PA; SP
NIKTIMVO INTRAVENOUS SOLUTION	3	PA; SP
NILOTINIB D-TARTRATE ORAL CAPSULE	3	SP
nilotinib hcl oral capsule	1	PA; SP
nilutamide oral tablet	1	SP
NINLARO ORAL CAPSULE	3	PA; SP
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
NUBEQA ORAL TABLET	3	PA; SP
ODOMZO ORAL CAPSULE	3	PA; SP
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
OGSIVEO ORAL TABLET	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
OJEMDA ORAL SUSPENSION RECONSTITUTED	3	PA; SP
OJEMDA ORAL TABLET	3	PA; SP
OJJAARA ORAL TABLET 100 MG	3	PA; SP; QL (1 EA per 1 day)
OJJAARA ORAL TABLET 150 MG, 200 MG	3	PA; SP
ONCASPAR INJECTION SOLUTION	2	SP
ONIVYDE INTRAVENOUS SUSPENSION	3	SP
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ONUREG ORAL TABLET	3	PA; SP
OPDIVO INTRAVENOUS SOLUTION	3	PA; SP
OPDIVO QVANTIG SUBCUTANEOUS SOLUTION	3	PA; SP
OPDUALAG INTRAVENOUS SOLUTION	3	PA; SP
ORGOVYX ORAL TABLET	3	PA; SP
ORSERDU ORAL TABLET	3	PA; SP
oxaliplatin intravenous solution	1	SP
oxaliplatin intravenous solution reconstituted	1	SP
paclitaxel intravenous concentrate	1	SP

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Drug Name	Drug Tier	Requirements /Limits
paclitaxel protein-bound part intravenous suspension reconstituted	1	SP
PADCEV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
PANRETIN EXTERNAL GEL	3	
pazopanib hcl oral tablet 200 mg	1	PA; SP
PEMAZYRE ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
PEMETREXED DIPOTASSIUM INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	3	SP
pemetrexed disodium intravenous solution reconstituted	1	SP
PEMETREXED INTRAVENOUS SOLUTION	3	SP
PEMFEXY INTRAVENOUS SOLUTION	3	SP
PEMRYDI RTU INTRAVENOUS SOLUTION	3	SP
PERJETA INTRAVENOUS SOLUTION	2	PA; SP
PHESGO SUBCUTANEOUS SOLUTION	2	PA; SP

Drug Name	Drug Tier	Requirements /Limits
PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
PHYRAGO ORAL TABLET	3	PA; SP
PIQRAY ORAL TABLET THERAPY PACK	3	PA; SP
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
POMALYST ORAL CAPSULE 1 MG, 2 MG	3	PA; SP; QL (1 EA per 1 day)
POMALYST ORAL CAPSULE 3 MG, 4 MG	3	PA; SP
PORTRAZZA INTRAVENOUS SOLUTION	3	PA; SP
POTELIGEO INTRAVENOUS SOLUTION	3	PA; SP
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
PURIXAN ORAL SUSPENSION	3	SP
QINLOCK ORAL TABLET	3	PA; SP
RETEVMO ORAL TABLET 120 MG, 160 MG	3	PA; SP
RETEVMO ORAL TABLET 40 MG	3	PA; SP; QL (3 EA per 1 day)
RETEVMO ORAL TABLET 80 MG	3	PA; SP; QL (2 EA per 1 day)
REVLIMID ORAL CAPSULE	2	PA; SP
REVUFORJ ORAL TABLET	3	PA; SP

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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
REZLIDHIA ORAL CAPSULE	3	PA; SP
RIABNI INTRAVENOUS SOLUTION	3	PA; SP
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	3	PA; SP
RITUXAN INTRAVENOUS SOLUTION	3	PA; SP
romidepsin intravenous solution reconstituted	1	PA; SP
ROMVIMZA ORAL CAPSULE	3	PA; SP
ROZLYTREK ORAL CAPSULE	3	PA; SP
ROZLYTREK ORAL PACKET	3	PA; SP
RUBRACA ORAL TABLET 200 MG	3	PA; SP; QL (4 EA per 1 day)
RUBRACA ORAL TABLET 250 MG, 300 MG	3	PA; SP
RUXIENCE INTRAVENOUS SOLUTION	2	PA; SP
RYBREVENT INTRAVENOUS SOLUTION	3	PA; SP
RYDAPT ORAL CAPSULE	3	PA; SP
RYLAZE INTRAMUSCULAR SOLUTION	3	PA; SP
RYTELO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
SARCLISA INTRAVENOUS SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
SCEMBLIX ORAL TABLET 100 MG	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG	3	PA; SP; QL (2 EA per 1 day)
SCEMBLIX ORAL TABLET 40 MG	3	PA; SP; QL (8 EA per 1 day)
SIKLOS ORAL TABLET	3	
SOLTAMOX ORAL SOLUTION	3	
sorafenib tosylate oral tablet	1	PA; SP
SPRYCEL ORAL TABLET	3	PA; SP
STIVARGA ORAL TABLET	2	PA; SP
sunitinib malate oral capsule	1	PA; SP
SUTENT ORAL CAPSULE	3	PA; SP
SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
TABLOID ORAL TABLET	2	SP
TABRECTA ORAL TABLET	3	PA; SP
TAFINLAR ORAL CAPSULE	3	PA; SP
TAFINLAR ORAL TABLET SOLUBLE	3	PA; SP
TAGRISSO ORAL TABLET 40 MG	3	PA; SP; QL (1 EA per 1 day)
TAGRISSO ORAL TABLET 80 MG	3	PA; SP
TALVEY SUBCUTANEOUS SOLUTION	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.75 MG, 1 MG	3	PA; SP
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG	3	PA; SP; QL (1 EA per 1 day)
tamoxifen citrate oral tablet	1	
TARCEVA ORAL TABLET	3	PA; SP
TARGRETIN EXTERNAL GEL	3	PA; SP
TARGRETIN ORAL CAPSULE	3	PA; SP
TASIGNA ORAL CAPSULE	3	PA; SP
TAZVERIK ORAL TABLET	3	PA; SP
TECENTRIQ HYBREZA SUBCUTANEOUS SOLUTION	3	PA; SP
TECENTRIQ INTRAVENOUS SOLUTION	3	PA; SP
TECVAYLI SUBCUTANEOUS SOLUTION	3	PA; SP
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
temozolomide oral capsule	1	PA; SP
TEPADINA INJECTION SOLUTION RECONSTITUTED	3	SP
TEPADINA INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

Drug Name	Drug Tier	Requirements /Limits
TEPMETKO ORAL TABLET	3	PA; SP
TEPYLUTE INTRAVENOUS SOLUTION	3	SP
TEVIMBRA INTRAVENOUS SOLUTION	3	PA; SP
THALOMID ORAL CAPSULE	2	PA; SP
thiotepa injection solution reconstituted	1	SP
TIBSOVO ORAL TABLET	3	PA; SP
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	2	SP
TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
topotecan hcl intravenous solution	1	SP
topotecan hcl intravenous solution reconstituted	1	SP
toremifene citrate oral tablet	1	
torpenz oral tablet	1	PA; SP; QL (1 EA per 1 day)
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
tretinoin oral capsule	1	SP

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Drug Name	Drug Tier	Requirements /Limits
TRISENOX INTRAVENOUS SOLUTION	3	SP
TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
TRUQAP ORAL TABLET	3	PA; SP
TRUQAP ORAL TABLET THERAPY PACK	3	PA; SP
TRUXIMA INTRAVENOUS SOLUTION	3	PA; SP
TUKYSA ORAL TABLET	3	PA; SP
TURALIO ORAL CAPSULE	3	PA; SP
TYKERB ORAL TABLET	3	PA; SP
UNITUXIN INTRAVENOUS SOLUTION	3	PA; SP
UNLOXCYT INTRAVENOUS SOLUTION	3	PA; SP
UVADEX EXTRACORPOREAL SOLUTION	3	
VALCHLOR EXTERNAL GEL	3	PA; SP
valrubicin intravesical solution	1	SP
VALSTAR INTRAVESICAL SOLUTION	3	SP
VANFLYTA ORAL TABLET	3	PA; SP
VECTIBIX INTRAVENOUS SOLUTION	3	SP

Drug Name	Drug Tier	Requirements /Limits
VEGZELMA INTRAVENOUS SOLUTION	3	PA; SP
VELCADE INJECTION SOLUTION RECONSTITUTED	3	PA; SP
VENCLEXTA ORAL TABLET	3	PA; SP
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	3	PA; SP
VERZENIO ORAL TABLET	3	PA; SP
VIDAZA INJECTION SUSPENSION RECONSTITUTED	3	SP
VIJOICE ORAL PACKET	3	PA; SP; QL (1 EA per 1 day)
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	3	PA; SP; QL (1 EA per 1 day)
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	3	PA; SP; QL (2 EA per 1 day)
vinblastine sulfate intravenous solution	1	SP
vincristine sulfate intravenous solution	1	SP
vinorelbine tartrate intravenous solution	1	SP
VITRAKVI ORAL CAPSULE	3	PA; SP
VITRAKVI ORAL SOLUTION	3	PA; SP
VIVIMUSTA INTRAVENOUS SOLUTION	3	PA; SP
VIZIMPRO ORAL TABLET 15 MG	3	PA; SP; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
VIZIMPRO ORAL TABLET 30 MG, 45 MG	3	PA; SP
VONJO ORAL CAPSULE	3	PA; SP
VORANIGO ORAL TABLET 10 MG	3	PA; SP; QL (2 EA per 1 day)
VORANIGO ORAL TABLET 40 MG	3	PA; SP
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED	3	
VOTRIENT ORAL TABLET	3	PA; SP
VYLOY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA; SP
WELIREG ORAL TABLET	3	PA; SP
XALKORI ORAL CAPSULE	3	PA; SP
XALKORI ORAL CAPSULE SPRINKLE	3	PA; SP
XOFIGO INTRAVENOUS SOLUTION	2	
XOSPATA ORAL TABLET	3	PA; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; SP
XROMI ORAL SOLUTION	3	
XTANDI ORAL CAPSULE	3	PA; SP
XTANDI ORAL TABLET	3	PA; SP
YERVOY INTRAVENOUS SOLUTION	2	PA; SP
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
YONSA ORAL TABLET	3	PA; SP
ZALTRAP INTRAVENOUS SOLUTION	2	PA; SP
ZEJULA ORAL TABLET 100 MG	2	PA; SP; QL (1 EA per 1 day)
ZEJULA ORAL TABLET 200 MG, 300 MG	2	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
ZELBORAF ORAL TABLET	3	PA; SP
ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ZEVALIN Y-90 INTRAVENOUS KIT	3	SP
ZIIHERA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ZIRABEV INTRAVENOUS SOLUTION	2	PA; SP
ZOLINZA ORAL CAPSULE	2	PA; SP
ZUSDURI INTRAVESICAL SOLUTION RECONSTITUTED	3	PA; SP
ZYDELIG ORAL TABLET	3	PA; SP
ZYKADIA ORAL TABLET	3	PA; SP
ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ZYNYZ INTRAVENOUS SOLUTION	3	PA; SP
ZYTIGA ORAL TABLET	3	PA; SP
Antiparasitics		
albendazole oral tablet	1	
ARAKODA ORAL TABLET	3	
ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
atovaquone oral suspension	1	
atovaquone-proguanil hcl oral tablet	1	
BENZNIDAZOLE ORAL TABLET	3	
BILTRICIDE ORAL TABLET	2	
chloroquine phosphate oral tablet	1	
COARTEM ORAL TABLET	3	
CROTAN EXTERNAL LOTION	3	
DARAPRIM ORAL TABLET	3	PA; SP
EGATEN ORAL TABLET	3	
ELIMITE EXTERNAL CREAM	3	
EMVERM ORAL TABLET CHEWABLE	2	
hydroxychloroquine sulfate oral tablet	1	
IMPAVIDO ORAL CAPSULE	3	
ivermectin oral tablet	1	
KRINTAFEL ORAL TABLET	3	
LAMPIT ORAL TABLET	3	
MALARONE ORAL TABLET	3	
malathion external lotion	1	
mefloquine hcl oral tablet	1	
MEPRON ORAL SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
NATROBA EXTERNAL SUSPENSION	3	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	3	
nitazoxanide oral tablet	1	
OVIDE EXTERNAL LOTION	3	
PENTAM INJECTION SOLUTION RECONSTITUTED	3	
pentamidine isethionate inhalation solution reconstituted	1	
pentamidine isethionate injection solution reconstituted	1	
permethrin external cream	1	
PLAQUENIL ORAL TABLET	3	
praziquantel oral tablet	1	
primaquine phosphate oral tablet	1	
PRURADIK EXTERNAL LOTION	3	
pyrimethamine oral tablet	1	PA; SP
PYRIMETHAMINE-LEUCOVORIN ORAL CAPSULE	3	
quinine sulfate oral capsule	1	
SOVUNA ORAL TABLET	3	
spinosad external suspension	1	
STROMECTOL ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
sulfurated lime external solution	1	
Antiparkinson Agents		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP; QL (3 ML per 1 day)
apomorphine hcl subcutaneous solution cartridge	1	PA; SP; QL (3 ML per 1 day)
AZILECT ORAL TABLET	3	
benztropine mesylate injection solution	1	
benztropine mesylate oral tablet	1	
bromocriptine mesylate oral capsule	1	
bromocriptine mesylate oral tablet	1	
carbidopa oral tablet	1	
CARBIDOPA-LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE	3	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
carbidopa-levodopa oral tablet dispersible	1	
carbidopa-levodopa-entacapone oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
CREXONT ORAL CAPSULE EXTENDED RELEASE	3	
DHIVY ORAL TABLET	3	
DUOPA ENTERAL SUSPENSION	3	
entacapone oral tablet	1	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
INBRIJA INHALATION CAPSULE	3	PA; SP
LODOSYN ORAL TABLET	3	
NEUPRO TRANSDERMAL PATCH 24 HOUR	3	
NOURIANZ ORAL TABLET	3	
ONAPGO SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP; QL (3 ML per 1 day)
ONGENTYS ORAL CAPSULE	3	
PARLODEL ORAL CAPSULE	3	
PARLODEL ORAL TABLET	3	
pramipexole dihydrochloride er oral tablet extended release 24 hour	1	
pramipexole dihydrochloride oral tablet	1	
rasagiline mesylate oral tablet	1	
ropinirole hcl er oral tablet extended release 24 hour	1	

Drug Name	Drug Tier	Requirements /Limits
ropinirole hcl oral tablet	1	
RYTARY ORAL CAPSULE EXTENDED RELEASE	3	
selegiline hcl oral capsule	1	
selegiline hcl oral tablet	1	
SINEMET ORAL TABLET	3	
TASMAR ORAL TABLET	3	
tolcapone oral tablet	1	
trihexyphenidyl hcl oral solution	1	
trihexyphenidyl hcl oral tablet	1	
VYALEV SUBCUTANEOUS SOLUTION	3	PA; SP
XADAGO ORAL TABLET	3	
ZELAPAR ORAL TABLET DISPERSIBLE	3	
Antiplatelets		
AGGRASTAT INTRAVENOUS CONCENTRATE	3	
AGGRASTAT INTRAVENOUS SOLUTION	3	
aspirin-dipyridamole er oral capsule extended release 12 hour	1	
BRILINTA ORAL TABLET	3	
CABLIVI INJECTION KIT	3	PA; SP; QL (1 EA per 1 day)
cilostazol oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
clopidogrel bisulfate oral tablet	1	
dipyridamole oral tablet	1	
EFFIENT ORAL TABLET	3	
eptifibatide intravenous solution	1	
KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	3	
PLAVIX ORAL TABLET	3	
prasugrel hcl oral tablet	1	
TAVALISSE ORAL TABLET	3	PA; SP
ticagrelor oral tablet	1	
tirofiban hcl in nacl intravenous solution	1	
YOSPRALA ORAL TABLET DELAYED RELEASE	3	
ZONTIVITY ORAL TABLET	3	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE	3	
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	3	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK	3	

Drug Name	Drug Tier	Requirements /Limits
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	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	3	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	3	
asenapine maleate sublingual tablet sublingual	1	
CAPLYTA ORAL CAPSULE	3	
chlorpromazine hcl injection solution	1	
chlorpromazine hcl oral concentrate	1	
chlorpromazine hcl oral tablet	1	
clozapine oral tablet	1	
clozapine oral tablet dispersible	1	
CLOZARIL ORAL TABLET	3	
COBENFY ORAL CAPSULE	3	
COBENFY STARTER PACK ORAL CAPSULE THERAPY PACK	3	

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Drug Name	Drug Tier	Requirements /Limits
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
FANAPT ORAL TABLET	3	
FANAPT TITRATION PACK A ORAL TABLET	3	
FANAPT TITRATION PACK B ORAL TABLET	3	
FANAPT TITRATION PACK C ORAL TABLET	3	
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	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
GEODON ORAL CAPSULE	3	
haloperidol decanoate intramuscular solution	1	
haloperidol lactate injection solution	1	
haloperidol lactate oral concentrate 2 mg/ml	1	
haloperidol oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
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	
loxapine succinate oral capsule	1	
lurasidone hcl oral tablet	1	
LYBALVI ORAL TABLET	3	
molindone hcl oral tablet	1	
NUPLAZID ORAL CAPSULE	3	
NUPLAZID ORAL TABLET	3	
olanzapine intramuscular solution reconstituted	1	
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	1	
OPIPZA ORAL FILM	3	
paliperidone er oral tablet extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	3	
pimozide oral tablet	1	
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 microspheres er intramuscular suspension reconstituted er	1	
risperidone oral solution	1	
risperidone oral tablet	1	
risperidone oral tablet dispersible	1	
RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	3	
SECUADO TRANSDERMAL PATCH 24 HOUR	3	
SEROQUEL ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
thioridazine hcl oral tablet	1	
thiothixene oral capsule	1	
trifluoperazine hcl oral tablet	1	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	3	
VERSACLOZ ORAL SUSPENSION	3	
VRAYLAR ORAL CAPSULE	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	
Antivirals		
abacavir sulfate oral solution	1	
abacavir sulfate oral tablet	1	
abacavir sulfate-lamivudine oral tablet	1	
acyclovir external cream	1	

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Drug Name	Drug Tier	Requirements /Limits
acyclovir external ointment	1	
acyclovir oral capsule	1	
acyclovir oral suspension	1	
acyclovir oral tablet	1	
acyclovir sodium intravenous solution	1	
ACYCLOVIR SODIUM-NACL INTRAVENOUS SOLUTION	3	
adefovir dipivoxil oral tablet	1	
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	2	PV
APTIVUS ORAL CAPSULE	2	
atazanavir sulfate oral capsule	1	
BARACLUDE ORAL SOLUTION	3	
BARACLUDE ORAL TABLET	3	
BIKTARVY ORAL TABLET	3	
CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	2	
cidofovir intravenous solution	1	
CIMDUO ORAL TABLET	2	
COMPLERA ORAL TABLET	3	
darunavir oral tablet	1	
DELSTRIGO ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
DENAVIR EXTERNAL CREAM	3	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	PV
DOVATO ORAL TABLET	2	
EDURANT ORAL TABLET	2	
EDURANT PED ORAL TABLET SOLUBLE	2	
efavirenz oral tablet	1	
efavirenz-emtricitab-tenofo df oral tablet	1	
efavirenz-lamivudine-tenofovir oral tablet	1	
emtricitabine oral capsule	1	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	
emtricitabine-tenofovir df oral tablet 200-300 mg	1	PV
emtricitab-rilpivir-tenofov df oral tablet	1	
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
entecavir oral tablet	1	
EPCLUSA ORAL PACKET 150-37.5 MG	2	PA; SP; QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 200-50 MG	2	PA; SP; QL (2 EA per 1 day)
EPCLUSA ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)

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

Drug Name	Drug Tier	Requirements /Limits
ISENTRESS HD ORAL TABLET	2	
ISENTRESS ORAL PACKET	2	
ISENTRESS ORAL TABLET	2	
ISENTRESS ORAL TABLET CHEWABLE	2	
JULUCA ORAL TABLET	2	
KALETRA ORAL SOLUTION	3	
KALETRA ORAL TABLET	3	
LAGEVRIO ORAL CAPSULE	3	
lamivudine oral solution	1	
lamivudine oral tablet	1	
lamivudine-zidovudine oral tablet	1	
LEDIPASVIR-SOFOSBUVIR ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
LIVTENCITY ORAL TABLET	3	PA; SP
lopinavir-ritonavir oral tablet	1	
maraviroc oral tablet	1	
MAVYRET ORAL PACKET	2	PA; SP; QL (5 EA per 1 day)
MAVYRET ORAL TABLET	2	PA; SP; QL (3 EA per 1 day)
nevirapine er oral tablet extended release 24 hour	1	
nevirapine oral suspension	1	
nevirapine oral tablet	1	
NORVIR ORAL PACKET	2	

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Drug Name	Drug Tier	Requirements /Limits
NORVIR ORAL TABLET	3	
ODEFSEY ORAL TABLET	3	
oseltamivir phosphate oral capsule	1	
oseltamivir phosphate oral suspension reconstituted	1	
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	2	
PAXLOVID (300/100 & 150/100) ORAL TABLET THERAPY PACK	2	
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	2	
PEGASYS SUBCUTANEOUS SOLUTION	2	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP
penciclovir external cream	1	
PIFELTRO ORAL TABLET	3	
PREVYMIS INTRAVENOUS SOLUTION	3	SP
PREVYMIS ORAL PACKET	3	SP
PREVYMIS ORAL TABLET	3	SP
PREZCOBIX ORAL TABLET	2	
PREZISTA ORAL SUSPENSION	2	

Drug Name	Drug Tier	Requirements /Limits
PREZISTA ORAL TABLET 150 MG, 75 MG	2	
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RAPIVAB INTRAVENOUS SOLUTION	3	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
RETROVIR INTRAVENOUS SOLUTION	2	
RETROVIR ORAL CAPSULE	3	
RETROVIR ORAL SYRUP	3	
REYATAZ ORAL CAPSULE	3	
REYATAZ ORAL PACKET	2	
ribavirin inhalation solution reconstituted	1	
ribavirin oral capsule	1	SP
ribavirin oral tablet	1	SP
rimantadine hcl oral tablet	1	
ritonavir oral tablet	1	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	2	
SELZENTRY ORAL SOLUTION	2	
SELZENTRY ORAL TABLET	3	
SITAVIG BUCCAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
SOFOSBUVIR-VELPATASVIR ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
SOVALDI ORAL PACKET 150 MG	3	PA; SP; QL (1 EA per 1 day)
SOVALDI ORAL PACKET 200 MG	3	PA; SP; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 200 MG	3	PA; SP; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 400 MG	3	PA; SP; QL (1 EA per 1 day)
STRIBILD ORAL TABLET	3	
SUNLENCA ORAL TABLET	3	
SUNLENCA ORAL TABLET THERAPY PACK	3	
SUNLENCA SUBCUTANEOUS SOLUTION	3	
SYMFI ORAL TABLET	2	
SYMTUZA ORAL TABLET	3	
TAMIFLU ORAL CAPSULE	3	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	3	
TEMBEXA ORAL SUSPENSION	3	
TEMBEXA ORAL TABLET	3	
tenofovir disoproxil fumarate oral tablet	1	PV
TIVICAY ORAL TABLET	3	
TIVICAY PD ORAL TABLET SOLUBLE	3	

Drug Name	Drug Tier	Requirements /Limits
TPOXX INTRAVENOUS SOLUTION	3	
TPOXX ORAL CAPSULE	3	
TRIUMEQ ORAL TABLET	2	
TRIUMEQ PD ORAL TABLET SOLUBLE	3	
TROGARZO INTRAVENOUS SOLUTION	3	
TRUVADA ORAL TABLET	3	
TYBOST ORAL TABLET	2	
valacyclovir hcl oral tablet	1	
VALCYTE ORAL SOLUTION RECONSTITUTED	3	
VALCYTE ORAL TABLET	3	
valganciclovir hcl oral solution reconstituted	1	
valganciclovir hcl oral tablet	1	
VALTREX ORAL TABLET	3	
VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED	3	
VEMLIDY ORAL TABLET	3	
VIRACEPT ORAL TABLET	2	
VIREAD ORAL POWDER	2	

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Drug Name	Drug Tier	Requirements /Limits
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOCABRIA ORAL TABLET	3	
VOSEVI ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)
XERESE EXTERNAL CREAM	3	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	3	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	3	
YEZTUGO ORAL TABLET	3	
YEZTUGO SUBCUTANEOUS SOLUTION	3	
ZEPATIER ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
ZIAGEN ORAL SOLUTION	3	
zidovudine oral capsule	1	
zidovudine oral syrup	1	
zidovudine oral tablet	1	
ZOVIRAX EXTERNAL CREAM	3	
ZOVIRAX EXTERNAL OINTMENT	3	
Anxiolytics - Drugs for Anxiety		
alprazolam er oral tablet extended release 24 hour	1	
alprazolam intensol oral concentrate	1	

Drug Name	Drug Tier	Requirements /Limits
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	
BUCAPSOL ORAL CAPSULE	3	
buspirone hcl oral tablet	1	
chlordiazepoxide hcl oral capsule	1	
clonazepam oral tablet	1	
clonazepam oral tablet dispersible	1	
clorazepate dipotassium oral tablet	1	
diazepam injection solution 10 mg/2ml	1	
diazepam intensol oral concentrate	1	
diazepam oral concentrate	1	
diazepam oral solution	1	
diazepam oral tablet	1	
diazepam solution 5 mg/ml injection	1	
DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	
estazolam oral tablet	1	
HALCION ORAL TABLET	3	
hydroxyzine hcl intramuscular solution	1	
hydroxyzine hcl oral syrup	1	

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Drug Name	Drug Tier	Requirements /Limits
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral capsule	1	
KLONOPIN ORAL TABLET	3	
lorazepam injection solution 4 mg/ml	1	
lorazepam intensol oral concentrate	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
lorazepam solution 2 mg/ml injection	1	
LORAZEPAM SOLUTION 2 MG/ML INJECTION	3	
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE	3	
meprobamate oral tablet	1	
oxazepam oral capsule	1	
quazepam oral tablet	1	
triazolam oral tablet	1	
VALIUM ORAL TABLET	3	
XANAX ORAL TABLET	3	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	

Drug Name	Drug Tier	Requirements /Limits
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	
Blood Products and Modifiers - Drugs for Blood Disorders		
ADAKVEO INTRAVENOUS SOLUTION	3	PA; SP
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
AFSTYLA INTRAVENOUS KIT	3	SP
AGRYLIN ORAL CAPSULE	3	
ALHEMO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	2	SP

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Drug Name	Drug Tier	Requirements /Limits
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ALTUVIIIIO INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
ALVAIZ ORAL TABLET	3	PA; SP
aminocaproic acid intravenous solution	1	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	
anagrelide hcl oral capsule	1	
APHEXDA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	SP
ARANESP (ALBUMIN FREE) INJECTION SOLUTION	2	PA; SP
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	2	PA; SP
ASTRINGYN EXTERNAL SOLUTION	3	
BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED	3	
BENEFIX INTRAVENOUS KIT	2	SP
BKEMV INTRAVENOUS SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
CORIFACT INTRAVENOUS KIT	2	SP
CYKLOKAPRON INTRAVENOUS SOLUTION	3	
DOPTELET ORAL TABLET	3	PA; SP
DOPTELET SPRINKLE ORAL CAPSULE SPRINKLE	3	PA; SP; QL (2 EA per 1 day)
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
eltrombopag olamine oral packet	1	PA; SP
eltrombopag olamine oral tablet	1	PA; SP
EMPAVELI SUBCUTANEOUS SOLUTION	3	PA; SP
ENJAYMO INTRAVENOUS SOLUTION	3	PA; SP
EPOGEN INJECTION SOLUTION	3	PA; SP
EPYSQLI INTRAVENOUS SOLUTION	3	PA; SP
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

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Drug Name	Drug Tier	Requirements /Limits
FABHALTA ORAL CAPSULE	3	PA; SP; QL (2 EA per 1 day)
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
FYLNETRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
GRANIX SUBCUTANEOUS SOLUTION	3	PA; SP
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
HEMLIBRA SUBCUTANEOUS SOLUTION	3	SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
hetastarch-nacl intravenous solution	1	
HEXTEND INTRAVENOUS SOLUTION	3	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED	2	SP

Drug Name	Drug Tier	Requirements /Limits
HYMPAVZI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	SP
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
KCENTRA INTRAVENOUS KIT	3	
KOATE INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
KOGENATE FS INTRAVENOUS KIT	2	SP
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
LEUKINE INJECTION SOLUTION RECONSTITUTED	3	PA; SP
LMD IN D5W INTRAVENOUS SOLUTION	3	
LMD IN NACL INTRAVENOUS SOLUTION	3	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
MONSELS FERRIC SUBSULFATE EXTERNAL PASTE	3	
MOZOBIL SUBCUTANEOUS SOLUTION	3	SP
MULPLETA ORAL TABLET	3	PA; SP
NEULASTA ONPRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
NEUPOGEN INJECTION SOLUTION	3	PA; SP
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP
NIVESTYM INJECTION SOLUTION	2	PA; SP
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	2	PA; SP
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
NUWIQ INTRAVENOUS KIT	2	SP
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
NYPOZI INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
PIASKY INJECTION SOLUTION	3	PA; SP
plerixafor solution 24 mg/1.2ml subcutaneous	1	SP
plerixafor solution 24 mg/1.2ml subcutaneous	1	SP; QL (1 ML per 1 day)
PROCRIT INJECTION SOLUTION	2	PA; SP
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
PROMACTA ORAL PACKET	3	PA; SP
PROMACTA ORAL TABLET	3	PA; SP
protamine sulfate intravenous solution	1	
PYRUKYND ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	3	PA; SP; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
QFITLIA SUBCUTANEOUS SOLUTION	3	PA; SP
QFITLIA SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED	3	
RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	3	
RELEUKO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
RETACRIT INJECTION SOLUTION	2	PA; SP
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED	3	SP

Drug Name	Drug Tier	Requirements /Limits
ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
RYZNEUTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
SOLIRIS INTRAVENOUS SOLUTION	3	PA; SP
STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
THROMBIN-JMI EPISTAXIS EXTERNAL KIT	3	
THROMBIN-JMI EXTERNAL KIT	3	
THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	3	
THROMBOGEN EXTERNAL KIT	3	
THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	3	
tranexamic acid intravenous solution	1	
tranexamic acid oral tablet	1	
tranexamic acid-nacl intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
TRETEN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
UDENYCA ONBODY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
ULTOMIRIS INTRAVENOUS SOLUTION	3	PA; SP
VAFSEO ORAL TABLET	3	
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
VOYDEYA ORAL TABLET	3	PA; SP; QL (6 EA per 1 day)
VOYDEYA ORAL TABLET THERAPY PACK	3	PA; SP; QL (6 EA per 1 day)
WAYRILZ ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
WILATE INTRAVENOUS KIT	2	SP
XOLREMDI ORAL CAPSULE	3	PA; SP; QL (4 EA per 1 day)
XYNTHA INTRAVENOUS KIT	2	SP
XYNTHA SOLOFUSE INTRAVENOUS KIT	2	SP

Drug Name	Drug Tier	Requirements /Limits
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	2	PA; SP
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL ORAL TABLET	3	
ACCURETIC ORAL TABLET	3	
acebutolol hcl oral capsule	1	
acetazolamide sodium injection solution reconstituted	1	
adenosine intravenous solution	1	
ADRENALIN INTRAVENOUS SOLUTION 10-0.9 MG/250ML-%, 2-0.9 MG/250ML-%	3	
AKOVAZ INTRAVENOUS SOLUTION	3	
AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
ALDACTONE ORAL TABLET	3	
aliskiren fumarate oral tablet	1	
alprostadil injection solution	1	

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Drug Name	Drug Tier	Requirements /Limits
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
amiloride hcl oral tablet	1	
amiloride-hydrochlorothiazide oral tablet	1	
amiodarone hcl intravenous solution	1	
amiodarone hcl oral tablet	1	
AMLODIPINE BES+SYRSPEND SF ORAL SUSPENSION	3	
amlodipine besylate oral tablet	1	
amlodipine besylate-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	
ARBLI ORAL SUSPENSION	3	
ASCLERA INTRAVENOUS SOLUTION	3	
ATACAND HCT ORAL TABLET	3	
ATACAND ORAL TABLET	3	
atenolol oral tablet	1	
ATENOLOL+SYRSPE ND SF ORAL SUSPENSION	3	

Drug Name	Drug Tier	Requirements /Limits
atenolol-chlorthalidone oral tablet	1	
ATORVALIQ ORAL SUSPENSION	3	
atorvastatin calcium oral tablet	1	
ATTRUBY ORAL TABLET THERAPY PACK	3	PA; SP; QL (4 EA per 1 day)
AVALIDE ORAL TABLET	3	
AVAPRO ORAL TABLET	3	
AZOR ORAL TABLET	3	
benazepril hcl oral tablet	1	
benazepril-hydrochlorothiazide oral tablet	1	
BENICAR HCT ORAL TABLET	3	
BENICAR ORAL TABLET	3	
BETAPACE AF ORAL TABLET	3	
BETAPACE ORAL TABLET	3	
betaxolol hcl oral tablet	1	
BIDIL ORAL TABLET	3	
BIORPHEN INTRAVENOUS SOLUTION	3	
bisoprolol fumarate oral tablet	1	
bisoprolol-hydrochlorothiazide oral tablet	1	
BREVIBLOC IN NACL INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
BREVIBLOC INTRAVENOUS SOLUTION	3	
BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION	3	
BREVIBLOC PREMIXED INTRAVENOUS SOLUTION	3	
bumetanide injection solution	1	
bumetanide oral tablet	1	
BUMEX ORAL TABLET	3	
BYSTOLIC ORAL TABLET	3	
CADUET ORAL TABLET	3	
CAMZYOS ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
candesartan cilexetil oral tablet	1	
candesartan cilexetil-hctz oral tablet	1	
captopril oral tablet	1	
captopril-hydrochlorothiazide oral tablet	1	
CARDENE IV INTRAVENOUS SOLUTION	3	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
CARDIZEM ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
CARDURA ORAL TABLET	3	
CAROSPIR ORAL SUSPENSION	3	
cartia xt oral capsule extended release 24 hour	1	
carvedilol oral tablet	1	
carvedilol phosphate er oral capsule extended release 24 hour	1	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	3	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	3	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	3	
chlorothiazide sodium intravenous solution reconstituted	1	
chlorthalidone oral tablet	1	
cholestyramine light oral packet	1	
cholestyramine light oral powder	1	
cholestyramine oral packet	1	
cholestyramine oral powder	1	
CLEVIPREX INTRAVENOUS EMULSION	3	
CLONIDINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
clonidine hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
clonidine transdermal patch weekly	1	
colesevelam hcl oral packet	1	
colesevelam hcl oral tablet	1	
COLESTID ORAL GRANULES	3	
COLESTID ORAL TABLET	3	
colestipol hcl oral granules	1	
colestipol hcl oral packet	1	
colestipol hcl oral tablet	1	
CONJUPRI ORAL TABLET	3	
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
COREG ORAL TABLET	3	
CORLANOR ORAL SOLUTION	3	
CORLANOR ORAL TABLET	3	
CORVERT INTRAVENOUS SOLUTION	3	
COZAAR ORAL TABLET	3	
CRESTOR ORAL TABLET	3	
DEMSER ORAL CAPSULE	3	
digoxin injection solution	1	
digoxin oral solution	1	
digoxin oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
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	
DILTIAZEM HCL-DEXTROSE INTRAVENOUS SOLUTION	3	
DILTIAZEM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
dilt-xr oral capsule extended release 24 hour	1	
DIOVAN HCT ORAL TABLET	3	
DIOVAN ORAL TABLET	3	
disopyramide phosphate oral capsule	1	
DIURIL ORAL SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
dobutamine hcl intravenous solution	1	
dobutamine-dextrose intravenous solution	1	
dofetilide oral capsule	1	
dopamine hcl intravenous solution	1	
dopamine-dextrose intravenous solution	1	
doxazosin mesylate oral tablet	1	
droxidopa oral capsule	1	PA; SP
DYRENIUM ORAL CAPSULE	3	
EDARBI ORAL TABLET	3	
EDARBYCLOR ORAL TABLET	3	
EDECIN ORAL TABLET	3	
EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE 25 MG/5ML	3	
enalapril maleate oral solution	1	
enalapril maleate oral tablet	1	
enalaprilat intravenous solution	1	
enalapril-hydrochlorothiazide oral tablet	1	
ENBUMYST NASAL SOLUTION	3	
ENTRESTO ORAL CAPSULE SPRINKLE	2	
ENTRESTO ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
EPANED ORAL SOLUTION	3	
ephedrine sulfate (pressors) intravenous solution 50 mg/ml	1	
ephedrine sulfate (pressors) intravenous solution prefilled syringe 50 mg/10ml	1	
EPHEDRINE SULFATE (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE 50 MG/5ML	3	
ephedrine sulfate (pressors) solution prefilled syringe 25 mg/5ml intravenous	1	
EPHEDRINE SULFATE (PRESSORS) SOLUTION PREFILLED SYRINGE 25 MG/5ML INTRAVENOUS	3	
EPHEDRINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
EPINEPHRINE BITARTRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
EPINEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION	3	
EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
epinephrine injection solution	1	
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 1 MG/ML	3	
EPINEPHRINE INTRAVENOUS SOLUTION	3	
EPINEPHRINE INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.1 MG/10ML	3	
epinephrine intravenous solution prefilled syringe 1 mg/10ml	1	
epinephrine pf injection solution	1	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 2-5 MG/250ML-%	3	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION 2-0.9 MG/250ML-%	3	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
eplerenone oral tablet	1	
esmolol hcl intravenous solution 100 mg/10ml	1	

Drug Name	Drug Tier	Requirements /Limits
ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML	3	
esmolol hcl-sodium chloride intravenous solution	1	
ethacrynate sodium intravenous solution reconstituted	1	
ethacrynic acid oral tablet	1	
ETHAMOLIN INTRAVENOUS SOLUTION	3	
EVKEEZA INTRAVENOUS SOLUTION	3	PA; SP
EXFORGE HCT ORAL TABLET	3	
EXFORGE ORAL TABLET	3	
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	3	
ezetimibe oral tablet	1	
ezetimibe-simvastatin oral tablet	1	
felodipine er oral tablet extended release 24 hour	1	
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	

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Drug Name	Drug Tier	Requirements /Limits
flecainide acetate oral tablet	1	
FLOLIPID ORAL SUSPENSION	3	
fluvastatin sodium er oral tablet extended release 24 hour	1	
fluvastatin sodium oral capsule	1	
fosinopril sodium oral tablet	1	
fosinopril sodium-hctz oral tablet	1	
FUROSCIX SUBCUTANEOUS CARTRIDGE KIT	3	
FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
furosemide oral solution	1	
furosemide oral tablet	1	
furosemide solution 10 mg/ml injection	1	
FUROSEMIDE SOLUTION 10 MG/ML INJECTION	3	
gemfibrozil oral tablet	1	
guanfacine hcl oral tablet	1	
HEMANGEOL ORAL SOLUTION	3	
HEMICLOR ORAL TABLET	3	
hydralazine hcl injection solution	1	
hydralazine hcl oral tablet	1	
hydrochlorothiazide oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
hydrochlorothiazide oral tablet	1	
HYZAAR ORAL TABLET	3	
ibutilide fumarate intravenous solution	1	
icosapent ethyl oral capsule	1	
IMMPHENTIV INTRAVENOUS SOLUTION	3	
indapamide oral tablet	1	
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	
INPEFA ORAL TABLET	3	
INSPIRA ORAL TABLET	3	
INZIRQO ORAL SUSPENSION RECONSTITUTED	3	
irbesartan oral tablet	1	
irbesartan-hydrochlorothiazide oral tablet	1	
ISORDIL TITRADOSE ORAL TABLET	3	
isosorb dinitrate-hydralazine oral tablet	1	
isosorbide dinitrate oral tablet	1	
isosorbide mononitrate er oral tablet extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
isosorbide mononitrate oral tablet	1	
isradipine oral capsule	1	
ivabradine hcl oral tablet	1	
JUXTAPID ORAL CAPSULE 10 MG, 5 MG	3	PA; SP; QL (1 EA per 1 day)
JUXTAPID ORAL CAPSULE 20 MG, 30 MG	3	PA; SP; QL (2 EA per 1 day)
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE	3	
KATERZIA ORAL SUSPENSION	3	
LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
labetalol hcl oral tablet	1	
labetalol hcl solution 5 mg/ml intravenous	1	
LABETALOL HCL SOLUTION 5 MG/ML INTRAVENOUS	3	
LANOXIN INJECTION SOLUTION	3	
LANOXIN ORAL TABLET	2	
LANOXIN PEDIATRIC INJECTION SOLUTION	3	
LASIX ORAL TABLET	3	
LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Requirements /Limits
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
LEVAMLODIPINE MALEATE ORAL TABLET	3	
LEVOPHED INTRAVENOUS SOLUTION	3	
LIPITOR ORAL TABLET	3	
LIPOFEN ORAL CAPSULE	3	
lisinopril oral tablet	1	
lisinopril-hydrochlorothiazide oral tablet	1	
LIVALO ORAL TABLET	3	
LODOCO ORAL TABLET	3	
LOPID ORAL TABLET	3	
LOPRESSOR ORAL SOLUTION	3	
LOPRESSOR ORAL TABLET	3	
losartan potassium oral tablet	1	
losartan potassium-hctz oral tablet	1	
LOTENSIN HCT ORAL TABLET	3	
LOTENSIN ORAL TABLET	3	
LOTREL ORAL CAPSULE	3	
lovastatin oral tablet	1	
LOVAZA ORAL CAPSULE	3	
mannitol intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
matzim la oral tablet extended release 24 hour	1	
methyldopa oral tablet	1	
metolazone oral tablet	1	
metoprolol succinate er oral tablet extended release 24 hour	1	
metoprolol tartrate intravenous solution	1	
metoprolol tartrate oral tablet	1	
metoprolol-hydrochlorothiazide oral tablet	1	
metyrosine oral capsule	1	
mexiletine hcl oral capsule	1	
MICARDIS HCT ORAL TABLET	3	
MICARDIS ORAL TABLET	3	
midodrine hcl oral tablet	1	
milrinone lactate in dextrose intravenous solution	1	
milrinone lactate intravenous solution	1	
minoxidil oral tablet	1	
moexipril hcl oral tablet	1	
MULTAQ ORAL TABLET	3	
nadolol oral tablet	1	
nebivolol hcl oral tablet	1	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
NEXLETOL ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
NEXLIZET ORAL TABLET	2	
NEXTERONE INTRAVENOUS SOLUTION	3	
niacin (antihyperlipidemic) oral tablet	1	
niacin er (antihyperlipidemic) oral tablet extended release	1	
niacor oral tablet	1	
nicardipine hcl in nacl intravenous solution	1	
NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
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	
NIMODIPINE ORAL SOLUTION	3	
nisoldipine er oral tablet extended release 24 hour	1	
NITRO-BID TRANSDERMAL OINTMENT	3	

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Drug Name	Drug Tier	Requirements /Limits
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	3	
nitroglycerin in d5w intravenous solution	1	
nitroglycerin intravenous solution	1	
nitroglycerin rectal ointment	1	
nitroglycerin sublingual tablet sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	1	
NITROLINGUAL TRANSLINGUAL SOLUTION	3	
nitroprusside sodium intravenous solution	1	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	3	
norepinephrine bitartrate solution 1 mg/ml intravenous	1	
NOREPINEPHRINE BITARTRATE SOLUTION 1 MG/ML INTRAVENOUS	3	
NOREPINEPHRINE- DEXTROSE INTRAVENOUS SOLUTION	3	
NOREPINEPHRINE- SODIUM CHLORIDE INTRAVENOUS SOLUTION 16-0.9 MG/250ML-%, 4-0.9 MG/250ML-%, 8-0.9 MG/250ML-%	3	

Drug Name	Drug Tier	Requirements /Limits
NORLIQVA ORAL SOLUTION	3	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	2	
NORPACE ORAL CAPSULE	3	
NORTHERA ORAL CAPSULE	3	PA; SP
NORVASC ORAL TABLET	3	
NYMALIZE ORAL SOLUTION	3	
olmesartan medoxomil oral tablet	1	
olmesartan medoxomil- hctz oral tablet	1	
olmesartan-amlodipine- hctz oral tablet	1	
omega-3-acid ethyl esters oral capsule	1	
OSMITROL INTRAVENOUS SOLUTION	3	
PACERONE ORAL TABLET	3	
pentoxifylline er oral tablet extended release	1	
perindopril erbumine oral tablet	1	
phenoxybenzamine hcl oral capsule	1	
phentolamine mesylate injection solution reconstituted	1	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION 0.4 MG/10ML, 0.8 MG/10ML	3	

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Drug Name	Drug Tier	Requirements /Limits
phenylephrine hcl (pressors) intravenous solution 10 mg/ml	1	
PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION	3	
PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION 10-0.9 MG/250ML-%, 20-0.9 MG/250ML-%, 25-0.9 MG/250ML-%, 40-0.9 MG/250ML-%, 50-0.9 MG/250ML-%, 80-0.9 MG/250ML-%	3	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
pindolol oral tablet	1	
pitavastatin calcium oral tablet	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
pravastatin sodium oral tablet	1	
prazosin hcl oral capsule	1	
PRESTALIA ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
prevalite oral packet	1	
prevalite oral powder	1	
procainamide hcl injection solution	1	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
propafenone hcl er oral capsule extended release 12 hour	1	
propafenone hcl oral tablet	1	
propranolol hcl er oral capsule extended release 24 hour	1	
propranolol hcl intravenous solution	1	
propranolol hcl oral solution	1	
propranolol hcl oral tablet	1	
PROSTIN VR INJECTION SOLUTION	3	
QBRELIS ORAL SOLUTION	3	
QUESTRAN LIGHT ORAL POWDER	3	
QUESTRAN ORAL PACKET	3	
QUESTRAN ORAL POWDER	3	
quinapril hcl oral tablet	1	
quinapril-hydrochlorothiazide oral tablet	1	
quinidine gluconate er oral tablet extended release	1	
quinidine sulfate oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
ramipril oral capsule	1	
ranolazine er oral tablet extended release 12 hour	1	
RAPIBLYK INTRAVENOUS SOLUTION RECONSTITUTED	3	
RECTIV RECTAL OINTMENT	3	
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	
rosuvastatin calcium oral tablet	1	
sacubitril-valsartan oral tablet	1	
simvastatin oral tablet	1	
SOAANZ ORAL TABLET	3	
sodium nitroprusside intravenous solution 25 mg/ml	1	
sotalol hcl (af) oral tablet	1	
sotalol hcl oral tablet	1	
SOTYLIZE ORAL SOLUTION	3	
spironolactone oral suspension	1	
spironolactone oral tablet	1	
spironolactone-hctz oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
TEKTURNAL ORAL TABLET	2	
telmisartan oral tablet	1	
telmisartan-amlodipine oral tablet	1	
telmisartan-hctz oral tablet	1	
TENORETIC 100 ORAL TABLET	3	
TENORETIC 50 ORAL TABLET	3	
TENORMIN ORAL TABLET	3	
THALITONE ORAL TABLET	3	
tiadylt er oral capsule extended release 24 hour	1	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
TIKOSYN ORAL CAPSULE	3	
timolol maleate oral tablet	1	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
toremide oral tablet	1	
trandolapril oral tablet	1	
trandolapril-verapamil hcl er oral tablet extended release	1	
triamterene oral capsule	1	
triamterene-hctz oral capsule	1	

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Drug Name	Drug Tier	Requirements /Limits
triamterene-hctz oral tablet	1	
TRIBENZOR ORAL TABLET	3	
TRICOR ORAL TABLET	3	
TRYNGOLZA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.03 ML per 1 day)
TRYVIO ORAL TABLET	3	
valsartan oral solution	1	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide oral tablet	1	
VARITHENA INTRAVENOUS FOAM	3	
VASCEPA ORAL CAPSULE	2	
VASERETIC ORAL TABLET	3	
VASOTEC ORAL TABLET	3	
VAZCULEP INTRAVENOUS SOLUTION	3	
VECAMYL ORAL TABLET	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	
VERQUVO ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
VYNDAMAX ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
VYND AQEL ORAL CAPSULE	3	PA; SP; QL (4 EA per 1 day)
VYTORIN ORAL TABLET	3	
WELCHOL ORAL PACKET	3	
WELCHOL ORAL TABLET	3	
ZESTORETIC ORAL TABLET	3	
ZESTRIL ORAL TABLET	3	
ZETIA ORAL TABLET	3	
ZOCOR ORAL TABLET	3	
ZYPITAMAG ORAL TABLET	3	
Central Nervous System Agents		
SKYCLARYS ORAL CAPSULE	3	PA; SP; QL (3 EA per 1 day)
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL ORAL TABLET	3	
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	3	
AMPHETAMINE ER ORAL TABLET EXTENDED RELEASE DISPERSIBLE	3	

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Drug Name	Drug Tier	Requirements /Limits
amphetamine sulfate oral tablet	1	
amphetamine-dextroamphetamine er oral capsule extended release 24 hour	1	
amphetamine-dextroamphetamine oral tablet	1	
amphet-dextroamphet 3-bead er oral capsule extended release 24 hour	1	
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
atomoxetine hcl oral capsule	1	
AZSTARYS ORAL CAPSULE	2	
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	
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
dexmethylphenidate hcl er oral capsule extended release 24 hour	1	
dexmethylphenidate hcl oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
dextroamphetamine sulfate er oral capsule extended release 24 hour	1	
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet	1	
DYANAVAL XR ORAL SUSPENSION EXTENDED RELEASE	3	
DYANAVAL XR ORAL TABLET EXTENDED RELEASE	3	
EVEKEO ORAL TABLET	3	
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	
lisdexamfetamine dimesylate oral capsule	1	
lisdexamfetamine dimesylate oral tablet chewable	1	
METADATE CD ORAL CAPSULE EXTENDED RELEASE	3	
methamphetamine hcl oral tablet	1	
METHYLIN ORAL SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
methylphenidate hcl er (cd) oral capsule extended release	1	
methylphenidate hcl er (la) oral capsule extended release 24 hour	1	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	
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	
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
ONYDA XR ORAL SUSPENSION EXTENDED RELEASE	3	

Drug Name	Drug Tier	Requirements /Limits
PROCENTRA ORAL SOLUTION	3	
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	
VYVANSE ORAL CAPSULE	3	
VYVANSE ORAL TABLET CHEWABLE	3	
XELSTRYM TRANSDERMAL PATCH	3	
ZENZEDI ORAL TABLET	3	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA; SP; QL (2 EA per 1 day)
AUBAGIO ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	2	PA; SP; QL (0.04 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	2	PA; SP; QL (0.04 EA per 1 day)
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	2	PA; SP; QL (4 EA per 1 day)
BETASERON SUBCUTANEOUS KIT	2	PA; SP; QL (0.5 EA per 1 day)
BRIUMVI INTRAVENOUS SOLUTION	3	PA; SP
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	3	PA; SP; QL (1 ML per 1 day)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	3	PA; SP; QL (0.43 ML per 1 day)
dalfampridine er oral tablet extended release 12 hour	1	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate oral capsule delayed release	1	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate starter pack oral capsule delayed release therapy pack	1	PA; SP; QL (120 EA per 365 days)
fingolimod hcl oral capsule	1	PA; SP; QL (1 EA per 1 day)
GILENYA ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	1	PA; SP; QL (1 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	1	PA; SP; QL (0.43 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	1	PA; SP; QL (1 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	1	PA; SP; QL (0.43 ML per 1 day)
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.02 ML per 1 day)
LEMTRADA INTRAVENOUS SOLUTION	3	PA; SP; QL (3.6 ML per 350 days)
MAVENCLAD ORAL TABLET THERAPY PACK	3	PA; SP; QL (4 EA per 1 lifetime)
MAYZENT ORAL TABLET 0.25 MG	3	PA; SP; QL (4 EA per 1 day)
MAYZENT ORAL TABLET 1 MG, 2 MG	3	PA; SP; QL (1 EA per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	3	PA; SP; QL (24 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	3	PA; SP; QL (14 EA per 365 days)
OCREVUS INTRAVENOUS SOLUTION	3	PA; SP
OCREVUS ZUNOVO SUBCUTANEOUS SOLUTION	3	PA; SP; QL (23 ML per 168 days)
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.04 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (2 ML per 365 days)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (2 ML per 365 days)
PLEGRIDY SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (0.04 ML per 1 day)
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.04 ML per 1 day)
PONVORY ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
PONVORY STARTER PACK ORAL TABLET THERAPY PACK	3	PA; SP; QL (2 EA per 365 days)
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (0.22 ML per 1 day)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (4.2 ML per 365 days)
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.22 ML per 1 day)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (4.2 ML per 365 days)

Drug Name	Drug Tier	Requirements /Limits
TASCENSO ODT ORAL TABLET DISPERSIBLE	3	PA; SP; QL (1 EA per 1 day)
TECFIDERA ORAL CAPSULE DELAYED RELEASE	3	PA; SP; QL (2 EA per 1 day)
TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK	3	PA; SP; QL (120 EA per 365 days)
teriflunomide oral tablet	1	PA; SP; QL (1 EA per 1 day)
TYRUKO INTRAVENOUS CONCENTRATE	3	SP
TYSABRI INTRAVENOUS CONCENTRATE	3	PA; SP; QL (0.54 ML per 1 day)
VUMERITY ORAL CAPSULE DELAYED RELEASE	2	PA; SP; QL (4 EA per 1 day)
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	3	PA; SP; QL (14 EA per 365 days)
ZEPOSIA ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	3	PA; SP; QL (56 EA per 365 days)
Central Nervous System Agents - Miscellaneous		
AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.5 ML per 81 days)
ANECTINE INJECTION SOLUTION	3	
atracurium besylate intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
AUSTEDO ORAL TABLET	3	PA; SP; QL (4 EA per 1 day)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; SP; QL (1 EA per 1 day)
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA; SP; QL (56 EA per 365 days)
benzphetamine hcl oral tablet	1	
caffeine citrate intravenous solution	1	
caffeine citrate oral solution	1	
CAFFEINE-SODIUM BENZOATE INJECTION SOLUTION	3	
cisatracurium besylate (pf) intravenous solution	1	
cisatracurium besylate intravenous solution	1	
CONTRACE ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA
DAYBUE ORAL SOLUTION	3	PA; SP; QL (120 ML per 1 day)
diethylpropion hcl er oral tablet extended release 24 hour	1	
diethylpropion hcl oral tablet	1	
DOPRAM INTRAVENOUS SOLUTION	3	
edaravone intravenous solution	1	PA; SP

Drug Name	Drug Tier	Requirements /Limits
gabapentin (once-daily) oral tablet	1	
GRALISE ORAL TABLET	3	
HORIZANT ORAL TABLET EXTENDED RELEASE	3	
INGREZZA ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE SPRINKLE	3	PA; SP; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE THERAPY PACK	3	PA; SP; QL (56 EA per 365 days)
liraglutide -weight management subcutaneous solution pen-injector	1	PA
LOMAIRA ORAL TABLET	3	PA
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
LYRICA ORAL CAPSULE	3	
LYRICA ORAL SOLUTION	3	
NEURAPTINE EXTERNAL CREAM	3	
NUEDEXTA ORAL CAPSULE	3	
ONPATTRO INTRAVENOUS SOLUTION	3	PA; SP
ORLISTAT ORAL CAPSULE	3	PA
phendimetrazine tartrate er oral capsule extended release 24 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
phendimetrazine tartrate oral tablet	1	
phentermine hcl oral capsule	1	
phentermine hcl oral tablet	1	
phentermine-topiramate er oral capsule extended release 24 hour	1	
pregabalin er oral tablet extended release 24 hour	1	
pregabalin oral capsule	1	
pregabalin oral solution	1	
QALSODY INTRATHECAL SOLUTION	3	PA; SP
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	PA
QUELICIN INJECTION SOLUTION	3	
RADICAVA INTRAVENOUS SOLUTION	3	PA; SP
RADICAVA ORS ORAL SUSPENSION	2	PA; SP
RADICAVA ORS STARTER KIT ORAL SUSPENSION	2	PA; SP
riluzole oral tablet	1	
ROCURONIUM BROMIDE +RFID INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
rocuronium bromide intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
SAVELLA ORAL TABLET	3	
SAVELLA TITRATION PACK ORAL	3	
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA
succinylcholine chloride injection solution prefilled syringe 200 mg/10ml	1	
SUCCINYLCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
succinylcholine chloride solution 20 mg/ml injection	1	
SUCCINYLCHOLINE CHLORIDE SOLUTION 20 MG/ML INJECTION	3	
succinylcholine chloride solution prefilled syringe 100 mg/5ml injection	1	
SUCCINYLCHOLINE CHLORIDE SOLUTION PREFILLED SYRINGE 100 MG/5ML INJECTION	3	
succinylcholine cl +rfid injection solution prefilled syringe	1	
TEGLUTIK ORAL SUSPENSION	2	

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Drug Name	Drug Tier	Requirements /Limits
tetrabenazine oral tablet	1	PA; SP
TIGLUTIK ORAL SUSPENSION	2	
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
vecuronium bromide intravenous solution reconstituted	1	
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.03 ML per 1 day)
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA
XENAZINE ORAL TABLET	3	PA; SP
XENICAL ORAL CAPSULE	3	PA
ZEPBOUND SUBCUTANEOUS SOLUTION	3	PA
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
AQUORAL MOUTH/THROAT SOLUTION	3	
cevimeline hcl oral capsule	1	
chlorhexidine gluconate mouth/throat solution	1	

Drug Name	Drug Tier	Requirements /Limits
CLINPRO 5000 DENTAL PASTE	3	
DENTA 5000 PLUS DENTAL CREAM	3	
DENTA 5000 PLUS SENSITIVE DENTAL GEL	3	
DENTAGEL DENTAL GEL	3	
EASYGEL DENTAL GEL	3	
EVOXAC ORAL CAPSULE	3	
FIRST-MOUTHWASH BLM MOUTH/THROAT SUSPENSION	3	
FLUORIDEX DAILY RENEWAL MOUTH/THROAT CONCENTRATE	3	
FLUORIDEX DENTAL PASTE	3	
FLUORIDEX ENHANCED WHITENING DENTAL PASTE	3	
FLUORIMAX 5000 DENTAL PASTE	3	
FLUORIMAX 5000 SENSITIVE DENTAL GEL	3	
FRAICHE 5000 DENTAL DENTAL GEL	3	
JUST RIGHT 5000 DENTAL PASTE	3	
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
KOURZEQ MOUTH/THROAT PASTE	3	

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Drug Name	Drug Tier	Requirements /Limits
lidocaine viscous hcl mouth/throat solution	1	
MI PASTE DENTAL PASTE	3	
MI PASTE PLUS DENTAL PASTE	3	
ORALONE MOUTH/THROAT PASTE	3	
PERIDEX MOUTH/THROAT SOLUTION	3	
periogard mouth/throat solution	1	
pilocarpine hcl oral tablet	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	3	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	3	
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL	3	
PREVIDENT 5000 KIDS DENTAL PASTE	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	

Drug Name	Drug Tier	Requirements /Limits
REMESENSE DENTAL	3	
SALAGEN ORAL TABLET	3	
sf 5000 plus dental cream	1	
sf dental gel	1	
sod fluoride-potassium nitrate 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	
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	
triamcinolone acetonide mouth/throat paste	1	
VANISH DENTAL LIQUID EXTENDED RELEASE	3	
Dermatological Agents - Drugs for Skin Conditions		
A.A.G.C. KIT IN TERODERM EXTERNAL CREAM	3	
ABSORICA LD ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
ABSORICA ORAL CAPSULE	3	
ACANYA EXTERNAL GEL	3	
accutane oral capsule	1	
acitretin oral capsule	1	
ACZONE EXTERNAL GEL	3	
adapalene external cream	1	
adapalene external gel	1	
ADAPALENE EXTERNAL PAD	3	
ADAPALENE EXTERNAL SOLUTION	3	
adapalene-benzoyl peroxide external gel	1	
ADBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.15 ML per 1 day)
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.15 ML per 1 day)
AKLIEF EXTERNAL CREAM	3	
ALA SCALP EXTERNAL LOTION	3	
ala-cort external cream	1	
alclometasone dipropionate external cream	1	
alclometasone dipropionate external ointment	1	
ALTRENO EXTERNAL LOTION	3	

Drug Name	Drug Tier	Requirements /Limits
ALUMINUM CHLORIDE ANHYDROUS POWDER	3	
ALUMINUM CHLORIDE HEXAHYDRATE POWDER	3	
amcinonide external cream	1	
amcinonide external ointment	1	
ammonium lactate external cream	1	
ammonium lactate external lotion	1	
amnestem oral capsule	1	
AMZEEQ EXTERNAL FOAM	3	
ANZUPGO EXTERNAL CREAM	3	
AQUACEL AG BURN EXTERNAL PAD	3	
ARAZLO EXTERNAL LOTION	3	
ATRALIN EXTERNAL GEL	3	
ATRAPRO DERMAL SPRAY EXTERNAL LIQUID	3	
azelaic acid external gel	1	
AZELEX EXTERNAL CREAM	3	
B & C EXTERNAL OINTMENT	3	
balsam peru-castor oil external ointment	1	
BENZAMYCIN EXTERNAL GEL	3	

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Drug Name	Drug Tier	Requirements /Limits
benzoyl peroxide-erythromycin external gel	1	
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	
BPCO EXTERNAL OINTMENT	3	
brimonidine tartrate external gel	1	
BRYHALI EXTERNAL LOTION	3	
CABTREO EXTERNAL GEL	3	

Drug Name	Drug Tier	Requirements /Limits
CALAMINE POWDER	3	
calcipotriene external cream	1	
CALCIPOTRIENE EXTERNAL FOAM	3	
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	
CIBINQO ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)
claravis oral capsule	1	
CLEOCIN-T EXTERNAL LOTION	3	
clindacin etz external swab	1	
clindacin external foam	1	
clindacin-p external swab	1	
CLINDAGEL EXTERNAL GEL	3	
clindamycin phos (once-daily) external gel	1	
clindamycin phos (twice-daily) external gel	1	
clindamycin phos-benzoyl perox external gel	1	

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Drug Name	Drug Tier	Requirements /Limits
clindamycin phosphate external foam	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin-tretinoin external gel	1	
CLINOIN EXTERNAL CREAM	3	
clobetasol propionate e external cream	1	
clobetasol propionate emulsion external foam	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	3	
clobetasol propionate external cream 0.05 %	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	

Drug Name	Drug Tier	Requirements /Limits
CLOBEX SPRAY EXTERNAL LIQUID	3	
clocortolone pivalate external cream	1	
clodan external shampoo	1	
CLODERM EXTERNAL CREAM	3	
coal tar external solution	1	
CONDYLOX EXTERNAL GEL	3	
dapsone external gel	1	
DERMA-SMOOTHIE/FS BODY EXTERNAL OIL	3	
DERMA-SMOOTHIE/FS SCALP EXTERNAL OIL	3	
desonide external cream	1	
desonide external gel	1	
desonide external lotion	1	
desonide external ointment	1	
desoximetasone external cream	1	
desoximetasone external gel	1	
desoximetasone external liquid	1	
desoximetasone external ointment	1	
diclofenac sodium external gel 3 %	1	
DIFFERIN EXTERNAL CREAM	3	
DIFFERIN EXTERNAL GEL 0.3 %	3	
DIFFERIN EXTERNAL LOTION	3	

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Drug Name	Drug Tier	Requirements /Limits
diflorasone diacetate external cream	1	
diflorasone diacetate external ointment	1	
DIPROLENE EXTERNAL OINTMENT	3	
doxepin hcl external cream	1	
doxycycline oral capsule delayed release	1	
DRYSOL EXTERNAL SOLUTION	3	
DUOBRII EXTERNAL LOTION	3	
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML	2	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML	2	PA; SP; QL (0.29 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	2	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	2	PA; SP; QL (0.29 ML per 1 day)
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.15 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
EBGLYSS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.15 ML per 1 day)
ELIDEL EXTERNAL CREAM	3	
EMROSI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
ENOVARX-TRAMADOL EXTERNAL CREAM	3	
ENSTILAR EXTERNAL FOAM	3	
EPIDUO EXTERNAL GEL	3	
EPIDUO FORTE EXTERNAL GEL	3	
EPIFOAM EXTERNAL FOAM	3	
EPSOLAY EXTERNAL CREAM	3	
ERY EXTERNAL PAD	3	
erythromycin external gel	1	
erythromycin external solution	1	
EUCRISA EXTERNAL OINTMENT	2	
FABIOR EXTERNAL FOAM	3	
FILSUEVZ EXTERNAL GEL	3	PA; SP; QL (15 GM per 1 day)
FINACEA EXTERNAL FOAM	3	
fluocinolone acetonide body external oil	1	
fluocinolone acetonide external cream	1	
fluocinolone acetonide external ointment	1	

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Drug Name	Drug Tier	Requirements /Limits
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	
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
flurandrenolide external lotion	1	
fluticasone propionate external cream	1	
fluticasone propionate external lotion	1	
fluticasone propionate external ointment	1	
GORDOFILM EXTERNAL SOLUTION	3	
halcinonide external cream	1	
HALCINONIDE EXTERNAL SOLUTION	3	
halobetasol propionate external cream	1	
halobetasol propionate external foam	1	

Drug Name	Drug Tier	Requirements /Limits
halobetasol propionate external ointment	1	
HALOG EXTERNAL CREAM	3	
HYDROCORTISONE ACETATE EXTERNAL CREAM 2.5 %	3	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	1	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external lotion 2 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
HYDROCORTISONE EXTERNAL SOLUTION	3	
hydrocortisone valerate external cream	1	
hydrocortisone valerate external ointment	1	
HYDROXATE EXTERNAL GEL	3	
HYFTOR EXTERNAL GEL	3	
HYPOCYN ANTIPRURITIC EXTERNAL GEL	3	
imiquimod external cream	1	
imiquimod pump external cream	1	
IMPOYZ EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
isotretinoin oral capsule	1	
ivermectin external cream	1	
JUVAZIN EXTERNAL GEL	3	
KERALYT EXTERNAL SHAMPOO	3	
KLARON EXTERNAL LOTION	3	
KLISYRI (250 MG) EXTERNAL OINTMENT	3	
KLISYRI (350 MG) EXTERNAL OINTMENT	3	
lactic acid e external cream	1	
LEQSELVI ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED	3	
LEXETTE EXTERNAL FOAM	3	
LITFULO ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
L-MESITRAN SOFT WOUND EXTERNAL GEL	3	
LUXAMEND EXTERNAL CREAM	3	
MEDIHONEY WOUND/BURN DRESSING EXTERNAL GEL	3	
methoxsalen rapid oral capsule	1	
METROCREAM EXTERNAL CREAM	3	

Drug Name	Drug Tier	Requirements /Limits
METROGEL EXTERNAL GEL	3	
metronidazole external cream	1	
metronidazole external gel	1	
metronidazole external lotion	1	
MICORT HC EXTERNAL CREAM	3	
MICROCYN EXTERNAL LIQUID	3	
MIRVASO EXTERNAL GEL	2	
mometasone furoate external cream	1	
mometasone furoate external ointment	1	
mometasone furoate external solution	1	
NEMLUVIO SUBCUTANEOUS AUTO-INJECTOR	2	PA; SP; QL (0.08 EA per 1 day)
NEO-SYNALAR EXTERNAL CREAM	3	
neuac external gel	1	
NORITATE EXTERNAL CREAM	3	
ONEXTON EXTERNAL GEL	3	
OPZELURA EXTERNAL CREAM	2	
ORACEA ORAL CAPSULE DELAYED RELEASE	3	
PETROLEUM GAUZE NON-WOVEN 3X9" EXTERNAL	3	
pimecrolimus external cream	1	

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Drug Name	Drug Tier	Requirements /Limits
PLEXION CLEANSER EXTERNAL LIQUID	3	
podofilox external gel	1	
podofilox external solution	1	
PRAMOSONE EXTERNAL LOTION	3	
PRUDOXIN EXTERNAL CREAM	3	
PYROGALLIC ACID EXTERNAL OINTMENT	3	
QBREXZA EXTERNAL PAD	3	
RADIAPLEXRX EXTERNAL GEL	3	
RECEDO EXTERNAL GEL	3	
REGENECARE EXTERNAL GEL	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	
salicylic acid er external solution	1	
salicylic acid external solution	1	
SANTYL EXTERNAL OINTMENT	3	
SCENESSE SUBCUTANEOUS IMPLANT	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
selenium sulfide external lotion	1	
SERNIVO EXTERNAL EMULSION	3	
SOFDRA EXTERNAL GEL	3	
SOOLANTRA EXTERNAL CREAM	3	
SORILUX EXTERNAL FOAM	3	
sulfacetamide sodium (acne) external lotion	1	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %, 9.8-4.8 %	1	
sulfacetamide sodium-sulfur external suspension 8-4 %	1	
SYNALAR EXTERNAL CREAM	3	
SYNALAR EXTERNAL OINTMENT	3	
TACLONEX EXTERNAL SUSPENSION	3	
tacrolimus external ointment	1	
tazarotene external cream	1	
TAZAROTENE EXTERNAL FOAM	3	
tazarotene external gel	1	
TAZORAC EXTERNAL CREAM	3	
TAZORAC EXTERNAL GEL	3	
TEXACORT EXTERNAL SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
TOLAK EXTERNAL CREAM	3	
TOPICORT EXTERNAL OINTMENT	3	
TOPICORT SPRAY EXTERNAL LIQUID	3	
tovet external foam	1	
tretinoin external cream	1	
tretinoin external gel	1	
tretinoin microsphere external gel	1	
tretinoin microsphere pump external gel	1	
triamcinolone acetanide external aerosol solution	1	
triamcinolone acetanide external cream	1	
triamcinolone acetanide external lotion	1	
triamcinolone acetanide external ointment	1	
triamcinolone in absorbase external ointment	1	
triderm external cream	1	
TWYNEO EXTERNAL CREAM	3	
ULTRAVATE EXTERNAL LOTION	3	
urea external cream 20 %, 40 %, 41 %	1	
urea external lotion	1	
VANOS EXTERNAL CREAM	3	
VECTICAL EXTERNAL OINTMENT	3	
VENELEX EXTERNAL OINTMENT	3	

Drug Name	Drug Tier	Requirements /Limits
VEREGEN EXTERNAL OINTMENT	3	
VTAMA EXTERNAL CREAM	2	
WINLEVI EXTERNAL CREAM	3	
WYNZORA EXTERNAL CREAM	3	
XALIX EXTERNAL SOLUTION	3	
XERAC AC EXTERNAL SOLUTION	3	
XEROFORM OCCLUSIVE GAUZE PATCH EXTERNAL PAD	3	
XEROFORM OIL EMULSION 2"X2" EXTERNAL PAD	3	
XEROFORM OIL EMULSION GAUZE EXTERNAL PAD	3	
XEROFORM OIL EMULSION STRIP EXTERNAL	3	
XEROFORM OIL ROLL 4"X9' EXTERNAL	3	
XEROFORM PETROLAT GAUZE 1"X8" EXTERNAL	3	
XEROFORM PETROLAT GAUZE 5"X9" EXTERNAL	3	
XEROFORM PETROLAT PATCH 2"X2" EXTERNAL PAD	3	
XEROFORM PETROLAT PATCH 4"X4" EXTERNAL PAD	3	

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Drug Name	Drug Tier	Requirements /Limits
XEROFORM PETROLATUM DRES 4"X4" EXTERNAL PAD	3	
XEROFORM PETROLATUM DRES 5"X9" EXTERNAL PAD	3	
XEROFORM PETROLATUM ROLL 4"X9' EXTERNAL	3	
YCANTH EXTERNAL SOLUTION	3	
ZELSUVMi EXTERNAL GEL	3	
zenatane oral capsule	1	
ZIANA EXTERNAL GEL	3	
ZILXI EXTERNAL FOAM	3	
ZONALON EXTERNAL CREAM	3	
ZORYVE EXTERNAL CREAM 0.05 %	3	
ZORYVE EXTERNAL CREAM 0.15 %, 0.3 %	2	
ZORYVE EXTERNAL FOAM	3	
ZYCLARA EXTERNAL CREAM	3	
ZYCLARA PUMP EXTERNAL CREAM	3	
Diabetes - Antidiabetic Agents		
acarbose oral tablet	1	
ACTOPLUS MET ORAL TABLET	3	
ACTOS ORAL TABLET	3	
ALOGLIPTIN BENZOATE ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
ALOGLIPTIN-METFORMIN HCL ORAL TABLET	3	
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET	3	
BEXAGLIFLOZIN ORAL TABLET	3	
BRENZAVVY ORAL TABLET	3	
BRYNOVIN ORAL SOLUTION	3	
CYCLOSET ORAL TABLET	3	
DAPAGLIFLOZIN PRO-METFORMIN ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
DAPAGLIFLOZIN PROPANEDIOL ORAL TABLET	3	
DUETACT ORAL TABLET	3	
EXENATIDE SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
FARXIGA ORAL TABLET	2	
glimepiride oral tablet	1	
glipizide er oral tablet extended release 24 hour	1	
glipizide oral tablet	1	
glipizide-metformin hcl oral tablet	1	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
glyburide micronized oral tablet	1	
glyburide oral tablet	1	
glyburide-metformin oral tablet	1	
GLYXAMBI ORAL TABLET	2	
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	
JARDIANCE ORAL TABLET	2	
JENTADUETO ORAL TABLET	2	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
liraglutide subcutaneous solution pen-injector	1	PA
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	

Drug Name	Drug Tier	Requirements /Limits
metformin hcl oral solution	1	
metformin hcl oral tablet	1	
miglitol oral tablet	1	
MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA
nateglinide oral tablet	1	
ONGLYZA ORAL TABLET	3	
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA
pioglitazone hcl oral tablet	1	
pioglitazone hcl-glimepiride oral tablet	1	
pioglitazone hcl-metformin hcl oral tablet	1	
repaglinide oral tablet	1	
RIOMET ORAL SOLUTION	3	
RYBELSUS ORAL TABLET	2	PA
saxagliptin hcl oral tablet	1	
saxagliptin-metformin er oral tablet extended release 24 hour	1	
SEGLUROMET ORAL TABLET	3	
SITAGLIPT BASE-METFORM HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
SITAGLIPTIN BASE-METFORMIN HCL ORAL TABLET	3	
SITAGLIPTIN ORAL TABLET	3	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	
STEGLATRO ORAL TABLET	3	
STEGLUJAN ORAL TABLET	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 AUTO-INJECTOR	2	PA
TZIELD INTRAVENOUS SOLUTION	3	
VICTOZA	3	PA
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	QL (1 ML per 1 day)
ZITUVIMET ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
ZITUVIMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
ZITUVIO ORAL TABLET	3	
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA IN VITRO SOLUTION	3	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	3	
ACCU-CHEK AVIVA PLUS KIT	3	
ACCU-CHEK FASTCLIX LANCET KIT KIT	2	
ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	3	
ACCU-CHEK GUIDE KIT	3	
ACCU-CHEK GUIDE ME KIT	3	
ACCU-CHEK GUIDE TEST IN VITRO STRIP	3	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	3	
ACCU-CHEK SMARTVIEW TEST STRIPS IN VITRO STRIP	3	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	
ADVOCATE SAFETY LANCETS 21G	2	
ADVOCATE SAFETY LANCETS 23G	2	

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Drug Name	Drug Tier	Requirements /Limits
ADVOCATE SAFETY LANCETS 28G	2	
AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION	3	
AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION	3	
ASSURE PLATINUM IN VITRO STRIP	3	
AUTOLET II CLINISAFE KIT	3	
AUTOLET LANCING DEVICE	3	
AUTOLET LITE LANCING DEVICE	3	
BIOTEL CARE BLOOD GLUCOSE KIT	3	
BIOTEL CARE BLOOD GLUCOSE SYST KIT	3	
BLOOD GLUCOSE MONITORING 333 DEVICE	3	
BLOOD GLUCOSE TEST IN VITRO STRIP	3	
BLOOD GLUCOSE TEST STRIPS 333 IN VITRO STRIP	3	
BLULINK CONTROL HIGH & LOW IN VITRO LIQUID	3	
BLULINK GLUCOSE MONITORING SYS DEVICE	3	
BLULINK GLUCOSE TEST IN VITRO STRIP	3	
CARESENS CONTROL SOLUTION A/B IN VITRO SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
CARESENS LANCETS 30G	2	
CARESENS N FELIZ BT DEVICE	3	
CARESENS N FELIZ DEVICE	3	
CARESENS N PLUS BT KIT	3	
CARESENS S CONTROL SOLN A/B IN VITRO LIQUID	3	
CARESENS S FIT BLOOD GLUC MON DEVICE	3	
CARESENS S FIT BT BLOOD GLUC DEVICE	3	
CARESENS S GLUCOSE TEST IN VITRO STRIP	3	
CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID	3	
CARETOUCH LANCING/EJECTOR	3	
CARETOUCH TEST IN VITRO STRIP	3	
CEQUR SIMPLICITY 2U DEVICE	2	
CEQUR SIMPLICITY INSERTER	2	
CHEMSTRIP BG LOG BOOK	3	
CHEMSTRIP K IN VITRO STRIP	3	
CHEMSTRIP UGK IN VITRO STRIP	3	
CHOSEN LANCETS 30G	2	
CHOSEN LANCING DEVICE	3	

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Drug Name	Drug Tier	Requirements /Limits
CHOSEN SAFETY LANCETS 28G	2	
CLEVER CHOICE COMFORT EZ	2	
COMFORT TOUCH TWIST LANCET 30G	2	
CONTOUR CONTROL IN VITRO LIQUID	2	
CONTOUR MONITOR DEVICE DEVICE	2	
CONTOUR MONITOR KIT W/DEVICE KIT	2	
CONTOUR NEXT CONTROL IN VITRO SOLUTION	2	
CONTOUR NEXT EZ KIT	2	
CONTOUR NEXT GEN MONITOR KIT	2	
CONTOUR NEXT LINK KIT	2	
CONTOUR NEXT MONITOR KIT	2	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT TEST IN VITRO STRIP	2	
CONTOUR PLUS BLUE KIT	2	
CONTOUR PLUS CONTROL SOLUTION IN VITRO LIQUID	3	
CONTOUR PLUS TEST IN VITRO STRIP	2	
CONTOUR TEST IN VITRO STRIP	2	
DEXCOM G6 RECEIVER DEVICE	2	
DEXCOM G6 SENSOR	2	

Drug Name	Drug Tier	Requirements /Limits
DEXCOM G6 TRANSMITTER	2	
DEXCOM G7 15 DAY SENSOR	2	
DEXCOM G7 RECEIVER DEVICE	2	
DEXCOM G7 SENSOR	2	
DIASTIX REAGENT IN VITRO STRIP	2	
DIATHRIVE BLOOD GLUCOSE METER DEVICE	3	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP	3	
DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID	3	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP	3	
DIATHRIVE LANCING DEVICE	3	
DIATHRIVE+ GLUCOSE MONITOR DEVICE	3	
DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP	3	
DROPLET GENTEEL LANCING DEVICE	3	
DROPSAFE ACTI-LANCE 23G	2	
EASY MAX BLOOD GLUCOSE TEST IN VITRO STRIP	3	
EASY MAX T1 GLUCOSE SYSTEM KIT	3	
EASY TALK PLUS II CONTROL IN VITRO SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
EASY TALK PLUS II TEST STRIPS IN VITRO STRIP	3	
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP	3	
EASY TOUCH HEALTHPRO GLUCOSE KIT	3	
EASY TOUCH HEALTHPRO HIGH/LOW IN VITRO LIQUID	3	
EASY TOUCH LANCING DEVICE	3	
EASY TRAK II BLOOD GLUCOSE SYS DEVICE	3	
EASY TRAK II CONTROL IN VITRO LIQUID	3	
EASY TRAK II GLUCOSE TEST IN VITRO STRIP	3	
EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID	3	
EASYMAX CONTROL IN VITRO SOLUTION	3	
EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID	3	
EMBRACE EVO GLUCOSE MONITOR DEVICE	3	
EMBRACE LANCING DEVICE/EJECTOR	3	
EMBRACE TALK BLOOD GLUCOSE DEVICE	3	

Drug Name	Drug Tier	Requirements /Limits
EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION	3	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	3	
EMBRACE TALK MONITORING SYSTEM KIT	3	
EMBRACE WAVE BLOOD GLUCOSE DEVICE	3	
EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP	3	
EMBRACE WAVE GLUCOSE METER DEVICE	3	
ENLITE GLUCOSE SENSOR	3	
EVERSENSE 365 SENSOR/HOLDER	3	
EVERSENSE 365 SMART TRANSMIT	3	
EVERSENSE SENSOR/HOLDER	3	
EVERSENSE SMART TRANSMITTER	3	
FORA 6 CONNECT IN VITRO STRIP	3	
FORA 6 CONNECT/GTEL TEST IN VITRO STRIP	3	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	3	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	3	
FORA TN'G ADVANCE PRO IN VITRO STRIP	3	

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Drug Name	Drug Tier	Requirements /Limits
FREESTYLE FREEDOM LITE KIT	2	
FREESTYLE INSULINX TEST IN VITRO STRIP	2	
FREESTYLE LIBRE 14 DAY READER DEVICE	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	
FREESTYLE LIBRE 2 PLUS SENSOR	2	
FREESTYLE LIBRE 2 READER DEVICE	2	
FREESTYLE LIBRE 2 SENSOR	2	
FREESTYLE LIBRE 3 PLUS SENSOR	2	
FREESTYLE LIBRE 3 READER DEVICE	2	
FREESTYLE LIBRE 3 SENSOR	2	
FREESTYLE LIBRE READER DEVICE	2	
FREESTYLE LITE TEST IN VITRO STRIP	2	
FREESTYLE PRECISION NEO SYSTEM KIT	2	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	2	
FREESTYLE TEST IN VITRO STRIP	2	
GENTEEL LANCING KIT (BLUE) KIT	3	
GHT BLOOD GLUCOSE MONITOR KIT	3	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP	3	

Drug Name	Drug Tier	Requirements /Limits
GLUCOCARD EXPRESSION TEST IN VITRO STRIP	3	
GLUCOCARD SHINE CONNEX KIT	3	
GLUCOCARD SHINE EXPRESS KIT	3	
GLUCOCARD SHINE TEST IN VITRO STRIP	3	
GLUCOCARD VITAL TEST IN VITRO STRIP	3	
GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP	3	
GOJJI CONTROL IN VITRO SOLUTION	3	
GOJJI LANCING DEVICE/CLEAR CAP	3	
GUARDIAN 4 GLUCOSE SENSOR	3	
GUARDIAN 4 TRANSMITTER	3	
GUARDIAN LINK 3 TRANSMITTER	3	
GUARDIAN REAL-TIME CHARGER	3	
GUARDIAN REAL-TIME TEST PLUG	3	
GUARDIAN SENSOR 3	3	
HW EMBRACE PRO GLUCOSE METER DEVICE	3	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	3	
HW EMBRACE TALK BLOOD GLUCOSE DEVICE	3	

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Drug Name	Drug Tier	Requirements /Limits
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	3	
IHEALTH BLOOD GLUCOSE TEST STR IN VITRO STRIP	3	
IHEALTH CONTROL SOLUTION IN VITRO LIQUID	3	
IHEALTH LANCING DEVICE	3	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP	3	
KETO-DIASTIX IN VITRO STRIP	3	
KETONE CARE IN VITRO STRIP	3	
KETOSTIX IN VITRO STRIP	3	
KROGER HEALTHPRO GLUCOSE TEST IN VITRO STRIP	3	
KT TAPE CGM PATCH	3	
LANCETS	2	
LANCETS 28G THIN	2	
LANCETS IN VITRO STRIP	3	
LANCETS SUPER THIN	2	
MICRODOT TEST IN VITRO STRIP	3	
MICROLET NEXT LANCING DEVICE	3	
MINIMED INSTINCT GLUC SENSOR	3	
MM BLOOD GLUCOSE SYSTEM KIT	3	

Drug Name	Drug Tier	Requirements /Limits
MM BLOOD GLUCOSE SYSTEM REFILL KIT	3	
MM BLULINK GLUCOSE MONIT SYS DEVICE	3	
MM BLULINK GLUCOSE TEST IN VITRO STRIP	3	
MOBILE LANCETS 30G	2	
NOVOPEN ECHO DEVICE	3	
ONE DROP BLOOD GLUCOSE MONITOR KIT	3	
ONE DROP TEST IN VITRO STRIP	3	
ONETOUCH DELICA PLUS LANCING	3	
ONETOUCH DELICA SAFETY LANCING	2	
ONETOUCH ULTRA 2 KIT	3	
ONETOUCH ULTRA BLUE TEST IN VITRO STRIP	3	
ONETOUCH ULTRA IN VITRO LIQUID	3	
ONETOUCH ULTRA IN VITRO STRIP	3	
ONETOUCH ULTRA TEST IN VITRO STRIP	3	
ONETOUCH VERIO FLEX SYSTEM DEVICE	3	
ONETOUCH VERIO FLEX SYSTEM KIT	3	
ONETOUCH VERIO IN VITRO LIQUID HIGH	3	

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Drug Name	Drug Tier	Requirements /Limits
ONETOUCH VERIO TEST STRIPS	3	
ONETOUCH VERIO REFLECT KIT	3	
PERFECT POINT SAFETY LANCETS	2	
PIP BLOOD GLUCOSE MONITORING DEVICE	3	
PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP	3	
PIP GLUCOSE CONTROL SOLUTION IN VITRO LIQUID	3	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE	3	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST	3	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	2	
PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE	3	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	3	
PRODIGY NO CODING BLOOD GLUC KIT	3	
PRODIGY VOICE BLOOD GLUCOSE KIT	3	
PTS PANELS EGLU TEST IN VITRO STRIP	3	
QUICK TOUCH BLOOD GLUCOSE KIT	3	

Drug Name	Drug Tier	Requirements /Limits
QUICK TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP	3	
RELION GLUCOSE TEST STRIPS IN VITRO STRIP	3	
RELION PREMIER CLASSIC DEVICE	3	
RELION PREMIER TEST IN VITRO STRIP	3	
RIGHTTEST GT333 BLOOD GLUCOSE DEVICE	3	
RIGHTTEST GT333 BLOOD GLUCOSE IN VITRO STRIP	3	
RIGHTTEST GT333 GLUCOSE TEST IN VITRO STRIP	3	
SIMPLERA SENSOR	3	
SIMPLERA SYNC SENSOR	3	
SIMPLERA SYSTEM	3	
TECHLITE LANCETS 26G	2	
TEMPO REFILL KIT	3	
TEMPO SMART BUTTON	3	QL (1 EA per 1 day)
TEMPO WELCOME KIT	3	
TRUE FOCUS BLOOD GLUCOSE METER DEVICE	3	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP	3	
TRUE METRIX LEVEL 1 IN VITRO SOLUTION	3	
TRUE METRIX LEVEL 2 IN VITRO SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
TRUE METRIX LEVEL 3 IN VITRO SOLUTION	3	
TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP	3	
UNISTRIIP CONTROL IN VITRO SOLUTION LOW	3	
VERIFINE SAFE LANCET MINI 21G	2	
VERIFINE SAFE LANCET MINI 23G	2	
VERIFINE SAFE LANCET MINI 28G	2	
VERIFINE SAFE LANCET MINI 30G	2	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	3	
VIVAGUARD INO GLUCOSE METER DEVICE	3	
VIVAGUARD INO GLUCOSE METER KIT	3	
VIVAGUARD INO SMART GLUC METER DEVICE	3	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	3	
VIVAGUARD LANCETS 30G	2	
VIVAGUARD LANCING DEVICE	3	
VIVAGUARD SAFETY LANCETS 28G	2	
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK NASAL POWDER	2	

Drug Name	Drug Tier	Requirements /Limits
BAQSIMI TWO PACK NASAL POWDER	2	
diazoxide oral suspension	1	
glucagon emergency kit injection solution reconstituted 1 mg	1	
GLUCAGON EMERGENCY KIT	2	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
GVOKE KIT SUBCUTANEOUS SOLUTION	3	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
PROGLYCEM ORAL SUSPENSION	3	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	
Diabetes - Insulins		
ADMELOG INJECTION SOLUTION	1	

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Drug Name	Drug Tier	Requirements /Limits
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
AFREZZA INHALATION POWDER	3	
APIDRA SOLOSTAR	1	
APIDRA VIAL INJECTION SOLUTION	1	
AQ INSULIN SYRINGE	2	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
BD ULTRA-FINE INSULIN SYRINGES 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML	2	
BD VEO INSULIN SYR ULTRAFINE	2	
DROPSAFE SAFETY SYRINGE/NEEDLE	2	
EMBECTA INS SYR U/F 1/2 UNIT	2	
EMBECTA INSULIN SYR ULTRAFINE	2	

Drug Name	Drug Tier	Requirements /Limits
EMBECTA INSULIN SYRINGE	2	
EMBECTA INSULIN SYRINGE U-100	2	
EMBECTA INSULIN SYRINGE U-500	2	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
FIASP INJECTION SOLUTION	1	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	1	
FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE	1	
HUMALOG INJECTION SOLUTION	1	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
HUMALOG MIX 50/50 KWIKPEN	1	
HUMALOG MIX 75/25 KWIKPEN	1	
HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION	1	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	1	

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Drug Name	Drug Tier	Requirements /Limits
HUMALOG TEMPO PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	1	
HUMULIN 70/30 KWIKPEN	1	
HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	1	
HUMULIN N KWIKPEN	1	
HUMULIN N VIAL SUBCUTANEOUS SUSPENSION	1	
HUMULIN R SOLUTION 100 UNIT/ML INJECTION	1	QL (1 ML per 1 day)
HUMULIN R SOLUTION 100 UNIT/ML INJECTION	1	
HUMULIN R U-500 KWIKPEN	1	
INSULIN ASP PROT & ASP FLEXPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	1	
INSULIN ASPART FLEXPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	1	
INSULIN ASPART INJECTION SOLUTION	1	

Drug Name	Drug Tier	Requirements /Limits
INSULIN ASPART PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	1	
INSULIN ASPART PROT & ASPART SUBCUTANEOUS SUSPENSION	1	
INSULIN DEGLUDEC FLEXTouch SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
INSULIN DEGLUDEC SUBCUTANEOUS SOLUTION	3	
INSULIN GLARGINE MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
INSULIN GLARGINE- YFGN SUBCUTANEOUS SOLUTION	3	
INSULIN GLARGINE- YFGN SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN- INJECTOR	1	
INSULIN LISPRO INJECTION SOLUTION	1	

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Drug Name	Drug Tier	Requirements /Limits
INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN-INJECTOR	1	
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 0.5 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/2" 0.3 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML	2	
KIRSTY INJECTION SOLUTION	3	
KIRSTY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
LANTUS U-100 SOLOSTAR	1	
LANTUS U-100 VIAL SUBCUTANEOUS SOLUTION	1	

Drug Name	Drug Tier	Requirements /Limits
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
LYUMJEV TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
LYUMJEV VIAL INJECTION SOLUTION	1	
MERILOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
MERILOG SUBCUTANEOUS SOLUTION	3	
MYXREDLIN INTRAVENOUS SOLUTION	3	
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	1	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	1	
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	1	
NOVOLIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	1	

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Drug Name	Drug Tier	Requirements /Limits
NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	1	QL (1 ML per 1 day)
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	1	QL (1 ML per 1 day)
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION	1	
NOVOLIN N VIAL SUBCUTANEOUS SUSPENSION	1	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR	1	QL (1 ML per 1 day)
NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR	1	QL (1 ML per 1 day)
NOVOLIN R RELION INJECTION SOLUTION	1	
NOVOLIN R VIAL INJECTION SOLUTION	1	
NOVOLOG 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
NOVOLOG U-100 FLEXPEN	1	
NOVOLOG MIX 70/30 FLEXPEN	1	

Drug Name	Drug Tier	Requirements /Limits
NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION	3	
NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION	1	
NOVOLOG U-100 PENFILL	1	
NOVOLOG RELION INJECTION SOLUTION	3	
NOVOLOG U-100 VIAL INJECTION SOLUTION	1	
REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION	3	
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	

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Drug Name	Drug Tier	Requirements /Limits
TRESIBA SUBCUTANEOUS SOLUTION	1	
ULTIGUARD SAFEPAK SYR/NEEDLE	2	
VERIFINE INSULIN SYRINGE	2	
Electrolytes / Minerals / Metals / Vitamins		
5-MTHF ORAL CAPSULE	3	
ABANEU-SL SUBLINGUAL TABLET SUBLINGUAL	3	
ACCRUFER ORAL CAPSULE	3	
ACTIVE FE ORAL TABLET	3	
ADRENAL C FORMULA ORAL TABLET	3	
AIRAVITE ORAL TABLET	3	
ALANINE POWDER	3	
AMINO ACID INTRAVENOUS SOLUTION	3	
AMINO ACID- CALCIUM-HEP IN D10W INTRAVENOUS SOLUTION 3 %	3	
AMINOPROTECT INTRAVENOUS SOLUTION	3	
AMINOSYN II INTRAVENOUS SOLUTION	3	
AMINOSYN-PF 7% INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
AMINOSYN-PF INTRAVENOUS SOLUTION	3	
AQUASOL A INTRAMUSCULAR SOLUTION	3	
ARGININE HCL INJECTION SOLUTION	3	
ARGYLE STERILE SALINE IRRIGATION SOLUTION	3	
argyle sterile water irrigation solution	1	
ATABEX OB ORAL TABLET	2	
BACMIN ORAL TABLET	3	
BIOCEL ORAL TABLET	3	
BP VIT 3 ORAL CAPSULE	3	
b-plex oral tablet	1	
b-plex plus oral tablet	1	
CALCIFOL ORAL WAFER	3	
CALCIUM CHLORIDE DIHYDRATE POWDER	3	
CALCIUM CHLORIDE SOLUTION 10 % INTRAVENOUS	3	
calcium chloride solution 10 % intravenous	1	
CALCIUM GLUCONATE ANHYDROUS POWDER	3	
calcium gluconate intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
CALCIUM GLUCONATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
CALCIUM GLUCONATE MONOHYDRATE POWDER	3	
CALCIUM GLUCONATE POWDER	3	
calcium gluconate-nacl intravenous solution 1-0.675 gm/50ml-%, 1-0.8 gm/100ml-%, 2-0.675 gm/100ml-%	1	
CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION 1-0.9 GM/100ML-%, 2-0.9 GM/100ML-%	3	
CALCIUM LACTATE PENTAHYDRATE POWDER	3	
CALCIUM PHOSPHATE DIBASIC POWDER	3	
CALCIUM PHOSPHATE TRIBASIC POWDER	3	
CARBAGLU ORAL TABLET SOLUBLE	3	PA; SP
carglumic acid oral tablet soluble	1	PA; SP
CARNITOR INTRAVENOUS SOLUTION	3	
CARNITOR ORAL SOLUTION	3	
CARNITOR ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
CARNITOR SF ORAL SOLUTION	3	
CENFOL ORAL TABLET	3	
CENTRATEX ORAL CAPSULE	3	
CHEMET ORAL CAPSULE	3	
CHOLINE BITARTRATE POWDER	3	
chromic chloride intravenous solution	1	
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION	3	
CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION	3	
CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION	3	
CLINISOL SF INTRAVENOUS SOLUTION	3	
CLINOLIPID INTRAVENOUS EMULSION	3	
cod liver oil oral oil	1	
corvita 150 oral tablet	1	
CORVITA ORAL TABLET	3	
CORVITE 150 ORAL TABLET 150-1.25 MG	2	
cupric chloride intravenous solution	1	
CURITY STERILE SALINE IRRIGATION SOLUTION	3	
CUVRIOR ORAL TABLET	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal solution	1	
deferasirox granules oral packet	1	
deferasirox oral packet	1	
deferasirox oral tablet	1	
deferasirox oral tablet soluble	1	
deferiprone oral tablet	1	
DEPLIN FC ORAL CAPSULE	3	
DEPLIN MA ORAL CAPSULE	3	
DEXPANTHENOL INJECTION SOLUTION	3	
dextrose intravenous solution 10 %, 20 %, 30 %, 40 %, 5 %, 70 %	1	
DEXTROSE SOLUTION 250 MG/ML INTRAVENOUS	3	
dextrose solution 250 mg/ml intravenous	1	
DEXTROSE SOLUTION 50 % INTRAVENOUS	3	
dextrose solution 50 % intravenous	1	
DIALYVITE 3000 ORAL TABLET	3	
DIALYVITE 5000 ORAL TABLET	3	
DIALYVITE ORAL TABLET	3	
DIALYVITE SUPREME D ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
DIALYVITE/ZINC ORAL TABLET	3	
DL-ALANINE POWDER	3	
DL-LEUCINE POWDER	3	
DL-METHIONINE POWDER	3	
DL-PHENYLALANINE POWDER	3	
DRISDOL ORAL CAPSULE	3	
EB-N3 DR ORAL CAPSULE DELAYED RELEASE	3	
EDETATE DISODIUM INTRAVENOUS SOLUTION	3	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k oral tablet effervescent 25 meq	1	
ELFOLATE ORAL TABLET	3	
ELITE-OB ORAL TABLET	2	
ergocalciferol oral capsule	1	
EXJADE ORAL TABLET SOLUBLE	3	
FERAHEME INTRAVENOUS SOLUTION	3	
ferottrinsic oral capsule	1	
FERRALET 90 ORAL TABLET	3	
FERRIPROX ORAL SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
FERRIPROX ORAL TABLET	3	
FERRIPROX TWICE-A-DAY ORAL TABLET	3	
FERRLECIT INTRAVENOUS SOLUTION	3	
FERRO-PLEX ORAL TABLET	3	
ferumoxytol intravenous solution	1	
FOLAFY ER ORAL TABLET EXTENDED RELEASE	3	
FOLBIC RF ORAL TABLET	3	
FOLGARD OS ORAL TABLET	3	
FOLGARD RX ORAL TABLET	2	
folic acid injection solution	1	
folic acid oral tablet 1 mg	1	
FOLIVANE-F ORAL CAPSULE	3	
FOLIVANE-PLUS ORAL CAPSULE	3	
FOLPLEX 2.2 ORAL TABLET	3	
FOLTANX ORAL TABLET	3	
foltrin oral capsule	1	
FOLTX ORAL TABLET	3	
FUSION PLUS ORAL CAPSULE	3	
GALZIN ORAL CAPSULE	3	
glucose (dextrose) intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
GLUTATHIONE INJECTION SOLUTION 200 MG/ML	3	
GLUTATHIONE INTRAVENOUS SOLUTION	3	
GLYCINE INJECTION SOLUTION	3	
GLYCOPHOS INTRAVENOUS SOLUTION	3	
HEMATINIC PLUS VIT/MINERALS ORAL TABLET	3	
HEMATINIC/FOLIC ACID ORAL TABLET	3	
HEMATOGEN FA ORAL CAPSULE	3	
HEMOCYTE PLUS ORAL CAPSULE	3	
hydroxocobalamin acetate intramuscular solution	1	
ICAR-C PLUS ORAL TABLET	2	
INFED INJECTION SOLUTION	3	
INFUVITE ADULT INTRAVENOUS SOLUTION	3	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	3	
INJECTAFER INTRAVENOUS SOLUTION	3	
INTEGRA F ORAL CAPSULE	3	
INTEGRA PLUS ORAL CAPSULE	3	

Drug Name	Drug Tier	Requirements /Limits
INTRALIPID INTRAVENOUS EMULSION	3	
iodine strong oral solution	1	
IRON FOLATE PLUS ORAL CAPSULE	3	
iron sucrose intravenous solution	1	
JADENU ORAL TABLET	3	
JADENU SPRINKLE ORAL PACKET	3	
JYNARQUE ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
JYNARQUE ORAL TABLET THERAPY PACK	3	PA; SP; QL (2 EA per 1 day)
KABIVEN INTRAVENOUS EMULSION	3	
KIONEX COMBINATION SUSPENSION	3	
klor-con 10 oral tablet extended release	1	
klor-con m10 oral tablet extended release	1	
klor-con m15 oral tablet extended release	1	
klor-con m20 oral tablet extended release	1	
klor-con oral packet	1	
klor-con oral tablet extended release	1	
K-PHOS ORAL TABLET	3	
k-tan plus oral capsule	1	
lactated ringers irrigation solution	1	

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Drug Name	Drug Tier	Requirements /Limits
L-ALANINE POWDER	3	
L-ARGININE POWDER	3	
L-CYSTINE POWDER	3	
LEVOCARNITINE INJECTION SOLUTION	3	
levocarnitine intravenous solution	1	
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
levocarnitine sf oral solution	1	
L-GLUTAMIC ACID POWDER	3	
L-HISTIDINE MONOHYDROCHLORIDE POWDER	3	
L-HISTIDINE POWDER	3	
LIPO INTRAMUSCULAR SOLUTION	3	
LIPO-C INTRAMUSCULAR SOLUTION	3	
L-ISOLEUCINE POWDER	3	
LIVITA CHILDREN ORAL LIQUID	3	
L-LEUCINE POWDER	3	
L-METHIONINE POWDER	3	
l-methylfolate calcium oral tablet 7.5 mg	1	
l-methylfolate oral tablet	1	
l-methylfolate-algae-b12-b6 oral capsule	1	
l-methyl-mc oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
LOKELMA ORAL PACKET	3	
L-PHENYLALANINE POWDER	3	
L-PROLINE POWDER	3	
L-TRYPTOPHAN POWDER	3	
L-TYROSINE POWDER	3	
L-VALINE POWDER	3	
LYSINE HCL INJECTION SOLUTION	3	
LYSIPLEX PLUS ORAL TABLET	3	
MAGNESIUM CARBONATE HEAVY POWDER	3	
MAGNESIUM CARBONATE POWDER	3	
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	3	
MANGANESE CHLORIDE INTRAVENOUS SOLUTION	3	
MEDI TAB ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
METAFOLBIC ORAL TABLET	3	
METAFOLBIC PLUS ORAL TABLET	3	
METANX FC ORAL CAPSULE	3	
METHIONINE POWDER	3	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	3	
methylfol-algae-b12-acetylcyst oral tablet	1	
methyl-folate oral capsule	1	
MI-VITE RX ORAL TABLET	3	
M-NATAL PLUS ORAL TABLET	2	
MONOFERRIC INTRAVENOUS SOLUTION	3	
MULTIGEN FOLIC ORAL TABLET	3	
MULTIGEN ORAL TABLET	3	
MULTIGEN PLUS ORAL TABLET	3	
MULTRYS INTRAVENOUS SOLUTION	3	
MYNEPHRON ORAL CAPSULE	3	
na ferric gluc cplx in sucrose intravenous solution	1	
NASCOBAL NASAL SOLUTION	3	
NEOKE ALCAR ORAL POWDER	3	

Drug Name	Drug Tier	Requirements /Limits
NEONATAL PLUS ORAL TABLET	2	
NEO-VITAL RX ORAL TABLET	3	
NEOVITE ORAL TABLET	3	
NEPHPLEX RX ORAL TABLET	3	
NEPHRON FA ORAL TABLET	3	
NEURIN-SL SUBLINGUAL TABLET SUBLINGUAL	3	
NIFEREX ORAL TABLET	3	
NUFOL ORAL TABLET	3	
NUFOLA ORAL CAPSULE	3	
NUTRIFAC ZX ORAL TABLET	3	
NUTRILIPID INTRAVENOUS EMULSION	3	
NUTRIVIT ORAL LIQUID	3	
ONE VITE WOMENS PLUS ORAL TABLET	2	
ORAL CITRATE ORAL SOLUTION	3	
PERIKABIVEN INTRAVENOUS EMULSION	3	
phosphorous oral tablet	1	
phospho-trin 250 neutral oral tablet	1	
PHOSPHO-TRIN K500 ORAL TABLET	3	
PHYSIOLYTE IRRIGATION SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	3	
phytonadione injection solution	1	
phytonadione oral tablet	1	
PLENAMINE INTRAVENOUS SOLUTION	3	
pnv 27-ca/fe/fa oral tablet	1	
pnv prenatal plus multivit+dha oral	1	
PODIAPN ORAL CAPSULE	3	
POKONZA ORAL PACKET	3	
poly-iron 150 forte oral capsule	1	
polysaccharide iron forte oral capsule	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 intravenous solution	1	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Requirements /Limits
potassium chloride oral packet	1	
potassium chloride oral solution	1	
potassium citrate er oral tablet extended release	1	
potassium phosphates intravenous solution	1	
potassium phosphates(66 meq k) intravenous solution	1	
potassium phosphates(71 meq k) intravenous solution	1	
POTASSIUM PHOSPHATES-NACL INTRAVENOUS SOLUTION 15 MMOL/100ML, 15 MMOL/250ML	3	
PREMASOL INTRAVENOUS SOLUTION	3	
prenatal oral tablet 27-1 mg	1	
prenatal plus vitamin/mineral oral tablet	1	
PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION	3	
PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION	3	
PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION	3	
PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION	3	
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION	3	
PRO HERS RX ORAL CAPSULE	3	
PRO HIS RX ORAL CAPSULE	3	
PRO PCOS RX ORAL CAPSULE	3	
PROSOL INTRAVENOUS SOLUTION	3	
purevit dualfe plus oral capsule	1	
pyridoxine hcl solution 100 mg/ml injection	1	
PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION	3	
REFRESH AA 15 PKU ORAL LIQUID	3	
RELNATE DHA ORAL CAPSULE	2	
RENAL ORAL CAPSULE	3	
RENATABS ORAL TABLET	3	
RENATABS WITH IRON ORAL	3	
ringers irrigation irrigation solution	1	

Drug Name	Drug Tier	Requirements /Limits
SAMSCA ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
se-tan plus oral capsule	1	
SMOFLIPID INTRAVENOUS EMULSION	3	
sod citrate-citric acid oral solution	1	
sodium acetate intravenous solution	1	
SODIUM ASCORBATE POWDER	3	
sodium bicarbonate intravenous solution 4.2 %, 7.5 %	1	
sodium bicarbonate solution 8.4 % intravenous	1	
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	3	
sodium chloride (pf) injection solution	1	
SODIUM CHLORIDE INJECTION SOLUTION 0.9 %	3	
sodium chloride injection solution 2.5 meq/ml	1	
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	1	
sodium chloride irrigation solution	1	
SODIUM CHLORIDE SOLUTION 4 MEQ/ML INTRAVENOUS	3	
sodium chloride solution 4 meq/ml intravenous	1	

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Drug Name	Drug Tier	Requirements /Limits
sodium citrate-citric acid oral solution 3000-2004 mg/30ml	1	
sodium fluoride oral solution	1	
sodium fluoride oral tablet	1	
sodium fluoride oral tablet chewable	1	
sodium phosphates intravenous solution	1	
sodium polystyrene sulfonate oral powder	1	
SPS (SODIUM POLYSTYRENE SULF) COMBINATION SUSPENSION	3	
SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION	3	
sterile water for irrigation irrigation solution	1	
STROVITE FORTE ORAL SYRUP	3	
SUPERVITE ORAL LIQUID	3	
SUPPORT ORAL LIQUID	3	
SYPRINE ORAL CAPSULE	3	PA; SP
TANDEM PLUS ORAL CAPSULE	2	
TARON FORTE ORAL CAPSULE	3	
TAURINE INJECTION SOLUTION	3	
TAURINE POWDER	3	
THAM INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
THE LIQUILIFT TRACE INTRAVENOUS KIT	3	
thiamine hcl injection solution	1	
THREONINE POWDER	3	
tolvaptan oral tablet	1	PA; SP; QL (2 EA per 1 day)
tolvaptan oral tablet therapy pack	1	PA; SP; QL (2 EA per 1 day)
TRALEMENT INTRAVENOUS SOLUTION	3	
TRAVASOL INTRAVENOUS SOLUTION	3	
TRI-AMINO INJECTION SOLUTION	3	
TRICON ORAL CAPSULE	3	
trientine hcl oral capsule	1	PA; SP
trigels-f forte oral capsule	1	
TRINATE ORAL TABLET	2	
triphrocaps oral capsule	1	
TRISODIUM CITRATE/CRRT EXTRACORPOREAL SOLUTION	3	
tromethamine intravenous solution	1	
TROPHAMINE INTRAVENOUS SOLUTION	3	
TRYPTOPHAN POWDER	3	

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Drug Name	Drug Tier	Requirements /Limits
UDAMIN SP ORAL TABLET	3	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	3	
VALINE POWDER	3	
v-c forte oral capsule	1	
VELTASSA ORAL PACKET	3	
VENOFER INTRAVENOUS SOLUTION	3	
vic-forte oral capsule	1	
VIT B12-METHIONINE-INOS-CHOL INTRAMUSCULAR SOLUTION	3	
VITA S FORTE ORAL TABLET	3	
VITACEL ORAL TABLET	3	
VITAL-D RX ORAL TABLET	3	
VITALIPID N INFANT INTRAVENOUS EMULSION	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
vitamin k1 injection solution	1	
VITAROCA PLUS ORAL TABLET	3	
VITLIPID N ADULT INTRAVENOUS EMULSION	3	

Drug Name	Drug Tier	Requirements /Limits
VITLIPID N INFANT INTRAVENOUS EMULSION	3	
water for irrigation, sterile irrigation solution	1	
WESCAP-PN DHA ORAL CAPSULE	2	
wescaps oral capsule	1	
WESNATAL DHA COMPLETE ORAL	2	
wes-phos 250 neutral oral tablet	1	
WESTAB PLUS ORAL TABLET	2	
XAQUIL XR ORAL TABLET EXTENDED RELEASE	3	
zinc chloride intravenous solution	1	
zinc sulfate intravenous solution	1	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX ORAL TABLET DELAYED RELEASE	3	
CARAFATE ORAL TABLET	3	
cimetidine hcl oral solution	1	
cimetidine oral tablet	1	
CYTOTEC ORAL TABLET	3	
DEXILANT ORAL CAPSULE DELAYED RELEASE	3	
dexlansoprazole oral capsule delayed release	1	

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Drug Name	Drug Tier	Requirements /Limits
esomeprazole magnesium oral capsule delayed release	1	
esomeprazole magnesium oral packet	1	
esomeprazole sodium intravenous solution reconstituted	1	
famotidine (pf) intravenous solution	1	
famotidine intravenous solution	1	
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	1	
famotidine premixed intravenous solution	1	
FIRST-LANSOPRAZOLE ORAL SUSPENSION	3	
FIRST-OMEPRAZOLE ORAL SUSPENSION	3	
KONVOMEPRAZOLE ORAL SUSPENSION RECONSTITUTED	3	
lansoprazole oral capsule delayed release	1	
lansoprazole oral tablet delayed release dispersible	1	
misoprostol oral tablet	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	3	
NEXIUM ORAL PACKET	3	
nizatidine oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
omeprazole oral capsule delayed release	1	
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	
PANTOPRAZOLE SODIUM-NACL INTRAVENOUS SOLUTION	3	
PEPCID ORAL TABLET	3	
PREVACID ORAL CAPSULE DELAYED RELEASE	3	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	3	
PRIOSEC ORAL PACKET	3	
PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROTONIX ORAL PACKET	3	
PROTONIX ORAL TABLET DELAYED RELEASE	3	

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Drug Name	Drug Tier	Requirements /Limits
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	3	
rabeprazole sodium oral tablet delayed release	1	
sucralfate oral suspension	1	
sucralfate oral tablet	1	
VOQUEZNA ORAL TABLET	3	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl oral tablet	1	
alvimopan oral capsule	1	
AMITIZA ORAL CAPSULE	3	
atropine sulfate injection solution	1	
atropine sulfate injection solution prefilled syringe 0.25 mg/5ml, 1 mg/10ml	1	
atropine sulfate intravenous solution	1	
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	1	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	1	QL (1 ML per 1 day)
BIO-KULT INFANTIS ORAL PACKET	3	
bis subcit-metronid-tetracyc oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
BISACODYL POWDER	3	
bismuth/metronidaz/tetracyclin oral capsule	1	
CHENODAL ORAL TABLET 250 MG	3	PA; SP
chlordiazepoxide-clidinium oral capsule	1	
CLENPIQ ORAL SOLUTION	3	
constulose oral solution	1	
cromolyn sodium oral concentrate	1	
CTEXLI ORAL TABLET	3	PA; SP
CULTURELLE ABDOMINAL SUPPORT ORAL PACKET	3	
CULTURELLE KIDS GROW THRIVE ORAL PACKET	3	
CUVPOSA ORAL SOLUTION	3	
dicyclomine hcl intramuscular solution	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution 10 mg/5ml	1	
dicyclomine hcl oral tablet	1	
diphenoxylate-atropine oral liquid	1	
diphenoxylate-atropine oral tablet	1	
enulose oral solution	1	
FLORATUMMYS KIDS ORAL PACKET	3	
GASTROCROM ORAL CONCENTRATE	3	

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Drug Name	Drug Tier	Requirements /Limits
GATTEX SUBCUTANEOUS KIT	3	PA; SP
gavilyte-c oral solution reconstituted	1	PV
gavilyte-g oral solution reconstituted	1	PV
gavilyte-n with flavor pack oral solution reconstituted	1	PV
generlac oral solution	1	
GLYCATO ORAL TABLET	3	
glycopyrrolate injection solution	1	
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE	3	
GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
glycopyrrolate oral solution	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	
glycopyrrolate pf +rfid injection solution prefilled syringe	1	
GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	3	
glycopyrrolate pf solution prefilled syringe 0.2 mg/ml injection	1	

Drug Name	Drug Tier	Requirements /Limits
glycopyrrolate pf solution prefilled syringe 0.2 mg/ml injection	1	QL (1 ML per 1 day)
glycopyrrolate pf solution prefilled syringe 0.4 mg/2ml injection	1	
glycopyrrolate pf solution prefilled syringe 0.4 mg/2ml injection	1	QL (1 ML per 1 day)
GLYRX-PF INJECTION SOLUTION	3	
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	3	
GOLYTELY ORAL SOLUTION RECONSTITUTED	3	
hyoscyamine sulfate er oral tablet extended release 12 hour	1	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl sublingual tablet sublingual	1	
hyoscyamine sulfate sublingual tablet sublingual	1	
IBSRELA ORAL TABLET	3	
IQIRVO ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
KRISTALOSE ORAL PACKET	3	

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Drug Name	Drug Tier	Requirements /Limits
lactulose encephalopathy oral solution	1	
lactulose oral packet	1	
lactulose oral solution	1	
LIBRAX ORAL CAPSULE	3	
LINZESS ORAL CAPSULE	2	
LIVDELZI ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1	
LOTRONEX ORAL TABLET	3	
lubiprostone oral capsule	1	
methscopolamine bromide oral tablet	1	
mineral oil heavy oral oil	1	
MOTEGRITY ORAL TABLET	3	
MOTOFEN ORAL TABLET	3	
MOVANTIK ORAL TABLET	2	
MOVIPREP ORAL SOLUTION RECONSTITUTED	3	
MYTESI ORAL TABLET DELAYED RELEASE	3	
na sulfate-k sulfate-mg sulf oral solution	1	PV
OMECLAMOX-PAK ORAL	3	

Drug Name	Drug Tier	Requirements /Limits
OMNI-BIOTIC AB 10 ORAL PACKET	3	
OMNI-BIOTIC BALANCE ORAL PACKET	3	
OMNI-BIOTIC HETOX ORAL PACKET	3	
OMNI-BIOTIC PANDA ORAL PACKET	3	
OMNI-BIOTIC STRESS RELEASE ORAL PACKET	3	
OSCIMIN ORAL TABLET	3	
OSCIMIN SUBLINGUAL TABLET SUBLINGUAL	3	
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 ascorbic acid oral solution reconstituted	1	
PEG-PREP ORAL KIT	3	
PLENVU ORAL SOLUTION RECONSTITUTED	3	
PROBIOMAX 350 DF ORAL PACKET	3	
PROBIOMAX PLUS DF ORAL PACKET	3	
prucalopride succinate oral tablet 2 mg	1	

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Drug Name	Drug Tier	Requirements /Limits
prucalopride succinate tablet 1 mg oral	1	
prucalopride succinate tablet 1 mg oral	1	QL (1 EA per 1 day)
PYLERA ORAL CAPSULE	2	
REBYOTA RECTAL SUSPENSION	3	PA; SP
RELISTOR ORAL TABLET	3	
RELISTOR SUBCUTANEOUS SOLUTION	3	
RELISTOR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
RELTONE ORAL CAPSULE	3	
RESTORA RX ORAL CAPSULE	3	
RESTORE ORAL PACKET	3	
REZDIFFRA ORAL TABLET	3	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
SIMILAC PROBIOTIC TRI-BLEND ORAL PACKET	3	
SUFLAVE ORAL SOLUTION RECONSTITUTED	3	
SUPREP BOWEL PREP KIT ORAL SOLUTION	3	
SUTAB ORAL TABLET	3	
SYMPROIC ORAL TABLET	2	

Drug Name	Drug Tier	Requirements /Limits
TALICIA ORAL CAPSULE DELAYED RELEASE	2	
TRULANCE ORAL TABLET	3	
URSO FORTE ORAL TABLET	3	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	3	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
URSODIOL+SYRSPE ND SF ORAL SUSPENSION	3	
VIBERZI ORAL TABLET	3	
VOWST ORAL CAPSULE	3	PA; SP; QL (24 EA per 365 days)
VSL#3 DS ORAL PACKET	3	
VSL#3 ORAL PACKET	3	
XERMELO ORAL TABLET	3	PA; SP; QL (3 EA per 1 day)
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
ADZYNMA INTRAVENOUS KIT	3	PA; SP
ALDURAZYME INTRAVENOUS SOLUTION	2	PA; SP
betaine oral powder	1	SP
BUPHENYL ORAL POWDER	3	PA; SP
BUPHENYL ORAL TABLET	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
CERDELGA ORAL CAPSULE	3	PA; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
CHOLBAM ORAL CAPSULE	3	PA; SP
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
CRYSVITA SUBCUTANEOUS SOLUTION	3	PA; SP
CYSTADANE ORAL POWDER	3	SP
CYSTAGON ORAL CAPSULE	3	SP
DUVYZAT ORAL SUSPENSION	3	PA; SP; QL (12 ML per 1 day)
ELAPRASE INTRAVENOUS SOLUTION	2	PA; SP
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ELFABRIO INTRAVENOUS SOLUTION	3	PA; SP
EVRYSDI ORAL SOLUTION RECONSTITUTED	3	PA; SP; QL (8 ML per 1 day)
EVRYSDI ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
FORZINITY SUBCUTANEOUS SOLUTION	3	SP

Drug Name	Drug Tier	Requirements /Limits
GALAFOLD ORAL CAPSULE	3	PA; SP; QL (0.5 EA per 1 day)
glycerol phenylbutyrate oral liquid	1	PA; SP
HARLIKU ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
IMCIVREE SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.3 ML per 1 day)
JAVYGTOR ORAL PACKET	3	PA; SP
JAVYGTOR ORAL TABLET	3	PA; SP
KANUMA INTRAVENOUS SOLUTION	3	PA; SP
KUVAN ORAL PACKET	3	PA; SP
KUVAN ORAL TABLET	3	PA; SP
L-GLUTAMIC ACID HCL POWDER	3	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
MEPSEVII INTRAVENOUS SOLUTION	3	PA; SP
miglustat oral capsule	1	PA; SP
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
NAGLAZYME INTRAVENOUS SOLUTION	2	PA; SP
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
nitisinone oral capsule	1	PA; SP
NITYR ORAL TABLET	3	PA; SP
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
OCALIVA ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
OPFOLDA ORAL CAPSULE	3	PA; SP; QL (0.3 EA per 1 day)
ORFADIN ORAL CAPSULE	3	PA; SP
ORFADIN ORAL SUSPENSION	3	PA; SP
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	3	PA; SP; QL (0.5 ML per 1 day)
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2.5 MG/0.5ML	3	PA; SP; QL (0.15 ML per 1 day)
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	3	PA; SP; QL (2 ML per 1 day)
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PHEBURANE ORAL PELLET	3	PA; SP
POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
PROCYSBI ORAL CAPSULE DELAYED RELEASE	3	PA; SP
PROCYSBI ORAL PACKET	3	PA; SP
RAVICTI ORAL LIQUID	3	PA; SP
REVCovi INTRAMUSCULAR SOLUTION	3	PA; SP
sapropterin dihydrochloride oral packet	1	PA; SP
sapropterin dihydrochloride oral tablet	1	PA; SP
SEPHIENCE ORAL PACKET	3	PA; SP
sod benz-sod phenylacet intravenous solution	1	
sodium phenylbutyrate oral powder	1	PA; SP
sodium phenylbutyrate oral tablet	1	PA; SP
STRENSIQ SUBCUTANEOUS SOLUTION	2	PA; SP
SUCRAID ORAL SOLUTION	3	PA; SP
VIMIZIM INTRAVENOUS SOLUTION	3	PA; SP
VIOKACE ORAL TABLET	3	
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (1 EA per 1 day)
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
XURIDEN ORAL PACKET	3	PA; SP; QL (4 EA per 1 day)
yargesa oral capsule	1	PA; SP
ZAVESCA ORAL CAPSULE	3	PA; SP
zelvysia oral packet	1	PA; SP
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
acetic acid irrigation solution	1	
AURYXIA ORAL TABLET	3	
avanafil oral tablet	1	PA
bethanechol chloride oral tablet	1	
calcium acetate (phos binder) oral capsule	1	
calcium acetate (phos binder) oral tablet	1	
calcium acetate oral tablet 667 mg	1	
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED 20 MCG	3	PA
CERVIDIL VAGINAL INSERT	3	
CIALIS ORAL TABLET	3	PA
CUPRIMINE ORAL CAPSULE	3	PA; SP
darifenacin hydrobromide er oral tablet extended release 24 hour	1	

Drug Name	Drug Tier	Requirements /Limits
DEPEN TITRATABS ORAL TABLET	3	SP
DETROL ORAL TABLET	3	
ELMIRON ORAL CAPSULE	3	
FERRIC CITRATE ORAL TABLET	3	
fesoterodine fumarate er oral tablet extended release 24 hour	1	
FILSPARI ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
flavoxate hcl oral tablet	1	
FOSRENOL ORAL PACKET	3	
FOSRENOL ORAL TABLET CHEWABLE	3	
GEMTESA ORAL TABLET	3	
glycine irrigation solution	1	
glycine urologic irrigation solution	1	
INTRAROSA VAGINAL INSERT	3	
lanthanum carbonate oral tablet chewable	1	
LITHOSTAT ORAL TABLET	3	
mirabegron er oral tablet extended release 24 hour	1	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	

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Drug Name	Drug Tier	Requirements /Limits
OXLUMO SUBCUTANEOUS SOLUTION	3	PA; SP
oxybutynin chloride er oral tablet extended release 24 hour	1	
oxybutynin chloride oral solution	1	
oxybutynin chloride oral tablet	1	
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	3	
penicillamine oral capsule	1	PA; SP
penicillamine oral tablet	1	SP
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PREPIDIL VAGINAL GEL	3	
RENACIDIN IRRIGATION SOLUTION	3	
REVELA ORAL PACKET	3	
REVELA ORAL TABLET	3	
RIMSO-50 INTRAVESICAL SOLUTION	3	
RIVFLOZA SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.04 ML per 1 day)
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML	3	PA; SP; QL (0.03 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
sevelamer carbonate oral packet	1	
sevelamer carbonate oral tablet	1	
sevelamer hcl oral tablet	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	PA
solifenacin succinate oral tablet	1	
STENDRA ORAL TABLET	3	PA
tadalafil oral tablet	1	PA
THIOLA EC ORAL TABLET DELAYED RELEASE	3	SP
THIOLA ORAL TABLET	3	SP
tiopronin oral tablet	1	SP
tiopronin oral tablet delayed release	1	SP
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	

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Drug Name	Drug Tier	Requirements /Limits
VANRAFIA ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
varidenafil hcl oral tablet	1	PA
varidenafil hcl oral tablet dispersible	1	PA
VELPHORO ORAL TABLET CHEWABLE	3	
VENXXIVA ORAL TABLET DELAYED RELEASE	3	SP
VESICARE ORAL TABLET	3	
VIAGRA ORAL TABLET	3	PA
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er oral tablet extended release 24 hour	1	
AVODART ORAL CAPSULE	3	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
dutasteride oral capsule	1	
dutasteride-tamsulosin hcl oral capsule	1	
ENTADFI ORAL CAPSULE	3	
finasteride oral tablet 5 mg	1	
JALYN ORAL CAPSULE	3	
PROSCAR ORAL TABLET	3	
RAPAFLO ORAL CAPSULE	3	
silodosin oral capsule	1	

Drug Name	Drug Tier	Requirements /Limits
tamsulosin hcl oral capsule	1	
terazosin hcl oral capsule	1	
TEZRULY ORAL SOLUTION	3	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
Hormonal Agents - Adrenal		
AGAMREE ORAL SUSPENSION	3	PA; SP
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE	3	
betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	1	
BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION	3	
BLT-25 INJECTION KIT	3	
CELESTONE SOLUSPAN INJECTION SUSPENSION	3	
CORTEF ORAL TABLET	3	
CORTISONE ACETATE ORAL TABLET	3	
deflazacort oral suspension	1	PA; SP
deflazacort oral tablet	1	PA; SP
DEPO-MEDROL INJECTION SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
dexameth sod phos (pf) +rfid injection solution prefilled syringe	1	
DEXAMETHASONE (LA) INJECTION SUSPENSION	3	
dexamethasone intensol oral concentrate	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	1	
dexamethasone sod phos (pf) injection solution prefilled syringe	1	
dexamethasone sod phos +rfid injection solution prefilled syringe	1	
DEXAMETHASONE SOD PHOS-NACL INTRAVENOUS SOLUTION	3	
dexamethasone sod phosphate pf injection solution	1	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1	
dexamethasone sodium phosphate injection solution prefilled syringe	1	

Drug Name	Drug Tier	Requirements /Limits
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	
dexamethasone sodium phosphate solution 10 mg/ml injection	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION	3	
dexamethasone sodium phosphate solution 4 mg/ml injection	1	
DEXONTO 0.4% IONTOPHORESIS SOLUTION	3	
EMFLAZA ORAL SUSPENSION	3	PA; SP
EMFLAZA ORAL TABLET	3	PA; SP
fludrocortisone acetate oral tablet	1	
HEMADY ORAL TABLET	3	
HEXATRIONE INTRA-ARTICULAR SUSPENSION	3	
HIDEX 6-DAY ORAL TABLET THERAPY PACK	3	
hydrocortisone oral tablet	1	
hydrocortisone sod suc (pf) injection solution reconstituted	1	
jaythari oral tablet	1	PA; SP
KENALOG-10 INJECTION SUSPENSION	3	

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Drug Name	Drug Tier	Requirements /Limits
KENALOG-40 INJECTION SUSPENSION	3	
KENALOG-80 INJECTION SUSPENSION	3	
KHINDIVI ORAL SOLUTION	3	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	3	
methylprednisolone acetate suspension 40 mg/ml injection	1	
METHYLPREDNISOLONE ACETATE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone acetate suspension 80 mg/ml injection	1	
METHYLPREDNISOLONE ACETATE SUSPENSION 80 MG/ML INJECTION	3	
methylprednisolone oral tablet	1	
methylprednisolone oral tablet therapy pack	1	
methylprednisolone sodium succ injection solution reconstituted	1	

Drug Name	Drug Tier	Requirements /Limits
METHYLPREDNISOLONE-BUPIVACAINE INJECTION SUSPENSION	3	
ORAPRED ODT ORAL TABLET DISPERSIBLE	3	
PEDIAPRED ORAL SOLUTION	3	
prednisolone oral solution	1	
prednisolone oral tablet	1	
prednisolone sodium phosphate oral solution	1	
prednisolone sodium phosphate oral tablet dispersible	1	
prednisone intensol oral concentrate	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
pyquvi oral suspension	1	PA; SP
RAYOS ORAL TABLET DELAYED RELEASE 1 MG, 2 MG, 5 MG	3	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED	3	
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED	3	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK	3	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK	3	
triamcinolone acetonide injection suspension 10 mg/ml	1	
triamcinolone acetonide suspension 40 mg/ml injection	1	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
TRIAMCINOLONE DIACETATE INJECTION SUSPENSION 80 MG/ML	3	
TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION	3	
ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER	3	
Hormonal Agents - Men's Health		
ANDROGEL PUMP TRANSDERMAL GEL	3	
AVEED INTRAMUSCULAR SOLUTION	3	
AZMIRO INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Requirements /Limits
danazol oral capsule	1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	3	
EC-RX TESTOSTERONE TRANSDERMAL CREAM	3	
JATENZO ORAL CAPSULE	3	
KYZATREX ORAL CAPSULE	3	
METHITEST ORAL TABLET	3	
methyltestosterone oral capsule	1	
METHYLTESTOSTERONE POWDER	3	
NATESTO NASAL GEL	3	
TESTIM TRANSDERMAL GEL	3	
TESTOPEL IMPLANT PELLET	3	
testosterone cypionate intramuscular solution	1	
testosterone enanthate intramuscular solution	1	
TESTOSTERONE IMPLANT PELLET 37.5 MG, 87.5 MG	3	
testosterone transdermal gel	1	
testosterone transdermal solution	1	
TLANDO ORAL CAPSULE	3	
VOGELXO PUMP TRANSDERMAL GEL	3	
VOGELXO TRANSDERMAL GEL	3	

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Drug Name	Drug Tier	Requirements /Limits
XYOSTED SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	
Hormonal Agents - Pituitary		
ACTHAR GEL SUBCUTANEOUS PEN-INJECTOR	2	PA; SP
ACTHAR INJECTION GEL	2	PA; SP
BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; SP
cabergoline oral tablet	1	
carboprost tromethamine intramuscular solution	1	
CORTROPHIN GEL SUBCUTANEOUS PREFILLED SYRINGE	2	PA; SP
CORTROPHIN INJECTION GEL	2	PA; SP
CRENESSITY ORAL CAPSULE 100 MG	3	PA; SP; QL (4 EA per 1 day)
CRENESSITY ORAL CAPSULE 25 MG, 50 MG	3	PA; SP; QL (3 EA per 1 day)
CRENESSITY ORAL SOLUTION	3	PA; SP; QL (8 ML per 1 day)
DDAVP INJECTION SOLUTION	3	
DDAVP ORAL TABLET	3	
DDAVP PF INJECTION SOLUTION	3	
desmopressin ace spray refrig nasal solution	1	
desmopressin acetate injection solution	1	

Drug Name	Drug Tier	Requirements /Limits
desmopressin acetate oral tablet	1	
desmopressin acetate pf injection solution	1	
desmopressin acetate spray nasal solution	1	
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (1 EA per 1 day)
EGRIFTA WR SUBCUTANEOUS KIT	3	PA; SP; QL (0.15 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 22.5 MG	3	PA; SP; QL (0.012 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 30 MG	3	PA; SP; QL (0.009 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 45 MG	3	PA; SP; QL (0.006 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 7.5 MG	3	PA; SP; QL (0.036 EA per 1 day)
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	3	PA; SP; QL (0.006 EA per 1 day)
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (2 EA per 365 days)
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (0.036 EA per 1 day)
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
GENOTROPIN SUBCUTANEOUS CARTRIDGE	3	PA; SP
HEMABATE INTRAMUSCULAR SOLUTION	3	
HUMATROPE INJECTION CARTRIDGE	3	PA; SP
INCRELEX SUBCUTANEOUS SOLUTION	2	PA; SP
ISTURISA ORAL TABLET	3	PA; SP
Ianreotide acetate subcutaneous solution	1	PA; SP
leuprolide acetate injection kit	1	PA; SP
LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION	3	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	3	PA; SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	3	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP

Drug Name	Drug Tier	Requirements /Limits
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG INTRAMUSCULAR KIT	2	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG INTRAMUSCULAR KIT	2	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT	2	PA; SP; QL (0.04 EA per 1 day)
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT	2	PA; SP; QL (0.02 EA per 1 day)
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT	2	PA; SP; QL (0.01 EA per 1 day)
LUTRATE DEPOT INTRAMUSCULAR INJECTABLE	3	PA; SP; QL (0.012 EA per 1 day)
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	3	PA; SP
NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
NORDITROPIN FLEXPPO SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA; SP
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; SP
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; SP
octreotide acetate injection solution	1	PA; SP
octreotide acetate intramuscular kit	1	PA; SP
octreotide acetate subcutaneous solution prefilled syringe	1	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	2	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; SP
ORILISSA ORAL TABLET	2	
oxytocin +rfid injection solution	1	
oxytocin solution 10 unit/ml injection	1	
OXYTOCIN SOLUTION 10 UNIT/ML INJECTION	3	
OXYTOCIN- LACTATED RINGERS INTRAVENOUS SOLUTION	3	
OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
PALSONIFY ORAL TABLET	3	SP
PITOCIN INJECTION SOLUTION	3	
RECORLEV ORAL TABLET	3	PA; SP; QL (8 EA per 1 day)
SANDOSTATIN INJECTION SOLUTION	3	PA; SP
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	3	PA; SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA; SP; QL (0.04 EA per 1 day)
SIGNIFOR SUBCUTANEOUS SOLUTION	3	PA; SP; QL (2 ML per 1 day)
SKYTROFA SUBCUTANEOUS CARTRIDGE	3	PA; SP
SOGROYA SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	3	PA; SP
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
SUPPRELIN LA SUBCUTANEOUS KIT	3	PA; SP; QL (1 EA per 250 days)
SYNAREL NASAL SOLUTION	2	
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

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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
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG	3	PA; SP; QL (0.012 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG	3	PA; SP; QL (0.006 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG	3	PA; SP; QL (0.036 EA per 1 day)
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	2	PA; SP; QL (0.006 EA per 1 day)
VABRINTY SUBCUTANEOUS KIT 22.5 MG	3	PA; SP; QL (0.012 EA per 1 day)
VABRINTY SUBCUTANEOUS KIT 30 MG	3	PA; SP; QL (0.009 EA per 1 day)
VABRINTY SUBCUTANEOUS KIT 45 MG	3	PA; SP; QL (0.006 EA per 1 day)
vasopressin +rfd intravenous solution	1	
vasopressin intravenous solution	1	
VASOPRESSIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION	3	
VASOSTRICT INTRAVENOUS SOLUTION 20 UNIT/ML	3	
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	3	SP; QL (0.012 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	2	SP; QL (0.036 EA per 1 day)
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
Hormonal Agents - Prostaglandins		
KORLYM ORAL TABLET	3	PA; SP; QL (4 EA per 1 day)
MIFEPREX ORAL TABLET	3	
mifepristone oral tablet 200 mg	1	
mifepristone oral tablet 300 mg	1	PA; SP; QL (4 EA per 1 day)
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
EVISTA ORAL TABLET	3	
OSPHENA ORAL TABLET	3	
raloxifene hcl oral tablet	1	
Hormonal Agents - Sex Hormones and Birth Control		
abigale lo oral tablet	1	
abigale oral tablet	1	
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

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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
alyacen 7/7/7 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
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
AVERI ORAL TABLET	3	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
brielllyn oral tablet	1	PV
camila oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
camrese lo oral tablet	1	PV
camrese oral tablet	1	PV
charlotte 24 fe oral tablet chewable	1	PV
chateal eq oral tablet	1	PV
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	2	
CLIMARA TRANSDERMAL PATCH WEEKLY	3	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	3	
CRINONE VAGINAL GEL	3	
cryselle-28 oral tablet	1	PV
cyred eq oral tablet	1	PV
dasetta 1/35 (28) oral tablet	1	PV
dasetta 7/7/7 oral tablet	1	PV
daysee oral tablet	1	PV
deblitane oral tablet	1	PV
DELESTROGEN INTRAMUSCULAR OIL	3	
delyla oral tablet	1	PV
DEPO-ESTRADIOL INTRAMUSCULAR OIL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	3	PV; QL (5 ML per 365 days)
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV; QL (5 ML per 365 days)

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Drug Name	Drug Tier	Requirements /Limits
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	3	PV; QL (5 ML per 365 days)
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
DUAVEE ORAL TABLET	2	
EC-RX ESTRADIOL TRANSDERMAL CREAM	3	
EC-RX PROGESTERONE TRANSDERMAL CREAM	3	
ELESTRIN TRANSDERMAL GEL	3	
elinest oral tablet	1	PV
ELLA ORAL TABLET	3	PV
eluryng vaginal ring	1	PV
emzahh oral tablet	1	PV
ENDOMETRIN VAGINAL INSERT	2	
enilloring vaginal ring	1	PV
enpresse-28 oral tablet	1	PV
enskyce oral tablet	1	PV
errin oral tablet	1	PV
estarylla oral tablet	1	PV
ESTRACE VAGINAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
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	
estrogens conjugated oral tablet	1	
ethynodiol diac-eth estradiol oral tablet	1	PV
etonogestrel-ethinyl estradiol vaginal ring	1	PV
EVAMIST TRANSDERMAL SOLUTION	3	
falmina oral tablet	1	PV
feirza 1.5/30 oral tablet	1	PV
feirza 1/20 oral tablet	1	PV
FEMLYV ORAL TABLET DISPERSIBLE	3	PV
FEMRING VAGINAL RING	3	
finzala oral tablet chewable	1	PV
fyavolv oral tablet	1	
galbriela oral tablet chewable	1	PV

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Drug Name	Drug Tier	Requirements /Limits
gallifrey oral tablet	1	
gemmily oral capsule	1	PV
hailey 1.5/30 oral tablet	1	PV
hailey 24 fe oral tablet	1	PV
hailey fe 1.5/30 oral tablet	1	PV
hailey fe 1/20 oral tablet	1	PV
haloette vaginal ring	1	PV
heather oral tablet	1	PV
iclevia oral tablet	1	PV
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	2	
IMVEXXY STARTER PACK VAGINAL INSERT	2	
incassia oral tablet	1	PV
introvale oral tablet	1	PV
isibloom oral tablet	1	PV
jaimiess oral tablet	1	PV
jasmiel oral tablet	1	PV
jencycla 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
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

Drug Name	Drug Tier	Requirements /Limits
kelnor 1/35 oral tablet	1	PV
kurvelo oral tablet	1	PV
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	3	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
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
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	3	PV
LO LOESTRIN FE ORAL TABLET	3	PV
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

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Drug Name	Drug Tier	Requirements /Limits
LOESTRIN FE 1/20 ORAL TABLET	3	PV
lojaimiess oral tablet	1	PV
loryna oral tablet	1	PV
low-ogestrel oral tablet	1	PV
lo-zumandimine oral tablet	1	PV
luizza 1.5/30 oral tablet	1	PV
luizza 1/20 oral tablet	1	PV
luteria oral tablet	1	PV
lyleq oral tablet	1	PV
lyllana transdermal patch twice weekly	1	
lyza oral tablet	1	PV
marlissa oral tablet	1	PV
medroxyprogesterone acetate intramuscular suspension	1	PV; QL (5 ML per 365 days)
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	PV; QL (5 ML per 365 days)
medroxyprogesterone acetate oral tablet	1	
megestrol acetate oral suspension	1	
megestrol acetate oral tablet	1	
meleya oral tablet	1	PV
MENOSTAR TRANSDERMAL PATCH WEEKLY	3	
mibelas 24 fe oral tablet chewable	1	PV
microgestin 1.5/30 oral tablet	1	PV
microgestin 1/20 oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
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	
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY	3	
minzoya oral tablet	1	PV
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE	3	PV
MIUDELLA INTRAUTERINE COPPER INTRAUTERINE DEVICE	3	PV
mono-lynyah oral tablet	1	PV
MYFEMBREE ORAL TABLET	2	
NATAZIA ORAL TABLET	2	PV
necon 0.5/35 (28) oral tablet	1	PV
NEXPLANON SUBCUTANEOUS IMPLANT	3	PV
NEXTSTELLIS ORAL TABLET	3	PV
nikki oral tablet	1	PV
nora-be oral tablet	1	PV
norelgestromin-eth estradiol transdermal patch weekly	1	PV
norethin ace-eth estrad-fe oral capsule	1	PV

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Drug Name	Drug Tier	Requirements /Limits
norethin ace-eth estrad-fe oral tablet	1	PV
norethin ace-eth estrad-fe oral tablet chewable	1	PV
norethindrone acetate oral tablet	1	
norethindrone acet-ethinyl est oral tablet	1	PV
norethindrone oral tablet	1	PV
norethindrone-eth estradiol oral tablet	1	
norethin-eth estradiol-fe oral tablet chewable	1	PV
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	PV
norgestimate-ethinyl estradiol triphasic oral tablet	1	PV
norlyroc oral tablet	1	PV
nortrel 0.5/35 (28) oral tablet	1	PV
nortrel 1/35 (21) oral tablet	1	PV
nortrel 1/35 (28) oral tablet	1	PV
nortrel 7/7/7 oral tablet	1	PV
NUVARING VAGINAL RING	3	PV
nylia 1/35 oral tablet	1	PV
nylia 7/7/7 oral tablet	1	PV
ORIAHNN ORAL CAPSULE THERAPY PACK	2	
orquidea oral tablet	1	PV

Drug Name	Drug Tier	Requirements /Limits
PARAGARD INTRAUTERINE COPPER INTRAUTERINE DEVICE	3	PV
philith oral tablet	1	PV
pimtrea oral tablet	1	PV
portia-28 oral tablet	1	PV
PREMARIN INJECTION SOLUTION RECONSTITUTED	3	
PREMARIN ORAL TABLET	2	
PREMARIN VAGINAL CREAM	2	
PREMPHASE ORAL TABLET	2	
PREMPRO ORAL TABLET	2	
progesterone intramuscular oil	1	
PROGESTERONE MICRONIZED TRANSDERMAL CREAM	3	
progesterone oral capsule	1	
progesterone vaginal insert	1	
PROMETRIUM ORAL CAPSULE	3	
PROVERA ORAL TABLET	3	
reclipsen oral tablet	1	PV
rivelsa oral tablet	1	PV
rosyrah oral tablet	1	PV
SAFYRAL ORAL TABLET	3	PV

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Drug Name	Drug Tier	Requirements /Limits
setlakin oral tablet	1	PV
sharobel oral tablet	1	PV
simliya oral tablet	1	PV
simpesse oral tablet	1	PV
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	3	PV
SLYND ORAL TABLET	3	PV
sprintec 28 oral tablet	1	PV
sronyx oral tablet	1	PV
syeda oral tablet	1	PV
tarina 24 fe oral tablet	1	PV
tarina fe 1/20 eq oral tablet	1	PV
taysofy oral capsule	1	PV
TAYTULLA ORAL CAPSULE	3	PV
tilia fe oral tablet	1	PV
tri-estarylla oral tablet	1	PV
tri-legest fe oral tablet	1	PV
tri-linyah oral tablet	1	PV
tri-lo-estarylla oral tablet	1	PV
tri-lo-marzia oral tablet	1	PV
tri-lo-mili oral tablet	1	PV
tri-lo-sprintec oral tablet	1	PV
tri-mili oral tablet	1	PV
tri-sprintec oral tablet	1	PV
tri-vylibra lo oral tablet	1	PV
tri-vylibra oral tablet	1	PV
turqoz oral tablet	1	PV
TWIRLA TRANSDERMAL PATCH WEEKLY	3	PV
TYBLUME ORAL TABLET CHEWABLE	3	PV

Drug Name	Drug Tier	Requirements /Limits
tydemy oral tablet	1	PV
VAGIFEM VAGINAL TABLET	3	
valtya 1/35 oral tablet	1	PV
valtya 1/50 oral tablet	1	PV
velivet oral tablet	1	PV
vestura oral tablet	1	PV
vienva oral tablet	1	PV
violele 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
xarah fe oral tablet	1	PV
xelria fe oral tablet chewable	1	PV
xulane transdermal patch weekly	1	PV
YASMIN 28 ORAL TABLET	3	PV
YAZ ORAL TABLET	3	PV
yuvafer vaginal tablet	1	
zafemy transdermal patch weekly	1	PV
zovia 1/35 (28) oral tablet	1	PV
zumandimine oral tablet	1	PV
Hormonal Agents - Thyroid		
ADTHYZA ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
ARMOUR THYROID ORAL TABLET	3	
CYTOMEL ORAL TABLET	3	
ERMEZA ORAL SOLUTION	3	
EVEXITHROID ORAL TABLET	3	
levo-t oral tablet	1	
levothyroxine sodium intravenous solution	1	
levothyroxine sodium intravenous solution reconstituted	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
levothyroxine sodium oral tablet	1	
levoxyl oral tablet	1	
liomny oral tablet	1	
liothyronine sodium intravenous solution	1	
liothyronine sodium oral tablet	1	
methimazole oral tablet	1	
NIVA THYROID ORAL TABLET	3	
np thyroid oral tablet	1	
propylthiouracil oral tablet	1	
RENTHYROID ORAL TABLET	3	
SODIUM IODIDE I-131 ORAL SOLUTION	3	
SYNTHROID ORAL TABLET	3	
THYQUIDITY ORAL SOLUTION	3	
thyroid oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
TIROSINT ORAL CAPSULE	3	
TIROSINT-SOL ORAL SOLUTION	3	
unithroid oral tablet	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ABRILADA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.13 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION	3	PA; SP
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.13 ML per 1 day)
ACTIMMUNE SUBCUTANEOUS SOLUTION	2	PA; SP
ADALIMUMAB-AACF (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
ADALIMUMAB-AACF (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.08 EA per 1 day)
ADALIMUMAB-AACF(CD/UC/HS STRT) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-AACF(PS/UV STARTER) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
ADALIMUMAB-AATY (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-AATY (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-AATY CD/UC/HS START SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.06 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML	3	PA; SP; QL (0.01 ML per 1 day)
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	3	PA; SP; QL (0.03 ML per 1 day)
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)
ADALIMUMAB-ADBM (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-ADBM (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML	3	PA; SP; QL (0.08 EA per 1 day)
ADALIMUMAB-ADBM (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-ADBM(CD/UC/HS STRT) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-ADBM(PS/UV STARTER) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; SP; QL (0.15 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
ADALIMUMAB-FKJP (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-FKJP (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-RYVK (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
ADALIMUMAB-RYVK (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
ADALIMUMAB-RYVK (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
ALYGLO INTRAVENOUS SOLUTION	3	PA; SP
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.4ML SUBCUTANEOUS	2	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.4ML SUBCUTANEOUS	3	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	2	PA; SP; QL (0.12 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	3	PA; SP; QL (0.12 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
AMJEVITA SOLUTION AUTO-INJECTOR 80 MG/0.8ML SUBCUTANEOUS	2	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 80 MG/0.8ML SUBCUTANEOUS	3	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML SUBCUTANEOUS	2	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML SUBCUTANEOUS	3	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	2	PA; SP; QL (0.12 EA per 1 day)
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.02 ML per 1 day)
AMJEVITA-PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS	2	PA; SP; QL (0.03 ML per 1 day)
AMJEVITA-PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS	3	PA; SP; QL (0.03 ML per 1 day)
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	2	PA; SP; QL (0.06 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
ANDEMBRY SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (0.05 ML per 1 day)
ARAVAL ORAL TABLET	3	
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
ASCENIV INTRAVENOUS SOLUTION	3	PA; SP
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
AVTOZMA INTRAVENOUS SOLUTION	3	PA; SP
AZASAN ORAL TABLET	3	
azathioprine oral tablet	1	
azathioprine sodium injection solution reconstituted	1	
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
BERINERT INTRAVENOUS KIT	3	PA; SP; QL (0.34 EA per 1 day)
BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
BIMZELX SUBCUTANEOUS SOLUTION AUTO- INJECTOR 160 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION AUTO- INJECTOR 320 MG/2ML	3	PA; SP; QL (0.08 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 320 MG/2ML	3	PA; SP; QL (0.08 ML per 1 day)
BIVIGAM INTRAVENOUS SOLUTION	3	PA; SP
CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED	3	
CELLCEPT ORAL CAPSULE	3	
CELLCEPT ORAL SUSPENSION RECONSTITUTED	3	
CELLCEPT ORAL TABLET	3	

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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
CIMZIA (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP; QL (0.08 EA per 1 day)
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP; QL (0.08 EA per 1 day)
CIMZIA SUBCUTANEOUS KIT	2	PA; SP; QL (0.08 EA per 1 day)
CIMZIA-STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP; QL (0.08 EA per 1 day)
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (1.2 EA per 1 day)
CNJ-016 INTRAVENOUS SOLUTION	3	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.08 ML per 1 day)
COSENTYX 150 MG/ML INTRAVENOUS SOLUTION 125 MG/5ML	3	PA; SP
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	3	PA; SP; QL (0.04 ML per 1 day)
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	3	PA; SP; QL (0.02 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.08 ML per 1 day)
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.04 ML per 1 day)
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.08 ML per 1 day)
CUTAQUIG SUBCUTANEOUS SOLUTION	3	PA; SP
CUVITRU SUBCUTANEOUS SOLUTION	3	PA; SP
cyclosporine modified oral capsule	1	
cyclosporine modified oral solution	1	
cyclosporine oral capsule	1	
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML	3	PA; SP; QL (0.08 EA per 1 day)
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
DAWNZERA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.03 ML per 1 day)
EKTERLY ORAL TABLET	3	PA; SP; QL (8 EA per 25 days)
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	2	PA; SP; QL (0.15 ML per 1 day)
ENBREL SUBCUTANEOUS SOLUTION	2	PA; SP; QL (0.15 ML per 1 day)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.15 ML per 1 day)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.15 ML per 1 day)
ENFLONIA INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
ENTYVIO PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.05 ML per 1 day)
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.6 ML per 1 day)
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	3	PA; SP
GAMASTAN INTRAMUSCULAR SOLUTION	2	PA; SP
GAMIFANT INTRAVENOUS SOLUTION	3	PA; SP
GAMMAGARD INJECTION SOLUTION	3	PA; SP
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
GAMMAKED INJECTION SOLUTION	3	PA; SP
GAMMAPLEX INTRAVENOUS SOLUTION	3	PA; SP
GAMUNEX-C INJECTION SOLUTION	3	PA; SP
gengraf oral capsule	1	
gengraf oral solution	1	

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Drug Name	Drug Tier	Requirements /Limits
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO- INJECTOR 40 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO- INJECTOR 40 MG/0.8ML	3	PA; SP; QL (0.12 ML per 1 day)
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	3	PA; SP; QL (0.12 ML per 1 day)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	3	PA; SP; QL (0.9 EA per 1 day)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	3	PA; SP; QL (0.6 EA per 1 day)
HEPAGAM B INJECTION SOLUTION	3	
HIZENTRA SUBCUTANEOUS SOLUTION	3	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
HULIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
HULIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL (0.15 EA per 1 day)
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
HUMIRA- PSORIASIS/UEIT STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (3 EA per 365 days)
HYPERHEP B INTRAMUSCULAR SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT, 250 UNIT	2	
HYQVIA SUBCUTANEOUS KIT	3	PA; SP
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.06 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML	3	PA; SP; QL (0.01 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	3	PA; SP; QL (0.03 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)
HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.06 ML per 1 day)
HYRIMOZ-PED<40KG CROHN STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (1.2 ML per 365 days)

Drug Name	Drug Tier	Requirements /Limits
HYRIMOZ-PED>=40KG CROHN START SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (2.4 ML per 365 days)
HYRIMOZ-PLAQ PSOR/UEIT START SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (1.6 ML per 365 days)
HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (1.6 ML per 365 days)
icatibant acetate subcutaneous solution prefilled syringe	1	PA; SP; QL (0.6 ML per 1 day)
ILARIS SUBCUTANEOUS SOLUTION	2	PA; SP; QL (0.08 ML per 1 day)
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.02 ML per 1 day)
IMAAVY INTRAVENOUS SOLUTION	3	PA; SP
IMULDOSA INTRAVENOUS SOLUTION	3	PA; SP
IMULDOSA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
IMULDOSA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
IMURAN ORAL TABLET	3	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; SP
INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
JOENJA ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
JYLAMVO ORAL SOLUTION	3	
KALBITOR SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.4 ML per 1 day)
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.09 ML per 1 day)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.09 ML per 1 day)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
leflunomide oral tablet	1	
LUPKYNIS ORAL CAPSULE	3	PA; SP; QL (6 EA per 1 day)
methotrexate sodium (pf) injection solution	1	
methotrexate sodium injection solution	1	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
mycophenolate mofetil hcl intravenous solution reconstituted	1	
mycophenolate mofetil intravenous solution reconstituted	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral suspension reconstituted	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium oral tablet delayed release	1	
mycophenolic acid oral tablet delayed release	1	
MYFORTIC ORAL TABLET DELAYED RELEASE	3	
MYHIBBIN ORAL SUSPENSION	3	
NABI-HB INTRAMUSCULAR SOLUTION	3	
NEORAL ORAL CAPSULE	3	
NEORAL ORAL SOLUTION	3	
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	3	
OCTAGAM INTRAVENOUS SOLUTION	3	PA; SP
OLUMIANT ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.11 ML per 1 day)
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.18 ML per 1 day)
OMVOH INTRAVENOUS SOLUTION	2	PA; SP; QL (45 ML per 365 days)
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.08 ML per 1 day)
OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.08 ML per 1 day)
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.15 ML per 1 day)
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	3	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	3	PA; SP; QL (0.06 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	3	PA; SP; QL (0.1 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
ORLADEYO ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
OTEZLA ORAL TABLET	2	PA; SP; QL (2 EA per 1 day)
OTEZLA ORAL TABLET THERAPY PACK	2	PA; SP; QL (55 EA per 365 days)
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; SP; QL (1 EA per 1 day)
OTEZLA/OTEZLA XR INITIATION PK ORAL TABLET THERAPY PACK	3	PA; SP; QL (55 EA per 365 days)
OTULFI INTRAVENOUS SOLUTION	3	PA; SP
OTULFI SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.009 ML per 1 day)
OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
PANZYGA INTRAVENOUS SOLUTION	3	PA; SP
PEMGARDA INTRAVENOUS SOLUTION	3	
PRIVIGEN INTRAVENOUS SOLUTION	3	PA; SP
PROGRAF INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
PROGRAF ORAL CAPSULE	3	
PROGRAF ORAL PACKET	3	
PYZCHIVA INTRAVENOUS SOLUTION	3	PA; SP
PYZCHIVA SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.009 ML per 1 day)
PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
REZUROCK ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
RHAPSIDO ORAL TABLET	3	SP
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	2	
RIDAURA ORAL CAPSULE	3	SP
RINVOQ LQ ORAL SOLUTION	2	PA; SP; QL (12 ML per 1 day)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	PA; SP; QL (1 EA per 1 day)
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP; QL (0.27 EA per 1 day)
SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.6 ML per 1 day)
SANDIMMUNE INTRAVENOUS SOLUTION	2	
SANDIMMUNE ORAL CAPSULE	3	
SAPHNELO INTRAVENOUS SOLUTION	3	PA; SP
SELARSDI INTRAVENOUS SOLUTION	3	PA; SP
SELARSDI SUBCUTANEOUS SOLUTION	3	SP

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Drug Name	Drug Tier	Requirements /Limits
SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.11 ML per 1 day)
SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; SP; QL (0.15 EA per 1 day)
SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
SIMPONI ARIA INTRAVENOUS SOLUTION	2	PA; SP
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR 100 MG/ML	2	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR 50 MG/0.5ML	2	PA; SP; QL (0.02 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	2	PA; SP; QL (0.02 ML per 1 day)
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	3	
sirolimus oral solution	1	
sirolimus oral tablet	1	
SKYRIZI INTRAVENOUS SOLUTION	2	PA; SP
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; SP; QL (0.02 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	2	PA; SP; QL (0.03 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	2	PA; SP; QL (0.05 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.02 ML per 1 day)
SOTYKTU ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)
SPEVIGO INTRAVENOUS SOLUTION	3	PA; SP; QL (30 ML per 84 days)

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Drug Name	Drug Tier	Requirements /Limits
SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.08 ML per 1 day)
STELARA INTRAVENOUS SOLUTION	3	PA; SP
STELARA SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
STEQEYMA INTRAVENOUS SOLUTION	3	PA; SP
STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
SYNAGIS INTRAMUSCULAR SOLUTION	2	SP
tacrolimus oral capsule	1	
TAKHZYRO SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.15 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	3	PA; SP; QL (0.08 ML per 1 day)
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	3	PA; SP; QL (0.15 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; SP; QL (0.04 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.25ML	2	PA; SP; QL (0.01 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.5ML	2	PA; SP; QL (0.02 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	2	PA; SP; QL (0.04 ML per 1 day)
temsirolimus intravenous solution	1	SP
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
TOFIDENCE INTRAVENOUS SOLUTION	3	PA; SP
TORISEL INTRAVENOUS SOLUTION	3	SP

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Drug Name	Drug Tier	Requirements /Limits
TREMFYA INTRAVENOUS SOLUTION	2	PA; SP
TREMFYA ONE-PRESS SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA; SP; QL (0.02 ML per 1 day)
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	2	PA; SP; QL (0.02 ML per 1 day)
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	2	PA; SP; QL (0.08 ML per 1 day)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; SP; QL (0.02 ML per 1 day)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	2	PA; SP; QL (0.08 ML per 1 day)
TREMFYA-CD/UC INDUCTION SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.08 ML per 1 day)
TREXALL ORAL TABLET	3	
TYENNE INTRAVENOUS SOLUTION	3	PA; SP
TYENNE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL (0.13 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
TYENNE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.13 ML per 1 day)
UPLIZNA INTRAVENOUS SOLUTION	3	PA; SP
USTEKINUMAB INTRAVENOUS SOLUTION	3	PA; SP
USTEKINUMAB SUBCUTANEOUS SOLUTION	3	PA; SP; QL (0.009 ML per 1 day)
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
USTEKINUMAB-AEKN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)
USTEKINUMAB-AEKN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
USTEKINUMAB-TTWE INTRAVENOUS SOLUTION	3	PA; SP
USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	3	PA; SP; QL (0.009 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	3	PA; SP; QL (0.02 ML per 1 day)
VARIZIG INTRAMUSCULAR SOLUTION	3	
VELSIPITY ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)
VEOPOZ INJECTION SOLUTION	3	PA; SP
WEZLANA INTRAVENOUS SOLUTION	2	PA; SP
WEZLANA SUBCUTANEOUS SOLUTION	2	PA; SP; QL (0.009 ML per 1 day)
WEZLANA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	2	PA; SP; QL (0.009 ML per 1 day)
WEZLANA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	2	PA; SP; QL (0.02 ML per 1 day)
WINRHO SDF INJECTION SOLUTION	2	
XATMEP ORAL SOLUTION	3	
XELJANZ ORAL SOLUTION	2	PA; SP; QL (10 ML per 1 day)
XELJANZ ORAL TABLET	2	PA; SP; QL (2 EA per 1 day)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
XEMBIFY SUBCUTANEOUS SOLUTION	3	PA; SP
YESINTEK INTRAVENOUS SOLUTION	2	PA; SP
YESINTEK SUBCUTANEOUS SOLUTION	2	PA; SP; QL (0.009 ML per 1 day)
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	2	PA; SP; QL (0.009 ML per 1 day)
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	2	PA; SP; QL (0.02 ML per 1 day)
YIMMUGO INTRAVENOUS SOLUTION	3	PA; SP
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; SP; QL (0.15 EA per 1 day)
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	3	PA; SP; QL (0.08 EA per 1 day)
YUFLYMA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.15 EA per 1 day)
YUFLYMA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.15 EA per 1 day)
YUFLYMA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
YUSIMRY SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	PA; SP; QL (0.12 ML per 1 day)
ZINPLAVA INTRAVENOUS SOLUTION	3	
ZORTRESS ORAL TABLET	3	
ZYMFENTRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
ZYMFENTRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; SP; QL (0.08 EA per 1 day)
ZYMFENTRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; SP; QL (0.04 EA per 1 day)
Immunological Agents - Drugs for Vaccination		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PV
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PV
ADACEL INTRAMUSCULAR SUSPENSION	3	PV
ADACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
AFLURIA INTRAMUSCULAR SUSPENSION	3	PV

Drug Name	Drug Tier	Requirements /Limits
AFLURIA PRESERVATIVE FREE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PV
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	3	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
BIOTHRAX INTRAMUSCULAR SUSPENSION	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
CAPVAXIVE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
COMIRNATY 5-11 YEARS INTRAMUSCULAR SUSPENSION	3	PV
COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
DAPTACEL INTRAMUSCULAR SUSPENSION	3	PV

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Drug Name	Drug Tier	Requirements /Limits
DENGVAIXA SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	PV
ENGERIX-B INJECTION SUSPENSION	3	PV
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	3	PV
FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUBLOK INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
FLUCELVAX INTRAMUSCULAR SUSPENSION	3	PV
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
FLUMIST NASAL LIQUID	3	PV
FLUZONE HIGH- DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV

Drug Name	Drug Tier	Requirements /Limits
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
GARDASIL 9 INTRAMUSCULAR SUSPENSION	3	PV
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
HAVRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PV
HIBERIX INJECTION SOLUTION RECONSTITUTED	3	PV
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
INFANRIX INTRAMUSCULAR SUSPENSION	3	PV
IPOL INJECTION SUSPENSION	3	PV
IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
IXIARO INTRAMUSCULAR SUSPENSION	3	
JYNNEOS SUBCUTANEOUS SUSPENSION	3	PV

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Drug Name	Drug Tier	Requirements /Limits
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
MENQUADFI INTRAMUSCULAR SOLUTION	3	PV
MENVEO INTRAMUSCULAR SOLUTION	3	PV
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PV
M-M-R II INJECTION SOLUTION RECONSTITUTED	3	PV
MNEXSPIKE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
MRESVIA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
NUVAXOVID COVID- 19 VACCINE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
PEDVAX HIB INTRAMUSCULAR SUSPENSION	3	PV
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PV

Drug Name	Drug Tier	Requirements /Limits
PENMENVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PV
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PV
PNEUMOVAX 23 INJECTION SOLUTION PREFILLED SYRINGE	3	PV
PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	PV
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	PV
QUADRACEL INTRAMUSCULAR SUSPENSION	3	PV
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
RECOMBIVAX HB INJECTION SUSPENSION	3	PV
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	3	PV

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Drug Name	Drug Tier	Requirements /Limits
ROTARIX ORAL SUSPENSION	3	PV
ROTATEQ ORAL SOLUTION	3	PV
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PV
SPIKEVAX 6M-11Y INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
TENIVAC INTRAMUSCULAR SUSPENSION	3	PV
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
TYPHIM VI INTRAMUSCULAR SOLUTION	3	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
VAQTA INTRAMUSCULAR SUSPENSION	3	PV

Drug Name	Drug Tier	Requirements /Limits
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
VARIVAX INJECTION SUSPENSION RECONSTITUTED	3	PV
VAXCHORA ORAL SUSPENSION RECONSTITUTED	3	
VAXELIS INTRAMUSCULAR SUSPENSION	3	PV
VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	PV
VIMKUNYA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
VIVOTIF ORAL CAPSULE DELAYED RELEASE	3	
YF-VAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	
Inflammatory Bowel Disease Agents		
ANALPRAM HC EXTERNAL CREAM 1-1 %	3	
ANALPRAM HC EXTERNAL LOTION	3	
ANUSOL-HC EXTERNAL CREAM	3	

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Drug Name	Drug Tier	Requirements /Limits
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	3	
AZULFIDINE ORAL TABLET	3	
balsalazide disodium oral capsule	1	
budesonide er oral tablet extended release 24 hour	1	
budesonide oral capsule delayed release particles	1	
budesonide rectal foam	1	
CANASA RECTAL SUPPOSITORY	3	
COLAZAL ORAL CAPSULE	3	
CORTENEMA RECTAL ENEMA	3	
CORTIFOAM EXTERNAL FOAM	3	
DIPENTUM ORAL CAPSULE	3	
EOHILIA ORAL SUSPENSION	3	
hydrocortisone (perianal) external cream	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone rectal enema	1	
LIALDA ORAL TABLET DELAYED RELEASE	3	
mesalamine er oral capsule 500 mg	1	

Drug Name	Drug Tier	Requirements /Limits
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release	1	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	
mesalamine-cleanser rectal kit	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE	3	
PROCTOCORT EXTERNAL CREAM	3	
PROCTOFOAM HC EXTERNAL FOAM	2	
procto-med hc external cream	1	
PROCTOSOL HC EXTERNAL CREAM	3	
PROCTOZONE-HC EXTERNAL CREAM	3	
ROWASA RECTAL KIT	3	
SFROWASA RECTAL ENEMA	2	
sulfasalazine oral tablet	1	
sulfasalazine oral tablet delayed release	1	
TARPEYO ORAL CAPSULE DELAYED RELEASE	3	PA; SP; QL (4 EA per 1 day)
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
UCERIS RECTAL FOAM	3	

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Drug Name	Drug Tier	Requirements /Limits
Metabolic Bone Disease Agents		
BILDYOS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (2 ML per 250 days)
BILPREVDA SUBCUTANEOUS SOLUTION	3	PA; SP
BOMYNTRA SUBCUTANEOUS SOLUTION	3	PA; SP
BOMYNTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
CONEXXENCE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (180 day supply per 1 fill)
OSENVELT SUBCUTANEOUS SOLUTION	2	PA; SP
OSPOMYV SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
STOBOCLO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (2 ML per 250 days)
WYOST SUBCUTANEOUS SOLUTION	3	PA; SP
XGEVA SUBCUTANEOUS SOLUTION	2	PA; SP
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL ORAL TABLET	3	

Drug Name	Drug Tier	Requirements /Limits
alendronate sodium oral solution	1	
alendronate sodium oral tablet	1	
ATELVIA ORAL TABLET DELAYED RELEASE	3	
BINOSTO ORAL TABLET EFFERVESCENT	3	
BONSITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA; SP
calcitonin (salmon) injection solution	1	
calcitonin (salmon) nasal solution	1	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (0.09 ML per 1 day)
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; SP
FOSAMAX ORAL TABLET	3	
FOSAMAX PLUS D ORAL TABLET	3	
ibandronate sodium intravenous solution	1	
ibandronate sodium oral tablet	1	
JUBBONTI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL (2 ML per 250 days)
MIACALCIN INJECTION SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
pamidronate disodium intravenous solution	1	SP
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (2 ML per 250 days)
RECLAST INTRAVENOUS SOLUTION	3	SP
risedronate sodium oral tablet	1	
risedronate sodium oral tablet delayed release	1	
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	1	PA; SP
TERIPARATIDE SOLUTION PEN- INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	2	PA; SP
TYMLOS SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; SP
zoledronic acid intravenous concentrate	1	SP
zoledronic acid intravenous solution	1	SP
Metabolic Bone Disease Agents - Other		
calcitriol intravenous solution	1	
calcitriol oral capsule	1	
calcitriol oral solution	1	
cinacalcet hcl oral tablet	1	
doxercalciferol intravenous solution	1	

Drug Name	Drug Tier	Requirements /Limits
doxercalciferol oral capsule	1	
paricalcitol intravenous solution	1	
paricalcitol oral capsule	1	
PARSABIV INTRAVENOUS SOLUTION	3	SP
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	3	
ROCALTROL ORAL CAPSULE	3	
ROCALTROL ORAL SOLUTION	3	
SENSIPAR ORAL TABLET	3	
ZEMPLAR INTRAVENOUS SOLUTION	3	
ZEMPLAR ORAL CAPSULE	3	
Miscellaneous Therapeutic Agents		
ACCU-CHEK ULTRAFLEX INF SET	3	
ACETADOTE INTRAVENOUS SOLUTION	3	
acetylcysteine intravenous solution	1	
AEROCHAMBER HOLDING CHAMBER DEVICE	2	
AEROCHAMBER MINI CHAMBER DEVICE	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLS FLOVU MTHPIECE DEVICE	2	

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Drug Name	Drug Tier	Requirements /Limits
AEROCHAMBER PLUS FLO-VU INTERM DEVICE	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER2GO ANTI-STATIC DEVICE	2	
ALBUKED 25 INTRAVENOUS SOLUTION	3	
ALBUKED 5 INTRAVENOUS SOLUTION	3	
ALBUMIN HUMAN INTRAVENOUS SOLUTION	3	
ALBUMINEX INTRAVENOUS SOLUTION	3	
ALBUMIN-ZLB INTRAVENOUS SOLUTION	3	
ALBURX INTRAVENOUS SOLUTION	3	
ALBUTEIN INTRAVENOUS SOLUTION	3	
ALCOHOL PREP PADS PAD , 70 %	3	
ALCOHOL PREP PADS SHEET 70 %	3	

Drug Name	Drug Tier	Requirements /Limits
ALPHA-LIPOIC ACID INJECTION SOLUTION	3	
AMD FOAM DRESSING PAD	3	
AMD FOAM DRESSING TOPSHEET PAD	3	
AMPHADASE INJECTION SOLUTION	3	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED	3	
AQINJECT PEN NEEDLE	2	
AQNEURSA ORAL PACKET	3	PA; SP; QL (4 EA per 1 day)
ARTISS EXTERNAL KIT	3	
ASPARTAME (FOR COMPOUNDING) POWDER	3	
ASPARTAME (NUTRASWEET) POWDER	3	
ASSURE ID DUO PRO PEN NEEDLES	2	
ASSURE ID PRO PEN NEEDLES	2	
ASTAMED MYO ORAL CAPSULE	3	
AUM ALCOHOL PREP PADS PAD	3	
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	2	
AUM MINI INSULIN PEN NEEDLE	2	

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Drug Name	Drug Tier	Requirements /Limits
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	2	
AUM READYGARD DUO PEN NEEDLE	2	
AUM SAFETY PEN NEEDLE	2	
AUTOSOFT 30 INFUSION SET	3	
AUTOSOFT 90 INFUSION SET	3	
AUTOSOFT XC INFUSION SET	3	
AVAILNEX ORAL TABLET CHEWABLE	3	
AXONA ORAL PACKET	3	
BACTERIOSTATIC WATER(BENZ ALC) INJECTION SOLUTION	3	
BD AUTOSHIELD DUO PEN NEEDLES	2	
BD ECLIPSE LUER-LOK NEEDLE	3	
BD ECLIPSE NEEDLE 18G X 1-1/2" , 23G X 1" , 25G X 1-1/2" , 25G X 5/8"	3	
BD FILTER NEEDLE	3	
BD PEN NEEDLE MICRO ULTRAFINE	2	
BD PEN NEEDLE MINI ULTRAFINE	2	
BD PEN NEEDLE NANO ULTRAFINE	2	
BD PEN NEEDLE ORIG ULTRAFINE	2	
BD PEN NEEDLE SHORT ULTRAFINE	2	

Drug Name	Drug Tier	Requirements /Limits
BD SAFETYGLIDE NEEDLE 23G X 1-1/2"	3	
BD SYRINGE LUER-LOK 30 ML	3	
BD ULTRA-FINE PEN NEEDLES	2	
BOTOX INJECTION SOLUTION RECONSTITUTED	3	
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	
BREATHERITE VALVED MDI CHAMBER DEVICE	2	
BRIDION INTRAVENOUS SOLUTION 200 MG/2ML	3	
BROMELAIN POWDER	3	
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	3	PA; SP
BYLVAY ORAL CAPSULE	3	PA; SP
CAREPOINT POLY HUB NEEDLE 18G X 1" , 20G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 5/8"	3	

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Drug Name	Drug Tier	Requirements /Limits
CAREPOINT SAFETY 1ST NEEDLE	3	
CAREPOINT SYRINGE LUER LOCK 1 ML , 30 ML	3	
CAREPOINT SYRINGE LUER SLIP 1 ML	3	
CARETOUCH HYPODERMIC NEEDLE 22G X 1" , 26G X 1" , 27G X 1-1/2"	3	
CARETOUCH LUER LOCK 1 ML	3	
CAYA VAGINAL DIAPHRAGM	3	PV
CETYLCEIDE-G CONCENTRATE	3	
CHARCOAL ACTIVATED POWDER	3	
CHLORHEXIDINE GLUCONATE SOLUTION 20 %	3	
CHOLEXMAX ORAL POWDER	3	
CHOLEXTRA T/F ORAL POWDER	3	
CLEVER CHOICE HOLDING CHAMBER DEVICE	2	
COMFORT EZ PRO PEN NEEDLES	2	
COMPACT SPACE CHAMBER DEVICE	2	
COMPACT SPACE CHAMBER/LG MASK DEVICE	2	
COMPACT SPACE CHAMBER/MED MASK DEVICE	2	

Drug Name	Drug Tier	Requirements /Limits
COMPACT SPACE CHAMBER/SM MASK DEVICE	2	
CURITY AMD ANTIMICROBIAL SPNGE PAD 4"X4"	3	
CURITY AMD ANTIMICROBIAL STRIP	3	
CURITY IODOFORM PACKING STRIP	3	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED	3	
CYTOTINE ORAL POWDER	3	
DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
deferoxamine mesylate injection solution reconstituted	1	
DEFLUX METAL NEEDLE	3	
DENOVO PLUS B12 ORAL CAPSULE	3	
DEPLIN 15 ORAL CAPSULE	3	
DEPLIN 7.5 ORAL CAPSULE	3	
DESFERAL INJECTION SOLUTION RECONSTITUTED	3	
dexmedetomidine hcl in nacl intravenous solution	1	

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Drug Name	Drug Tier	Requirements /Limits
DEXMEDETOMIDINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
dexmedetomidine hcl intravenous solution	1	
DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION	3	
DIASCREEN 10	3	
DIASCREEN 1B	3	
DIASCREEN 1G STRIP	3	
DIASCREEN 1K	3	
DIASCREEN 1K STRIP	3	
DIASCREEN 2GK STRIP	3	
DIASCREEN 2GP	3	
DIASCREEN 3	3	
DIASCREEN 4NL	3	
DIASCREEN 4OBL	3	
DIASCREEN 4PH	3	
DIASCREEN 5	3	
DIASCREEN 6	3	
DIASCREEN 7	3	
DIASCREEN 8	3	
DIASCREEN 9	3	
DIASCREEN LIQUID URINE CONTROL	3	
digestive support oral capsule extended release	1	
DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	3	

Drug Name	Drug Tier	Requirements /Limits
diluent for treprostinil intravenous solution	1	
DOJOLVI ORAL LIQUID	3	
d-ribose oral powder	1	
DROPLET MICRON	2	
DROPSAFE ALCOHOL PREP PAD	3	
DROPSAFE SICURA	3	
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE	2	
DYSFORT INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
EASIVENT	2	
EASY GLIDE LUER LOCK SYRINGE	3	
EASY GLIDE SLIP LOCK SYRINGE	3	
EASY TOUCH HYPODERMIC NEEDLE 16G X 1"	3	
EASYPPOINT NEEDLE	3	
EC-RX DHEA EXTERNAL CREAM	3	
EDETATE CALCIUM DISODIUM INJECTION SOLUTION	3	
EMBECTA AUTOSHIELD DUO	2	
EMBECTA PEN NEEDLE NANO	2	
EMBECTA PEN NEEDLE NANO 2 GEN	2	
EMBECTA PEN NEEDLE ULTRAFINE	2	

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Drug Name	Drug Tier	Requirements /Limits
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	
ENDARI ORAL PACKET	3	
EUA PATIENT ASSESSMENT	3	
EUFLEXXA INTRA- ARTICULAR SOLUTION PREFILLED SYRINGE	2	
EXCILON AMD DRAIN SPONGES PAD	3	
EXTENDED INFUSION SET 23"/6MM	3	
EXTENDED INFUSION SET 23"/9MM	3	
EXTENDED INFUSION SET 32"/6MM	3	
EXTENDED INFUSION SET 32"/9MM	3	
EXTENDED RESERVOIR 3ML	3	
FDGARD ORAL CAPSULE	3	
FEMCAP VAGINAL DEVICE	3	PV
FIRDAPSE ORAL TABLET	3	PA; SP
FLEXBUMIN INTRAVENOUS SOLUTION	3	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	

Drug Name	Drug Tier	Requirements /Limits
FLEXICHAMBER DEVICE	2	
flumazenil intravenous solution	1	
FOLBIC ORAL TABLET	3	
fomepizole intravenous solution	1	
FORA D40G GLUCOSE/PRESSUR E DEVICE	3	
formaldehyde external solution 37 %	1	
GALAXTRA ORAL POWDER	3	
GALEN IQ 900 POWDER	3	
GEL-ONE INTRA- ARTICULAR PREFILLED SYRINGE	3	
GELSYN-3 INTRA- ARTICULAR SOLUTION PREFILLED SYRINGE	2	
GENVISC 850 INTRA- ARTICULAR SOLUTION PREFILLED SYRINGE	3	
glutaraldehyde external solution	1	
GOHIBIC INTRAVENOUS SOLUTION	3	
GOODSENSE ALCOHOL SWABS PAD	3	
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	3	
HUMATROPEN FOR 12MG DEVICE	3	

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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
HUMATROPEN FOR 24MG DEVICE	3	
HUMATROPEN FOR 6MG DEVICE	3	
HYALGAN INTRA-ARTICULAR SOLUTION	3	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
HYLENEX INJECTION SOLUTION	3	
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
IGALMI SUBLINGUAL FILM	3	
ILET CONTACT DETACH 23" 6MM	3	
ILET INFUSION-INSET 23" 6MM	3	
ILET INFUSION-INSET 32" 6MM	3	
ILET INSULIN PUMP DEVICE	3	
ILET STARTER - CONTACT DETACH	3	
ILET STARTER KIT - INSET 23"	3	
ILET STARTER KIT - INSET 32"	3	
INCONTROL ULTICARE PEN NEEDLES	2	
INSPIREASE RESERVOIR BAGS	2	

Drug Name	Drug Tier	Requirements /Limits
INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 4MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 6 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	2	
INSUPEN32G EXTR3ME	2	
IWILFIN ORAL TABLET	3	PA; SP
J-TIP KIT W/VIAL ADAPTERS KIT	3	
KEDBUMIN INTRAVENOUS SOLUTION	3	
KERENDIA ORAL TABLET	3	
KERLIX AMD ANTIMICROBIAL	3	
KERLIX AMD SUPER SPONGES PAD	3	
KORSUVA INTRAVENOUS SOLUTION	3	PA; SP
LDL CARE ORAL POWDER	3	
l-glutamine oral packet	1	
LIMBREL ORAL CAPSULE	3	
LIMBREL250 ORAL CAPSULE	3	
LIMBREL500 ORAL CAPSULE	3	

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Drug Name	Drug Tier	Requirements /Limits
LIVMARLI ORAL SOLUTION 19 MG/ML	3	PA; SP; QL (2 ML per 1 day)
LIVMARLI ORAL SOLUTION 9.5 MG/ML	3	PA; SP; QL (3 ML per 1 day)
LIVMARLI ORAL TABLET 10 MG, 15 MG, 20 MG	3	PA; SP; QL (2 EA per 1 day)
LIVMARLI ORAL TABLET 30 MG	3	PA; SP; QL (1 EA per 1 day)
l-methylfolate forte oral capsule	1	
l-methylfolate-algae oral capsule	1	
MEDACTIV ORAL TABLET	3	
MEDTRONIC MINIMED 780G KIT	3	
METHERGINE ORAL TABLET	3	
methylene blue intravenous solution	1	
methylergonovine maleate injection solution	1	
methylergonovine maleate oral tablet	1	
MICROCHAMBER DEVICE	2	
MINIMED 780G INSULIN PUMP KIT	3	
MINIMED MIO ADVANCE INFUSE SET	3	
MINIMED PUMP RESERVOIR 3ML	3	
MINIMED QUICK SET INF SET 18"	3	
MINIMED QUICK SET INF SET 23"	3	
MINIMED QUICK SET INF SET 32"	3	

Drug Name	Drug Tier	Requirements /Limits
MINIMED QUICK SET INF SET 43"	3	
MINIMED SILHOUETTE INF SET 32"	3	
MINIMED SILHOUETTE INF SET 43"	3	
MIPLYFFA ORAL CAPSULE	3	PA; SP; QL (3 EA per 1 day)
MODD1 PATIENT WELCOME KIT KIT	3	
MODD1 SUPPLY KIT KIT	3	
MONOJECT HYPODERMIC NEEDLE 22G X 1-1/2"	3	
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
MYOBLOC INTRAMUSCULAR SOLUTION	2	
NEOKE BCAA4 ORAL POWDER	3	
NEOKE BHB ORAL POWDER	3	
NEOKE RA LIPOIC ORAL POWDER	3	
NEOPHE ORAL POWDER	3	
NEOPHE ORAL TABLET	3	
NEXAVIR INJECTION SOLUTION	3	
NICAPRIN ORAL TABLET	3	
NITHIODOTE INTRAVENOUS KIT	3	

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Drug Name	Drug Tier	Requirements /Limits
NIVA-FOL ORAL TABLET	3	
NORDIPEN 5 INJECTION DEVICE	3	
NORM-JECT LUER SLIP SYRINGE	3	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION	3	
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	3	
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	2	
OMNIPOD 5 DEXCOM PODS	2	
OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT	2	
OMNIPOD 5 LIBRE PODS	2	
OMNIPOD DASH INTRO (GEN 4) KIT	2	
OMNIPOD DASH PDM (GEN 4) KIT	2	

Drug Name	Drug Tier	Requirements /Limits
OMNIPOD DASH PODS	2	
OMNIPOD POD PALS	3	
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	
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	3	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
PALFORZIA (1 MG DAILY DOSE) ORAL	3	
PALFORZIA INITIAL DOSE 1-3YRS ORAL	3	
PALFORZIA INITIAL DOSE 4-17YRS ORAL	3	
PALFORZIA ORAL	3	
PALFORZIA ORAL PACKET	3	
PANDA MASK LARGE	2	
PANDA MASK MEDIUM	2	
PANDA MASK SMALL	2	

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Drug Name	Drug Tier	Requirements /Limits
PARI VORTEX ADULT MASK	2	
PARI VORTEX PEDIATRIC MASK	2	
PEDIATRIC PANDA MASK	2	
PEDMARK INTRAVENOUS SOLUTION	3	
PEN NEEDLE/5-BEVEL TIP	2	
PENTETATE CALCIUM TRISODIUM COMBINATION SOLUTION	3	
PENTETATE ZINC TRISODIUM COMBINATION SOLUTION	3	
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	2	
PERFECT POINT SAFETY NEEDLE	3	
PHEXXI VAGINAL GEL	3	PV
PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE	3	
PIP PEN NEEDLES 32G X 4MM	2	
POCKET SPACER DEVICE	2	
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML, 200 MCG/50ML, 400 MCG/100ML	3	

Drug Name	Drug Tier	Requirements /Limits
pregnenolone oral tablet	1	
PREVDUO INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT DEVICE	2	
PROCARE SPACER/ADULT MASK DEVICE	2	
PROCARE SPACER/CHILD MASK DEVICE	2	
PROLEEVA ORAL CAPSULE	3	
PROLEVA ORAL TABLET	3	
PROTEOLIN ORAL TABLET	3	
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROVAYBLUE INTRAVENOUS SOLUTION	3	
PURE COMFORT SAFETY PEN NEEDLE	2	
PURE COMFORT SPACER CHAMBER DEVICE	2	
PYRIDOSTIGMINE BROMIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	

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Drug Name	Drug Tier	Requirements /Limits
QUICK TOUCH INSULIN PEN NEEDLE	2	
RADIOGARDASE ORAL CAPSULE	3	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	3	
RAPPORT RLS KIT	3	
RAPPORT VTD KIT	3	
RAYA SURE PEN NEEDLE	2	
RYPLAZIM INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
RYSTIGGO SUBCUTANEOUS SOLUTION 280 MG/2ML, 420 MG/3ML	3	PA; SP; QL (0.5 ML per 1 day)
RYSTIGGO SUBCUTANEOUS SOLUTION 560 MG/4ML	3	PA; SP; QL (0.6 ML per 1 day)
RYSTIGGO SUBCUTANEOUS SOLUTION 840 MG/6ML	3	PA; SP; QL (0.9 ML per 1 day)
SACCHARIN POWDER	3	
SAFETY PEN NEEDLES	2	
saline bacteriostatic injection solution	1	
SALINE-PHENOL INJECTION SOLUTION	3	
SECURESAFE HYPODERMIC NEEDLE	3	
SILHOUETTE 23" INFUSION SET	3	

Drug Name	Drug Tier	Requirements /Limits
SILHOUETTE 43" INFUSION SET	3	
SILHOUETTE INFUSION SET 18"	3	
sodium chloride bacteriostatic solution 0.9 % injection	1	
SODIUM CHLORIDE BACTERIOSTATIC SOLUTION 0.9 % INJECTION	3	
sodium nitrite intravenous solution	1	
sodium saccharin powder	1	
sodium thiosulfate intravenous solution	1	
SOHONOS ORAL CAPSULE 1 MG	3	PA; SP; QL (20 EA per 1 day)
SOHONOS ORAL CAPSULE 1.5 MG	3	PA; SP; QL (13 EA per 1 day)
SOHONOS ORAL CAPSULE 10 MG	3	PA; SP; QL (2 EA per 1 day)
SOHONOS ORAL CAPSULE 2.5 MG	3	PA; SP; QL (8 EA per 1 day)
SOHONOS ORAL CAPSULE 5 MG	3	PA; SP; QL (4 EA per 1 day)
SORBITOL IRRIGATION SOLUTION	3	
sorbitol-mannitol irrigation solution	1	
STERILE DILUENT FLOLAN PH 12 INTRAVENOUS SOLUTION	3	
STERILE DILUENT FOR REMODULIN INTRAVENOUS SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
sterile water for injection solution injection	1	
STERILE WATER FOR INJECTION SOLUTION INJECTION	3	
SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
SURE T INFUSION SET 18"/6MM	3	
SURE T INFUSION SET 23"/10MM	3	
SURE T INFUSION SET 23"/6MM	3	
SURE T INFUSION SET 23"/8MM	3	
SURE T INFUSION SET 32"/10MM	3	
SURE T INFUSION SET 32"/6MM	3	
SURE T INFUSION SET 32"/8MM	3	
SYNOJOYNT INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
SYRINGE LUER LOCK 30 ML	3	
SYRINGE LUER SLIP 1 ML	3	

Drug Name	Drug Tier	Requirements /Limits
T:SLIM X2 3ML CARTRIDGE	3	
T:SLIM X2 BASAL-IQ PUMP DEVICE	3	
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVICE	3	
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVICE	3	
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	3	
T:SLIM X2 INSULIN PUMP DEVICE	3	
T:SLIM X2/BASAL-IQ/ACC/INSTR	3	
T:SLIM X2/CONTROL-IQ/ACC/INSTR	3	
TANDEM MOBI AUTOSOFT 30 KIT	3	
TANDEM MOBI AUTOSOFT XC KIT	3	
TANDEM MOBI AUTOSOFT30 14PK23"	3	
TANDEM MOBI AUTOSOFTXC 14PK23"	3	
TANDEM MOBI AUTOSOFTXC 14PK5"	3	
TANDEM MOBI SYSTEM STARTER KIT	3	
TANDEM MOBI TRUSTEEL SUPP KIT	3	
TANDEM T:SLIM ASFT 30 PK10 23"	3	
TANDEM T:SLIM ASFT 30 PK14 23"	3	
TANDEM T:SLIM ASFT XC PK10 23"	3	

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Drug Name	Drug Tier	Requirements /Limits
TANDEM T:SLIM ASFT XC PK14 23"	3	
TANDEM T:SLIM TRUSTL PK10 23"	3	
TAVNEOS ORAL CAPSULE	3	PA; SP; QL (6 EA per 1 day)
TECHLITE PLUS PEN NEEDLES	2	
TELFA AMD ISLAND DRESSING PAD	3	
TELFA AMD NON-ADHERENT PAD	3	
TISSEEL EXTERNAL KIT	3	
TISSEEL EXTERNAL SOLUTION	3	
TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
TRUE COMFORT SAFETY PEN NEEDLE	2	
TRUSTEEL INFUSION SET	3	
TWIST REFILL KIT KIT	2	
TWIST REFILL KIT/INFUSION SET KIT	2	
TWIST STARTER KIT KIT	2	
TYR SPHERE 20 ORAL PACKET	3	
UDSX MEDICATED SYSTEM COMBINATION KIT	3	

Drug Name	Drug Tier	Requirements /Limits
UDSXMP MEDICATED SYSTEM COMBINATION KIT	3	
UNIFINE OTC PEN NEEDLES	2	
UNIFINE PROTECT PEN NEEDLE	2	
UREAPRO ORAL POWDER	3	
URE-NA URAPPLE ORAL PACKET	3	
VARISOFT INFUSION SET	3	
VASCAZEN ORAL CAPSULE	3	
VB6 P5P ORAL POWDER	3	
VEOZAH ORAL TABLET	3	
VERIFINE INSULIN PEN NEEDLE	2	
VERIFINE PLUS PEN NEEDLE	2	
VERISAFE SAFETY STERILE NEEDLE	3	
VERSAPENN (AG) ANHYDROUS TRANSDERMAL GEL	3	
VERSAPENN (AL) ANHYD LIPID TRANSDERMAL GEL	3	
V-GO 20 KIT	2	
V-GO 30 KIT	2	
V-GO 40 KIT	2	
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	3	
VISTOGARD ORAL PACKET	3	

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Drug Name	Drug Tier	Requirements /Limits
VORTEX VALVE CHAMBER-PEDI MASK DEVICE	2	
VORTEX VALVED HOLDING CHAMBER DEVICE	2	
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG	3	PA; SP; QL (3 EA per 1 day)
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG	3	PA; SP; QL (4 EA per 1 day)
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG	3	PA; SP; QL (7 EA per 1 day)
WESTAB MAX ORAL TABLET	3	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM	3	PV

Drug Name	Drug Tier	Requirements /Limits
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM	3	PV
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM	3	PV
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED	2	
XIAFLEX INJECTION SOLUTION RECONSTITUTED	2	PA; SP
XPHOZAH ORAL TABLET	3	
YONI FIT BLADDER SUPPORT KIT 1 VAGINAL DEVICE	3	
YONI FIT BLADDER SUPPORT KIT 2 VAGINAL DEVICE	3	
YONI FIT BLADDER SUPPORT KIT 3 VAGINAL DEVICE	3	
YONI FIT BLADDER SUPPORT KIT 4 VAGINAL DEVICE	3	
YONI FIT BLADDER SUPPORT KIT 5 VAGINAL DEVICE	3	
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 168 MCG/0.56ML	3	PA; SP; QL (0.04 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
YORVIPATH SUBCUTANEOUS SOLUTION PEN- INJECTOR 294 MCG/0.98ML	3	PA; SP; QL (0.07 ML per 1 day)
YORVIPATH SUBCUTANEOUS SOLUTION PEN- INJECTOR 420 MCG/1.4ML	3	PA; SP; QL (0.1 ML per 1 day)
ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
ZOKINVY ORAL CAPSULE	3	PA; SP; QL (4 EA per 1 day)
ZYVEXOL ORAL TABLET	3	
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR LS OPHTHALMIC SOLUTION	3	
ACULAR OPHTHALMIC SOLUTION	3	
ACUVAIL OPHTHALMIC SOLUTION	3	
ALOCRIAL OPHTHALMIC SOLUTION	3	
ALREX OPHTHALMIC SUSPENSION	3	
AZASITE OPHTHALMIC SOLUTION	3	
azelastine hcl ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
bacitracin ophthalmic ointment	1	
bepotastine besilate ophthalmic solution	1	
BEPREVE OPHTHALMIC SOLUTION	3	
BESIVANCE OPHTHALMIC SUSPENSION	3	
BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION	3	
bromfenac sodium (once-daily) ophthalmic solution	1	
bromfenac sodium ophthalmic solution	1	
BROMSITE OPHTHALMIC SOLUTION	3	
CILOXAN OPHTHALMIC OINTMENT	3	
ciprofloxacin hcl ophthalmic solution	1	
CLOBETASOL PROPIONATE OPHTHALMIC SUSPENSION	3	
cromolyn sodium ophthalmic solution	1	
dexamethasone sodium phosphate ophthalmic solution	1	
diclofenac sodium ophthalmic solution	1	
difluprednate ophthalmic emulsion	1	

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Drug Name	Drug Tier	Requirements /Limits
DUREZOL OPHTHALMIC EMULSION	3	
epinastine hcl ophthalmic solution	1	
erythromycin ophthalmic ointment	1	
EYSUVIS OPHTHALMIC SUSPENSION	3	
FLAREX OPHTHALMIC SUSPENSION	3	
fluorometholone ophthalmic suspension	1	
flurbiprofen sodium ophthalmic solution	1	
FML FORTE OPHTHALMIC SUSPENSION	3	
FML LIQUIFILM OPHTHALMIC SUSPENSION	3	
gatifloxacin ophthalmic solution	1	
gentamicin sulfate ophthalmic solution	1	
ILEVRO OPHTHALMIC SUSPENSION	3	
INVELTYS OPHTHALMIC SUSPENSION	3	
ketorolac tromethamine ophthalmic solution	1	
levofloxacin ophthalmic solution	1	
LOTEMAX OPHTHALMIC GEL	3	
LOTEMAX OPHTHALMIC OINTMENT	3	

Drug Name	Drug Tier	Requirements /Limits
LOTEMAX OPHTHALMIC SUSPENSION	3	
LOTEMAX SM OPHTHALMIC GEL	3	
loteprednol etabonate ophthalmic gel	1	
loteprednol etabonate ophthalmic suspension	1	
MAXIDEX OPHTHALMIC SUSPENSION	3	
MAXITROL OPHTHALMIC OINTMENT	3	
MAXITROL OPHTHALMIC SUSPENSION	3	
MITOSOL OPHTHALMIC KIT	3	
moxifloxacin hcl (2x day) ophthalmic solution	1	
MOXIFLOXACIN HCL INTRAOCULAR SOLUTION PREFILLED SYRINGE 0.16 %	3	
moxifloxacin hcl ophthalmic solution	1	
NATACYN OPHTHALMIC SUSPENSION	2	
neomycin-polymyxin- dexameth ophthalmic ointment	1	
neomycin-polymyxin- dexameth ophthalmic suspension	1	
neomycin-polymyxin-hc ophthalmic suspension	1	

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Drug Name	Drug Tier	Requirements /Limits
NEVANAC OPHTHALMIC SUSPENSION	3	
OCUFLOX OPHTHALMIC SOLUTION	3	
ofloxacin ophthalmic solution	1	
olopatadine hcl ophthalmic solution 0.2 %	1	
POVIDONE-IODINE OPHTHALMIC SOLUTION	3	
PRED FORTE OPHTHALMIC SUSPENSION	3	
PRED MILD OPHTHALMIC SUSPENSION	3	
prednisolone acetate ophthalmic suspension	1	
prednisolone sodium phosphate ophthalmic solution	1	
PROLENSA OPHTHALMIC SOLUTION	3	
sulfacetamide sodium ophthalmic ointment	1	
sulfacetamide sodium ophthalmic solution	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX ST OPHTHALMIC SUSPENSION	3	
tobramycin ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
tobramycin- dexamethasone ophthalmic suspension	1	
TOBREX OPHTHALMIC OINTMENT	3	
TRIESENCE INTRAOCULAR SUSPENSION	3	
trifluridine ophthalmic solution	1	
TRIPLE PMB OPHTHALMIC SOLUTION RECONSTITUTED	3	
TRIPLE PMK OPHTHALMIC SOLUTION RECONSTITUTED	3	
UPNEEQ OPHTHALMIC SOLUTION	3	
VIGAMOX OPHTHALMIC SOLUTION	3	
XDEMY OPHTHALMIC SOLUTION	3	
XIPERE INTRAOCULAR SUSPENSION	3	
ZERVATE OPHTHALMIC SOLUTION	3	
ZIRGAN OPHTHALMIC GEL	3	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er oral capsule extended release 12 hour	1	

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Drug Name	Drug Tier	Requirements /Limits
acetazolamide oral tablet	1	
ALPHAGAN P OPTHALMIC SOLUTION 0.1 %	3	
ALPHAGAN P OPTHALMIC SOLUTION 0.15 %	2	
apraclonidine hcl ophthalmic solution	1	
AZOPT OPTHALMIC SUSPENSION	3	
betaxolol hcl ophthalmic solution	1	
BETIMOL OPTHALMIC SOLUTION	3	
BETOPTIC-S OPTHALMIC SUSPENSION	3	
bimatoprost ophthalmic solution	1	
brimonidine tartrate ophthalmic solution	1	
brimonidine tartrate-timolol ophthalmic solution	1	
BRIMONIDINE-DORZOLAMIDE OPTHALMIC SOLUTION 0.1-2 %	3	
brinzolamide ophthalmic suspension	1	
carteolol hcl ophthalmic solution	1	
COMBIGAN OPTHALMIC SOLUTION	3	
COSOPT OPTHALMIC SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
COSOPT PF OPTHALMIC SOLUTION	3	
dichlorphenamide oral tablet	1	PA; SP; QL (4 EA per 1 day)
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal ophthalmic solution	1	
dorzolamide hcl-timolol mal pf ophthalmic solution	1	
IOPIDINE OPTHALMIC SOLUTION	3	
ISTALOL OPTHALMIC SOLUTION	3	
IYUZEH OPTHALMIC SOLUTION	3	
KEVEYIS ORAL TABLET	3	PA; SP; QL (4 EA per 1 day)
latanoprost ophthalmic solution	1	
levobunolol hcl ophthalmic solution	1	
LUMIGAN OPTHALMIC SOLUTION	2	
methazolamide oral tablet	1	
ORMALVI ORAL TABLET	3	PA; SP; QL (4 EA per 1 day)
PHOSPHOLINE IODIDE OPTHALMIC SOLUTION RECONSTITUTED	3	

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Drug Name	Drug Tier	Requirements /Limits
pilocarpine hcl ophthalmic solution	1	
QLOSI OPHTHALMIC SOLUTION	3	
RHOPRESSA OPHTHALMIC SOLUTION	3	
ROCKLATAN OPHTHALMIC SOLUTION	3	
SIMBRINZA OPHTHALMIC SUSPENSION	2	
tafluprost (pf) ophthalmic solution	1	
timolol hemihydrate 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	
timolol maleate pf ophthalmic solution	1	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	3	
TRAVATAN Z OPHTHALMIC SOLUTION	3	
travoprost (bak free) ophthalmic solution	1	
VUITY OPHTHALMIC SOLUTION	3	

Drug Name	Drug Tier	Requirements /Limits
VYZULTA OPHTHALMIC SOLUTION	3	
XALATAN OPHTHALMIC SOLUTION	3	
XELPROS OPHTHALMIC EMULSION	3	
ZIOPTAN OPHTHALMIC SOLUTION	3	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
AKTEN OPHTHALMIC GEL	3	
ALCAINE OPHTHALMIC SOLUTION	3	
ALTACAINE OPHTHALMIC SOLUTION	3	
altafrin ophthalmic solution	1	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.025 %, 0.05 %	3	
atropine sulfate ophthalmic solution 1 %	1	
bacitracin-polymyxin b ophthalmic ointment	1	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	1	
BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE 1.25 MG/0.05ML, 2.25 MG/0.09ML	2	SP
BUP-LIDO INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
BYOOVIZ INTRAVITREAL SOLUTION	3	PA; SP
CEQUA OPTHALMIC SOLUTION	3	
CIMERLI INTRAVITREAL SOLUTION	3	PA; SP
CYCLOGYL OPHTHALMIC SOLUTION	3	
CYCLOMYDRIL OPHTHALMIC SOLUTION	3	
cyclopentolate hcl ophthalmic solution	1	
cyclosporine ophthalmic emulsion	1	
CYSTADROPS OPHTHALMIC SOLUTION	3	SP; QL (0.72 ML per 1 day)
CYSTARAN OPHTHALMIC SOLUTION	3	SP; QL (2.15 ML per 1 day)
DOUBLE PM OPHTHALMIC SOLUTION RECONSTITUTED	3	
EYLEA HD INTRAVITREAL SOLUTION	3	PA; SP

Drug Name	Drug Tier	Requirements /Limits
EYLEA INTRAVITREAL SOLUTION	3	PA; SP
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; SP
HOMATROPAIRE OPHTHALMIC SOLUTION	3	
IZERVAY INTRAVITREAL SOLUTION	3	PA; SP
LIDOCAINE HCL- BUPIVACAINE HCL INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; SP
MIEBO OPTHALMIC SOLUTION	2	
MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED	3	
neomycin-bacitracin zn- polymyx ophthalmic ointment	1	
neomycin-polymyxin- gramicidin ophthalmic solution	1	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	3	
NEO-POLYCIN OPHTHALMIC OINTMENT	3	
OXERVATE OPHTHALMIC SOLUTION	3	PA; SP; QL (2 ML per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
PAVBLU INTRAVITREAL SOLUTION	3	PA; SP
PAVBLU INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; SP
phenylephrine hcl ophthalmic solution	1	
POLYCIN OPHTHALMIC OINTMENT	3	
polymyxin b-trimethoprim ophthalmic solution	1	
proparacaine hcl ophthalmic solution	1	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION	2	
RESTASIS OPHTHALMIC EMULSION	2	
sulfacetamide-prednisolone ophthalmic solution	1	
SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION	3	PA; SP
SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION	3	PA; SP
SYFOVRE INTRAVITREAL SOLUTION	3	PA; SP
tetracaine hcl ophthalmic solution	1	

Drug Name	Drug Tier	Requirements /Limits
TROPICAMIDE-PHENYLEPHRINE OPHTHALMIC SOLUTION	3	
TROPIC-CYCLOPENT-PE-KETOROLAC OPHTHALMIC SOLUTION 1-1-10-0.5 %	3	
TROPIC-CYCLOPENT-PE-KETOROLAC OPHTHALMIC SOLUTION PREFILLED SYRINGE	3	
TROPIC-CYCLOP-PE-KETO-PROPAR OPHTHALMIC SOLUTION PREFILLED SYRINGE	3	
TRYPTYR OPHTHALMIC SOLUTION	3	
TYRVAYA NASAL SOLUTION	3	
VABYSMO INTRAVITREAL SOLUTION	3	PA; SP
VABYSMO INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; SP
VERKAZIA OPHTHALMIC EMULSION	3	
VEVYE OPHTHALMIC SOLUTION	3	
VISIONBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	

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Drug Name	Drug Tier	Requirements /Limits
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
VIZZ OPHTHALMIC SOLUTION	3	
XIIDRA OPHTHALMIC SOLUTION	2	
ZYLET OPHTHALMIC SUSPENSION	3	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic solution	1	
CETRAXAL OTIC SOLUTION	3	
CIPRO HC OTIC SUSPENSION	3	
ciprofloxacin hcl otic solution	1	
ciprofloxacin-dexamethasone otic suspension	1	
CIPROFLOXACIN-FLUOCINOLONE PF OTIC SOLUTION	3	
CORTISPORIN-TC OTIC SUSPENSION	3	
DERMOTIC OTIC OIL	3	
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	

Drug Name	Drug Tier	Requirements /Limits
PRAMOTIC OTIC LIQUID	3	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal solution	1	
azelastine-fluticasone nasal suspension	1	
benzonatate oral capsule	1	
CARBINOXAMINE MALEATE ER ORAL SUSPENSION EXTENDED RELEASE	3	
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet	1	
CARBZAH ORAL SOLUTION	3	
cetirizine hcl oral solution	1	
CINQAIR INTRAVENOUS SOLUTION	3	PA; SP
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	
CLEMSZA ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
CUROSURF INTRATRACHEAL SUSPENSION	3	
cyproheptadine hcl oral syrup	1	
cyproheptadine hcl oral tablet	1	
desloratadine oral tablet	1	
desloratadine oral tablet dispersible	1	
DICOPANOL FUSEPAQ ORAL SUSPENSION RECONSTITUTED	3	
diphenhydramine hcl injection solution	1	
diphenhydramine hcl oral elixir	1	
DYMISTA NASAL SUSPENSION	3	
flunisolide nasal solution	1	
fluticasone propionate nasal suspension	1	
guaifenesin-codeine oral solution	1	QL (30 day supply per 1 fill)
HYCODAN ORAL SOLUTION	3	QL (30 day supply per 1 fill)
HYCODAN ORAL TABLET	3	QL (30 day supply per 1 fill)
hydrocod poli-chlorphe poli er oral suspension extended release	1	QL (30 day supply per 1 fill)
hydrocodone bit-homatrop mbr oral solution	1	QL (30 day supply per 1 fill)

Drug Name	Drug Tier	Requirements /Limits
hydrocodone bit-homatrop mbr oral tablet	1	QL (30 day supply per 1 fill)
hydromet oral solution	1	QL (30 day supply per 1 fill)
HYPERSAL INHALATION NEBULIZATION SOLUTION	3	
INFASURF INTRATRACHEAL SUSPENSION	3	
ipratropium bromide nasal solution	1	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	3	
levocetirizine dihydrochloride oral solution	1	
levocetirizine dihydrochloride oral tablet	1	
LIDOCAINE HCL-OXYMETAZOLINE NASAL SOLUTION PREFILLED SYRINGE	3	
maxi-tuss ac oral solution	1	QL (30 day supply per 1 fill)
mometasone furoate nasal suspension	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
NEOTUSS PLUS ORAL LIQUID	3	
olopatadine hcl nasal solution	1	

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Drug Name	Drug Tier	Requirements /Limits
OMNARIS NASAL SUSPENSION	3	
promethazine-codeine oral solution	1	QL (30 day supply per 1 fill)
promethazine-dm oral syrup	1	
promethazine-phenylephrine oral syrup	1	
pseudoephedrine-bromphen-dm oral syrup	1	
PULMOSAL INHALATION NEBULIZATION SOLUTION	3	
QNASL CHILDRENS NASAL AEROSOL SOLUTION	3	
QNASL NASAL AEROSOL SOLUTION	3	
RYALTRIS NASAL SUSPENSION	3	
RYCLORA ORAL SOLUTION	3	
ryvent oral tablet	1	
sodium chloride inhalation nebulization solution	1	
SURVANTA INTRATRACHEAL SUSPENSION	3	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR	3	
XHANCE NASAL EXHALER SUSPENSION	3	

Drug Name	Drug Tier	Requirements /Limits
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ACCOLATE ORAL TABLET	3	
acetylcysteine inhalation solution	1	
ADRENALIN INJECTION SOLUTION	3	
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ADVAIR HFA INHALATION AEROSOL	1	
AIRSUPRA INHALATION AEROSOL	2	
albuterol sulfate hfa inhalation aerosol solution	1	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	2	
albuterol sulfate oral syrup	1	
albuterol sulfate oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
ALVESCO INHALATION AEROSOL SOLUTION	3	
aminophylline intravenous solution	1	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
arformoterol tartrate inhalation nebulization solution	1	
ARNUITY 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	
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ASMANEX HFA INHALATION AEROSOL	3	

Drug Name	Drug Tier	Requirements /Limits
ATROVENT HFA INHALATION AEROSOL SOLUTION	3	
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR	3	
BEVESPI AEROSPHERE INHALATION AEROSOL	3	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	1	
breyna inhalation aerosol	1	
BREZTRI AEROSPHERE INHALATION AEROSOL	2	
BRINSUPRI ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
BROVANA INHALATION NEBULIZATION SOLUTION	3	
budesonide inhalation suspension	1	
budesonide-formoterol fumarate inhalation aerosol	1	
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	2	
cromolyn sodium inhalation nebulization solution	1	
DALIRESP ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements /Limits
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
DULERA INHALATION AEROSOL	3	
elixophyllin oral elixir	1	
epinephrine (anaphylaxis) injection solution	1	
epinephrine injection solution auto-injector	1	
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	3	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	3	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	3	
ESBRIET ORAL TABLET	3	PA; SP
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.02 ML per 1 day)
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	2	PA; SP; QL (0.01 ML per 1 day)
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	2	PA; SP; QL (0.02 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
FLUTICASONE FUROATE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
FLUTICASONE PROPIONATE DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL	3	
FLUTICASONE-SALMETEROL INHALATION AEROSOL 45-21 MCG/ACT, 115-21 MCG/ACT, 230-21 MCG/ACT	3	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	

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Drug Name	Drug Tier	Requirements /Limits
formoterol fumarate inhalation nebulization solution	1	
GLASSIA INTRAVENOUS SOLUTION	3	PA; SP
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
ipratropium bromide inhalation solution	1	
ipratropium-albuterol inhalation solution	1	
isoproterenol hcl injection solution	1	
JASCAYD ORAL TABLET	3	SP
levalbuterol hcl inhalation nebulization solution	1	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	
montelukast sodium oral packet	1	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NEFFY NASAL SOLUTION	3	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; SP; QL (0.11 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	2	PA; SP; QL (0.02 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; SP; QL (0.11 EA per 1 day)
OFEV ORAL CAPSULE	3	PA; SP
OHTUVAYRE INHALATION SUSPENSION	3	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	3	
pirfenidone oral capsule	1	PA; SP
pirfenidone oral tablet	1	PA; SP
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA; SP
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
PULMICORT SUSPENSION INHALATION SUSPENSION	3	
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED	2	
roflumilast oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER	3	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	3	
SINGULAIR ORAL TABLET CHEWABLE	3	
SPIRIVA HANDIHALER INHALATION CAPSULE	3	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	2	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED	3	
STERITALC INTRAPLEURAL POWDER	3	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	2	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	2	
SYMBICORT INHALATION AEROSOL	3	
terbutaline sulfate injection solution	1	

Drug Name	Drug Tier	Requirements /Limits
terbutaline sulfate oral tablet	1	
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; SP; QL (0.07 ML per 1 day)
TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL (0.07 ML per 1 day)
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	1	
theophylline er oral tablet extended release 24 hour	1	
theophylline oral elixir	1	
theophylline oral solution	1	
tiotropium bromide inhalation capsule	1	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	2	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
UMECLIDINIUM- VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED	3	
VENTOLIN HFA INHALATION AEROSOL SOLUTION	3	

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Drug Name	Drug Tier	Requirements /Limits
wixela inhub inhalation aerosol powder breath activated	1	
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	2	PA; SP; QL (0.08 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML	2	PA; SP; QL (0.3 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/0.5ML	2	PA; SP; QL (0.04 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	2	PA; SP; QL (0.08 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	2	PA; SP; QL (0.3 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	2	PA; SP; QL (0.04 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; SP
XOPENEX HFA INHALATION AEROSOL	3	
YUPELRI INHALATION SOLUTION	3	
zafirlukast oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
zileuton er oral tablet extended release 12 hour	1	
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
ALYFTREK ORAL TABLET 10-50-125 MG	3	PA; SP; QL (2 EA per 1 day)
ALYFTREK ORAL TABLET 4-20-50 MG	3	PA; SP; QL (3 EA per 1 day)
BETHKIS INHALATION NEBULIZATION SOLUTION	3	SP; QL (8 ML per 1 day)
BRONCHITOL INHALATION CAPSULE	3	PA; SP; QL (20 EA per 1 day)
BRONCHITOL TOLERANCE TEST INHALATION CAPSULE	3	PA; SP; QL (20 EA per 1 day)
CAYSTON INHALATION SOLUTION RECONSTITUTED	3	PA; SP
KALYDECO ORAL PACKET	3	PA; SP; QL (2 EA per 1 day)
KALYDECO ORAL TABLET	3	PA; SP
KITABIS PAK (W/ NEBULIZER) INHALATION NEBULIZATION SOLUTION	3	SP; QL (10 ML per 1 day)
ORKAMBI ORAL PACKET	3	PA; SP; QL (2 EA per 1 day)
ORKAMBI ORAL TABLET	3	PA; SP; QL (4 EA per 1 day)

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Drug Name	Drug Tier	Requirements /Limits
PULMOZYME INHALATION SOLUTION	2	PA; SP
SYMDEKO ORAL TABLET THERAPY PACK	3	PA; SP; QL (2 EA per 1 day)
TOBI NEBULIZER INHALATION NEBULIZATION SOLUTION	3	SP; QL (10 ML per 1 day)
TOBI PODHALER INHALATION CAPSULE	3	SP; QL (224 EA per 40 days)
tobramycin inhalation nebulization solution 300 mg/4ml	1	SP; QL (8 ML per 1 day)
tobramycin nebulization solution 300 mg/5ml inhalation	1	SP; QL (10 ML per 1 day)
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	3	SP; QL (10 ML per 1 day)
TRIKAFTA ORAL TABLET THERAPY PACK	3	PA; SP; QL (3 EA per 1 day)
TRIKAFTA ORAL THERAPY PACK	3	PA; SP; QL (2 EA per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
ADEMPAS ORAL TABLET	2	PA; SP; QL (3 EA per 1 day)
alyq oral tablet	1	PA; SP; QL (2 EA per 1 day)
ambrisentan oral tablet	1	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Requirements /Limits
AURLUMYN INTRAVENOUS SOLUTION	3	PA; QL (9 ML per 1 day)
bosentan oral tablet	1	PA; SP; QL (2 EA per 1 day)
bosentan oral tablet soluble	1	PA; SP; QL (4 EA per 1 day)
epoprostenol sodium intravenous solution reconstituted	1	PA; SP
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
LETAIRIS ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
OPSUMIT ORAL TABLET	2	PA; SP; QL (1 EA per 1 day)
OPSYNVI ORAL TABLET	3	PA; SP; QL (1 EA per 1 day)
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA; SP; QL (336 EA per 365 days)
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA; SP; QL (672 EA per 365 days)
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	3	PA; SP; QL (504 EA per 365 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE	3	PA; SP
REMODULIN INJECTION SOLUTION	3	PA; SP
REVATIO INTRAVENOUS SOLUTION	3	PA; SP

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Drug Name	Drug Tier	Requirements /Limits
REVATIO ORAL TABLET	3	PA; SP; QL (3 EA per 1 day)
sildenafil citrate intravenous solution	1	PA; SP
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL (7.5 ML per 1 day)
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL (3 EA per 1 day)
tadalafil (pah) oral tablet	1	PA; SP; QL (2 EA per 1 day)
TADLIQ ORAL SUSPENSION	3	PA; SP; QL (10 ML per 1 day)
TRACLEER 62.5 MG, 125 MG	3	PA; SP; QL (2 EA per 1 day)
TRACLEER 32 MG	3	PA; SP; QL (4 EA per 1 day)
treprostinil injection solution	1	PA; SP
TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER	3	PA; SP; QL (4 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER	3	PA; SP; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT INHALATION POWDER	3	PA; SP; QL (2 EA per 365 days)
TYVASO INHALATION SOLUTION	3	PA; SP; QL (2.9 ML per 1 day)
TYVASO REFILL KIT INHALATION SOLUTION	3	PA; SP; QL (2.9 ML per 1 day)
TYVASO STARTER KIT INHALATION SOLUTION	3	PA; SP; QL (2.9 ML per 1 day)

Drug Name	Drug Tier	Requirements /Limits
UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
UPTRAVI ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
UPTRAVI TITRATION ORAL TABLET THERAPY PACK	3	PA; SP; QL (400 EA per 365 days)
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
WINREVAIR SUBCUTANEOUS KIT	3	PA; SP; QL (0.05 EA per 1 day)
YUTREPIA INHALATION CAPSULE 106 MCG	3	PA; SP; QL (8 EA per 1 day)
YUTREPIA INHALATION CAPSULE 26.5 MCG, 53 MCG	3	PA; SP; QL (5 EA per 1 day)
YUTREPIA INHALATION CAPSULE 79.5 MCG	3	PA; SP; QL (10 EA per 1 day)
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
baclofen intrathecal solution	1	
baclofen intrathecal solution prefilled syringe	1	
baclofen oral solution	1	
baclofen oral suspension	1	
baclofen oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
BACLOFEN REFILL KIT-SYNCHROMED INTRATHECAL KIT	3	
carisoprodol oral tablet	1	
chlorzoxazone oral tablet	1	
cyclobenzaprine hcl er oral capsule extended release 24 hour	1	
cyclobenzaprine hcl oral tablet	1	
DANTRIVM INTRAVENOUS SOLUTION RECONSTITUTED	3	
DANTRIVM ORAL CAPSULE	3	
dantrolene sodium intravenous solution reconstituted	1	
dantrolene sodium oral capsule	1	
ENOVARX-BACLOFEN EXTERNAL CREAM	3	
ENOVARX-CYCLOBENZAPRINE HCL TRANSDERMAL CREAM	3	
FEXMID ORAL TABLET	3	
FLEQSUVY ORAL SUSPENSION	3	
GABLOFEN INTRATHECAL SOLUTION	3	
GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Requirements /Limits
LIORESAL INTRATHECAL SOLUTION	3	
metaxalone oral tablet	1	
methocarbamol injection solution	1	
methocarbamol oral tablet	1	
NORGESIC FORTE ORAL TABLET	3	
NORGESIC ORAL TABLET	3	
orphenadrine citrate er oral tablet extended release 12 hour	1	
orphenadrine citrate injection solution	1	
orphenadrine-aspirin-caffeine oral tablet	1	
ORPHENGESIC FORTE ORAL TABLET	3	
OZOBAX DS ORAL SOLUTION	3	
revonto intravenous solution reconstituted	1	
ROBAXIN INJECTION SOLUTION	3	
RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED	3	
SOMA ORAL TABLET	3	
TABRADOL FUSEPAQ ORAL SUSPENSION	3	
TANLOR ORAL TABLET	3	
tizanidine hcl oral capsule	1	
tizanidine hcl oral tablet	1	

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Drug Name	Drug Tier	Requirements /Limits
ZANAFLEX ORAL CAPSULE	3	
ZANAFLEX ORAL TABLET	3	
Sleep Disorder Agents		
AMBIEN CR ORAL TABLET EXTENDED RELEASE	3	
AMBIEN ORAL TABLET	3	
armodafinil oral tablet	1	
BELSOMRA ORAL TABLET	3	
DAYVIGO ORAL TABLET	3	
doxepin hcl oral tablet	1	
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	3	
eszopiclone oral tablet	1	
flurazepam hcl oral capsule	1	
HETLIOZ LQ ORAL SUSPENSION	3	PA; SP; QL (158 ML per 30 days)
HETLIOZ ORAL CAPSULE	3	PA; SP; QL (1 EA per 1 day)
LUMRYZ ORAL PACKET	3	PA; SP; QL (1 EA per 1 day)
LUNESTA ORAL TABLET	3	
modafinil oral tablet	1	
NUVIGIL ORAL TABLET	3	
PROVIGIL ORAL TABLET	3	
QUVIVIQ ORAL TABLET	3	
ramelteon oral tablet	1	

Drug Name	Drug Tier	Requirements /Limits
RESTORIL ORAL CAPSULE	3	
ROZEREM ORAL TABLET	3	
SILENOR ORAL TABLET	3	
SODIUM OXYBATE ORAL SOLUTION	3	PA; SP; QL (18 ML per 1 day)
SUNOSI ORAL TABLET	2	
tasimelteon oral capsule	1	PA; SP; QL (1 EA per 1 day)
temazepam oral capsule	1	
WAKIX ORAL TABLET	3	PA; SP; QL (2 EA per 1 day)
XYREM ORAL SOLUTION	3	PA; SP; QL (18 ML per 1 day)
XYWAV ORAL SOLUTION	3	PA; SP; QL (18 ML per 1 day)
zaleplon oral capsule	1	
zolpidem tartrate er oral tablet extended release	1	
ZOLPIDEM TARTRATE ORAL CAPSULE	3	
zolpidem tartrate oral tablet	1	
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