

2022 Prescription Drug List

Effective January 1, 2022



Formulary Introduction

FORMULARY

The Ambetter of Illinois Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

- Tier 0** - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.
- Tier 1_A** - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 1_B** - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 2** - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.
- Tier 3** - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.
- Tier 4** - **Highest copayment is for “specialty” drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management.** Prescription drugs covered under the specialty tier require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Envolve Pharmacy Solutions will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL TABS 7.5 MG-7.5 MG-7.5 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(2 ea daily)
ADDERALL TABS 1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(3 ea daily)
ADDERALL XR CP24 1.25 MG-1.25 MG, 2.5 MG-2.5 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(1 ea daily)
ADDERALL XR CP24 6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(2 ea daily)
ADDERALL XR CP24 5 MG-5 MG-5 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ADDERALL XR CP24 12.5 MG-12.5 MG-12.5 MG, 3.125 MG-3.125 MG, 3.75 MG-3.75 MG, 6.25 MG-6.25 MG, 9.375 MG-9.375 MG (Use <i>amphetamine-dextroamphetamine</i>)	NF	
<i>amphetamine-dextroamphetamine tabs 7.5 MG-7.5 MG-7.5 MG</i>	1B	QL(2 ea daily)
<i>amphetamine-dextroamphetamine cp24 5 MG-5 MG-5 MG</i>	1B	QL(3 ea daily)
DESOXYN (Use <i>methamphetamine hcl</i>)	NF	QL(5 ea daily);AL(At least 6 yrs old)
DEXEDRINE CP24 10 MG, 15 MG (Use <i>dextroamphetamine sulfate</i>)	NF	QL(4 ea daily)
DEXEDRINE CP24 5 MG (Use <i>dextroamphetamine sulfate</i>)	NF	
<i>dextroamphetamine sulfate cp24 5 MG</i>	1B	
<i>dextroamphetamine sulfate tabs 5 MG, 10 MG</i>	1B	QL(4 ea daily)
<i>dextroamphetamine sulfate cp24 10 MG, 15 MG</i>	1B	QL(4 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>methamphetamine hcl</i>	1B	QL(5 ea daily);AL(At least 6 yrs old)
VYVANSE CAPS	3	QL(1 ea daily);ST
Anorexiant Non-Amphetamine		
ADIPEX-P CAPS (<i>Use phentermine hcl</i>)	NF	PA
<i>phendimetrazine tartrate tabs</i>	1B	PA
<i>phentermine hcl caps</i>	1B	PA
Anti-Obesity Agents		
CONTRAVE 90 MG-8 MG	3	QL(4 ea daily);PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 ea daily);AL(At least 6 yrs old)
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 ea daily);AL(At least 6 yrs old)
<i>clonidine hcl (adhd) tb12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 ea daily);AL(At least 6 yrs old)
INTUNIV (<i>Use guanfacine hcl (adhd)</i>)	NF	QL(1 ea daily);AL(At least 6 yrs old)
KAPVAY TB12 (<i>Use clonidine hcl (adhd)</i>)	NF	
STRATTERA 60 MG, 80 MG, 100 MG (<i>Use atomoxetine hcl</i>)	NF	QL(1 ea daily);AL(At least 6 yrs old)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (<i>Use atomoxetine hcl</i>)	NF	QL(2 ea daily);AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRI)		
SUNOSI 75 MG	3	QL(2 ea daily);PA

Drug Name	Drug Tier	Requirement s/Limits
SUNOSI 150 MG	3	QL(1 ea daily);PA
Stimulants - Misc.		
<i>armodafinil</i>	1B	QL(1 ea daily);AL(At least 17 yrs old);PA
CONCERTA TBCR 36 MG, 54 MG (<i>Use methylphenidate hcl</i>)	NF	QL(2 ea daily);AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG (<i>Use methylphenidate hcl</i>)	NF	QL(1 ea daily);AL(At least 6 yrs old)
DAYTRANA PTCH (<i>Use methylphenidate</i>)	3	QL(1 ea daily);PA
<i>dexmethylphenidate hcl tabs</i>	1B	QL(2 ea daily);AL(At least 6 yrs old)
<i>dexmethylphenidate hcl cp24</i>	1B	QL(1 ea daily)
FOCALIN TABS (<i>Use dexmethylphenidate hcl</i>)	NF	QL(2 ea daily);AL(At least 6 yrs old)
FOCALIN XR CP24 (<i>Use dexmethylphenidate hcl</i>)	NF	QL(1 ea daily)
METHYLIN SOLN (<i>Use methylphenidate hcl</i>)	2	QL(30 ml daily);AL(At least 6 yrs old)
<i>methylphenidate ptch</i>	1B	QL(1 ea daily);PA
<i>methylphenidate hcl tabs 5 MG</i>	1B	QL(6 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl tbc 18 MG, 27 MG</i>	1B	QL(1 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl cpcr</i>	1B	QL(1 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl tbc 36 MG, 54 MG</i>	1B	QL(2 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl cp24 20 MG, 40 MG</i>	1B	AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirement s/Limits
<i>methylphenidate hcl tabs 10 MG, 20 MG</i>	1B	QL(5 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl tbc 10 MG, 20 MG</i>	1B	QL(3 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl cp24 30 MG</i>	1B	QL(3 ea daily);AL(At least 6 yrs old)
<i>methylphenidate hcl soln</i>	1B	QL(30 ml daily);AL(At least 6 yrs old)
<i>modafinil 200 MG</i>	1B	QL(2 ea daily);PA
<i>modafinil 100 MG</i>	1B	QL(1 ea daily);PA
<i>NUVIGIL (Use armodafinil)</i>	NF	QL(1 ea daily);AL(At least 17 yrs old);PA
<i>PROVIGIL 200 MG (Use modafinil)</i>	NF	QL(2 ea daily);PA
<i>PROVIGIL 100 MG (Use modafinil)</i>	NF	QL(1 ea daily);PA
<i>RITALIN TABS 5 MG (Use methylphenidate hcl)</i>	NF	QL(6 ea daily);AL(At least 6 yrs old)
<i>RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)</i>	NF	QL(5 ea daily);AL(At least 6 yrs old)
<i>RITALIN LA CP24 20 MG, 40 MG (Use methylphenidate hcl)</i>	NF	AL(At least 6 yrs old)
<i>RITALIN LA CP24 30 MG (Use methylphenidate hcl)</i>	NF	QL(3 ea daily);AL(At least 6 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
<i>GRASSTK SUBL</i>	3	PA
AMEBICIDES		
Amebicides		
<i>SOLOSEC</i>	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial		

Drug Name	Drug Tier	Requirement s/Limits
Infections		
Aminoglycosides		
<i>amikacin sulfate soln 1 GM/4ML, 500 MG/2ML</i>	1B	
<i>ARIKAYCE</i>	4	PA
<i>gentamicin in saline 0.9 %-0.8 MG/ML, 0.9 %-1 MG/ML, 0.9 %-1.2 MG/ML, 0.9 %-1.6 MG/ML</i>	1B	
<i>gentamicin sulfate ij 40 MG/ML</i>	1B	
<i>HUMATIN (Use paromomycin sulfate)</i>	NF	
<i>KITABIS PAK NEBU (Use tobramycin)</i>	NF	PA
<i>neomycin sulfate tabs</i>	1B	
<i>paromomycin sulfate</i>	1B	
<i>streptomycin sulfate solr</i>	3	
<i>TOBI NEBU (Use tobramycin)</i>	NF	PA
<i>tobramycin nebu</i>	4	PA
<i>tobramycin sulfate soln ij 10 MG/ML, 40 MG/ML, 80 MG/2ML</i>	1B	
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
<i>RINVOQ 15 MG</i>	4	QL(1 ea daily);PA
<i>XELJANZ TABS 5 MG</i>	4	QL(2 ea daily);SP;PA
<i>XELJANZ TABS 10 MG</i>	4	QL(2 ea daily);PA
<i>XELJANZ XR TB24</i>	4	QL(1 ea daily);PA
Antirheumatic Antimetabolites		

Drug Name	Drug Tier	Requirement s/Limits
METHOTREXATE	4	QL(1.714 ea daily);SP;PA
Anti-TNF-alpha - Monoclonal Antibodies		
HUMIRA PSKT	4	QL(0.143 ea daily);PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	4	1 rtl pack lmt amt,180 rtl pack lmt day(s);1 mail pack lmt amt,180 mail pack lmt day(s);PA
HUMIRA PEN PNKT	4	QL(0.143 ea daily);PA
HUMIRA PEN PNKT 80 MG/0.8ML	4	QL(0.072 ea daily);PA
HUMIRA PEN-CD/UC/HS STARTER PNKT	4	QL(0.143 ea daily);PA
HUMIRA PEN-CD/UC/HS STARTER PNKT 80 MG/0.8ML	4	1 rtl pack lmt amt,180 rtl pack lmt day(s);1 mail pack lmt amt,180 mail pack lmt day(s);PA
HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	4	1 rtl pack lmt amt,180 rtl pack lmt day(s);1 mail pack lmt amt,180 mail pack lmt day(s);PA
HUMIRA PEN-PS/UV STARTER PNKT	4	QL(0.143 ea daily);PA
HUMIRA PEN-PS/UV STARTER PNKT	4	1 rtl pack lmt amt,180 rtl pack lmt day(s);1 mail pack lmt amt,180 mail pack lmt day(s);PA
Gold Compounds		
RIDAURA	3	QL(3 ea daily)
Interleukin-1 Blockers		

Drug Name	Drug Tier	Requirement s/Limits
ARCALYST	4	QL(0.286 ea daily);SP;PA
Interleukin-6 Receptor Inhibitors		
KEVZARA SOSY	4	QL(0.082 ml daily);PA
KEVZARA SOAJ	4	QL(0.082 ml daily);PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
ANAPROX DS TABS (Use naproxen sodium)	NF	
ARTHROTEC 50 TBEC 200 MCG-50 MG (Use diclofenac w/ misoprostol)	NF	
ARTHROTEC 75 TBEC 200 MCG-75 MG (Use diclofenac w/ misoprostol)	NF	
CELEBREX (Use celecoxib)	NF	PA
celecoxib	1B	PA
CHILDRENS ADVIL SUSP 100 MG/5ML (Use ibuprofen)	NF	RX/OTC
CHILDRENS MOTRIN SUSP 100 MG/5ML (Use ibuprofen)	NF	RX/OTC
DAYPRO (Use oxaprozin)	NF	
diclofenac potassium tabs 50 MG	1B	
diclofenac sodium tbec	1B	
diclofenac sodium tb24	1B	
diclofenac w/ misoprostol tbec	1B	
etodolac caps	1B	
etodolac tabs	1B	

Drug Name	Drug Tier	Requirement s/Limits
FELDENE CAPS (<i>Use piroxicam</i>)	NF	
<i>fenoprofen calcium tabs</i>	1B	QL(4 ea daily);ST
<i>flurbiprofen tabs</i>	1B	
<i>ibuprofen tabs 400 MG, 600 MG</i>	1A	
<i>ibuprofen tabs 800 MG</i>	1B	
<i>ibuprofen susp 100 MG/5ML</i>	1B	RX/OTC
<i>indomethacin caps 25 MG, 50 MG</i>	1B	
<i>indomethacin cpcr</i>	1B	
<i>ketoprofen caps 50 MG, 75 MG</i>	1B	
<i>ketorolac tromethamine tabs</i>	1B	QL(0.667 ea daily)
LODINE TABS (<i>Use etodolac</i>)	NF	
<i>meclofenamate sodium caps</i>	1B	
<i>mefenamic acid caps</i>	1B	QL(5 ea daily);ST
<i>meloxicam tabs</i>	1A	QL(1 ea daily)
<i>meloxicam susp</i>	1B	
MELOXICAM SUSP	1B	
MOBIC TABS (<i>Use meloxicam</i>)	NF	QL(1 ea daily)
<i>nabumetone</i>	1B	
NALFON TABS (<i>Use fenoprofen calcium</i>)	NF	QL(4 ea daily);ST
NAPROSYN TABS 500 MG (<i>Use naproxen</i>)	NF	
NAPROSYN SUSP (<i>Use naproxen</i>)	NF	PA
<i>naproxen tabs</i>	1B	
<i>naproxen tbec 500 MG</i>	1B	
<i>naproxen susp</i>	1B	PA

Drug Name	Drug Tier	Requirement s/Limits
<i>naproxen sodium tabs 550 MG</i>	1B	
<i>oxaprozin</i>	1B	
<i>piroxicam caps</i>	1B	
<i>sulindac tabs</i>	1B	
TIVORBEX CAPS (<i>Use indomethacin</i>)	NF	
<i>tolmetin sodium caps</i>	1B	
<i>tolmetin sodium tabs 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TBPK	4	1 rtl pack lmt amt,180 rtl pack lmt day(s);PA
OTEZLA TABS	4	QL(2 ea daily);PA
Pyrimidine Synthesis Inhibitors		
ARAVA (<i>Use leflunomide</i>)	NF	QL(1 ea daily)
<i>leflunomide</i>	1B	QL(1 ea daily)
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL SOLN	4	QL(0.146 ml daily);PA
ENBREL SOLR	4	QL(0.286 ea daily);SP;PA
ENBREL SOSY 50 MG/ML	4	QL(0.28 ml daily);SP;PA
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ml daily);SP;PA
ENBREL MINI SOCT	4	QL(0.15 ml daily);PA
ENBREL SURECLICK SOAJ	4	QL(0.143 ml daily);SP;PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen tabs 325 MG-50 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen-caffeine tabs 325 MG-40 MG-50 MG</i>	1B	
<i>butalbital-acetaminophen-caffeine caps 300 MG-40 MG-50 MG, 325 MG-40 MG-50 MG</i>	1B	
<i>butalbital-aspirin-caffeine caps 50 MG-325 MG-40 MG</i>	1B	
ESGIC TABS 325 MG-40 MG-50 MG (Use <i>butalbital-acetaminophen-caffeine</i>)	NF	
FIORICET CAPS 300 MG-40 MG-50 MG (Use <i>butalbital-acetaminophen-caffeine</i>)	NF	
FIORINAL CAPS 50 MG-325 MG-40 MG (Use <i>butalbital-aspirin-caffeine</i>)	NF	
Salicylates		
<i>aspirin tbec 81 MG</i>	0	AL(At least 45 yrs old- Up to 79 yrs old)
<i>aspirin tbec 325 MG</i>	1A	
<i>aspirin chew</i>	0	AL(At least 45 yrs old- Up to 79 yrs old)
<i>aspirin tabs 325 MG</i>	0	AL(At least 45 yrs old- Up to 79 yrs old)
<i>diflunisal tabs</i>	1B	
ECOTRIN TBEC (Use <i>aspirin</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
ECOTRIN REGULAR STRENGTH TBEC (Use <i>aspirin</i>)	NF	
<i>salsalate</i>	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
ACTIQ LPOP (Use <i>fentanyl citrate</i>)	NF	QL(4 ea daily);PA
<i>codeine sulfate tabs</i>	1B	New starts limited to 7 day supply
CODEINE SULFATE TABS	1B	New starts limited to 7 day supply
DEMEROL SOLN IJ (Use <i>meperidine hcl</i>)	NF	
DILAUDID TABS (Use <i>hydromorphone hcl</i>)	NF	New starts limited to 7 day supply;QL(8 ea daily)
DILAUDID LIQD (Use <i>hydromorphone hcl</i>)	NF	New starts limited to 7 day supply
DURAGESIC PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR (Use <i>fentanyl</i>)	NF	QL(0.34 ea daily)
<i>fentanyl pt72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1B	QL(0.34 ea daily)
<i>fentanyl citrate lpop</i>	1B	QL(4 ea daily);PA
<i>hydrocodone bitartrate cp12</i>	1B	QL(2 ea daily);PA
<i>hydromorphone hcl tabs</i>	1B	New starts limited to 7 day supply;QL(8 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>hydromorphone hcl tb24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 ea daily);PA
<i>hydromorphone hcl soln ij 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B	
<i>hydromorphone hcl liqd</i>	1B	New starts limited to 7 day supply
<i>hydromorphone hcl tb24 32 MG</i>	1B	QL(1 ea daily);PA
HYDROMORPHONE HYDROCHLORIDE SOLN IJ (Use <i>hydromorphone hcl</i>)	NF	
KADIAN CP24 10 MG, 40 MG, 200 MG (Use <i>morphine sulfate</i>)	NF	
KADIAN CP24 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG (Use <i>morphine sulfate</i>)	NF	QL(2 ea daily);PA
<i>levorphanol tartrate tabs 2 MG</i>	1B	New starts limited to 7 day supply
<i>meperidine hcl soln ij 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B	
<i>meperidine hcl tabs 50 MG</i>	1B	New starts limited to 7 days.;QL(6 ea daily)
<i>meperidine hcl soln or 50 MG/5ML</i>	1B	New starts limited to 7 day supply;QL(500 ml per fill retail)
<i>methadone hcl soln ij 10 MG/ML</i>	1B	
<i>methadone hcl soln or 5 MG/5ML</i>	1B	QL(100 ml daily)
<i>methadone hcl soln or 10 MG/5ML</i>	1B	QL(50 ml daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>methadone hcl conc</i>	1B	QL(10 ml daily)
<i>methadone hcl tabs 5 MG</i>	1B	QL(4 ea daily)
<i>methadone hcl tabs 10 MG</i>	1B	QL(10 ea daily)
<i>methadone hcl tbso</i>	1B	QL(2 ea daily)
METHADONE HCL SOLN IJ (Use <i>methadone hcl</i>)	1B	
METHADOSE CONC (Use <i>methadone hcl</i>)	NF	QL(10 ml daily)
METHADOSE SUGAR-FREE CONC (Use <i>methadone hcl</i>)	NF	QL(10 ml daily)
<i>morphine sulfate soln or 10 MG/5ML</i>	1B	New starts limited to 7 day supply;QL(100 ml daily)
<i>morphine sulfate cp24 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 ea daily);PA
<i>morphine sulfate tabs</i>	1B	New starts limited to 7 day supply;QL(6 ea daily)
<i>morphine sulfate soln ij .5 MG/ML, 1 MG/ML</i>	1B	
<i>morphine sulfate soln or 20 MG/5ML</i>	1B	New starts limited to 7 day supply;QL(50 ml daily)
<i>morphine sulfate tbc</i>	1B	QL(2 ea daily)
MS CONTIN TBCR (Use <i>morphine sulfate</i>)	NF	QL(2 ea daily)
NUCYNTA TABS	2	QL(6 ea daily);PA
NUCYNTA ER TB12	2	QL(2 ea daily);PA
<i>oxycodone hcl tabs</i>	1B	New starts limited to 7 day supply;QL(12 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>oxycodone hcl t12a</i>	3	QL(2 ea daily);PA
<i>oxymorphone hcl tb12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 ea daily);PA
<i>oxymorphone hcl tabs</i>	1B	QL(12 ea daily);PA
<i>oxymorphone hcl tb12 40 MG</i>	1B	QL(4 ea daily);PA
ROXICODONE TABS (Use <i>oxycodone hcl</i>)	NF	New starts limited to 7 day supply;QL(12 ea daily)
SUBSYS LIQD 800 MCG, 1200 MCG, 1600 MCG	3	QL(8 ea daily);PA
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 ea daily);PA
SUBSYS LIQD 100 MCG	3	QL(3 ea daily);PA
<i>tramadol hcl tb24</i>	1B	QL(1 ea daily)
<i>tramadol hcl tabs 50 MG</i>	1A	New starts limited to 7 day supply;QL(8 ea daily)
ULTRAM TABS (Use <i>tramadol hcl</i>)	NF	New starts limited to 7 day supply;QL(8 ea daily)
XTAMPZA ER	2	QL(2 ea daily);PA
ZOHYDRO ER CP12 (Use <i>hydrocodone bitartrate</i>)	1B	QL(2 ea daily);PA
Opioid Combinations		
<i>acetaminophen w/ codeine tabs 300 MG-15 MG</i>	1B	New starts limited to 7 day supply;QL(13 ea daily)
<i>acetaminophen w/ codeine tabs 300 MG-30 MG</i>	1A	New starts limited to 7 day supply;QL(12 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>acetaminophen w/ codeine tabs 300 MG-60 MG</i>	1B	New starts limited to 7 day supply;QL(6 ea daily)
<i>acetaminophen w/ codeine soln 120 MG/5ML-12 MG/5ML</i>	1A	New starts limited to 7 day supply;QL(75 ml daily)
<i>acetaminophen-caff-dihydrocod caps 16 MG-30 MG-320.5 MG</i>	1B	New starts limited to 7 day supply
<i>acetaminophen-caff-dihydrocod caps 16 MG-30 MG-320.5 MG</i>	3	New starts limited to 7 day supply;PA
<i>butalbital-acetaminophen-caffeine w/ codeine 300 MG-30 MG-40 MG-50 MG</i>	1B	New starts limited to 7 day supply
<i>butalbital-aspirin-caffeine w/cod 50 MG-325 MG-30 MG-40 MG</i>	1B	New starts limited to 7 day supply;QL(6 ea daily)
FIORICET/CODEINE 300 MG-30 MG-40 MG-50 MG (Use <i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NF	New starts limited to 7 day supply
FIORINAL/CODEINE #3 50 MG-325 MG-30 MG-40 MG (Use <i>butalbital-aspirin-caffeine w/cod</i>)	NF	New starts limited to 7 day supply;QL(6 ea daily)
<i>hydrocodone-acetaminophen soln 10 MG/15ML-325 MG/15ML</i>	1B	New starts limited to 7 day supply
<i>hydrocodone-acetaminophen tabs 10 MG-325 MG, 5 MG-325 MG, 7.5 MG-325 MG</i>	1B	New starts limited to 7 day supply;QL(12 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen soln</i> 2.5 MG/5ML-108 MG/5ML, 5 MG/10ML-217 MG/10ML, 7.5 MG/15ML-325 MG/15ML	1B	New starts limited to 7 day supply;QL(180 ml daily)
<i>hydrocodone-ibuprofen</i> 200 MG-7.5 MG	1B	New starts limited to 7 day supply;QL(5 ea daily)
LORTAB ELIX 10 MG/15ML-300 MG/15ML	2	New starts limited to 7 day supply;QL(60 ml daily)
NORCO TABS (Use <i>hydrocodone-acetaminophen</i>)	NF	New starts limited to 7 day supply;QL(12 ea daily)
<i>oxycodone w/acetaminophen tabs</i> 10 MG-325 MG, 5 MG-325 MG, 7.5 MG-325 MG	1B	New starts limited to 7 day supply;QL(12 ea daily)
PERCOCET TABS 10 MG-325 MG, 5 MG-325 MG, 7.5 MG-325 MG (Use <i>oxycodone w/acetaminophen</i>)	NF	New starts limited to 7 day supply;QL(12 ea daily)
<i>tramadol-acetaminophen</i> 37.5 MG-325 MG	1B	New starts limited to 7 day supply;QL(8 ea daily)
ULTRACET 37.5 MG-325 MG (Use <i>tramadol-acetaminophen</i>)	NF	New starts limited to 7 day supply;QL(8 ea daily)
Opioid Partial Agonists		
BUNAVAIL FILM BU 6.3 MG-1 MG	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
BUNAVAIL FILM BU 2.1 MG-0.3 MG	2	QL(4 ea daily)
BUNAVAIL FILM BU 4.2 MG-0.7 MG	2	QL(2 ea daily)
BUPRENEX SOLN (Use <i>buprenorphine hcl</i>)	NF	
<i>buprenorphine ptwk</i>	1B	QL(0.143 ea daily);PA
<i>buprenorphine hcl sub</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl soln</i>	1B	
<i>buprenorphine hcl-naloxone hcl dihydrate sub</i>	1B	QL(3 ea daily)
<i>buprenorphine hcl-naloxone hcl dihydrate film sl</i> 2 MG-0.5 MG, 4 MG-1 MG, 8 MG-2 MG	1B	QL(3 ea daily)
<i>butorphanol tartrate inj</i> 1 MG/ML, 2 MG/ML	1B	
<i>butorphanol tartrate na</i> 10 MG/ML	1B	PA
BUTRANS PTWK (Use <i>buprenorphine</i>)	NF	QL(0.143 ea daily);PA
<i>nalbuphine hcl</i>	1B	QL(8 ml daily)
<i>pentazocine w/naloxone hcl</i> 50 MG-0.5 MG	1B	New starts limited to 7 day supply
SUBLOCADE SOSY	2	
SUBOXONE FILM SL 12 MG-3 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	2	QL(2 ea daily)
SUBOXONE FILM SL 2 MG-0.5 MG, 4 MG-1 MG, 8 MG-2 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	2	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ZUBSOLV SUBL	2	QL(3 ea daily)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
ANADROL-50	3	
<i>oxandrolone</i>	1B	
Androgens		
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 ea daily);PA
<i>danazol caps</i>	1B	
DEPO-TESTOSTERONE SOLN IM (Use <i>testosterone cypionate</i>)	NF	
METHITEST TABS	3	
<i>testosterone cypionate soln im</i>	1B	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate soln im</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
CORTENEMA (Use <i>hydrocortisone (intrarectal)</i>)	NF	
<i>hydrocortisone (intrarectal)</i>	1B	
UCERIS	4	QL(1.6 gm daily);PA
Rectal Steroids		
ANUSOL-HC EX (Use <i>hydrocortisone (rectal)</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone (rectal) ex</i>	1B	
<i>hydrocortisone acetate (rectal)</i>	1B	
PROCTOCORT EX (Use <i>hydrocortisone (rectal)</i>)	NF	
PROCTOCORT (Use <i>hydrocortisone acetate (rectal)</i>)	NF	
Vasodilating Agents		
RECTIV	3	QL(2 gm daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1B	PA
ALBENZA (Use <i>albendazole</i>)	NF	PA
BILTRICIDE (Use <i>praziquantel</i>)	NF	PA
EMVERM CHEW	2	1 rtl MAX fill,60 rtl day(s) supply;1 mail MAX fill;QL(2 ea daily,6 ea per fill retail,6 per fill mail MG)
<i>ivermectin</i>	1B	1 rtl MAX fill,75 rtl day(s) supply;1 mail MAX fill;QL(9 ea per fill retail,9 per fill mail MG)
<i>praziquantel</i>	1B	PA
STROMECTOL (Use <i>ivermectin</i>)	NF	1 rtl MAX fill,75 rtl day(s) supply;1 mail MAX fill;QL(9 ea per fill retail,9 per fill mail MG)
ANTIANGINAL AGENTS - Drugs to Treat		

Drug Name	Drug Tier	Requirements/Limits
Chest Pain		
Antianginals-Other		
RANEXA TB12 1000 MG (Use ranolazine)	NF	QL(2 ea daily)
RANEXA TB12 500 MG (Use ranolazine)	NF	QL(3 ea daily)
ranolazine tb12 1000 MG	1B	QL(2 ea daily)
ranolazine tb12 500 MG	1B	QL(3 ea daily)
Nitrates		
isosorbide dinitrate tabs 5 MG, 10 MG, 20 MG, 30 MG	1B	
isosorbide mononitrate tabs	1B	
isosorbide mononitrate tb24	1B	
NITRO-BID OINT	3	
NITRO-DUR PT24 (Use nitroglycerin)	NF	
nitroglycerin cpcr	1B	QL(4 ea daily)
nitroglycerin pt24	1B	
nitroglycerin subl	1B	
NITROGLYCERIN SOLN IV	1B	
NITROSTAT SUBL (Use nitroglycerin)	NF	
ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
bupirone hcl 5 MG	1A	
bupirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG	1B	
hydroxyzine hcl syrup	1B	
hydroxyzine hcl soln 50 MG/ML	1B	
hydroxyzine hcl tabs	1B	

Drug Name	Drug Tier	Requirements/Limits
hydroxyzine pamoate caps	1B	
meprobamate	1B	
VISTARIL CAPS (Use hydroxyzine pamoate)	NF	
Benzodiazepines		
alprazolam tabs 2 MG	1B	QL(4 ea daily)
alprazolam tabs .25 MG, .5 MG, 1 MG	1A	QL(4 ea daily)
alprazolam tbdp	1B	
alprazolam tb24	1B	
ATIVAN TABS 1 MG (Use lorazepam)	NF	QL(4 ea daily)
ATIVAN TABS .5 MG, 2 MG (Use lorazepam)	NF	QL(3 ea daily)
chlordiazepoxide hcl caps	1B	
clorazepate dipotassium tabs	1B	
diazepam conc	1B	
diazepam tabs	1A	QL(4 ea daily)
diazepam soln or 5 MG/5ML	1B	
lorazepam tabs 1 MG	1A	QL(4 ea daily)
lorazepam tabs .5 MG, 2 MG	1A	QL(3 ea daily)
lorazepam conc	1B	
oxazepam caps	1B	
TRANXENE T TABS 7.5 MG (Use clorazepate dipotassium)	NF	
VALIUM TABS (Use diazepam)	NF	QL(4 ea daily)
XANAX TABS (Use alprazolam)	NF	QL(4 ea daily)
XANAX XR TB24 (Use alprazolam)	NF	
ANTIARRHYTHMICS - Drugs to treat		

Drug Name	Drug Tier	Requirement s/Limits
abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate caps</i>	1B	
NORPACE CAPS (<i>Use disopyramide phosphate</i>)	NF	
<i>procainamide hcl soln 500 MG/ML</i>	1B	
<i>quinidine sulfate tabs</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl tabs</i>	1B	
<i>propafenone hcl cp12</i>	1B	
RYTHMOL SR CP12 (<i>Use propafenone hcl</i>)	NF	
Antiarrhythmics Type III		
<i>amiodarone hcl soln 50 MG/ML, 150 MG/3ML</i>	1B	
<i>amiodarone hcl tabs</i>	1B	
<i>dofetilide</i>	1B	
MULTAQ	3	
TIKOSYN (<i>Use dofetilide</i>)	NF	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA SOSY	4	PA
FASENRA PEN SOAJ	4	PA
NUCALA SOLR	4	PA
NUCALA SOSY 100 MG/ML	4	PA
NUCALA SOAJ	4	PA

Drug Name	Drug Tier	Requirement s/Limits
XOLAIR SOSY	4	PA
XOLAIR SOLR	4	SP;PA
Anti-Inflammatory Agents		
<i>cromolyn sodium nebu</i>	1B	QL(8 ml daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	3	QL(0.44 gm daily)
INCRUSE ELLIPTA	2	QL(1 ea daily)
<i>ipratropium bromide soln .02 %</i>	1B	QL(15 ml daily)
SPIRIVA HANDIHALER CAPS	2	QL(1 ea daily)
SPIRIVA RESPIMAT AERS	2	QL(0.14 gm daily)
Leukotriene Modulators		
ACCOLATE (<i>Use zafirlukast</i>)	NF	QL(2 ea daily)
<i>montelukast sodium pack</i>	1B	QL(1 ea daily);PA
<i>montelukast sodium tabs</i>	1B	QL(1 ea daily)
<i>montelukast sodium chew</i>	1B	QL(1 ea daily)
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NF	QL(1 ea daily);PA
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NF	QL(1 ea daily)
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NF	QL(1 ea daily)
<i>zafirlukast</i>	1B	QL(2 ea daily)
<i>zileuton tb12</i>	1B	QL(4 ea daily)
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP 250 MCG (<i>Use roflumilast</i>)	3	30 rtl MAX day(s) supply,180 rtl lmt day(s);30 mail MAX day(s) supply,180 mail lmt day(s);QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
DALIRESP 500 MCG (Use roflumilast)	3	QL(1 ea daily)
<i>roflumilast 250 MCG</i>	1B	30 rti MAX day(s) supply,180 rti lmt day(s);30 mail MAX day(s) supply,180 mail lmt day(s);QL(1 ea daily)
<i>roflumilast 500 MCG</i>	1B	QL(1 ea daily)
Steroid Inhalants		
ALVESCO	3	PA
ARNUITY ELLIPTA	2	
<i>budesonide (inhalation) susp</i>	1B	QL(4 ml daily);PA
FLOVENT DISKUS AEPB	2	
FLOVENT HFA	2	
PULMICORT SUSP (Use <i>budesonide (inhalation)</i>)	NF	QL(4 ml daily);PA
PULMICORT FLEXHALER AEPB	2	
QVAR REDHALER	2	
Sympathomimetics		
ADVAIR DISKUS AEPB (Use <i>fluticasone-salmeterol</i>)	NF	
ADVAIR HFA AERO	2	
<i>albuterol sulfate nebu .5 %, 2.5 MG/0.5ML</i>	1B	
<i>albuterol sulfate tabs</i>	1B	
<i>albuterol sulfate syrup</i>	1B	
<i>albuterol sulfate aers</i>	1B	
<i>albuterol sulfate tb12</i>	1B	
<i>albuterol sulfate nebu .083 %, .63 MG/3ML, 1.25 MG/3ML</i>	1B	QL(15 ml daily)

Drug Name	Drug Tier	Requirements/Limits
ANORO ELLIPTA 62.5 MCG/INH-25 MCG/INH	2	QL(2 ea daily)
ARCAPTA NEOHALER	2	
<i>arformoterol tartrate</i>	1B	QL(4 ml daily)
BEVESPI AEROSPHERE 4.8 MCG/ACT-9 MCG/ACT	2	QL(0.36 gm daily)
BREO ELLIPTA	2	
BREZTRI AEROSPHERE 4.8 MCG/ACT-9 MCG/ACT-160 MCG/ACT	2	QL(0.38 gm daily)
BROVANA (Use <i>arformoterol tartrate</i>)	3	QL(4 ml daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1B	
<i>fluticasone-salmeterol aepb 50 MCG/ACT-100 MCG/ACT, 50 MCG/ACT-250 MCG/ACT, 50 MCG/ACT-500 MCG/ACT</i>	1B	
<i>formoterol fumarate nebu</i>	1B	QL(4 ml daily)
<i>ipratropium-albuterol soln 0.5 MG/3ML-2.5 MG/3ML</i>	1B	QL(18 ml daily)
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1B	PA
<i>levalbuterol hcl</i>	1B	QL(12 ml daily);PA
<i>levalbuterol tartrate</i>	3	
PERFOROMIST NEBU (Use <i>formoterol fumarate</i>)	NF	QL(4 ml daily)
PROAIR HFA AERS (Use <i>albuterol sulfate</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
PROVENTIL HFA AERS (Use albuterol sulfate)	NF	
SEREVENT DISKUS	2	
STRIVERDI RESPIMAT	2	
SYMBICORT	2	
<i>terbutaline sulfate tabs</i>	1B	
<i>terbutaline sulfate soln</i>	1B	
TRELEGY ELLIPTA	2	QL(2 ea daily)
UTIBRON NEOHALER 27.5 MCG-15.6 MCG	3	QL(2 ea daily);PA
VENTOLIN HFA AERS (Use albuterol sulfate)	NF	
XOPENEX (Use <i>levalbuterol hcl</i>)	NF	QL(12 ml daily);PA
XOPENEX CONCENTRATE (Use <i>levalbuterol hcl</i>)	NF	PA
XOPENEX HFA (Use <i>levalbuterol tartrate</i>)	NF	
Xanthines		
<i>aminophylline soln</i>	1B	
<i>theophylline soln</i>	1B	QL(56 ml daily)
<i>theophylline tb12 300 MG, 450 MG</i>	1B	
<i>theophylline elix</i>	1B	
<i>theophylline tb24</i>	1B	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium tabs</i>	1B	
Direct Factor Xa Inhibitors		
ELIQUIS TABS	2	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ELIQUIS STARTER PACK TBPK	2	1 rtl MAX fill,180 rtl day(s) supply;QL(2.47 ea daily)
XARELTO TABS 2.5 MG, 15 MG	2	QL(2 ea daily)
XARELTO SUSR	2	QL(900 ml per 30 days retail,900 ml per 30 days mail)
XARELTO TABS 10 MG, 20 MG	2	QL(1 ea daily)
XARELTO STARTER PACK TBPK	2	1 rtl MAX fill,365 rtl day(s) supply
Heparins And Heparinoid-Like Agents		
ARIXTRA 7.5 MG/0.6ML (Use <i>fondaparinux sodium</i>)	NF	QL(5.4 ml per 180 days retail,5 ml per 180 days mail);SP
ARIXTRA 2.5 MG/0.5ML (Use <i>fondaparinux sodium</i>)	NF	QL(4.5 ml per 180 days retail,4 ml per 180 days mail);SP
ARIXTRA 10 MG/0.8ML (Use <i>fondaparinux sodium</i>)	NF	QL(7.2 ml per 180 days retail,7 ml per 180 days mail);SP
ARIXTRA 5 MG/0.4ML (Use <i>fondaparinux sodium</i>)	NF	QL(3.6 ml per 180 days retail,3 ml per 180 days mail);SP
<i>enoxaparin sodium soty 100 MG/ML, 150 MG/ML</i>	4	QL(2 ml daily)
<i>enoxaparin sodium soty 40 MG/0.4ML</i>	4	QL(0.8 ml daily,30 Day(s) limit MG/0.4ML);SP
<i>enoxaparin sodium soty 60 MG/0.6ML</i>	4	QL(1.2 ml daily,30 Day(s) limit MG/0.6ML);SP

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium soln ij 300 MG/3ML</i>	4	QL(6 ml daily)
<i>enoxaparin sodium sosal 30 MG/0.3ML</i>	4	QL(0.6 ml daily);SP
<i>enoxaparin sodium sosal 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ml daily)
<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ml per 180 days retail, 7 ml per 180 days mail);SP
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ml per 180 days retail, 4 ml per 180 days mail);SP
<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ml per 180 days retail, 5 ml per 180 days mail);SP
<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ml per 180 days retail, 3 ml per 180 days mail);SP
FRAGMIN SOSY	4	SP;PA
<i>heparin sodium (porcine) soln ij 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
HEPARIN SODIUM/NACL 0.45% SOLN IV 12500 UNIT/250ML-0.45 %	1B	
LOVENOX SOLN IJ 300 MG/3ML (Use <i>enoxaparin sodium</i>)	NF	QL(6 ml daily)
LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use <i>enoxaparin sodium</i>)	NF	QL(2 ml daily)

Drug Name	Drug Tier	Requirements/Limits
LOVENOX SOSY 40 MG/0.4ML (Use <i>enoxaparin sodium</i>)	NF	QL(0.8 ml daily, 30 Day(s) limit MG/0.4ML);SP
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use <i>enoxaparin sodium</i>)	NF	QL(1.6 ml daily)
LOVENOX SOSY 30 MG/0.3ML (Use <i>enoxaparin sodium</i>)	NF	QL(0.6 ml daily);SP
LOVENOX SOSY 60 MG/0.6ML (Use <i>enoxaparin sodium</i>)	NF	QL(1.2 ml daily, 30 Day(s) limit MG/0.6ML);SP

ANTICONVULSANTS - Drugs to Treat Seizures

AMPA Glutamate Receptor Antagonists

FYCOMPA TABS	3	PA
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Anticonvulsants - Benzodiazepines

<i>clobazam susp</i>	1B	QL(16 ml daily);PA
<i>clobazam tabs</i>	1B	QL(2 ea daily);PA
<i>clonazepam tabs</i>	1A	
DIASTAT ACUDIAL GEL (Use <i>diazepam (anticonvulsant)</i>)	NF	
DIASTAT PEDIATRIC GEL (Use <i>diazepam (anticonvulsant)</i>)	NF	
<i>diazepam (anticonvulsant) gel</i>	3	
KLONOPIN TABS (Use <i>clonazepam</i>)	NF	
NAYZILAM	3	QL(10 ea per 30 days retail);PA
ONFI TABS (Use <i>clobazam</i>)	NF	QL(2 ea daily);PA
ONFI SUSP (Use <i>clobazam</i>)	NF	QL(16 ml daily);PA

Anticonvulsants - Misc.

Drug Name	Drug Tier	Requirements/Limits
APTIOM	3	QL(2 ea daily);ST
BANZEL TABS 200 MG (Use rufinamide)	2	QL(2 ea daily);PA
BANZEL SUSP (Use rufinamide)	NF	QL(80 ml daily);PA
BANZEL TABS 400 MG (Use rufinamide)	2	QL(8 ea daily);PA
BRIVIACT TABS	3	QL(2 ea daily);PA
BRIVIACT SOLN OR 10 MG/ML	3	QL(20 ml daily);PA
carbamazepine cp12 300 MG	1B	QL(4 ea daily)
carbamazepine cp12 100 MG	1B	
carbamazepine chew	1B	
carbamazepine tb12 200 MG	1B	QL(6 ea daily)
carbamazepine tb12 100 MG, 400 MG	1B	QL(4 ea daily)
carbamazepine susp	1B	
carbamazepine cp12 200 MG	1B	QL(6 ea daily)
carbamazepine tabs	1B	
CARBATROL CP12 200 MG (Use carbamazepine)	NF	QL(6 ea daily)
CARBATROL CP12 300 MG (Use carbamazepine)	NF	QL(4 ea daily)
CARBATROL CP12 100 MG (Use carbamazepine)	NF	
DIACOMIT CAPS 250 MG	4	QL(12 ea daily);PA
DIACOMIT PACK 500 MG	4	QL(6 ea daily);PA
DIACOMIT CAPS 500 MG	4	QL(6 ea daily);PA
DIACOMIT PACK 250 MG	4	QL(12 ea daily);PA

Drug Name	Drug Tier	Requirements/Limits
EPIDIOLEX	3	PA
<i>gabapentin tabs 600 MG, 800 MG</i>	1B	
<i>gabapentin caps</i>	1B	
<i>gabapentin soln</i>	1B	QL(60 ml daily)
KEPPRA SOLN IV 500 MG/5ML (Use levetiracetam)	NF	QL(30 ml daily)
KEPPRA TABS 500 MG (Use levetiracetam)	NF	QL(6 ea daily)
KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	NF	QL(4 ea daily)
KEPPRA TABS 1000 MG (Use levetiracetam)	NF	QL(3 ea daily)
KEPPRA XR TB24 (Use levetiracetam)	NF	QL(4 ea daily)
<i>lacosamide tabs</i>	1B	QL(2 ea daily);PA
<i>lacosamide soln iv 200 MG/20ML</i>	1B	QL(40 ml daily)
<i>lacosamide soln or 10 MG/ML</i>	1B	QL(40 ml daily);PA
LAMICTAL TABS 25 MG (Use lamotrigine)	NF	QL(20 ea daily)
LAMICTAL TABS 100 MG (Use lamotrigine)	NF	QL(5 ea daily)
LAMICTAL TABS 200 MG (Use lamotrigine)	NF	QL(2.5 ea daily)
LAMICTAL TABS 150 MG (Use lamotrigine)	NF	QL(4 ea daily)
LAMICTAL CHEWABLE DISPERSIBLE CHEW 5 MG (Use lamotrigine)	NF	QL(100 ea daily)
LAMICTAL CHEWABLE DISPERSIBLE CHEW 25 MG (Use lamotrigine)	NF	QL(20 ea daily)
LAMICTAL ODT TBDP (Use lamotrigine)	NF	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine chew 5 MG</i>	1B	QL(100 ea daily)
<i>lamotrigine tabs 100 MG</i>	1B	QL(5 ea daily)
<i>lamotrigine tbdp</i>	1B	QL(1 ea daily)
<i>lamotrigine tabs 25 MG</i>	1B	QL(20 ea daily)
<i>lamotrigine tabs 150 MG</i>	1B	QL(4 ea daily)
<i>lamotrigine tabs 200 MG</i>	1B	QL(2.5 ea daily)
<i>lamotrigine chew 25 MG</i>	1B	QL(20 ea daily)
<i>levetiracetam tabs 250 MG, 750 MG</i>	1B	QL(4 ea daily)
<i>levetiracetam soln iv 500 MG/5ML</i>	1B	QL(30 ml daily)
<i>levetiracetam tb24</i>	1B	QL(4 ea daily)
<i>levetiracetam tabs 1000 MG</i>	1B	QL(3 ea daily)
<i>levetiracetam tabs 500 MG</i>	1B	QL(6 ea daily)
<i>LYRICA CAPS 225 MG, 300 MG (Use pregabalin)</i>	NF	QL(2 ea daily);PA
<i>LYRICA SOLN (Use pregabalin)</i>	NF	QL(30 ml daily);PA
<i>LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)</i>	NF	QL(3 ea daily);PA
<i>MYSOLINE (Use primidone)</i>	NF	QL(8 ea daily)
<i>NEURONTIN TABS (Use gabapentin)</i>	NF	
<i>NEURONTIN CAPS (Use gabapentin)</i>	NF	
<i>NEURONTIN SOLN (Use gabapentin)</i>	NF	QL(60 ml daily)
<i>oxcarbazepine tabs 150 MG, 300 MG</i>	1B	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine susp</i>	1B	QL(40 ml daily)
<i>oxcarbazepine tabs 600 MG</i>	1B	QL(4 ea daily)
<i>pregabalin caps 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	1B	QL(3 ea daily);PA
<i>pregabalin caps 225 MG, 300 MG</i>	1B	QL(2 ea daily);PA
<i>pregabalin soln</i>	1B	QL(30 ml daily);PA
<i>primidone</i>	1B	QL(8 ea daily)
<i>QUDEXY XR CS24 (Use topiramate)</i>	NF	PA
<i>rufinamide susp</i>	1B	QL(80 ml daily);PA
<i>rufinamide tabs 200 MG</i>	1B	QL(2 ea daily);PA
<i>rufinamide tabs 400 MG</i>	1B	QL(8 ea daily);PA
<i>TEGRETOL TABS (Use carbamazepine)</i>	2	
<i>TEGRETOL SUSP (Use carbamazepine)</i>	2	
<i>TEGRETOL-XR TB12 100 MG, 400 MG (Use carbamazepine)</i>	NF	QL(4 ea daily)
<i>TEGRETOL-XR TB12 200 MG (Use carbamazepine)</i>	NF	QL(6 ea daily)
<i>TOPAMAX TABS 50 MG (Use topiramate)</i>	NF	QL(6 ea daily)
<i>TOPAMAX TABS 25 MG, 100 MG (Use topiramate)</i>	NF	QL(4 ea daily)
<i>TOPAMAX TABS 200 MG (Use topiramate)</i>	NF	QL(2 ea daily)
<i>TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)</i>	NF	QL(8 ea daily)

Drug Name	Drug Tier	Requirements/Limits
TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NF	QL(6 ea daily)
<i>topiramate tabs 25 MG, 100 MG</i>	1B	QL(4 ea daily)
<i>topiramate tabs 200 MG</i>	1B	QL(2 ea daily)
<i>topiramate cpsp 15 MG</i>	1B	QL(6 ea daily)
<i>topiramate cpsp 25 MG</i>	1B	QL(8 ea daily)
<i>topiramate tabs 50 MG</i>	1B	QL(6 ea daily)
<i>topiramate cs24</i>	3	PA
TRILEPTAL TABS 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 ea daily)
TRILEPTAL TABS 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(3 ea daily)
TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NF	QL(40 ml daily)
VIMPAT SOLN IV 200 MG/20ML (<i>Use lacosamide</i>)	3	QL(40 ml daily)
VIMPAT SOLN OR 10 MG/ML (<i>Use lacosamide</i>)	3	QL(40 ml daily);PA
VIMPAT TABS (<i>Use lacosamide</i>)	3	QL(2 ea daily);PA
ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NF	QL(6 ea daily)
<i>zonisamide caps</i>	1B	QL(6 ea daily)
Carbamates		
<i>felbamate tabs 600 MG</i>	1B	QL(6 ea daily)
<i>felbamate susp</i>	1B	QL(30 ml daily)
<i>felbamate tabs 400 MG</i>	1B	QL(9 ea daily)

Drug Name	Drug Tier	Requirements/Limits
FELBATOL TABS 600 MG (<i>Use felbamate</i>)	NF	QL(6 ea daily)
FELBATOL SUSP (<i>Use felbamate</i>)	NF	QL(30 ml daily)
FELBATOL TABS 400 MG (<i>Use felbamate</i>)	NF	QL(9 ea daily)
GABA Modulators		
GABITRIL (<i>Use tiagabine hcl</i>)	NF	
SABRIL TABS (<i>Use vigabatrin</i>)	NF	QL(6 ea daily);SP;PA
SABRIL PACK (<i>Use vigabatrin</i>)	NF	QL(6 ea daily);SP;PA
<i>tiagabine hcl</i>	1B	
<i>vigabatrin tabs</i>	4	QL(6 ea daily);SP;PA
<i>vigabatrin pack</i>	4	QL(6 ea daily);SP;PA
Hydantoins		
CEREBYX (<i>Use fosphenytoin sodium</i>)	NF	
DILANTIN (<i>Use phenytoin sodium extended</i>)	2	
DILANTIN	2	
DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>Use phenytoin</i>)	2	
<i>fosphenytoin sodium</i>	1B	
PHENYTEK (<i>Use phenytoin sodium extended</i>)	2	
<i>phenytoin chew</i>	1B	
<i>phenytoin susp</i>	1B	
<i>phenytoin sodium soln</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
Succinimides		
CELONTIN	3	QL(4 ea daily)
<i>ethosuximide caps</i>	1B	QL(6 ea daily)
<i>ethosuximide soln</i>	1B	QL(30 ml daily)
ZARONTIN CAPS (<i>Use ethosuximide</i>)	2	QL(6 ea daily)
ZARONTIN SOLN (<i>Use ethosuximide</i>)	NF	QL(30 ml daily)
Valproic Acid		
DEPAKOTE TBEC (<i>Use divalproex sodium</i>)	NF	
DEPAKOTE ER TB24 (<i>Use divalproex sodium</i>)	NF	
<i>divalproex sodium tbec</i>	1B	
<i>divalproex sodium tb24</i>	1B	
<i>valproate sodium soln or 250 MG/5ML</i>	1B	
<i>valproic acid caps</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine tbdp 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine tabs 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine tbdp 45 MG</i>	1B	QL(1 ea daily)
<i>mirtazapine tbdp 15 MG</i>	1B	QL(3 ea daily)
<i>mirtazapine tabs 30 MG</i>	1B	QL(1.5 ea daily)
<i>mirtazapine tabs 7.5 MG, 45 MG</i>	1B	QL(1 ea daily)
REMERON TABS 15 MG (<i>Use mirtazapine</i>)	NF	QL(3 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
REMERON TABS 30 MG (<i>Use mirtazapine</i>)	NF	QL(1.5 ea daily)
REMERON SOLTAB TBDP 45 MG (<i>Use mirtazapine</i>)	NF	QL(1 ea daily)
REMERON SOLTAB TBDP 30 MG (<i>Use mirtazapine</i>)	NF	QL(1.5 ea daily)
REMERON SOLTAB TBDP 15 MG (<i>Use mirtazapine</i>)	NF	QL(3 ea daily)
Antidepressants - Misc.		
<i>bupropion hcl tb12 150 MG</i>	1B	QL(3 ea daily)
<i>bupropion hcl tb12 200 MG</i>	1B	QL(2 ea daily)
<i>bupropion hcl tabs</i>	1B	QL(3 ea daily)
<i>bupropion hcl tb24 150 MG</i>	1B	QL(3 ea daily)
<i>bupropion hcl tb12 100 MG</i>	1B	QL(4 ea daily)
<i>bupropion hcl tb24 300 MG</i>	1B	QL(1 ea daily)
<i>maprotiline hcl</i>	1B	
WELLBUTRIN SR TB12 100 MG (<i>Use bupropion hcl</i>)	NF	QL(4 ea daily)
WELLBUTRIN SR TB12 150 MG (<i>Use bupropion hcl</i>)	NF	QL(3 ea daily)
WELLBUTRIN SR TB12 200 MG (<i>Use bupropion hcl</i>)	NF	QL(2 ea daily)
WELLBUTRIN XL TB24 150 MG (<i>Use bupropion hcl</i>)	NF	QL(3 ea daily)
WELLBUTRIN XL TB24 300 MG (<i>Use bupropion hcl</i>)	NF	QL(1 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
MARPLAN	2	QL(6 ea daily)
NARDIL (Use phenelzine sulfate)	NF	
PARNATE (Use tranylcypromine sulfate)	NF	
phenelzine sulfate	1B	
tranylcypromine sulfate	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO 56MG DOSE	4	PA
SPRAVATO 84MG DOSE	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS 40 MG (Use citalopram hydrobromide)	NF	QL(1 ea daily)
CELEXA TABS 10 MG (Use citalopram hydrobromide)	NF	QL(4 ea daily)
CELEXA TABS 20 MG (Use citalopram hydrobromide)	NF	QL(2 ea daily)
citalopram hydrobromide tabs 20 MG	1B	QL(2 ea daily)
citalopram hydrobromide tabs 40 MG	1B	QL(1 ea daily)
citalopram hydrobromide soln	1B	QL(20 ml daily)
citalopram hydrobromide tabs 10 MG	1B	QL(4 ea daily)
escitalopram oxalate tabs 20 MG	1B	QL(1 ea daily)
escitalopram oxalate soln	1B	QL(20 ml daily)

Drug Name	Drug Tier	Requirements/Limits
escitalopram oxalate tabs 5 MG	1B	QL(4 ea daily)
escitalopram oxalate tabs 10 MG	1B	QL(2 ea daily)
fluoxetine hcl tabs 20 MG	1B	QL(3 ea daily)
fluoxetine hcl caps 40 MG	1B	QL(2 ea daily)
fluoxetine hcl tabs 10 MG, 60 MG	1B	QL(1 ea daily)
fluoxetine hcl soln	1B	QL(20 ml daily)
fluoxetine hcl caps 10 MG	1A	QL(1 ea daily)
fluoxetine hcl caps 20 MG	1B	QL(3 ea daily)
fluoxetine hcl cpdr	1B	
FLUOXETINE HYDROCHLORIDE TABS (Use fluoxetine hcl)	NF	QL(1 ea daily)
fluvoxamine maleate tabs 25 MG, 50 MG	1B	QL(2 ea daily)
fluvoxamine maleate tabs 100 MG	1B	QL(3 ea daily)
LEXAPRO TABS 10 MG (Use escitalopram oxalate)	NF	QL(2 ea daily)
LEXAPRO TABS 20 MG (Use escitalopram oxalate)	NF	QL(1 ea daily)
LEXAPRO TABS 5 MG (Use escitalopram oxalate)	NF	QL(4 ea daily)
paroxetine hcl tabs 40 MG	1B	QL(1 ea daily)
paroxetine hcl tabs 30 MG	1B	QL(2 ea daily)
paroxetine hcl tb24 12.5 MG	1B	QL(1 ea daily)
paroxetine hcl tabs 10 MG	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl tb24 25 MG, 37.5 MG</i>	1B	QL(2 ea daily)
<i>paroxetine hcl tabs 20 MG</i>	1B	QL(3 ea daily)
<i>paroxetine hcl susp</i>	1B	QL(30 ml daily)
PAXIL TABS 20 MG (Use <i>paroxetine hcl</i>)	NF	QL(3 ea daily)
PAXIL TABS 10 MG (Use <i>paroxetine hcl</i>)	NF	QL(6 ea daily)
PAXIL TABS 40 MG (Use <i>paroxetine hcl</i>)	NF	QL(1 ea daily)
PAXIL SUSP (Use <i>paroxetine hcl</i>)	NF	QL(30 ml daily)
PAXIL TABS 30 MG (Use <i>paroxetine hcl</i>)	NF	QL(2 ea daily)
PAXIL CR TB24 12.5 MG (Use <i>paroxetine hcl</i>)	NF	QL(1 ea daily)
PAXIL CR TB24 25 MG, 37.5 MG (Use <i>paroxetine hcl</i>)	NF	QL(2 ea daily)
PROZAC CAPS 40 MG (Use <i>fluoxetine hcl</i>)	NF	QL(2 ea daily)
PROZAC CAPS 10 MG (Use <i>fluoxetine hcl</i>)	NF	QL(1 ea daily)
PROZAC CAPS 20 MG (Use <i>fluoxetine hcl</i>)	NF	QL(3 ea daily)
<i>sertraline hcl tabs 100 MG</i>	1B	QL(2 ea daily)
<i>sertraline hcl conc</i>	1B	QL(10 ml daily)
<i>sertraline hcl tabs 25 MG, 50 MG</i>	1B	QL(4 ea daily)
ZOLOFT TABS 25 MG, 50 MG (Use <i>sertraline hcl</i>)	NF	QL(4 ea daily)
ZOLOFT CONC (Use <i>sertraline hcl</i>)	NF	QL(10 ml daily)
ZOLOFT TABS 100 MG (Use <i>sertraline hcl</i>)	NF	QL(2 ea daily)
Serotonin Modulators		

Drug Name	Drug Tier	Requirements/Limits
<i>nefazodone hcl</i>	1B	
<i>trazodone hcl tabs</i>	1B	
TRINTELLIX	3	QL(1 ea daily);PA
VIIBRYD TABS (Use <i>vilazodone hcl</i>)	3	QL(1 ea daily);PA
VIIBRYD STARTER PACK KIT	3	1 rtl pack lmt amt,180 rtl pack lmt day(s)
<i>vilazodone hcl tabs</i>	1B	QL(1 ea daily)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
CYMBALTA CPEP (Use <i>duloxetine hcl</i>)	NF	QL(2 ea daily)
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	1B	QL(1 ea daily)
<i>desvenlafaxine succinate 100 MG</i>	1B	QL(4 ea daily)
<i>duloxetine hcl cpep 20 MG, 30 MG, 60 MG</i>	1B	QL(2 ea daily)
<i>duloxetine hcl cpep 40 MG</i>	1B	
EFFEXOR XR CP24 37.5 MG (Use <i>venlafaxine hcl</i>)	NF	QL(4 ea daily)
EFFEXOR XR CP24 75 MG (Use <i>venlafaxine hcl</i>)	NF	QL(5 ea daily)
EFFEXOR XR CP24 150 MG (Use <i>venlafaxine hcl</i>)	NF	QL(2 ea daily)
FETZIMA CP24	3	PA
FETZIMA TITRATION PACK C4PK	3	PA
PRISTIQ 25 MG, 50 MG (Use <i>desvenlafaxine succinate</i>)	NF	QL(1 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
PRISTIQ 100 MG (<i>Use desvenlafaxine succinate</i>)	NF	QL(4 ea daily)
<i>venlafaxine hcl cp24 150 MG</i>	1B	QL(2 ea daily)
<i>venlafaxine hcl tb24 225 MG</i>	1B	QL(1 ea daily);ST
<i>venlafaxine hcl cp24 37.5 MG</i>	1B	QL(4 ea daily)
<i>venlafaxine hcl tb24 37.5 MG, 75 MG</i>	1B	QL(1 ea daily)
<i>venlafaxine hcl tb24 150 MG</i>	1B	QL(2 ea daily)
<i>venlafaxine hcl tabs</i>	1B	QL(3 ea daily)
<i>venlafaxine hcl cp24 75 MG</i>	1B	QL(5 ea daily)
Tricyclic Agents		
<i>amitriptyline hcl tabs</i>	1B	
<i>amoxapine</i>	1B	
ANAFRANIL (<i>Use clomipramine hcl</i>)	NF	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl tabs</i>	1B	
<i>doxepin hcl caps</i>	1B	
<i>doxepin hcl conc</i>	1B	
<i>imipramine hcl tabs</i>	1B	
<i>imipramine pamoate</i>	1B	
NORPRAMIN TABS 10 MG, 25 MG (<i>Use desipramine hcl</i>)	2	
<i>nortriptyline hcl soln</i>	1B	
<i>nortriptyline hcl caps</i>	1B	
PAMELOR CAPS (<i>Use nortriptyline hcl</i>)	NF	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate caps</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 ea daily)
GLYSET 100 MG (<i>Use miglitol</i>)	NF	
<i>miglitol</i>	1B	
PRECOSE (<i>Use acarbose</i>)	NF	QL(3 ea daily)
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	2	QL(0.36 ml daily);PA
SYMLINPEN 60 SOPN	2	QL(0.2 ml daily);PA
Antidiabetic Combinations		
ACTOPLUS MET TABS (<i>Use pioglitazone hcl-metformin hcl</i>)	NF	QL(2 ea daily)
DUETACT (<i>Use pioglitazone hcl-glimepiride</i>)	NF	QL(1 ea daily)
<i>glipizide-metformin hcl 2.5 MG-250 MG, 2.5 MG-500 MG</i>	1B	QL(2 ea daily)
<i>glyburide-metformin 2.5 MG-500 MG, 5 MG-500 MG</i>	1B	QL(4 ea daily)
GLYXAMBI	2	QL(1 ea daily)
JANUMET TABS	2	QL(2 ea daily)
JANUMET XR TB24 100 MG-1000 MG	2	QL(1 ea daily)
JANUMET XR TB24 50 MG-1000 MG, 50 MG-500 MG	2	QL(2 ea daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 ea daily)
<i>pioglitazone hcl-metformin hcl tabs</i>	1B	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
SOLIQUA 100/33 33 MCG/ML-100 UNIT/ML	3	PA
SYNJARDY TABS	2	QL(2 ea daily)
SYNJARDY XR TB24 25 MG-1000 MG	2	QL(1 ea daily)
SYNJARDY XR TB24 10 MG-1000 MG, 12.5 MG-1000 MG, 5 MG-1000 MG	2	QL(2 ea daily)
TRIJARDY XR 12.5 MG-1000 MG-2.5 MG, 5 MG-1000 MG-2.5 MG	2	QL(2 ea daily)
TRIJARDY XR 10 MG-1000 MG-5 MG, 25 MG-1000 MG-5 MG	2	QL(1 ea daily)
XIGDUO XR 10 MG-1000 MG, 10 MG-500 MG, 5 MG-500 MG	3	QL(1 ea daily);PA
XIGDUO XR 2.5 MG-1000 MG, 5 MG-1000 MG	3	QL(2 ea daily);PA
XULTOPHY 100/3.6 100 UNIT/ML-3.6 MG/ML	2	QL(0.5 ml daily);PA
Biguanides		
FORTAMET TB24 (Use metformin hcl)	NF	
metformin hcl tabs 1000 MG	1B	QL(2.5 ea daily)
metformin hcl tabs 850 MG	1B	QL(3 ea daily)
metformin hcl tabs 500 MG	1B	QL(5 ea daily)
metformin hcl tb24 750 MG	1B	QL(3 ea daily)
metformin hcl tb24 500 MG	1B	QL(4 ea daily)
Diabetic Other		

Drug Name	Drug Tier	Requirements/Limits
diazoxide	1B	
GLUCAGEN HYPOKIT	3	QL(0.035 ea daily)
glucagon (rdna)	1B	QL(0.035 ea daily)
GLUCAGON EMERGENCY KIT (Use glucagon (rdna))	NF	QL(0.035 ea daily)
PROGLYCEM (Use diazoxide)	NF	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
alogliptin benzoate	1B	QL(1 ea daily)
JANUVIA	2	QL(1 ea daily)
NESINA (Use alogliptin benzoate)	NF	
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET	3	QL(6 ea daily)
Incretin Mimetic Agents		
OZEMPIC SOPN 2 MG/1.5ML	2	QL(0.054 ml daily);PA
OZEMPIC SOPN 8 MG/3ML-14 MG/ML-5.5 MG/ML	2	QL(0.108 ml daily);PA
TRULICITY 3 MG/0.5ML, 4.5 MG/0.5ML	2	QL(0.143 ml daily);PA
TRULICITY .75 MG/0.5ML, 1.5 MG/0.5ML	2	QL(0.15 ml daily);PA
VICTOZA	2	QL(0.3 ml daily);PA
Insulin		
APIDRA SOLN	3	PA
APIDRA SOLOSTAR SOPN	3	PA
BASAGLAR KWIKPEN SOPN	2	
FIASP SOLN 100 UNIT/ML	2	

Drug Name	Drug Tier	Requirements/Limits
FIASP FLEXTOUCH SOPN 100 UNIT/ML	2	
FIASP PENFILL SOCT 100 UNIT/ML-20.8 MG/ML	2	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ml daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ml daily)
INSULIN DEGLUDEC SOLN	2	
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	
LEVEMIR SOLN	2	
LEVEMIR FLEXTOUCH SOPN	2	
NOVOLIN 70/30 SUSP 70 UNIT/ML-30 UNIT/ML	2	
NOVOLIN 70/30 FLEXPEN SUPN 70 UNIT/ML-30 UNIT/ML	2	
NOVOLIN 70/30 FLEXPEN RELION SUPN 70 UNIT/ML-30 UNIT/ML	2	
NOVOLIN 70/30 RELION SUSP 70 UNIT/ML-30 UNIT/ML	2	
NOVOLIN N SUSP	2	
NOVOLIN N FLEXPEN SUPN	2	
NOVOLIN N FLEXPEN RELION SUPN	2	
NOVOLIN N RELION SUSP	2	
NOVOLIN R SOLN IJ	2	
NOVOLIN R RELION SOLN IJ	2	
NOVOLOG SOLN IJ	2	

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG FLEXPEN SOPN	2	
NOVOLOG FLEXPEN RELION SOPN	2	
NOVOLOG MIX 70/30 SUSP 70 UNIT/ML-30 UNIT/ML	2	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN 70 UNIT/ML-30 UNIT/ML	2	
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN 70 UNIT/ML-30 UNIT/ML	2	
NOVOLOG PENFILL SOCT	2	
TRESIBA SOLN	2	
TRESIBA FLEXTOUCH SOPN	2	
Insulin Sensitizing Agents		
ACTOS (<i>Use pioglitazone hcl</i>)	NF	QL(1 ea daily)
AVANDIA 2 MG, 4 MG	3	QL(1 ea daily)
<i>pioglitazone hcl</i>	1B	QL(1 ea daily)
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 ea daily)
<i>repaglinide .5 MG, 1 MG</i>	1B	QL(4 ea daily)
<i>repaglinide 2 MG</i>	1B	QL(8 ea daily)
STARLIX (<i>Use nateglinide</i>)	NF	QL(3 ea daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
FARXIGA	3	QL(1 ea daily);PA
JARDIANCE	2	QL(1 ea daily)
Sulfonylureas		
AMARYL 1 MG, 2 MG (<i>Use glimepiride</i>)	NF	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits
AMARYL 4 MG (Use glimepiride)	NF	QL(2 ea daily)
glimepiride 4 MG	1B	QL(2 ea daily)
glimepiride 1 MG, 2 MG	1B	QL(4 ea daily)
glipizide tb24	1B	QL(2 ea daily)
glipizide tabs	1B	QL(4 ea daily)
GLUCOTROL TABS (Use glipizide)	NF	QL(4 ea daily)
GLUCOTROL XL TB24 (Use glipizide)	NF	QL(2 ea daily)
glyburide tabs	1B	QL(4 ea daily)
glyburide micronized 1.5 MG, 3 MG, 6 MG	1B	QL(4 ea daily)
GLYNASE (Use glyburide micronized)	NF	QL(4 ea daily)
tolbutamide	1B	QL(6 ea daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
diphenoxylate w/ atropine liqd 2.5 MG/5ML-0.025 MG/5ML	1B	
diphenoxylate w/ atropine tabs 2.5 MG-0.025 MG	1B	
IMODIUM A-D CAPS (Use loperamide hcl)	NF	RX/OTC
LOMOTIL TABS 2.5 MG-0.025 MG (Use diphenoxylate w/ atropine)	NF	
loperamide hcl caps	1B	RX/OTC
MOTOFEN 1 MG-0.025 MG	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	

Ambetter Illinois Formulary

Updated December 1, 2022

Drug Name	Drug Tier	Requirements/Limits
deferasirox tabs	4	SP;PA
deferasirox tbso	4	SP;PA
deferasirox pack	4	PA
deferiprone tabs 500 MG	1B	
EXJADE TBSO (Use deferasirox)	NF	SP;PA
FERRIPROX TABS (Use deferiprone)	NF	
JADENU TABS (Use deferasirox)	NF	SP;PA
JADENU SPRINKLE PACK (Use deferasirox)	NF	PA
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Benzodiazepine Antagonists		
flumazenil	1B	
Opioid Antagonists		
KLOXXADO LIQD	2	
naloxone hcl soct	1B	
naloxone hcl sosy	1B	
naloxone hcl liqd	1B	
naloxone hcl soln .4 MG/ML, 4 MG/10ML	1B	
naltrexone hcl	1B	
NARCAN LIQD (Use naloxone hcl)	NF	
VIVITROL	2	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS	3	QL(0.167 ea daily);PA
granisetron hcl tabs	1B	QL(0.34 ea daily)
granisetron hcl soln iv 1 MG/ML	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron tbdp 4 MG</i>	1B	QL(1 ea daily)
<i>ondansetron tbdp 8 MG</i>	1B	
<i>ondansetron hcl soln ij 4 MG/2ML</i>	1B	
<i>ondansetron hcl tabs 4 MG</i>	1B	QL(4 ea daily,60 ea per fill retail,60 per fill mail MG)
<i>ondansetron hcl tabs 24 MG</i>	1B	QL(0.143 ea daily)
<i>ondansetron hcl soln or 4 MG/5ML</i>	1B	QL(3.34 ml daily)
<i>ondansetron hcl tabs 8 MG</i>	1B	QL(3 ea daily,45 ea per fill retail,45 per fill mail MG)
<i>ondansetron hcl sosy</i>	1B	
<i>palonosetron hcl soln</i>	1B	
ZOFRAN TABS 4 MG (Use <i>ondansetron hcl</i>)	NF	QL(4 ea daily,60 ea per fill retail,60 per fill mail MG)
Antiemetics - Anticholinergic		
<i>meclizine hcl tabs 12.5 MG</i>	1A	RX/OTC
<i>meclizine hcl tabs 25 MG</i>	1B	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 ea daily)
TIGAN CAPS (Use <i>trimethobenzamide hcl</i>)	NF	
TRANSDERM SCOP (Use <i>scopolamine</i>)	NF	QL(0.34 ea daily)
TRANSDERM-SCOP (Use <i>scopolamine</i>)	NF	QL(0.34 ea daily)
<i>trimethobenzamide hcl caps</i>	1B	
Antiemetics - Miscellaneous		

Drug Name	Drug Tier	Requirements/Limits
AKYNZEO 300 MG-0.5 MG	3	PA
DICLEGIS TBEC 10 MG-10 MG (Use <i>doxylamine-pyridoxine</i>)	NF	3 rtl MAX fill,365 rtl day(s) supply;3 mail MAX fill;QL(4 ea daily);PA
<i>doxylamine-pyridoxine tbec 10 MG-10 MG</i>	1B	3 rtl MAX fill,365 rtl day(s) supply;3 mail MAX fill;QL(4 ea daily);PA
<i>dronabinol caps</i>	1B	
MARINOL CAPS (Use <i>dronabinol</i>)	NF	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant caps 40 MG, 125 MG</i>	1B	QL(0.067 ea daily);PA
<i>aprepitant caps</i>	1B	PA
<i>aprepitant caps 80 MG</i>	1B	QL(0.134 ea daily);PA
<i>aprepitant misc</i>	1B	PA
EMEND CAPS 80 MG (Use <i>aprepitant</i>)	NF	QL(0.134 ea daily);PA
EMEND TRIPACK CAPS (Use <i>aprepitant</i>)	NF	PA
VARUBI TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
CANCIDAS (Use <i>caspofungin acetate</i>)	NF	
<i>caspofungin acetate</i>	1B	
ERAXIS	3	
<i>micalfungin sodium</i>	1B	PA
MYCAMINE (Use <i>micalfungin sodium</i>)	NF	PA
Antifungals		

Drug Name	Drug Tier	Requirements/Limits
ABELCET	3	
AMBISOME (Use amphotericin b liposome)	3	
amphotericin b iv	3	
amphotericin b liposome	1B	
ANCOBON (Use flucytosine)	NF	
flucytosine	1B	
griseofulvin microsize susp	1B	AL(At least 2 yrs old)
griseofulvin microsize tabs	1B	
griseofulvin ultramicrosize	1B	
nystatin tabs	1B	
terbinafine hcl tabs	1B	QL(1 ea daily)
Imidazole-Related Antifungals		
CRESEMBA CAPS	3	PA
DIFLUCAN TABS (Use fluconazole)	NF	
DIFLUCAN SUSR (Use fluconazole)	NF	
fluconazole tabs	1B	
fluconazole susr	1B	
itraconazole soln	1B	QL(20 ml daily);PA
itraconazole caps	1B	QL(4 ea daily);PA
ketoconazole	1B	
NOXAFIL SUSP	3	QL(20 ml daily)
SPORANOX CAPS (Use itraconazole)	NF	QL(4 ea daily);PA
SPORANOX SOLN (Use itraconazole)	NF	QL(20 ml daily);PA
SPORANOX PULSEPAK CAPS (Use itraconazole)	NF	QL(4 ea daily);PA

Drug Name	Drug Tier	Requirements/Limits
TOLSURA CAPS	4	PA
VFEND TABS (Use voriconazole)	NF	QL(4 ea daily)
voriconazole tabs	1B	QL(4 ea daily)
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
dexchlorpheniramine maleate soln	1B	
Antihistamines - Ethanolamines		
carbinoxamine maleate soln	1B	
carbinoxamine maleate tabs 4 MG	1B	
clemastine fumarate tabs 2.68 MG	1B	
CLEMASTINE FUMARATE SYRP	1B	
diphenhydramine hcl soln 50 MG/ML	1B	
diphenhydramine hcl elix 12.5 MG/5ML	1B	
diphenhydramine hcl caps 50 MG	1A	
Antihistamines - Non-Sedating		
cetirizine hcl tabs	1A	QL(1 ea daily)
CLARINEX TABS (Use desloratadine)	NF	QL(1 ea daily)
CLARITIN CAPS (Use loratadine)	NF	
CLARITIN CHEW (Use loratadine)	NF	
CLARITIN TABS (Use loratadine)	NF	
CLARITIN SYRP (Use loratadine)	NF	
CLARITIN ALLERGY CHILDRENS SYRP (Use loratadine)	NF	

Drug Name	Drug Tier	Requirement s/Limits
CLARITIN CHILDRENS CHEW (Use loratadine)	NF	
CLARITIN REDITABS TBDP (Use loratadine)	NF	
desloratadine tabs	1B	QL(1 ea daily)
desloratadine tbdp 2.5 MG	1B	QL(1 ea daily)
levocetirizine dihydrochloride tabs	1B	QL(1 ea daily);RX/OTC
levocetirizine dihydrochloride soln	1B	QL(10 ml daily);RX/OTC
loratadine caps	1B	
loratadine soln	1B	
loratadine syrp	1B	
loratadine tbdp	1B	
loratadine chew	1B	
loratadine tabs	1A	
XYZAL ALLERGY 24HR TABS (Use levocetirizine dihydrochloride)	NF	QL(1 ea daily);RX/OTC
XYZAL ALLERGY 24HR CHILDRENS SOLN (Use levocetirizine dihydrochloride)	NF	QL(10 ml daily);RX/OTC
ZYRTEC ALLERGY TABS (Use cetirizine hcl)	NF	QL(1 ea daily)
Antihistamines - Phenothiazines		
PHENERGAN SOLN (Use promethazine hcl)	NF	
promethazine hcl syrp	1B	
promethazine hcl soln 25 MG/ML, 50 MG/ML	1B	
promethazine hcl supp	1B	
promethazine hcl tabs	1B	

Drug Name	Drug Tier	Requirement s/Limits
Antihistamines - Piperidines		
cyproheptadine hcl tabs	1B	
cyproheptadine hcl syrp	1B	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
ezetimibe-simvastatin	1B	QL(1 ea daily)
VYTORIN (Use ezetimibe-simvastatin)	NF	QL(1 ea daily)
Antihyperlipidemics - Misc.		
icosapent ethyl 1 GM	1B	QL(4 ea daily);PA
icosapent ethyl .5 GM	1B	QL(8 ea daily);PA
LOVAZA 1 GM-375 MG-465 MG (Use omega-3-acid ethyl esters)	NF	QL(4 ea daily)
omega-3-acid ethyl esters 1 GM-375 MG-465 MG	1B	QL(4 ea daily)
VASCEPA 1 GM (Use icosapent ethyl)	NF	QL(4 ea daily);PA
VASCEPA .5 GM (Use icosapent ethyl)	3	QL(8 ea daily);PA
Bile Acid Sequestrants		
cholestyramine powd	1B	QL(25.2 gm daily)
cholestyramine pack	1B	QL(6 ea daily)
cholestyramine light pack	1B	QL(6 ea daily)
cholestyramine light powd	1B	QL(24 gm daily)
colesevelam hcl tabs	1B	QL(7 ea daily)
colesevelam hcl pack	1B	QL(1 ea daily);PA
COLESTID TABS (Use colestipol hcl)	NF	QL(16 ea daily)
COLESTID PACK (Use colestipol hcl)	NF	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
COLESTID GRAN (Use <i>colestipol hcl</i>)	NF	QL(6 gm daily)
COLESTID FLAVORED GRAN (Use <i>colestipol hcl</i>)	NF	QL(6 gm daily)
COLESTID FLAVORED PACK (Use <i>colestipol hcl</i>)	NF	QL(6 ea daily)
<i>colestipol hcl pack</i>	1B	QL(6 ea daily)
<i>colestipol hcl tabs</i>	1B	QL(16 ea daily)
<i>colestipol hcl gran</i>	1B	QL(6 gm daily)
QUESTRAN PACK (Use <i>cholestyramine</i>)	NF	QL(6 ea daily)
QUESTRAN POWD (Use <i>cholestyramine</i>)	NF	QL(25.2 gm daily)
QUESTRAN LIGHT POWD (Use <i>cholestyramine light</i>)	NF	QL(24 gm daily)
WELCHOL PACK (Use <i>colesevelam hcl</i>)	NF	QL(1 ea daily);PA
WELCHOL TABS (Use <i>colesevelam hcl</i>)	NF	QL(7 ea daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1B	QL(1 ea daily)
<i>fenofibrate tabs 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	QL(1 ea daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	QL(1 ea daily)
<i>gemfibrozil tabs</i>	1B	QL(2 ea daily)
LOPID TABS (Use <i>gemfibrozil</i>)	NF	QL(2 ea daily)
TRICOR TABS (Use <i>fenofibrate</i>)	NF	QL(1 ea daily)
TRILIPIX (Use <i>choline fenofibrate</i>)	NF	QL(1 ea daily)
HMG CoA Reductase Inhibitors		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	3	QL(1 ea daily);ST

Drug Name	Drug Tier	Requirements/Limits
<i>atorvastatin calcium</i>	1B	QL(1 ea daily)
CRESTOR TABS (Use <i>rosuvastatin calcium</i>)	NF	QL(1 ea daily)
<i>fluvastatin sodium caps 40 MG</i>	1B	QL(2 ea daily)
<i>fluvastatin sodium caps 20 MG</i>	1B	QL(1 ea daily)
LIPITOR (Use <i>atorvastatin calcium</i>)	NF	QL(1 ea daily)
<i>lovastatin tabs 10 MG, 20 MG</i>	1B	\$0 copay for generic only, age 40 to 76;QL(1 ea daily);PV
<i>lovastatin tabs 40 MG</i>	1B	\$0 copay for generic only, age 40 to 76;QL(2 ea daily);PV
PRAVACHOL 20 MG, 40 MG (Use <i>pravastatin sodium</i>)	NF	QL(1 ea daily)
<i>pravastatin sodium</i>	1B	QL(1 ea daily)
<i>rosuvastatin calcium tabs</i>	3	QL(1 ea daily)
<i>simvastatin tabs</i>	1B	QL(1 ea daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG, 80 MG (Use <i>simvastatin</i>)	NF	QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	QL(1 ea daily)
ZETIA (Use <i>ezetimibe</i>)	NF	QL(1 ea daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) tbc</i>	1B	QL(2 ea daily)
NIASPAN TBCR (Use <i>niacin (antihyperlipidemic)</i>)	NF	QL(2 ea daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		

Drug Name	Drug Tier	Requirement s/Limits
REPATHA SOSY	4	QL(0.0714 ml daily);PA
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ml daily);PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ml daily);PA

ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure

ACE Inhibitors

ACCUPRIL (<i>Use quinapril hcl</i>)	NF	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>Use ramipril</i>)	NF	
<i>benazepril hcl</i>	1B	
<i>captopril</i>	1B	
<i>enalapril maleate tabs</i>	1B	
<i>fosinopril sodium</i>	1B	
<i>lisinopril tabs 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1B	
LOTENSIN 10 MG, 20 MG, 40 MG (<i>Use benazepril hcl</i>)	NF	
<i>moexipril hcl</i>	1B	
<i>perindopril erbumine</i>	1B	
PRINIVIL TABS (<i>Use lisinopril</i>)	NF	
<i>quinapril hcl</i>	1B	
<i>ramipril caps</i>	1B	
<i>trandolapril</i>	1B	
VASOTEC TABS (<i>Use enalapril maleate</i>)	NF	
ZESTRIL TABS (<i>Use lisinopril</i>)	NF	

Agents for Pheochromocytoma

Drug Name	Drug Tier	Requirement s/Limits
DIBENZYLIN (<i>Use phenoxybenzamine hcl</i>)	NF	PA
<i>phenoxybenzamine hcl</i>	3	PA

Angiotensin II Receptor Antagonists

ATACAND (<i>Use candesartan cilexetil</i>)	NF	QL(1 ea daily)
AVAPRO (<i>Use irbesartan</i>)	NF	QL(1 ea daily)
BENICAR (<i>Use olmesartan medoxomil</i>)	NF	QL(1 ea daily)
<i>candesartan cilexetil</i>	1B	QL(1 ea daily)
COZAAR (<i>Use losartan potassium</i>)	NF	QL(1 ea daily)
DIOVAN TABS (<i>Use valsartan</i>)	NF	QL(1 ea daily)
EDARBI	3	QL(1 ea daily);ST
<i>irbesartan</i>	1B	QL(1 ea daily)
<i>losartan potassium</i>	1B	QL(1 ea daily)
MICARDIS (<i>Use telmisartan</i>)	NF	QL(1 ea daily)
<i>olmesartan medoxomil</i>	1B	QL(1 ea daily)
<i>telmisartan</i>	1B	QL(1 ea daily)
<i>valsartan tabs</i>	1B	QL(1 ea daily)

Antiadrenergic Antihypertensives

CARDURA (<i>Use doxazosin mesylate</i>)	NF	
CATAPRES TABS (<i>Use clonidine hcl</i>)	NF	QL(8 ea daily)
CATAPRES-TTS-1 (<i>Use clonidine</i>)	NF	QL(0.15 ea daily)
CATAPRES-TTS-2 (<i>Use clonidine</i>)	NF	QL(0.15 ea daily)
CATAPRES-TTS-3 (<i>Use clonidine</i>)	NF	QL(0.15 ea daily)
<i>clonidine</i>	3	QL(0.15 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl tabs</i>	1B	QL(8 ea daily)
<i>doxazosin mesylate</i>	1B	
<i>guanfacine hcl</i>	1B	
<i>methyldopa tabs</i>	1B	QL(6 ea daily)
MINIPRESS CAPS (Use <i>prazosin hcl</i>)	NF	QL(4 ea daily)
<i>prazosin hcl caps</i>	1B	QL(4 ea daily)
<i>terazosin hcl</i>	1B	
Antihypertensive Combinations		
ACCURETIC 20 MG-12.5 MG (Use <i>quinapril-hydrochlorothiazide</i>)	NF	QL(4 ea daily)
ACCURETIC 20 MG-25 MG (Use <i>quinapril-hydrochlorothiazide</i>)	NF	QL(2 ea daily)
ACCURETIC 10 MG-12.5 MG (Use <i>quinapril-hydrochlorothiazide</i>)	NF	QL(3 ea daily)
<i>amlodipine besylate-benazepril hcl</i>	1B	
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST
<i>amlodipine besylate-valsartan</i>	1B	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1B	
ATACAND HCT (Use <i>candesartan cilexetil-hydrochlorothiazide</i>)	NF	
<i>atenolol & chlorthalidone</i>	1B	
AVALIDE (Use <i>irbesartan-hydrochlorothiazide</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
AZOR (Use <i>amlodipine besylate-olmesartan medoxomil</i>)	NF	ST
<i>benazepril & hydrochlorothiazide</i>	1B	
BENICAR HCT (Use <i>olmesartan medoxomil-hydrochlorothiazide</i>)	NF	
<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 ea daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B	
DIOVAN HCT (Use <i>valsartan-hydrochlorothiazide</i>)	NF	
<i>enalapril maleate & hydrochlorothiazide</i>	1B	
EXFORGE (Use <i>amlodipine besylate-valsartan</i>)	NF	
EXFORGE HCT (Use <i>amlodipine-valsartan-hydrochlorothiazide</i>)	NF	
<i>fosinopril sodium & hydrochlorothiazide</i>	1B	
HYZAAR 50 MG-12.5 MG (Use <i>losartan potassium & hydrochlorothiazide</i>)	NF	QL(2 ea daily)
HYZAAR 100 MG-12.5 MG, 100 MG-25 MG (Use <i>losartan potassium & hydrochlorothiazide</i>)	NF	QL(1 ea daily)
<i>irbesartan-hydrochlorothiazide</i>	1B	
<i>lisinopril & hydrochlorothiazide</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
LOPRESSOR HCT TABS 50 MG-25 MG (Use metoprolol & hydrochlorothiazide)	NF	
losartan potassium & hydrochlorothiazide 50 MG-12.5 MG	1B	QL(2 ea daily)
LOTENSIN HCT 10 MG-12.5 MG, 20 MG-12.5 MG, 20 MG-25 MG (Use benazepril & hydrochlorothiazide)	NF	
LOTREL 10 MG-20 MG, 10 MG-40 MG, 5 MG-10 MG, 5 MG-20 MG (Use amlodipine besylate-benazepril hcl)	NF	
metoprolol & hydrochlorothiazide tabs	1B	
MICARDIS HCT (Use telmisartan-hydrochlorothiazide)	NF	
olmesartan medoxomil-amlodipine-hydrochlorothiazide	1B	ST
olmesartan medoxomil-hydrochlorothiazide	1B	
quinapril-hydrochlorothiazide 20 MG-12.5 MG	1B	QL(4 ea daily)
quinapril-hydrochlorothiazide 20 MG-25 MG	1B	QL(2 ea daily)
TARKA 2 MG-180 MG, 2 MG-240 MG, 4 MG-240 MG (Use trandolapril-verapamil hcl)	NF	

Drug Name	Drug Tier	Requirements/Limits
telmisartan-amlodipine	1B	
telmisartan-hydrochlorothiazide	1B	
TENORETIC 100 100 MG-25 MG (Use atenolol & chlorthalidone)	NF	
TENORETIC 50 50 MG-25 MG (Use atenolol & chlorthalidone)	NF	
trandolapril-verapamil hcl	1B	
TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NF	ST
TWYNSTA (Use telmisartan-amlodipine)	NF	
valsartan-hydrochlorothiazide	1B	
VASERETIC 10 MG-25 MG (Use enalapril maleate & hydrochlorothiazide)	NF	
ZESTORETIC (Use lisinopril & hydrochlorothiazide)	NF	
ZIAC (Use bisoprolol & hydrochlorothiazide)	NF	QL(2 ea daily)
Antihypertensives - Misc.		
VECAMYL	3	PA
Direct Renin Inhibitors		
aliskiren fumarate	1B	QL(1 ea daily)
TEKTURNA (Use aliskiren fumarate)	NF	QL(1 ea daily)
Selective Aldosterone Receptor Antagonists (SARAs)		

Drug Name	Drug Tier	Requirements/Limits
<i>eplerenone</i>	1B	
INSPIRA (Use <i>eplerenone</i>)	NF	
Vasodilators		
<i>hydralazine hcl soln</i>	1B	
<i>hydralazine hcl tabs</i>	1B	
<i>minoxidil 2.5 MG, 10 MG</i>	1B	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>bacitracin</i>	3	
FLAGYL TABS 500 MG (Use <i>metronidazole</i>)	NF	
IMPAVIDO	3	QL(3 ea daily);PA
<i>metronidazole tabs</i>	1B	
<i>trimethoprim tabs</i>	1B	
XIFAXAN	3	AL(At least 12 yrs old);PA
Anti-infective Misc. - Combinations		
BACTRIM TABS 80 MG-400 MG (Use <i>sulfamethoxazole-trimethoprim</i>)	NF	
BACTRIM DS TABS 160 MG-800 MG (Use <i>sulfamethoxazole-trimethoprim</i>)	NF	
<i>sulfamethoxazole-trimethoprim tabs</i>	1A	
<i>sulfamethoxazole-trimethoprim susp 40 MG/5ML-200 MG/5ML</i>	1B	
<i>sulfamethoxazole-trimethoprim soln 80 MG/5ML-400 MG/5ML</i>	1B	
Antiprotozoal Agents		

Drug Name	Drug Tier	Requirements/Limits
ALINIA TABS (Use <i>nitazoxanide</i>)	NF	PA
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
MEPRON (Use <i>atovaquone</i>)	NF	
<i>nitazoxanide tabs</i>	1B	PA
Carbapenems		
<i>ertapenem sodium ij</i>	1B	
<i>imipenem-cilastatin iv</i>	1B	
INVANZ IJ (Use <i>ertapenem sodium</i>)	NF	
<i>meropenem</i>	1B	
MERREM 500 MG (Use <i>meropenem</i>)	NF	
PRIMAXIN IV IV 500 MG-500 MG (Use <i>imipenem-cilastatin</i>)	NF	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP;PA
Cyclic Lipopeptides		
CUBICIN (Use <i>daptomycin</i>)	NF	
CUBICIN RF (Use <i>daptomycin</i>)	NF	
<i>daptomycin 500 MG</i>	1B	
DAPTOMYCIN (Use <i>daptomycin</i>)	NF	
Glycopeptides		
FIRVANQ SOLR OR	2	QL(300 ml per fill retail)
VANCOGIN CAPS (Use <i>vancomycin hcl</i>)	NF	QL(4 ea daily,40 ea per fill retail)
<i>vancomycin hcl caps</i>	1B	QL(4 ea daily,40 ea per fill retail)
<i>vancomycin hcl solr iv 1 GM, 10 GM, 500 MG, 1000 MG</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
VANCOMYCIN HYDROCHLORIDE SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML	2	QL(300 ml per fill retail)
Leprostatics		
<i>dapsone</i>	1B	
Lincosamides		
CLEOCIN (Use <i>clindamycin hcl</i>)	NF	
CLEOCIN PEDIATRIC GRANULES (Use <i>clindamycin palmitate hydrochloride</i>)	NF	
CLEOCIN PHOSPHATE SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML (Use <i>clindamycin phosphate</i>)	NF	
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate soln ij 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
LINCOICIN (Use <i>lincomycin hcl</i>)	NF	
<i>lincomycin hcl</i>	1B	
Monobactams		
AZACTAM 1 GM (Use <i>aztreonam</i>)	NF	
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ml daily);PA
Oxazolidinones		

Drug Name	Drug Tier	Requirements/Limits
<i>linezolid tabs</i>	1B	QL(2 ea daily);PA
<i>linezolid susr</i>	1B	
SIVEXTRO TABS	3	PA
ZYVOX SUSR (Use <i>linezolid</i>)	NF	
ZYVOX TABS (Use <i>linezolid</i>)	NF	QL(2 ea daily);PA
Polymyxins		
<i>polymyxin b sulfate solr</i>	1B	
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	1B	
HIPREX (Use <i>methenamine hippurate</i>)	NF	
MACROBID (Use <i>nitrofurantoin monohyd macro</i>)	NF	
<i>methenamine hippurate</i>	1B	
MONUROL (Use <i>fosfomycin tromethamine</i>)	NF	
<i>nitrofurantoin</i>	1B	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohyd macro</i>	1B	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(12 ea per fill retail,12 per fill mail)
COARTEM 120 MG-20 MG	2	Covered for malaria treatment only. Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(24 ea per fill retail,24 per fill mail)
MALARONE (<i>Use atovaquone-proguanil hcl</i>)	NF	Covered for malaria treatment only. Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(12 ea per fill retail,12 per fill mail)
Antimalarials		
<i>chloroquine phosphate tabs</i>	1B	
DARAPRIM (<i>Use pyrimethamine</i>)	NF	QL(3 ea daily);PA
<i>hydroxychloroquine sulfate</i>	1B	
KRINTAFEL	3	QL(2 ea per 30 days retail)

Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days.;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(5 ea daily)
PLAQUENIL (<i>Use hydroxychloroquine sulfate</i>)	NF	
<i>primaquine phosphate tabs</i>	3	
PRIMAQUINE PHOSPHATE TABS (<i>Use primaquine phosphate</i>)	NF	
<i>pyrimethamine</i>	1B	QL(3 ea daily);PA
QUALAQUIN CAPS (<i>Use quinine sulfate</i>)	NF	PA
<i>quinine sulfate caps 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	4	PA
GUANIDINE HCL	2	
MESTINON TABS (<i>Use pyridostigmine bromide</i>)	NF	
MESTINON SOLN OR (<i>Use pyridostigmine bromide</i>)	NF	
MESTINON TIMESPAN TBCR (<i>Use pyridostigmine bromide</i>)	NF	
<i>neostigmine methylsulfate sosy</i>	3	PA

Drug Name	Drug Tier	Requirement s/Limits
NEOSTIGMINE METHYLSULFATE SOSY 3 MG/3ML	3	PA
<i>pyridostigmine bromide tabs 60 MG</i>	1B	
<i>pyridostigmine bromide soln or</i>	1B	
<i>pyridostigmine bromide tbc</i>	1B	
RUZURGI	4	PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
CAPASTAT SULFATE	3	
<i>cycloserine</i>	1B	QL(4 ea daily)
<i>ethambutol hcl tabs</i>	1B	
<i>isoniazid tabs</i>	1B	
<i>isoniazid soln</i>	1B	
<i>isoniazid syrp</i>	1B	
MYAMBUTOL TABS 400 MG (Use <i>ethambutol hcl</i>)	NF	
MYCOBUTIN (Use <i>rifabutin</i>)	NF	PA
PASER PACK	3	QL(3 ea daily)
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
RIFADIN SOLR (Use <i>rifampin</i>)	NF	
<i>rifampin solr</i>	1B	
<i>rifampin caps</i>	1B	
SIRTURO	3	PA
TRECTOR	3	QL(4 ea daily)
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		

Drug Name	Drug Tier	Requirement s/Limits
Alkylating Agents		
ALKERAN (Use <i>melphalan</i>)	NF	
ALKERAN (Use <i>melphalan hcl</i>)	NF	
BICNU (Use <i>carmustine</i>)	NF	SP;PA
<i>busulfan soln</i>	4	SP;PA
BUSULFEX SOLN (Use <i>busulfan</i>)	NF	SP;PA
<i>carboplatin soln 50 MG/5ML</i>	4	SP;PA
<i>carmustine</i>	4	SP;PA
<i>cisplatin soln 100 MG/100ML</i>	4	SP;PA
<i>cyclophosphamide solr ij</i>	4	SP;PA
<i>cyclophosphamide caps</i>	1B	PA
GLEOSTINE 40 MG, 100 MG	4	PA
GLEOSTINE 10 MG	4	SP;PA
IFEX SOLR (Use <i>ifosfamide</i>)	NF	SP;PA
<i>ifosfamide soln 1 GM/20ML</i>	4	SP;PA
<i>ifosfamide solr</i>	4	SP;PA
LEUKERAN	4	SP;PA
<i>melphalan</i>	1B	
<i>melphalan hcl</i>	1B	
MYLERAN TABS	4	SP;PA
<i>oxaliplatin soln 50 MG/10ML, 100 MG/20ML</i>	4	SP;PA
TEMODAR CAPS 20 MG, 100 MG, 140 MG, 180 MG, 250 MG (Use <i>temozolomide</i>)	NF	SP;PA
TEMODAR SOLR	4	SP;PA

Drug Name	Drug Tier	Requirement s/Limits
<i>temozolomide caps</i>	4	SP;PA
TEPADINA 15 MG (<i>Use thiotepa</i>)	NF	SP;PA
<i>thiotepa 15 MG</i>	4	SP;PA
TREANDA SOLR	4	SP;PA
ZANOSAR	4	SP;PA
Antimetabolites		
ALIMTA SOLR 500 MG (<i>Use pemetrexed disodium</i>)	4	SP;PA
ARRANON (<i>Use nelarabine</i>)	4	SP;PA
<i>azacitidine susr</i>	4	SP;PA
<i>capecitabine</i>	4	SP;PA
<i>clofarabine</i>	4	SP;PA
CLOLAR (<i>Use clofarabine</i>)	NF	SP;PA
<i>cytarabine soln</i>	4	SP;PA
DACOGEN (<i>Use decitabine</i>)	NF	SP;PA
<i>decitabine</i>	4	SP;PA
<i>floxuridine</i>	4	SP;PA
<i>fludarabine phosphate solr</i>	4	SP;PA
<i>fludarabine phosphate soln</i>	4	SP;PA
<i>fluorouracil 500 MG/10ML</i>	4	SP;PA
FOLOTYN 20 MG/ML	4	SP;PA
<i>gemcitabine hcl solr 200 MG</i>	4	SP;PA
<i>gemcitabine hcl solr 2 GM</i>	4	SP;PA
<i>mercaptopurine tabs</i>	1B	
<i>methotrexate sodium tabs 2.5 MG</i>	1B	SP

Drug Name	Drug Tier	Requirement s/Limits
<i>methotrexate sodium solr</i>	1B	SP
<i>methotrexate sodium soln 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>nelarabine</i>	4	SP;PA
<i>pemetrexed disodium solr 500 MG</i>	4	SP;PA
<i>pralatrexate 20 MG/ML</i>	4	SP;PA
TABLOID	4	SP;PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP;PA
VIDAZA SUSR (<i>Use azacitidine</i>)	NF	SP;PA
XELODA (<i>Use capecitabine</i>)	NF	SP;PA
Antineoplastic - Angiogenesis Inhibitors		
INLYTA	4	QL(2 ea daily);SP;PA
LENVIMA 10 MG DAILY DOSE	4	QL(1 ea daily);PA
LENVIMA 12MG DAILY DOSE	4	QL(3 ea daily);PA
LENVIMA 14 MG DAILY DOSE	4	QL(2 ea daily);PA
LENVIMA 18 MG DAILY DOSE	4	QL(3 ea daily);PA
LENVIMA 20 MG DAILY DOSE	4	QL(2 ea daily);PA
LENVIMA 24 MG DAILY DOSE	4	QL(3 ea daily);PA
LENVIMA 4 MG DAILY DOSE	4	QL(1 ea daily);PA
LENVIMA 8 MG DAILY DOSE	4	QL(2 ea daily);PA
MVASI	4	PA
ZALTRAP 100 MG/4ML	4	SP;PA
ZIRABEV	4	PA

Drug Name	Drug Tier	Requirement s/Limits
Antineoplastic - Antibodies		
ADCETRIS	4	SP;PA
ARZERRA	4	SP;PA
RITUXAN	4	SP;PA
RUXIENCE	4	PA
TRUXIMA	4	PA
YERVOY	4	SP;PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	4	PA
OGIVRI	4	PA
PERJETA	4	SP;PA
TRAZIMERA	4	PA
TUKYSA	4	PA
Antineoplastic - EGFR Inhibitors		
ERBITUX	4	SP;PA
<i>erlotinib hcl</i>	4	QL(1 ea daily);SP;PA
GILOTRIF	4	QL(1 ea daily);PA
IRESSA	4	PA
TAGRISO	4	PA
TARCEVA (<i>Use erlotinib hcl</i>)	NF	QL(1 ea daily);SP;PA
VECTIBIX 100 MG/5ML	4	SP;PA
VIZIMPRO	4	PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	4	PA
ERIVEDGE	4	QL(1 ea daily);SP;PA
ODOMZO	4	QL(1 ea daily);PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate 500 MG</i>	4	QL(2 ea daily);PA

Drug Name	Drug Tier	Requirement s/Limits
<i>abiraterone acetate 250 MG</i>	4	QL(4 ea daily);SP;PA
<i>anastrozole</i>	1B	QL(1 ea daily)
ARIMIDEX (<i>Use anastrozole</i>)	NF	QL(1 ea daily)
AROMASIN (<i>Use exemestane</i>)	NF	QL(1 ea daily);SP
<i>bicalutamide</i>	4	QL(1 ea daily);SP;PA
CASODEX (<i>Use bicalutamide</i>)	NF	QL(1 ea daily);SP;PA
ELIGARD SC 30 MG	4	SP;PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 ea daily);SP;PA
EMCYT	4	SP;PA
ERLEADA	4	QL(4 ea daily);PA
EULEXIN	4	QL(6 ea daily);SP;PA
<i>exemestane</i>	4	QL(1 ea daily);SP
FARESTON (<i>Use toremifene citrate</i>)	NF	
FASLODEX SOSY (<i>Use fulvestrant</i>)	NF	QL(0.357 ml daily);SP;PA
FEMARA (<i>Use letrozole</i>)	NF	
FIRMAGON	4	QL(0.143 ea daily);SP;PA
<i>flutamide</i>	4	QL(6 ea daily);SP;PA
<i>fulvestrant sosy</i>	4	QL(0.357 ml daily);SP;PA
<i>letrozole</i>	1B	
<i>leuprolide acetate kit ij 1 MG/0.2ML</i>	4	SP;PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 ea daily);SP;PA
LUPRON DEPOT (3-MONTH) IM	4	SP;PA
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 ea daily);SP;PA

Drug Name	Drug Tier	Requirement s/Limits
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 ea daily);SP;PA
LYSODREN	4	SP;PA
<i>megestrol acetate susp</i>	1B	
<i>megestrol acetate tabs</i>	1B	
NILANDRON (<i>Use nilutamide</i>)	NF	QL(2 ea daily)
<i>nilutamide</i>	1B	QL(2 ea daily)
NUBEQA	4	QL(4 ea daily);PA
<i>tamoxifen citrate tabs 10 MG</i>	0	
<i>tamoxifen citrate tabs 20 MG</i>	0	
<i>toremifene citrate</i>	1B	
TRELSTAR MIXJECT	4	SP;PA
XTANDI TABS 40 MG	4	QL(4 ea daily);PA
XTANDI TABS 80 MG	4	QL(2 ea daily);PA
XTANDI CAPS	4	QL(4 ea daily);SP;PA
YONSA	4	QL(4 ea daily);PA
ZOLADEX 3.6 MG	4	QL(0.0357 ea daily);SP;PA
ZOLADEX 10.8 MG	4	QL(0.0119 ea daily);SP;PA
ZYTIGA 250 MG (<i>Use abiraterone acetate</i>)	NF	QL(4 ea daily);SP;PA
ZYTIGA 500 MG (<i>Use abiraterone acetate</i>)	NF	QL(2 ea daily);PA
Antineoplastic - Immunomodulators		
POMALYST	4	QL(1 ea daily);PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT 100 MG, 200 MG, 300 MG	4	QL(1 ea daily);PA
AYVAKIT 25 MG, 50 MG	4	QL(1 ea daily);PA
Antineoplastic - XPO1 Inhibitors		

Drug Name	Drug Tier	Requirement s/Limits
XPOVIO 100 MG ONCE WEEKLY	4	PA
XPOVIO 60 MG ONCE WEEKLY	4	PA
XPOVIO 80 MG ONCE WEEKLY	4	PA
XPOVIO 80 MG TWICE WEEKLY	4	PA
Antineoplastic Antibiotics		
<i>bleomycin sulfate 15 UNIT</i>	4	SP;PA
COSMEGEN (<i>Use dactinomycin</i>)	NF	SP;PA
<i>dactinomycin</i>	4	SP;PA
DOXIL (<i>Use doxorubicin hcl liposomal</i>)	NF	SP;PA
<i>doxorubicin hcl soln</i>	4	SP;PA
<i>doxorubicin hcl solr 10 MG, 50 MG</i>	4	SP;PA
<i>doxorubicin hcl liposomal</i>	4	SP;PA
<i>epirubicin hcl soln 50 MG/25ML</i>	4	SP;PA
IDAMYCIN PFS 20 MG/20ML (<i>Use idarubicin hcl</i>)	NF	PA
IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (<i>Use idarubicin hcl</i>)	NF	SP;PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP;PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA
<i>mitomycin solr iv 20 MG</i>	4	SP;PA
<i>mitoxantrone hcl 2 MG/ML</i>	4	SP;PA
<i>valrubicin</i>	4	SP;PA

Drug Name	Drug Tier	Requirement s/Limits
VALSTAR (<i>Use valrubicin</i>)	NF	SP;PA
Antineoplastic Combinations		
KISQALI FEMARA 200 DOSE 200 MG-2.5 MG	4	QL(1 ea daily);PA
KISQALI FEMARA 400 DOSE 200 MG-2.5 MG	4	QL(1 ea daily);PA
KISQALI FEMARA 600 DOSE 200 MG-2.5 MG	4	QL(1 ea daily);PA
Antineoplastic Enzyme Inhibitors		
AFINITOR TABS (<i>Use everolimus</i>)	NF	QL(1 ea daily);SP;PA
ALECENSA	4	QL(4 ea daily);PA
ALUNBRIG TBPK	4	QL(1 ea daily);PA
ALUNBRIG TABS	4	QL(1 ea daily);PA
BALVERSA	4	PA
<i>bortezomib solr ij</i>	4	SP;PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA
BOSULIF 400 MG	4	PA
BOSULIF 100 MG, 500 MG	4	QL(1 ea daily);SP;PA
BRAFTOVI 75 MG	4	SP;PA
BRUKINSA	4	PA
CABOMETYX TABS	4	QL(1 ea daily);PA
CALQUENCE	4	QL(2 ea daily);PA
CALQUENCE	4	QL(2 ea daily);PA
CAPRELSA	4	QL(1 ea daily);SP;PA
COMETRIQ KIT	4	QL(3 ea daily);SP;PA
COMETRIQ KIT 0	4	QL(4 ea daily);SP;PA
COMETRIQ KIT 0	4	QL(2 ea daily);SP;PA
COPIKTRA	4	PA

Drug Name	Drug Tier	Requirement s/Limits
<i>everolimus tabs</i>	4	QL(1 ea daily);SP;PA
GLEEVEC (<i>Use imatinib mesylate</i>)	NF	QL(2 ea daily);SP;PA
IBRANCE TABS	3	PA
IBRANCE CAPS	3	PA
ICLUSIG	4	QL(1 ea daily);PA
<i>imatinib mesylate</i>	4	QL(2 ea daily);SP;PA
IMBRUVICA SUSP	4	QL(8 ml daily);PA
IMBRUVICA TABS	4	QL(1 ea daily);PA
IMBRUVICA CAPS 140 MG	4	QL(3 ea daily);PA
IMBRUVICA CAPS 70 MG	4	QL(1 ea daily);PA
INREBIC	4	PA
ISTODAX (OVERFILL) SOLR (<i>Use romidepsin</i>)	4	SP;PA
JAKAFI 10 MG, 20 MG	4	SP;PA
JAKAFI 5 MG, 15 MG, 25 MG	4	QL(2 ea daily);SP;PA
KISQALI	3	PA
KOSELUGO	4	PA
KYPROLIS	4	PA
<i>lapatinib ditosylate</i>	4	QL(6 ea daily);SP;PA
LORBRENA	4	QL(1 ea daily);PA
LYNPARZA TABS	4	QL(4 ea daily);PA
MEKINIST .5 MG	4	QL(3 ea daily);PA
MEKINIST 2 MG	4	QL(1 ea daily);PA
MEKTOVI	4	SP;PA
NEXAVAR (<i>Use sorafenib tosylate</i>)	4	QL(4 ea daily);SP;PA
NINLARO	4	QL(0.143 ea daily);PA
PEMAZYRE	4	QL(1 ea daily);PA

Drug Name	Drug Tier	Requirements/Limits
PIQRAY 200MG DAILY DOSE	4	PA
PIQRAY 250MG DAILY DOSE	4	PA
PIQRAY 300MG DAILY DOSE	4	PA
QINLOCK	4	PA
RETEVMO	4	PA
<i>romidepsin solr</i>	4	SP;PA
ROZLYTREK	4	PA
RUBRACA	4	QL(4 ea daily);PA
<i>sorafenib tosylate</i>	4	QL(4 ea daily);SP;PA
SPRYCEL	4	QL(1 ea daily);SP;PA
STIVARGA	4	QL(4 ea daily);SP;PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 ea daily);SP;PA
SUTENT 12.5 MG, 25 MG, 50 MG (Use <i>sunitinib malate</i>)	4	QL(1 ea daily);SP;PA
TABRECTA	4	PA
TAFINLAR	4	QL(4 ea daily);PA
TALZENNA .5 MG, .75 MG	4	QL(1 ea daily);PA
TALZENNA .25 MG, 1 MG	4	QL(1 ea daily);PA
TASIGNA 50 MG	4	QL(4 ea daily);PA
TASIGNA 150 MG, 200 MG	4	QL(4 ea daily);SP;PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ml daily);SP;PA
TIBSOVO	4	PA
TORISEL (Use <i>temsirolimus</i>)	NF	QL(0.143 ml daily);SP;PA
TURALIO	4	PA

Drug Name	Drug Tier	Requirements/Limits
TYKERB (Use <i>lapatinib ditosylate</i>)	4	QL(6 ea daily);SP;PA
VELCADE SOLR IJ (Use <i>bortezomib</i>)	4	SP;PA
VERZENIO	4	PA
VITRAKVI SOLN	4	PA
VITRAKVI CAPS	4	PA
VOTRIENT	4	QL(4 ea daily);SP;PA
XALKORI	4	QL(2 ea daily);SP;PA
XOSPATA	4	PA
ZEJULA	4	QL(3 ea daily);PA
ZELBORAF	4	SP;PA
ZOLINZA	4	QL(4 ea daily);SP;PA
ZYDELIG	4	QL(2 ea daily);PA
Antineoplastic Enzymes		
ERWINASE	4	SP;PA
ERWINAZE	4	SP;PA
ONCASPAR	4	SP;PA
Antineoplastics Misc.		
ACTIMMUNE	4	SP;PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP;PA
<i>bexarotene</i>	4	SP;PA
<i>dacarbazine solr 200 MG</i>	4	SP;PA
HYDREA (Use <i>hydroxyurea</i>)	NF	
<i>hydroxyurea</i>	1B	
INTRON A SOLR 18000000 UNIT	4	SP;PA
MATULANE	4	SP;PA
NIPENT	4	SP;PA
PHOTOFRIN	4	SP;PA

Drug Name	Drug Tier	Requirements/Limits
PROLEUKIN	4	SP;PA
SYNRIBO	4	SP;PA
TARGRETIN (Use bexarotene)	NF	SP;PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP;PA
Chemotherapy Adjuncts		
KEPIVANCE	4	SP;PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium solr</i>	1B	
<i>leucovorin calcium tabs</i>	1B	
VORAXAZE	4	SP;PA
Mitotic Inhibitors		
ABRAXANE 100 MG-900 MG (Use paclitaxel protein-bound particles)	4	SP;PA
<i>docetaxel conc 20 MG/ML</i>	4	SP;PA
<i>docetaxel soln 20 MG/2ML</i>	4	SP;PA
DOCETAXEL CONC 20 MG/ML (Use docetaxel)	NF	SP;PA
DOCETAXEL SOLN 20 MG/2ML (Use docetaxel)	4	SP;PA
ETOPOPHOS	4	SP;PA
<i>etoposide caps</i>	4	SP;PA
<i>etoposide soln 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP;PA
HALAVEN	4	SP;PA

Drug Name	Drug Tier	Requirements/Limits
IXEMPRA KIT 15 MG	4	SP;PA
JEVTANA	4	SP;PA
NAVELBINE 10 MG/ML (Use vinorelbine tartrate)	NF	SP;PA
NAVELBINE 50 MG/5ML (Use vinorelbine tartrate)	NF	
<i>paclitaxel 150 MG/25ML</i>	4	SP;PA
<i>paclitaxel 6 MG/ML, 100 MG/16.7ML</i>	4	SP;PA
<i>paclitaxel protein-bound particles 100 MG-900 MG</i>	4	SP;PA
PACLITAXEL PROTEIN-BOUND PARTICLES 100 MG-900 MG (Use paclitaxel protein-bound particles)	4	SP;PA
TENIPOSIDE	4	SP;PA
<i>vincristine sulfate</i>	4	SP;PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP;PA
Topoisomerase I Inhibitors		
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl)	NF	SP;PA
HYCAMTIN CAPS	4	SP;PA
HYCAMTIN SOLR (Use topotecan hcl)	NF	SP;PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP;PA
<i>topotecan hcl solr</i>	4	SP;PA
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		

Drug Name	Drug Tier	Requirement s/Limits
<i>carbidopa</i>	1B	
LODOSYN (<i>Use carbidopa</i>)	NF	
Antiparkinson Anticholinergics		
<i>benztropine mesylate tabs</i>	1B	
<i>benztropine mesylate soln</i>	1B	
COGENTIN SOLN (<i>Use benztropine mesylate</i>)	NF	
<i>trihexyphenidyl hcl soln</i>	1B	
<i>trihexyphenidyl hcl tabs</i>	1B	
Antiparkinson COMT Inhibitors		
COMTAN (<i>Use entacapone</i>)	NF	QL(8 ea daily)
<i>entacapone</i>	1B	QL(8 ea daily)
TASMAR (<i>Use tolcapone</i>)	NF	
<i>tolcapone</i>	1B	
Antiparkinson Dopaminergics		
<i>amantadine hcl tabs</i>	1B	
<i>amantadine hcl soln</i>	1B	
<i>amantadine hcl caps</i>	1B	
APOKYN SOCT	4	PA
<i>apomorphine hydrochloride soct</i>	4	PA
<i>bromocriptine mesylate caps</i>	1B	
<i>bromocriptine mesylate tabs 2.5 MG</i>	1B	
<i>carbidopa-levodopa tbdp</i>	1B	
<i>carbidopa-levodopa tbcr</i>	1B	
<i>carbidopa-levodopa tabs</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
<i>carbidopa-levodopa-entacapone</i>	1B	
MIRAPEX TABS .5 MG, .75 MG, 1 MG (<i>Use pramipexole dihydrochloride</i>)	NF	
MIRAPEX TABS .125 MG (<i>Use pramipexole dihydrochloride</i>)	NF	QL(4 ea daily)
NEUPRO	2	
PARLODEL CAPS (<i>Use bromocriptine mesylate</i>)	NF	
PARLODEL TABS (<i>Use bromocriptine mesylate</i>)	NF	
<i>pramipexole dihydrochloride tabs .25 MG, .5 MG, .75 MG, 1 MG, 1.5 MG</i>	1B	
<i>pramipexole dihydrochloride tabs .125 MG</i>	1B	QL(4 ea daily)
<i>ropinirole hydrochloride tb24 8 MG, 12 MG</i>	1B	QL(2 ea daily);ST
<i>ropinirole hydrochloride tb24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 ea daily);ST
<i>ropinirole hydrochloride tabs</i>	1B	
SINEMET TABS (<i>Use carbidopa-levodopa</i>)	NF	
STALEVO 100 200 MG-100 MG-25 MG (<i>Use carbidopa-levodopa-entacapone</i>)	NF	
STALEVO 125 200 MG-125 MG-31.25 MG (<i>Use carbidopa-levodopa-entacapone</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
STALEVO 150 200 MG-150 MG-37.5 MG (Use <i>carbidopa-levodopa-entacapone</i>)	NF	
STALEVO 200 200 MG-200 MG-50 MG (Use <i>carbidopa-levodopa-entacapone</i>)	NF	
STALEVO 50 200 MG-50 MG-12.5 MG (Use <i>carbidopa-levodopa-entacapone</i>)	NF	
STALEVO 75 200 MG-75 MG-18.75 MG (Use <i>carbidopa-levodopa-entacapone</i>)	NF	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT (Use <i>rasagiline mesylate</i>)	NF	QL(1 ea daily);PA
<i>rasagiline mesylate</i>	1B	QL(1 ea daily);PA
<i>selegiline hcl caps</i>	1B	
<i>selegiline hcl tabs</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium carbonate tbcr</i>	1B	
<i>lithium carbonate tabs</i>	1B	
<i>lithium carbonate caps</i>	1B	
LITHOBID TBCR (Use <i>lithium carbonate</i>)	NF	
Antipsychotics - Misc.		
EQUETRO 300 MG	3	QL(4 ea daily);ST
EQUETRO 100 MG	3	QL(2 ea daily);ST
EQUETRO 200 MG	3	QL(8 ea daily);ST
GEODON (Use <i>ziprasidone hcl</i>)	NF	QL(2 ea daily);AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
LATUDA 20 MG, 40 MG, 60 MG, 120 MG	3	QL(1 ea daily);PA
LATUDA 80 MG	3	QL(2 ea daily);PA
<i>ziprasidone hcl</i>	1B	QL(2 ea daily);AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 ea daily);PA
FANAPT TITRATION PACK	2	PA
INVEGA 1.5 MG, 3 MG, 9 MG (Use <i>paliperidone</i>)	NF	QL(1 ea daily)
INVEGA 6 MG (Use <i>paliperidone</i>)	NF	QL(2 ea daily)
<i>paliperidone 6 MG</i>	1B	QL(2 ea daily)
<i>paliperidone 1.5 MG, 3 MG, 9 MG</i>	1B	QL(1 ea daily)
PERSERIS PRSY	2	QL(0.072 ea daily);PA
RISPERDAL SOLN (Use <i>risperidone</i>)	NF	QL(8 ml daily)
RISPERDAL TABS .5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use <i>risperidone</i>)	NF	QL(4 ea daily)
RISPERDAL CONSTA	2	QL(0.072 ea daily);PA
<i>risperidone tabs</i>	1B	QL(4 ea daily)
<i>risperidone tbdp</i>	1B	QL(4 ea daily)
<i>risperidone soln</i>	1B	QL(8 ml daily)
Butyrophenones		
HALDOL SOLN (Use <i>haloperidol lactate</i>)	NF	
HALDOL DECANOATE 100 (Use <i>haloperidol decanoate</i>)	NF	QL(0.036 ml daily)
HALDOL DECANOATE 50 (Use <i>haloperidol decanoate</i>)	NF	QL(0.036 ml daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>haloperidol tabs .5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	1B	QL(6 ea daily)
<i>haloperidol tabs 20 MG</i>	1B	QL(5 ea daily)
<i>haloperidol decanoate</i>	1B	QL(0.036 ml daily)
<i>haloperidol lactate conc</i>	1B	
<i>haloperidol lactate soln</i>	1B	
Dibenzapines		
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 ea daily);PA
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 ea daily);PA
<i>clozapine tbdp 200 MG</i>	1B	QL(4 ea daily)
<i>clozapine tbdp 25 MG</i>	1B	QL(3 ea daily)
<i>clozapine tbdp 100 MG</i>	1B	QL(9 ea daily)
<i>clozapine tabs 200 MG</i>	1B	QL(4 ea daily)
<i>clozapine tabs 25 MG, 50 MG</i>	1B	QL(3 ea daily)
<i>clozapine tabs 100 MG</i>	1B	QL(9 ea daily)
<i>clozapine tbdp 12.5 MG, 150 MG</i>	1B	QL(6 ea daily)
CLOZARIL TABS 100 MG (Use clozapine)	NF	QL(9 ea daily)
CLOZARIL TABS 25 MG, 50 MG (Use clozapine)	NF	QL(3 ea daily)
CLOZARIL TABS 200 MG (Use clozapine)	NF	QL(4 ea daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine tbdp 20 MG</i>	1B	QL(1 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
<i>olanzapine tabs 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 ea daily)
<i>olanzapine solr</i>	1B	QL(0.215 ea daily)
<i>olanzapine tbdp 5 MG, 10 MG, 15 MG</i>	1B	QL(2 ea daily)
<i>olanzapine tabs 2.5 MG, 5 MG</i>	1B	QL(4 ea daily)
<i>quetiapine fumarate tabs 300 MG, 400 MG</i>	1B	QL(2 ea daily);AL(At least 10 yrs old)
<i>quetiapine fumarate tb24 300 MG, 400 MG</i>	1B	QL(2 ea daily)
<i>quetiapine fumarate tabs 25 MG, 50 MG, 100 MG, 200 MG</i>	1B	QL(4 ea daily);AL(At least 10 yrs old)
<i>quetiapine fumarate tb24 50 MG, 150 MG, 200 MG</i>	1B	QL(1 ea daily)
SAPHRIS 2.5 MG (Use asenapine maleate)	NF	QL(4 ea daily);PA
SAPHRIS 5 MG, 10 MG (Use asenapine maleate)	NF	QL(2 ea daily);PA
SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (Use quetiapine fumarate)	NF	QL(4 ea daily);AL(At least 10 yrs old)
SEROQUEL TABS 300 MG, 400 MG (Use quetiapine fumarate)	NF	QL(2 ea daily);AL(At least 10 yrs old)
SEROQUEL XR TB24 300 MG, 400 MG (Use quetiapine fumarate)	NF	QL(2 ea daily)
SEROQUEL XR TB24 50 MG, 150 MG, 200 MG (Use quetiapine fumarate)	NF	QL(1 ea daily)
ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	NF	QL(4 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
ZYPREXA SOLR (<i>Use olanzapine</i>)	NF	QL(0.215 ea daily)
ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (<i>Use olanzapine</i>)	NF	QL(2 ea daily)
ZYPREXA ZYDIS TBDP 20 MG (<i>Use olanzapine</i>)	NF	QL(1 ea daily)
ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (<i>Use olanzapine</i>)	NF	QL(2 ea daily)
Phenothiazines		
<i>chlorpromazine hcl tabs</i>	1B	
<i>chlorpromazine hcl soln</i>	3	
<i>fluphenazine hcl tabs</i>	1B	QL(4 ea daily)
<i>fluphenazine hcl conc</i>	1B	QL(8 ml daily)
<i>fluphenazine hcl soln</i>	1B	
<i>fluphenazine hcl elix</i>	1B	QL(78.9 ml daily)
<i>perphenazine tabs</i>	1B	
<i>prochlorperazine</i>	1B	
<i>prochlorperazine maleate tabs</i>	1B	
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl tabs</i>	1B	
Quinolinone Derivatives		
ABILIFY TABS (<i>Use aripiprazole</i>)	NF	QL(1 ea daily);AL(At least 6 yrs old)
<i>aripiprazole tabs</i>	1B	QL(1 ea daily);AL(At least 6 yrs old)
<i>aripiprazole soln or</i>	1B	QL(30 ml daily);AL(At least 6 yrs old)
REXULTI	3	PA

Drug Name	Drug Tier	Requirement s/Limits
Thioxanthenes		
<i>thiothixene</i>	1B	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate soln</i>	1B	QL(32 ml daily)
<i>abacavir sulfate tabs</i>	1B	QL(2 ea daily)
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 ea daily)
<i>abacavir sulfate-lamivudine-zidovudine 300 MG-300 MG-150 MG</i>	1B	QL(2 ea daily)
APTIVUS CAPS	2	QL(4 ea daily)
APTIVUS SOLN	2	QL(10 ml daily)
<i>atazanavir sulfate caps 150 MG, 300 MG</i>	1B	QL(1 ea daily)
<i>atazanavir sulfate caps 200 MG</i>	1B	QL(2 ea daily)
ATRIPLA 300 MG-200 MG-600 MG (<i>Use efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>)	3	QL(1 ea daily)
BIKTARVY 25 MG-200 MG-50 MG	2	QL(1 ea daily)
BIKTARVY 15 MG-120 MG-30 MG	3	QL(1 ea daily)
CIMDUO 300 MG-300 MG	2	QL(1 ea daily);ST
COMBIVIR 150 MG-300 MG (<i>Use lamivudine-zidovudine</i>)	NF	QL(2 ea daily)
COMPLERA 25 MG-200 MG-300 MG	3	QL(1 ea daily)
CRIXIVAN 400 MG	2	QL(6 ea daily)
CRIXIVAN 200 MG	2	QL(9 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
DELSTRIGO 100 MG-300 MG-300 MG	3	QL(1 ea daily)
<i>didanosine cpdr 250 MG, 400 MG</i>	1B	QL(1 ea daily)
<i>didanosine cpdr 200 MG</i>	1B	QL(2 ea daily)
DOVATO 50 MG-300 MG	2	QL(1 ea daily)
EDURANT	2	QL(1 ea daily)
<i>efavirenz caps 200 MG</i>	1B	QL(2 ea daily)
<i>efavirenz caps 50 MG</i>	1B	QL(3 ea daily)
<i>efavirenz tabs</i>	1B	QL(1 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate 300 MG-200 MG-600 MG</i>	1B	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 ea daily)
<i>emtricitabine caps</i>	1B	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 300 MG-200 MG</i>	0	QL(1 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 150 MG-100 MG, 200 MG-133 MG, 250 MG-167 MG</i>	1B	QL(1 ea daily)
EMTRIVA SOLN	2	QL(24 ml daily)
EMTRIVA CAPS (Use <i>emtricitabine</i>)	NF	QL(1 ea daily)
EPIVIR TABS 150 MG (Use <i>lamivudine</i>)	NF	QL(2 ea daily)
EPIVIR SOLN (Use <i>lamivudine</i>)	NF	QL(30 ml daily)
EPIVIR TABS 300 MG (Use <i>lamivudine</i>)	NF	QL(1 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
EPZICOM 600 MG-300 MG (Use <i>abacavir sulfate-lamivudine</i>)	NF	QL(1 ea daily)
<i>etravirine 100 MG</i>	1B	QL(4 ea daily)
<i>etravirine 200 MG</i>	1B	QL(2 ea daily)
EVOTAZ 150 MG-300 MG	3	QL(1 ea daily)
<i>fosamprenavir calcium tabs</i>	1B	QL(4 ea daily)
FUZEON SOLR	4	SP;PA
GENVOYA 150 MG-200 MG-150 MG-10 MG	2	QL(1 ea daily)
INTELENCE 100 MG (Use <i>etravirine</i>)	2	QL(4 ea daily)
INTELENCE 200 MG (Use <i>etravirine</i>)	2	QL(2 ea daily)
INTELENCE 25 MG	2	QL(8 ea daily)
INVIRASE TABS	2	QL(4 ea daily)
ISENTRESS CHEW	2	QL(6 ea daily)
ISENTRESS TABS	2	QL(2 ea daily)
ISENTRESS HD TABS	2	QL(2 ea daily)
JULUCA 50 MG-25 MG	3	QL(1 ea daily)
KALETRA TABS (Use <i>lopinavir-ritonavir</i>)	2	QL(4 ea daily)
KALETRA SOLN 400 MG/5ML-100 MG/5ML (Use <i>lopinavir-ritonavir</i>)	NF	QL(12.5 ml daily)
<i>lamivudine soln</i>	1B	QL(30 ml daily)
<i>lamivudine tabs 300 MG</i>	1B	QL(1 ea daily)
<i>lamivudine tabs 150 MG</i>	1B	QL(2 ea daily)
<i>lamivudine-zidovudine 150 MG-300 MG</i>	1B	QL(2 ea daily)
LEXIVA TABS (Use <i>fosamprenavir calcium</i>)	NF	QL(4 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
LEXIVA SUSP	2	QL(56 ml daily)
<i>lopinavir-ritonavir soln 400 MG/5ML-100 MG/5ML</i>	1B	QL(12.5 ml daily)
<i>lopinavir-ritonavir tabs</i>	1B	QL(4 ea daily)
<i>maraviroc tabs 300 MG</i>	1B	QL(4 ea daily)
<i>maraviroc tabs 150 MG</i>	1B	QL(2 ea daily)
<i>nevirapine tb24 400 MG</i>	1B	QL(1 ea daily)
<i>nevirapine tabs</i>	1B	QL(2 ea daily)
<i>nevirapine susp</i>	1B	QL(40 ml daily)
<i>nevirapine tb24 100 MG</i>	1B	QL(3 ea daily)
NORVIR SOLN	2	QL(15 ml daily)
NORVIR TABS (<i>Use ritonavir</i>)	NF	QL(12 ea daily)
NORVIR PACK	2	QL(12 ea daily)
ODEFSEY 25 MG-200 MG-25 MG	2	QL(1 ea daily)
PIFELTRO	2	QL(1 ea daily)
PREZCOBIX 800 MG-150 MG	2	QL(1 ea daily)
PREZISTA TABS 800 MG	2	QL(1 ea daily)
PREZISTA TABS 75 MG, 150 MG, 600 MG	2	QL(2 ea daily)
PREZISTA SUSP	2	QL(12 ml daily)
RETROVIR SYRP (<i>Use zidovudine</i>)	NF	QL(60 ml daily)
RETROVIR CAPS (<i>Use zidovudine</i>)	NF	QL(6 ea daily)
RETROVIR IV INFUSION SOLN	1B	
REYATAZ CAPS 150 MG, 300 MG (<i>Use atazanavir sulfate</i>)	NF	QL(1 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NF	QL(2 ea daily)
<i>ritonavir tabs</i>	1B	QL(12 ea daily)
RUKOBIA	4	PA
SELZENTRY TABS 25 MG, 75 MG, 150 MG	2	QL(2 ea daily)
SELZENTRY TABS (<i>Use maraviroc</i>)	2	QL(2 ea daily)
SELZENTRY SOLN	2	QL(30 ml daily)
SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	2	QL(4 ea daily)
<i>stavudine caps</i>	1B	QL(2 ea daily)
STRIBILD 150 MG-200 MG-300 MG-150 MG	3	QL(1 ea daily)
SUSTIVA CAPS 200 MG (<i>Use efavirenz</i>)	NF	QL(2 ea daily)
SUSTIVA TABS (<i>Use efavirenz</i>)	NF	QL(1 ea daily)
SUSTIVA CAPS 50 MG (<i>Use efavirenz</i>)	NF	QL(3 ea daily)
SYMFI 300 MG-300 MG-600 MG (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 ea daily)
SYMFI LO 300 MG-300 MG-400 MG (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 ea daily)
SYMTUZA 800 MG-200 MG-10 MG-150 MG	3	QL(1 ea daily);ST
TEMIXYS 300 MG-300 MG	2	QL(1 ea daily);ST
<i>tenofovir disoproxil fumarate tabs</i>	1B	
TIVICAY TABS	3	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
TRIUMEQ TABS 50 MG-300 MG-600 MG	2	QL(1 ea daily)
TRIZIVIR 300 MG-300 MG-150 MG	2	QL(2 ea daily)
TRUVADA (Use emtricitabine-tenofovir disoproxil fumarate)	NF	QL(1 ea daily)
TYBOST	2	QL(1 ea daily)
VIRACEPT TABS 250 MG	2	QL(10 ea daily)
VIRACEPT TABS 625 MG	2	QL(4 ea daily)
VIRAMUNE SUSP (Use nevirapine)	NF	QL(40 ml daily)
VIRAMUNE XR TB24 400 MG (Use nevirapine)	NF	QL(1 ea daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	2	QL(1 ea daily)
VIREAD TABS (Use tenofovir disoproxil fumarate)	NF	
VIREAD POWD	2	
ZIAGEN SOLN (Use abacavir sulfate)	NF	QL(32 ml daily)
ZIAGEN TABS (Use abacavir sulfate)	NF	QL(2 ea daily)
zidovudine tabs	1B	QL(2 ea daily)
zidovudine caps	1B	QL(6 ea daily)
zidovudine syrp	1B	QL(60 ml daily)
CMV Agents		
cidofovir	3	
ganciclovir sodium solr	1B	
VALCYTE TABS (Use valganciclovir hcl)	NF	QL(4 ea daily);PA
valganciclovir hcl tabs	1B	QL(4 ea daily);PA
Hepatitis Agents		

Drug Name	Drug Tier	Requirements/Limits
adefovir dipivoxil	4	QL(1 ea daily);SP;PA
BARACLUDE TABS (Use entecavir)	NF	QL(1 ea daily);SP;PA
BARACLUDE SOLN	4	QL(20 ml daily);SP;PA
entecavir tabs	4	QL(1 ea daily);SP;PA
EPCLUSA TABS	4	QL(1 ea daily);PA
EPCLUSA TABS	4	QL(1 ea daily);PA
EPCLUSA PACK	4	QL(1 ea daily);PA
EPIVIR HBV TABS (Use lamivudine (hbv))	NF	QL(3 ea daily);SP
EPIVIR HBV SOLN	4	QL(60 ml daily);SP;PA
HEPSERA (Use adefovir dipivoxil)	NF	QL(1 ea daily);SP;PA
lamivudine (hbv) tabs	1B	QL(3 ea daily);SP
MAVYRET TABS 100 MG-40 MG	4	QL(3 ea daily);PA
PEGASYS SOSY	4	QL(0.072 ml daily);PA
PEGASYS SOLN	4	QL(0.0714 ml daily);SP;PA
PEGINTRON 50 MCG/0.5ML	4	QL(0.143 ea daily);SP;PA
ribavirin (hepatitis c) caps	1B	QL(7 ea daily)
ribavirin (hepatitis c) tabs 200 MG	1B	QL(7 ea daily)
SOFOSBUVIR/VELPAT ASVIR TABS 400 MG-100 MG	4	QL(1 ea daily);PA
SOVALDI TABS 400 MG	4	QL(1 ea daily);SP;PA
VEMLIDY	4	QL(1 ea daily);SP;PA
VIEKIRA PAK TBPK 12.5 MG-50 MG-250 MG-75 MG	4	QL(1 ea daily);PA

Drug Name	Drug Tier	Requirements/Limits
VOSEVI 400 MG-100 MG-100 MG	4	QL(1 ea daily);PA
ZEPATIER 50 MG-100 MG	4	QL(1 ea daily);PA
Herpes Agents		
<i>acyclovir tabs or</i>	1B	QL(5 ea daily)
<i>acyclovir caps</i>	1A	QL(5 ea daily,50 ea per fill retail,50 per fill mail MG)
<i>acyclovir susp</i>	1B	QL(13.34 ml daily)
<i>famciclovir 500 MG</i>	1B	QL(4 ea daily)
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 ea daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 ea daily)
<i>valacyclovir hcl 1 GM, 1000 MG</i>	1B	QL(4 ea daily)
VALTRESX 500 MG (<i>Use valacyclovir hcl</i>)	NF	QL(2 ea daily)
VALTRESX 1 GM (<i>Use valacyclovir hcl</i>)	NF	QL(4 ea daily)
ZOVIRAX SUSP (<i>Use acyclovir</i>)	NF	QL(13.34 ml daily)
Influenza Agents		
<i>oseltamivir phosphate susr</i>	1B	Limit 1 fill every 90 days.;1 rtl MAX fill,90 rtl day(s) supply;QL(125 ml per fill retail)
<i>oseltamivir phosphate caps</i>	1B	Limit 1 fill every 90 days.;1 rtl MAX fill,90 rtl day(s) supply;1 mail MAX fill;QL(10 ea per fill retail,10 per fill mail MG)

Drug Name	Drug Tier	Requirements/Limits
RELENZA DISKHALER	2	1 rtl pack lmt amt,30 rtl pack lmt day(s)
<i>rimantadine hydrochloride tabs</i>	1B	QL(2 ea daily)
TAMIFLU CAPS (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.;1 rtl MAX fill,90 rtl day(s) supply;1 mail MAX fill;QL(10 ea per fill retail,10 per fill mail MG)
TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.;1 rtl MAX fill,90 rtl day(s) supply;QL(125 ml per fill retail)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1B	
COREG (<i>Use carvedilol</i>)	NF	
<i>labetalol hcl soln</i>	1B	
<i>labetalol hcl tabs</i>	1B	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl caps</i>	1B	
<i>atenolol tabs</i>	1B	
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	
BYSTOLIC 2.5 MG, 5 MG, 10 MG (<i>Use nebivolol hcl</i>)	2	QL(1 ea daily)
BYSTOLIC 20 MG (<i>Use nebivolol hcl</i>)	2	QL(2 ea daily)
LOPRESSOR TABS (<i>Use metoprolol tartrate</i>)	NF	

Drug Name	Drug Tier	Requirement s/Limits
<i>metoprolol succinate tb24</i>	1B	
<i>metoprolol tartrate tabs 25 MG, 50 MG, 100 MG</i>	1B	
<i>metoprolol tartrate soln iv 5 MG/5ML</i>	1B	
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	1B	QL(1 ea daily)
<i>nebivolol hcl 20 MG</i>	1B	QL(2 ea daily)
TENORMIN TABS (Use <i>atenolol</i>)	NF	
TOPROL XL TB24 (Use <i>metoprolol succinate</i>)	NF	
Beta Blockers Non-Selective		
BETAPACE TABS 80 MG, 120 MG, 160 MG (Use <i>sotalol hcl</i>)	NF	QL(2 ea daily)
BETAPACE AF (Use <i>sotalol hcl (afib/afl)</i>)	NF	
CORGARD TABS 20 MG, 40 MG, 80 MG (Use <i>nadolol</i>)	NF	
HEMANGEOL SOLN OR	4	QL(75 ml daily);PA
INDERAL LA CP24 (Use <i>propranolol hcl</i>)	NF	
<i>nadolol tabs 20 MG, 40 MG, 80 MG</i>	1B	
<i>pindolol tabs</i>	1B	
<i>propranolol hcl soln or 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl cp24</i>	1B	
<i>propranolol hcl tabs</i>	1B	
<i>sotalol hcl tabs 80 MG, 120 MG, 160 MG</i>	1B	QL(2 ea daily)
<i>sotalol hcl tabs 240 MG</i>	1B	
<i>sotalol hcl (afib/afl)</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
<i>timolol maleate tabs</i>	1B	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate tabs</i>	1B	
CALAN SR TBCR (Use <i>verapamil hcl</i>)	NF	
CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use <i>diltiazem hcl</i>)	NF	
CARDIZEM CD CP24 (Use <i>diltiazem hcl coated beads</i>)	NF	
CARDIZEM LA TB24 (Use <i>diltiazem hcl coated beads</i>)	NF	
<i>diltiazem hcl tabs</i>	1B	
<i>diltiazem hcl cp24</i>	1B	
<i>diltiazem hcl soln 50 MG/10ML</i>	1B	
<i>diltiazem hcl cp12</i>	1B	
DILTIAZEM HCL SOLR	1B	
<i>diltiazem hcl coated beads tb24</i>	1B	
<i>diltiazem hcl coated beads cp24</i>	1B	
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	
<i>felodipine</i>	1B	
<i>isradipine caps</i>	1B	
<i>nicardipine hcl caps</i>	1B	
<i>nicardipine hcl soln</i>	1B	
<i>nifedipine caps</i>	1B	
<i>nifedipine tb24</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>nimodipine caps</i>	1B	
<i>nisoldipine 8.5 MG, 17 MG, 20 MG, 30 MG, 34 MG, 40 MG</i>	1B	
NORVASC TABS (Use <i>amlodipine besylate</i>)	NF	
PROCARDIA CAPS (Use <i>nifedipine</i>)	NF	
PROCARDIA XL TB24 (Use <i>nifedipine</i>)	NF	
SULAR (Use <i>nisoldipine</i>)	NF	
<i>verapamil hcl soln 2.5 MG/ML</i>	1B	
<i>verapamil hcl tabs</i>	1B	
<i>verapamil hcl cp24</i>	1B	
<i>verapamil hcl tbc</i>	1B	
VERELAN CP24 (Use <i>verapamil hcl</i>)	NF	
VERELAN PM CP24 (Use <i>verapamil hcl</i>)	NF	

CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm

Cardiac Glycosides

<i>digoxin soln or .05 MG/ML</i>	1B	
<i>digoxin tabs .0625 MG, .125 MG, .25 MG, 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (Use <i>digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use <i>digoxin</i>)	2	

CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions

Cardiovascular Agents Misc. - Combinations

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 ea daily)
BIDIL 37.5 MG-20 MG (Use <i>isosorbide dinitrate-hydralazine hcl</i>)	2	
CADUET 10 MG-10 MG, 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG, 40 MG-5 MG, 80 MG-10 MG, 80 MG-5 MG (Use <i>amlodipine besylate-atorvastatin calcium</i>)	NF	QL(1 ea daily)
ENTRESTO	3	QL(2 ea daily);PA
<i>isosorbide dinitrate-hydralazine hcl 37.5 MG-20 MG</i>	1B	
Impotence Agents		
CIALIS 5 MG (Use <i>tadalafil</i>)	NF	BPH Only;QL(1 ea daily);PA
<i>sildenafil citrate</i>	1B	QL(0.1334 ea daily);PA
STENDRA	3	QL(0.134 ea daily)
<i>tadalafil 5 MG</i>	1B	BPH Only;QL(1 ea daily);PA
VIAGRA (Use <i>sildenafil citrate</i>)	NF	QL(0.1334 ea daily);PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
FLOLAN (Use <i>epoprostenol sodium</i>)	NF	PA
ORENITRAM .125 MG, .25 MG, 1 MG, 2.5 MG	3	PA
<i>treprostinil soln ij</i>	4	SP;PA
TYVASO SOLN IN	4	PA
TYVASO REFILL SOLN IN	4	PA

Drug Name	Drug Tier	Requirements/Limits
TYVASO STARTER SOLN IN	4	PA
VELETRI (Use epoprostenol sodium)	NF	PA
VENTAVIS	4	SP;PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 ea daily);SP;PA
<i>bosentan tabs 62.5 MG</i>	4	QL(2 ea daily);PA
<i>bosentan tabs 125 MG</i>	4	QL(2 ea daily);SP;PA
LETAIRIS (Use <i>ambrisentan</i>)	NF	QL(1 ea daily);SP;PA
OPSUMIT	4	QL(1 ea daily);PA
TRACLEER TABS 62.5 MG (Use <i>bosentan</i>)	NF	QL(2 ea daily);PA
TRACLEER TBSO	4	QL(2 ea daily);SP;PA
TRACLEER TABS 125 MG (Use <i>bosentan</i>)	NF	QL(2 ea daily);SP;PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (Use <i>tadalafil (pulmonary hypertension)</i>)	NF	QL(2 ea daily);SP;PA
REVATIO SOLN (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(37.5 ml daily);SP;PA
REVATIO SUSR (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(6 ml daily);PA
REVATIO TABS (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(3 ea daily);SP;PA

Drug Name	Drug Tier	Requirements/Limits
<i>sildenafil citrate (pulmonary hypertension) susr</i>	4	QL(6 ml daily);PA
<i>sildenafil citrate (pulmonary hypertension) soln</i>	4	QL(37.5 ml daily);SP;PA
<i>sildenafil citrate (pulmonary hypertension) tabs</i>	4	QL(3 ea daily);SP;PA
<i>tadalafil (pulmonary hypertension) tabs</i>	4	QL(2 ea daily);SP;PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 ea daily);PA
UPTRAVI TABS 200 MCG	4	PA
UPTRAVI TITRATION PACK TBPK	4	1 rtl MAX fill,180 rtl day(s) supply;PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	4	QL(3 ea daily);PA
Sinus Node Inhibitors		
CORLANOR TABS	3	QL(2 ea daily);PA
CORLANOR SOLN	3	QL(15 ml daily);PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 ea daily);PA
VYNDAQEL	4	QL(4 ea daily);PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil susr</i>	1B	
<i>cefadroxil caps</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>cefadroxil tabs</i>	1B	
<i>cefazolin sodium solr ij 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin susr</i>	1B	
<i>cephalexin caps</i>	1B	
<i>cephalexin tabs</i>	1B	
KEFLEX CAPS (Use <i>cephalexin</i>)	NF	
Cephalosporins - 2nd Generation		
<i>cefaclor susr 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
<i>cefaclor caps</i>	1B	
CEFOTAN IJ (Use <i>cefotetan disodium</i>)	NF	
<i>cefotetan disodium ij 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium iv 1 GM, 2 GM</i>	1B	
<i>cefprozil tabs</i>	1B	
<i>cefprozil susr</i>	1B	
<i>cefuroxime axetil tabs</i>	1B	
<i>cefuroxime sodium ij 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir caps</i>	1B	
<i>cefdinir susr</i>	1B	
<i>cefixime caps</i>	1B	
<i>cefixime susr</i>	1B	ST
<i>cefotaxime sodium ij 1 GM, 2 GM</i>	1B	
CEFOTAXIME SODIUM IJ 1 GM	2	
<i>cefpodoxime proxetil susr</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>cefpodoxime proxetil tabs</i>	1B	
<i>ceftazidime ij 1 GM, 6 GM</i>	1B	
<i>ceftriaxone sodium ij 250 MG</i>	1A	
<i>ceftriaxone sodium ij 1 GM, 2 GM, 500 MG</i>	1B	
FORTAZ IV 1 GM, 2 GM (Use <i>ceftazidime</i>)	NF	
SUPRAX SUSR (Use <i>cefixime</i>)	NF	ST
SUPRAX CAPS (Use <i>cefixime</i>)	NF	
Cephalosporins - 4th Generation		
<i>cefepime hcl solr ij</i>	1B	
Cephalosporins - 5th Generation		
TEFLARO	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
BALCOLTRA 36.5 MG-20 MCG-0.1 MG	0	
BEYAZ 0.451 MG-0.02 MG-3 MG (Use <i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	NF	
<i>desogestrel & ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	

Drug Name	Drug Tier	Requirements/Limits
ESTROSTEP FE 75 MG-1 MG (Use norethindrone acetate-ethinyl estradiol-fe)	NF	
ethynodiol diacet & eth estrad	0	
FALESSA 1 MG-20 MCG-0.1 MG	0	
GENERESS FE 75 MG-25 MCG-0.8 MG (Use norethindrone & ethinyl estradiol-fe)	NF	
levonorgestrel & eth estradiol tabs	0	
levonorgestrel-eth estradiol (triphasic)	0	
levonorgestrel-ethinyl estradiol (91-day) 0.15 MG-0.03 MG	0	
levonorgestrel-ethinyl estradiol (continuous) 90 MCG-20 MCG	0	
LO LOESTRIN FE TABS 75 MG-1 MG-10 MCG	0	
LOSEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	
MINASTRIN 24 FE CHEW 75 MG-1 MG-20 MCG (Use norethin acet & estrad-fe)	NF	
MIRCETTE 0 (Use desogestrel-ethinyl estradiol (biphasic))	NF	
NATAZIA	0	
NEXTSTELLIS 14.2 MG-3 MG	0	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
norethin acet & estrad-fe tabs 75 MG-1 MG-20 MCG, 75 MG-1.5 MG-30 MCG	0	
norethin acet & estrad-fe caps 75 MG-1 MG-20 MCG	0	
norethin acet & estrad-fe chew 75 MG-1 MG-20 MCG	0	
norethindrone & eth estradiol	0	
norethindrone & ethinyl estradiol-fe	0	
norethindrone acet & eth estra	0	
norethindrone acetate-ethinyl estradiol-fe 75 MG-1 MG	0	
norethindrone-eth estradiol (triphasic) 0	0	
norgestimate-ethinyl estradiol 0.25 MG-35 MCG	0	
norgestimate-ethinyl estradiol (triphasic) 0	0	
norgestrel & ethinyl estradiol 0.3 MG-30 MCG	0	
QUARTETTE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	
SAFYRAL 0.451 MG-0.03 MG-3 MG (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	
SEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	

Drug Name	Drug Tier	Requirements/Limits
TAYTULLA CAPS 75 MG-1 MG-20 MCG (Use norethin acet & estrad-fe)	NF	
TYBLUME CHEW 0.1 MG-20 MCG	0	
YASMIN 28 3 MG-0.03 MG (Use drospirenone-ethinyl estradiol)	NF	
YAZ 3 MG-0.02 MG (Use drospirenone-ethinyl estradiol)	NF	
Combination Contraceptives - Transdermal		
norelgestromin-ethinyl estradiol 150 MCG/24HR-35 MCG/24HR	0	
TWIRLA 120 MCG/24HR-30 MCG/24HR	0	QL(3 ea per 28 days retail)
Combination Contraceptives - Vaginal		
ANNOVERA 0.15 MG/24HR-0.013 MG/24HR	0	PA
etonogestrel-ethinyl estradiol 0.12 MG/24HR-0.015 MG/24HR	0	
NUVARING 0.12 MG/24HR-0.015 MG/24HR (Use etonogestrel-ethinyl estradiol)	NF	
Emergency Contraceptives		
ELLA	0	
levonorgestrel (emergency oc) 1.5 MG	0	
PLAN B ONE-STEP (Use levonorgestrel (emergency oc))	NF	

Drug Name	Drug Tier	Requirements/Limits
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP IM (Use medroxyprogesterone acetate (contraceptive))	NF	QL(1 ml per 90 days retail)
DEPO-PROVERA CONTRACEPTIVE SUSY IM (Use medroxyprogesterone acetate (contraceptive))	NF	QL(90 Day(s) limit MG/ML,1 ml per 90 days retail)
DEPO-SUBQ PROVERA 104 SUSY SC	0	
medroxyprogesterone acetate (contraceptive) susp im	0	QL(1 ml per 90 days retail)
medroxyprogesterone acetate (contraceptive) susy im	0	QL(90 Day(s) limit MG/ML,1 ml per 90 days retail)
Progestin Contraceptives - Oral		
norethindrone (contraceptive)	0	
ORTHO MICRONOR (Use norethindrone (contraceptive))	NF	
SLYND	0	QL(1 ea daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
budesonide cpep	1B	QL(3 ea daily)
CORTEF TABS (Use hydrocortisone)	NF	
DEPO-MEDROL SUSP	3	
DEPO-MEDROL SUSP (Use methylprednisolone acetate)	NF	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone tabs 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
<i>dexamethasone elix</i>	1B	
<i>dexamethasone soln</i>	1B	
<i>dexamethasone tabs .5 MG, .75 MG</i>	1A	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone sodium phosphate soln ij 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1B	
EMFLAZA SUSP	4	PA
EMFLAZA TABS	4	PA
ENTOCORT EC CPEP (Use <i>budesonide</i>)	NF	QL(3 ea daily)
<i>hydrocortisone tabs</i>	1B	
KENALOG-40 SUSP (Use <i>triamcinolone acetonide</i>)	NF	
MEDROL TABS	3	
MEDROL TABS (Use <i>methylprednisolone</i>)	NF	
MEDROL DOSEPAK TBPK (Use <i>methylprednisolone</i>)	NF	
<i>methylprednisolone tbpk</i>	1B	
<i>methylprednisolone tabs</i>	1B	
<i>methylprednisolone acetate susp</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
MILLIPRED TABS	3	

Drug Name	Drug Tier	Requirements/Limits
MILLIPRED DP TBPK	3	
ORAPRED ODT TBDP (Use <i>prednisolone sodium phosphate</i>)	NF	
PEDIAPRED SOLN (Use <i>prednisolone sodium phosphate</i>)	NF	
<i>prednisolone soln</i>	1B	
<i>prednisolone sodium phosphate tbdp</i>	3	
<i>prednisolone sodium phosphate soln</i>	1B	
<i>prednisone tbpk</i>	1B	
<i>prednisone tabs 1 MG, 5 MG</i>	1B	
<i>prednisone tabs 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone soln</i>	1B	
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 rtl MAX fill,30 rtl day(s) supply
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	
SOLU-MEDROL 40 MG, 125 MG, 500 MG, 1000 MG (Use <i>methylprednisolone sod succ</i>)	NF	
<i>triamcinolone acetonide susp 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate tabs</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		

Drug Name	Drug Tier	Requirements/Limits
<i>benzonatate 100 MG</i>	1B	QL(6 ea daily)
<i>benzonatate 150 MG</i>	1B	QL(4 ea daily)
<i>benzonatate 200 MG</i>	1B	QL(3 ea daily)
TESSALON PERLES (Use <i>benzonatate</i>)	NF	QL(6 ea daily)
Cough/Cold/Allergy Combinations		
ALLEGRA-D 12 HOUR ALLERGY & CONGESTION TB12 60 MG-120 MG (Use <i>fexofenadine-pseudoephedrine</i>)	NF	QL(2 ea daily)
ALLEGRA-D 24 HOUR ALLERGY & CONGESTION TB24 180 MG-240 MG (Use <i>fexofenadine-pseudoephedrine</i>)	NF	QL(1 ea daily)
<i>cetirizine-pseudoephedrine 5 MG-120 MG</i>	1B	QL(2 ea daily)
CLARITIN-D 12 HOUR TB12 5 MG-120 MG (Use <i>loratadine & pseudoephedrine</i>)	NF	QL(2 ea daily)
CLARITIN-D 24 HOUR TB24 10 MG-240 MG (Use <i>loratadine & pseudoephedrine</i>)	NF	QL(1 ea daily)
<i>fexofenadine-pseudoephedrine tb24 180 MG-240 MG</i>	1B	QL(1 ea daily)
<i>fexofenadine-pseudoephedrine tb12 60 MG-120 MG</i>	1B	QL(2 ea daily)
<i>hydrocodone polistirex-chlorpheniramine polistirex suer 10 MG/5ML-8 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>loratadine & pseudoephedrine tb12 5 MG-120 MG</i>	1B	QL(2 ea daily)
<i>loratadine & pseudoephedrine tb24 10 MG-240 MG</i>	1B	QL(1 ea daily)
TUZISTRA XR 14.7 MG/5ML-2.8 MG/5ML	2	PA
ZYRTEC-D ALLERGY/CONGESTION 5 MG-120 MG (Use <i>cetirizine-pseudoephedrine</i>)	NF	QL(2 ea daily)
Misc. Respiratory Inhalants		
HYPERSAL NEBU (Use <i>sodium chloride (inhalant)</i>)	NF	
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) nebu 3.5 %, 6 %, 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine soln</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use <i>isotretinoin</i>)	NF	AL(At least 12 yrs old);PA
<i>adapalene gel .3 %</i>	1B	AL(At least 12 yrs old);ST
<i>adapalene gel .1 %</i>	1B	AL(At least 12 yrs old);PA;RX/OTC
<i>adapalene crea</i>	1B	AL(At least 12 yrs old);PA
<i>adapalene-benzoyl peroxide gel 0.1 %-2.5 %</i>	1B	AL(At least 12 yrs old);ST

Drug Name	Drug Tier	Requirement s/Limits
AZELEX	3	AL(At least 12 yrs old);ST
BENZAACLIN GEL 1 %-5 % (Use clindamycin phosphate-benzoyl peroxide)	NF	AL(At least 12 yrs old);PA
BENZAACLIN WITH PUMP GEL 1 %-5 % (Use clindamycin phosphate-benzoyl peroxide)	NF	AL(At least 12 yrs old);PA
BENZAMYCIN GEL 3 %-5 % (Use benzoyl peroxide-erythromycin)	NF	AL(At least 12 yrs old);PA
benzoyl peroxide foam	1B	AL(At least 12 yrs old);RX/OTC
benzoyl peroxide gel 5 %, 10 %	1B	AL(At least 12 yrs old)
benzoyl peroxide liqd 4 %, 7 %, 10 %	1B	AL(At least 12 yrs old)
BENZOYL PEROXIDE CLEANSER LIQD	2	AL(At least 12 yrs old)
benzoyl peroxide-erythromycin gel 3 %-5 %	1B	AL(At least 12 yrs old);PA
CLEOCIN-T LOTN (Use clindamycin phosphate (topical))	NF	AL(At least 12 yrs old)
CLINDAGEL GEL (Use clindamycin phosphate (topical))	NF	AL(At least 12 yrs old)
clindamycin phosphate (topical) foam	1B	AL(At least 12 yrs old);PA
clindamycin phosphate (topical) gel	1B	AL(At least 12 yrs old)
clindamycin phosphate (topical) lotn	1B	AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirement s/Limits
clindamycin phosphate (topical) swab	1B	AL(At least 12 yrs old)
clindamycin phosphate (topical) soln	1B	QL(4 ml daily);AL(At least 12 yrs old)
clindamycin phosphate-benzoyl peroxide gel 1 %-5 %	1B	AL(At least 12 yrs old);PA
clindamycin phosphate-benzoyl peroxide (refrigerate) 1.2 %-5 %	1B	AL(At least 12 yrs old);PA
clindamycin phosphate-tretinoin 1.2 %-0.025 %	1B	AL(At least 12 yrs old);ST
DIFFERIN GEL .3 % (Use adapalene)	NF	AL(At least 12 yrs old);ST
DIFFERIN CREA (Use adapalene)	NF	AL(At least 12 yrs old);PA
DIFFERIN GEL .1 % (Use adapalene)	NF	AL(At least 12 yrs old);PA;RX/OTC
DIFFERIN LOTN	2	AL(At least 12 yrs old);ST
EPIDUO GEL 0.1 %-2.5 % (Use adapalene-benzoyl peroxide)	NF	AL(At least 12 yrs old);ST
erythromycin (acne aid) soln	1B	AL(At least 12 yrs old)
erythromycin (acne aid) pads	1B	AL(At least 12 yrs old)
EVOCLIN FOAM (Use clindamycin phosphate (topical))	NF	AL(At least 12 yrs old);PA
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	3	AL(At least 12 yrs old);PA
KLARON (Use sulfacetamide sodium (acne))	NF	AL(At least 12 yrs old)
RETIN-A CREA (Use tretinoin)	NF	AL(At least 12 yrs old- Up to 30 yrs old)

Drug Name	Drug Tier	Requirement s/Limits
RETIN-A GEL (Use tretinoin)	NF	AL(At least 12 yrs old- Up to 30 yrs old)
RETIN-A MICRO .1 % (Use tretinoin microsphere)	NF	AL(At least 12 yrs old- Up to 30 yrs old);PA
RETIN-A MICRO PUMP .1 % (Use tretinoin microsphere)	NF	AL(At least 12 yrs old- Up to 30 yrs old);PA
sulfacetamide sodium (acne)	1B	AL(At least 12 yrs old)
sulfacetamide sodium w/ sulfur crea 5 %-10 %	1B	AL(At least 12 yrs old)
sulfacetamide sodium w/ sulfur liqd 4.5 %-9 %	1B	AL(At least 12 yrs old);ST
sulfacetamide sodium-sulfur in urea vehicle emul 4 %-10 %-10 %	1B	AL(At least 12 yrs old)
SUMADAN WASH LIQD 4.5 %-9 % (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old);ST
SUMAXIN WASH LIQD 4 %-9 % (Use sulfacetamide sodium w/ sulfur)	NF	
tretinoin crea .025 %, .05 %, .1 %	1B	AL(At least 12 yrs old- Up to 30 yrs old)
tretinoin gel .01 %, .025 %	1B	AL(At least 12 yrs old- Up to 30 yrs old)
tretinoin microsphere .1 %	1B	AL(At least 12 yrs old- Up to 30 yrs old);PA
VELTIN 1.2 %-0.025 % (Use clindamycin phosphate-tretinoin)	NF	AL(At least 12 yrs old);ST
ZIANA 1.2 %-0.025 % (Use clindamycin phosphate-tretinoin)	NF	AL(At least 12 yrs old);ST

Drug Name	Drug Tier	Requirement s/Limits
Agents for External Genital and Perianal Warts		
VEREGEN	3	
Antibiotics - Topical		
ALTABAX	2	
gentamicin sulfate (topical) crea	1B	QL(1 gm daily)
gentamicin sulfate (topical) oint	1B	
mupirocin oint	1B	
NEO-SYNALAR 0.5 %-0.025 %	3	PA
Antifungals - Topical		
butenafine hcl	1B	RX/OTC
ciclopirox soln	1B	
ciclopirox sham	1B	
ciclopirox gel	1B	
ciclopirox olamine susp	1B	
ciclopirox olamine crea	1B	
clotrimazole (topical) soln	1B	RX/OTC
clotrimazole (topical) crea	1B	RX/OTC
clotrimazole w/ betamethasone crea 1 %-0.05 %	1B	
clotrimazole w/ betamethasone lotn 1 %-0.05 %	1B	
econazole nitrate crea	1B	QL(85 gm per fill retail,85 per fill mail %)
ERTACZO	3	QL(2.15 gm daily)
EXELDERM SOLN (Use sulconazole nitrate)	NF	1 rtl MAX fill,90 rtl day(s) supply;1 mail MAX fill

Drug Name	Drug Tier	Requirements/Limits
EXELDERM CREA (Use <i>sulconazole nitrate</i>)	NF	
JUBLIA	3	PA
KERYDIN (Use <i>tavaborole</i>)	NF	PA
<i>ketconazole (topical) crea</i>	1B	
<i>ketconazole (topical) sham 2 %</i>	1B	
LOPROX SUSP (Use <i>ciclopirox olamine</i>)	NF	
LOPROX CREA (Use <i>ciclopirox olamine</i>)	NF	
LOPROX SHAMPOO SHAM (Use <i>ciclopirox</i>)	NF	
LOTRIMIN AF CREA (Use <i>clotrimazole (topical)</i>)	NF	RX/OTC
LOTRIMIN AF JOCK ITCH CREA (Use <i>clotrimazole (topical)</i>)	NF	RX/OTC
LOTRIMIN ULTRA (Use <i>butenafine hcl</i>)	NF	RX/OTC
<i>luliconazole</i>	1B	PA
LUZU (Use <i>luliconazole</i>)	NF	PA
<i>naftifine hcl crea 1 %</i>	1B	1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(3 gm daily)
<i>naftifine hcl crea 2 %</i>	1B	1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(2 gm daily)
<i>naftifine hcl gel</i>	1B	1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(3 gm daily)

Drug Name	Drug Tier	Requirements/Limits
NAFTIN CREA 2 % (Use <i>naftifine hcl</i>)	NF	1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(2 gm daily)
<i>nystatin (topical) crea</i>	1B	
<i>nystatin (topical) powd ex</i>	1B	
<i>nystatin (topical) oint</i>	1B	
<i>nystatin-triamcinolone crea 100000 UNIT/GM-1 MG/GM</i>	1B	
<i>nystatin-triamcinolone oint 100000 UNIT/GM-0.1 %</i>	1B	
<i>oxiconazole nitrate crea</i>	1B	Limit 1 Fill per 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(3 gm daily)
OXISTAT LOTN	2	Limit 1 Fill per 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(2 ml daily)
OXISTAT CREA (Use <i>oxiconazole nitrate</i>)	NF	Limit 1 Fill per 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(3 gm daily)
<i>sulconazole nitrate crea</i>	1B	
<i>sulconazole nitrate soln</i>	1B	1 rtl MAX fill,90 rtl day(s) supply;1 mail MAX fill
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		

Drug Name	Drug Tier	Requirement s/Limits
<i>diclofenac epolamine ptch ex</i>	1B	
<i>diclofenac sodium (topical) gel ex</i>	1B	QL(3.34 gm daily);RX/OTC
FLECTOR PTCH EX (Use <i>diclofenac epolamine</i>)	NF	
VOLTAREN GEL EX (Use <i>diclofenac sodium (topical)</i>)	NF	QL(3.34 gm daily);RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP;PA
<i>diclofenac sodium (actinic keratoses) ex</i>	1B	QL(3.34 gm daily);PA
EFUDEX CREA (Use <i>fluorouracil (topical)</i>)	NF	
<i>fluorouracil (topical) crea 5 %</i>	1B	
<i>fluorouracil (topical) soln</i>	1B	
PANRETIN	3	
PICATO .015 %	2	1 rtl MAX fill,60 rtl day(s) supply;1 mail MAX fill;QL(3 ea per fill retail,3 per fill mail %)
PICATO .05 %	2	1 rtl MAX fill,60 rtl day(s) supply;1 mail MAX fill;QL(2 ea per fill retail,2 per fill mail %)
TARGRETIN (Use <i>bexarotene (topical)</i>)	4	SP;PA
Antipruritics - Topical		

Drug Name	Drug Tier	Requirement s/Limits
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(45 gm per fill retail,45 per fill mail %);PA
PRUDOXIN (Use <i>doxepin hcl (antipruritic)</i>)	NF	Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(45 gm per fill retail,45 per fill mail %);PA
ZONALON (Use <i>doxepin hcl (antipruritic)</i>)	NF	Limit 1 fill every 180 days;1 rtl MAX fill,180 rtl day(s) supply;1 mail MAX fill;QL(45 gm per fill retail,45 per fill mail %);PA
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 ea daily)
<i>acitretin 25 MG</i>	1B	QL(2 ea daily)
<i>calcipotriene oint</i>	1B	QL(4 gm daily);PA
<i>calcipotriene soln</i>	1B	QL(4 ml daily);PA
<i>calcipotriene crea</i>	1B	QL(4 gm daily);PA
<i>calcitriol (topical)</i>	1B	QL(3.34 gm daily)
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ml daily);PA
COSENTYX SOSY 150 MG/ML	4	QL(0.072 ml daily);PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ml daily);PA

Drug Name	Drug Tier	Requirements/Limits
DOVONEX CREA (<i>Use calcipotriene</i>)	NF	QL(4 gm daily);PA
<i>methoxsalen rapid</i>	1B	QL(4 ea daily)
OXSORALEN ULTRA (<i>Use methoxsalen rapid</i>)	NF	QL(4 ea daily)
SKYRIZI SOSY	4	QL(0.025 ml daily);PA
SKYRIZI PSKT	4	QL(0.025 ea daily);PA
SKYRIZI PEN SOAJ	4	QL(0.025 ml daily);PA
SORIATANE 25 MG (<i>Use acitretin</i>)	NF	QL(2 ea daily)
SORIATANE 10 MG (<i>Use acitretin</i>)	NF	QL(1 ea daily)
STELARA SOSY 90 MG/ML	4	QL(0.018 ml daily);SP;PA
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ml daily);PA
<i>tazarotene crea</i>	1B	QL(1 gm daily)
TAZORAC CREA (<i>Use tazarotene</i>)	NF	QL(1 gm daily)
TREMFYA SOPN	4	QL(0.018 ml daily);PA
TREMFYA SOSY	4	QL(0.018 ml daily);PA
VECTICAL (<i>Use calcitriol (topical)</i>)	NF	QL(3.34 gm daily)
Antiseborrheic Products		
<i>selenium sulfide lotn 2.5 %</i>	1B	
Antivirals - Topical		
<i>acyclovir topical oint</i>	1B	
<i>acyclovir topical crea</i>	1B	
DENAVIR 1 % (<i>Use penciclovir</i>)	3	QL(0.18 gm daily)
<i>penciclovir 1 %</i>	1B	QL(0.18 gm daily)
ZOVIRAX OINT (<i>Use acyclovir topical</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
ZOVIRAX CREA (<i>Use acyclovir topical</i>)	NF	
Burn Products		
<i>mafenide acetate pack</i>	3	
SILVADENE (<i>Use silver sulfadiazine</i>)	NF	
<i>silver sulfadiazine</i>	1B	
SULFAMYLON CREA	3	
SULFAMYLON PACK 5 % (<i>Use mafenide acetate</i>)	NF	
Corticosteroids - Topical		
<i>alclometasone dipropionate crea</i>	1B	
<i>alclometasone dipropionate oint</i>	1B	
<i>amcinonide crea</i>	1B	1 rtl MAX fill,30 rtl day(s) supply;1 mail MAX fill;QL(60 gm per fill retail,60 per fill mail %)
<i>amcinonide lotn</i>	3	
AMCINONIDE OINT	3	
<i>betamethasone dipropionate (topical) lotn</i>	1B	
<i>betamethasone dipropionate (topical) oint</i>	1B	
<i>betamethasone dipropionate (topical) crea</i>	1B	
<i>betamethasone dipropionate augmented crea</i>	1B	
<i>betamethasone dipropionate augmented oint</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate augmented lotn</i>	1B	
<i>betamethasone valerate crea</i>	1B	
<i>betamethasone valerate lotn</i>	1B	
<i>betamethasone valerate oint</i>	1B	
<i>betamethasone valerate foam</i>	1B	QL(1.67 gm daily)
<i>calcipotriene-betamethasone dipropionate oint 0.005 %-0.064 %</i>	1B	ST
<i>calcipotriene-betamethasone dipropionate susp 0.005 %-0.064 %</i>	1B	ST
<i>clobetasol propionate soln .05 %</i>	1B	QL(3.34 ml daily);PA
<i>clobetasol propionate crea .05 %</i>	1B	QL(3 gm daily);PA
<i>clobetasol propionate foam</i>	1B	QL(3 gm daily);ST
<i>clobetasol propionate gel .05 %</i>	1B	QL(2 gm daily);ST
<i>clobetasol propionate oint .05 %</i>	1B	QL(1 gm daily);PA
<i>clobetasol propionate emollient base .05 %</i>	1B	QL(1 gm daily);PA
<i>clocortolone pivalate</i>	3	
CLODERM (<i>Use clocortolone pivalate</i>)	NF	
CORDRAN TAPE	3	
CORDRAN CREA (<i>Use flurandrenolide</i>)	NF	
CORDRAN LOTN (<i>Use flurandrenolide</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
<i>CUTIVATE LOTN (Use fluticasone propionate)</i>	NF	QL(6 ml daily)
<i>DERMA-SMOOTHIE/FS BODY OIL (Use fluocinolone acetonide)</i>	NF	1 rtl MAX fill,30 rtl day(s) supply;QL(118.28 ml per fill retail)
<i>DERMA-SMOOTHIE/FS SCALP OIL (Use fluocinolone acetonide)</i>	NF	
<i>desonide oint</i>	1B	QL(3 gm daily)
<i>desonide crea</i>	1B	QL(4 gm daily)
<i>desonide lotn</i>	1B	QL(4 ml daily)
<i>DESOWEN CREA (Use desonide)</i>	NF	QL(4 gm daily)
<i>desoximetasone oint .25 %</i>	1B	
<i>desoximetasone crea .25 %</i>	1B	
<i>desoximetasone gel</i>	1B	
<i>diflorasone diacetate crea</i>	1B	PA
<i>diflorasone diacetate oint</i>	1B	PA
<i>DIPROLENE OINT (Use betamethasone dipropionate augmented)</i>	NF	
<i>DIPROLENE AF CREA (Use betamethasone dipropionate augmented)</i>	NF	
<i>fluocinolone acetonide oil</i>	1B	1 rtl MAX fill,30 rtl day(s) supply;QL(118.28 ml per fill retail)
<i>fluocinolone acetonide oint</i>	1B	
<i>fluocinolone acetonide soln</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide crea</i>	1B	
<i>fluocinonide oint</i>	1B	QL(2 gm daily)
<i>fluocinonide crea .05 %</i>	1B	QL(2 gm daily)
<i>fluocinonide soln</i>	1B	QL(2 ml daily)
<i>fluocinonide gel</i>	1B	
<i>fluocinonide emulsified base</i>	1B	QL(2 gm daily)
<i>flurandrenolide crea</i>	2	QL(2 gm daily)
<i>flurandrenolide lotn</i>	2	QL(2 ml daily)
<i>fluticasone propionate crea .05 %</i>	1B	
<i>fluticasone propionate lotn</i>	1B	QL(6 ml daily)
<i>fluticasone propionate oint</i>	1B	
<i>halcinonide crea</i>	1B	PA
<i>halobetasol propionate oint</i>	1B	
<i>halobetasol propionate crea</i>	1B	
HALOG CREA (Use <i>halcinonide</i>)	NF	PA
HALOG OINT	3	PA
<i>hydrocortisone (topical) lotn 2.5 %</i>	1B	
<i>hydrocortisone (topical) oint 1 %, 2.5 %</i>	1B	RX/OTC
<i>hydrocortisone (topical) crea 1 %, 2.5 %</i>	1B	RX/OTC
<i>hydrocortisone butyrate crea</i>	1B	
<i>hydrocortisone butyrate soln</i>	1B	
<i>hydrocortisone butyrate oint</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone valerate oint</i>	1B	
<i>hydrocortisone valerate crea</i>	1B	
LUXIQ FOAM (Use <i>betamethasone valerate</i>)	NF	QL(1.67 gm daily)
<i>mometasone furoate oint</i>	1B	
<i>mometasone furoate crea</i>	1B	
<i>mometasone furoate soln</i>	1B	
MONISTAT SOOTHING CARE ITCH RELIEF CREA (Use <i>hydrocortisone (topical)</i>)	NF	RX/OTC
OLUX FOAM (Use <i>clobetasol propionate</i>)	NF	QL(3 gm daily);ST
<i>prednicarbate oint</i>	1B	
<i>prednicarbate crea</i>	1B	
SYNALAR CREA (Use <i>fluocinolone acetonide</i>)	NF	
SYNALAR SOLN (Use <i>fluocinolone acetonide</i>)	NF	
SYNALAR OINT (Use <i>fluocinolone acetonide</i>)	NF	
TACLONEX OINT 0.005 %-0.064 % (Use <i>calcipotriene-betamethasone dipropionate</i>)	NF	ST
TACLONEX SUSP 0.005 %-0.064 % (Use <i>calcipotriene-betamethasone dipropionate</i>)	NF	ST

Drug Name	Drug Tier	Requirement s/Limits
TEMOVATE OINT (<i>Use clobetasol propionate</i>)	NF	QL(1 gm daily);PA
TEMOVATE CREA (<i>Use clobetasol propionate</i>)	NF	QL(3 gm daily);PA
TOPICORT GEL (<i>Use desoximetasone</i>)	NF	
<i>triamcinolone acetonide (topical) crea .1 %</i>	1B	QL(3.34 gm daily)
<i>triamcinolone acetonide (topical) lotn</i>	1B	
<i>triamcinolone acetonide (topical) crea .025 %, .5 %</i>	1B	
<i>triamcinolone acetonide (topical) oint .025 %, .1 %, .5 %</i>	1B	
<i>triamcinolone acetonide-dimethicone-silicone 5 %-0.1 %</i>	1B	PA
TRIDESILON CREA .05 % (<i>Use desonide</i>)	NF	QL(4 gm daily)
Eczema Agents		
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	4	PA
DUPIXENT SOPN 300 MG/2ML	4	PA
Emollients		
<i>lactic acid (ammonium lactate) lotn 12 %</i>	1B	RX/OTC
<i>lactic acid (ammonium lactate) crea</i>	1B	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
ALDARA (<i>Use imiquimod</i>)	NF	QL(12 ea per fill retail,12 per fill mail %)

Drug Name	Drug Tier	Requirement s/Limits
<i>imiquimod 5 %</i>	1B	QL(12 ea per fill retail,12 per fill mail %)
Immunosuppressive Agents - Topical		
ELIDEL (<i>Use pimecrolimus</i>)	NF	AL(At least 2 yrs old);PA
<i>pimecrolimus</i>	1B	AL(At least 2 yrs old);PA
PROTOPIC OINT (<i>Use tacrolimus (topical)</i>)	NF	AL(At least 2 yrs old);PA
<i>tacrolimus (topical) oint</i>	1B	AL(At least 2 yrs old);PA
Keratolytic/Antimitotic Agents		
<i>podofilox soln</i>	1B	
Local Anesthetics - Topical		
<i>lidocaine ptch 5 %</i>	1B	PA
<i>lidocaine hcl gel 2 %</i>	1B	QL(4 gm daily);RX/OTC
<i>lidocaine hcl soln</i>	1B	
<i>lidocaine hcl prsy</i>	1B	QL(4 ml daily)
<i>lidocaine-prilocaine crea</i>	1B	QL(1 gm daily)
LIDODERM PTCH (<i>Use lidocaine</i>)	NF	PA
SYNERA PTCH 70 MG-70 MG	3	1 rtl MAX fill,30 rtl day(s) supply;1 mail MAX fill;QL(10 ea per fill retail,10 per fill mail)
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 gm daily);PA
Rosacea Agents		
<i>azelaic acid gel</i>	1B	
FINACEA GEL (<i>Use azelaic acid</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
METROCREAM CREA (Use metronidazole (topical))	NF	
METROGEL GEL 1 % (Use metronidazole (topical))	NF	
METROLOTION LOTN (Use metronidazole (topical))	NF	
<i>metronidazole (topical) crea</i>	1B	
<i>metronidazole (topical) gel</i>	1B	
<i>metronidazole (topical) lotn</i>	1B	
MIRVASO	3	QL(1 gm daily);PA
Scabicides & Pediculicides		
<i>crotamiton lotn</i>	1B	PA
ELIMITE CREA (Use <i>permethrin</i>)	NF	
<i>ivermectin (pediculicide)</i>	1B	PA;RX/OTC
<i>lindane sham</i>	1B	
<i>malathion</i>	1B	
NATROBA (Use <i>spinosad</i>)	NF	PA
NIX CREME RINSE LIQD EX (Use <i>permethrin</i>)	NF	
OVIDE (Use <i>malathion</i>)	NF	
<i>permethrin crea</i>	1B	
<i>permethrin liqd ex</i>	1B	
SKLICE (Use <i>ivermectin (pediculicide)</i>)	NF	PA;RX/OTC
<i>spinosad</i>	1B	PA
Wound Care Products		

Drug Name	Drug Tier	Requirements/Limits
REGRANEX	3	
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
GLUCAGEN DIAGNOSTIC	3	QL(0.035 ea daily)
THYROGEN .9 MG	3	1 rtl MAX fill,365 rtl day(s) supply;1 mail MAX fill;PA
Diagnostic Tests		
CHEMSTRIP-K STRP	1B	
FORA GTEL BLOOD KETONE TEST STRIPS	1B	
GOJJI BLOOD KETONE TEST STRIPS	1B	
KETONE STRP	1B	
KETONE TEST STRIPS STRP	1B	
KETOSTIX STRP	1B	
NOVA MAX PLUS KETONE TESTSTRIPS	1B	
PRECISION XTRA	1B	
PTS PANELS KETONE TEST	1B	
RELION KETONE TEST STRIPS STRP	1B	
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	1B	QL(3.34 ea daily);RX/OTC
TRUE METRIX BLOOD GLUCOSETEST STRIPS STRP	1B	Limit 100 per month;QL(3.34 ea daily);RX/OTC
TRUETRACK TEST STRP	1B	Limit 100 per month;QL(3.34 ea daily);RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low		
Digestive Enzymes		
Digestive Enzymes		

Drug Name	Drug Tier	Requirement s/Limits
CREON CPEP	2	Non-FDA approved uses require Prior Authorization
SUCRAID	3	
ZENPEP CPEP 10000 UNIT-42000 UNIT-32000 UNIT, 12000 UNIT-60000 UNIT-38000 UNIT, 15000 UNIT-63000 UNIT-47000 UNIT, 20000 UNIT-84000 UNIT-63000 UNIT, 24000 UNIT-120000 UNIT-76000 UNIT, 25000 UNIT-105000 UNIT-79000 UNIT, 3000 UNIT-14000 UNIT-10000 UNIT, 3000 UNIT-15000 UNIT-9500 UNIT, 36000 UNIT-180000 UNIT-114000 UNIT, 40000 UNIT-168000 UNIT-126000 UNIT, 5000 UNIT-24000 UNIT-17000 UNIT, 6000 UNIT-30000 UNIT-19000 UNIT	2	Non-FDA approved uses require Prior Authorization

DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure

Carbonic Anhydrase Inhibitors

<i>acetazolamide cp12</i>	1B	QL(2 ea daily)
<i>acetazolamide tabs 125 MG</i>	1B	QL(8 ea daily)
<i>acetazolamide tabs 250 MG</i>	1B	QL(4 ea daily)
<i>acetazolamide sodium</i>	1B	
KEVEYIS	4	QL(4 ea daily);PA
<i>methazolamide tabs</i>	1B	QL(6 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
Diuretic Combinations		
ALDACTAZIDE 25 MG-25 MG (<i>Use spironolactone & hydrochlorothiazide</i>)	NF	
<i>amiloride & hydrochlorothiazide 5 MG-50 MG</i>	1B	
DYAZIDE CAPS 37.5 MG-25 MG (<i>Use triamterene & hydrochlorothiazide</i>)	NF	
MAXZIDE TABS 75 MG-50 MG (<i>Use triamterene & hydrochlorothiazide</i>)	NF	
MAXZIDE-25 TABS 37.5 MG-25 MG (<i>Use triamterene & hydrochlorothiazide</i>)	NF	
<i>spironolactone & hydrochlorothiazide 25 MG-25 MG</i>	1B	
<i>triamterene & hydrochlorothiazide caps 37.5 MG-25 MG</i>	1B	
<i>triamterene & hydrochlorothiazide tabs</i>	1B	
Loop Diuretics		
<i>bumetanide tabs</i>	1B	QL(5 ea daily)
<i>bumetanide soln .25 MG/ML</i>	1B	
BUMEX TABS (<i>Use bumetanide</i>)	NF	QL(5 ea daily)
EDECIN (<i>Use ethacrynic acid</i>)	NF	QL(16 ea daily)
<i>ethacrynic acid</i>	1B	QL(16 ea daily)
<i>furosemide tabs</i>	1B	
<i>furosemide soln or 10 MG/ML, 40 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
LASIX TABS (<i>Use furosemide</i>)	NF	
<i>torseamide tabs</i>	1B	
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>Use spironolactone</i>)	NF	
<i>amiloride hcl tabs</i>	1B	
DYRENIUM CAPS (<i>Use triamterene</i>)	NF	QL(3 ea daily)
<i>spironolactone tabs</i>	1B	
<i>triamterene caps</i>	1B	QL(3 ea daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1B	
<i>hydrochlorothiazide tabs 25 MG, 50 MG</i>	1A	QL(2 ea daily)
<i>hydrochlorothiazide tabs 12.5 MG</i>	1B	QL(2 ea daily)
<i>hydrochlorothiazide caps</i>	1B	QL(2 ea daily)
<i>indapamide tabs 1.25 MG</i>	1B	QL(1 ea daily)
<i>indapamide tabs 2.5 MG</i>	1B	QL(2 ea daily)
<i>metolazone</i>	1B	QL(2 ea daily)
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 150 MG (<i>Use risedronate sodium</i>)	NF	QL(0.036 ea daily);PA
ACTONEL TABS 35 MG (<i>Use risedronate sodium</i>)	NF	QL(0.143 ea daily);PA
<i>alendronate sodium tabs 5 MG, 10 MG</i>	1B	QL(1 ea daily)
<i>alendronate sodium tabs 35 MG, 70 MG</i>	1B	QL(0.143 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
ATELVIA TBEC (<i>Use risedronate sodium</i>)	NF	PA
BONIVA SOLN (<i>Use ibandronate sodium</i>)	NF	SP;PA
BONIVA TABS (<i>Use ibandronate sodium</i>)	NF	QL(0.036 ea daily)
<i>calcitonin (salmon) na</i>	1B	
FORTEO SOPN	4	QL(0.09 ml daily);SP;PA
FOSAMAX TABS 70 MG (<i>Use alendronate sodium</i>)	NF	QL(0.143 ea daily)
FOSAMAX PLUS D	3	QL(0.143 ea daily);PA
<i>ibandronate sodium soln</i>	4	SP;PA
<i>ibandronate sodium tabs</i>	1B	QL(0.036 ea daily)
<i>pamidronate disodium soln</i>	4	SP;PA
PAMIDRONATE DISODIUM SOLN	4	SP;PA
PROLIA SOSY	4	1 rtl MAX fill,180 rtl day(s) supply;SP;PA
RECLAST SOLN (<i>Use zoledronic acid</i>)	NF	SP;PA
<i>risedronate sodium tabs 35 MG</i>	1B	QL(0.143 ea daily);PA
<i>risedronate sodium tabs 150 MG</i>	1B	QL(0.036 ea daily);PA
<i>risedronate sodium tabs 5 MG, 30 MG</i>	1B	QL(1 ea daily);PA
<i>risedronate sodium tbec</i>	1B	PA
TERIPARATIDE SOPN	4	QL(0.09 ml daily);PA
TYMLOS	4	PA
XGEVA SOLN	4	SP;PA
<i>zoledronic acid conc</i>	4	SP;PA

Drug Name	Drug Tier	Requirements/Limits
<i>zoledronic acid soln</i>	4	SP;PA
Corticotropin		
ACTHAR	4	PA
CORTROPHIN	4	PA
Fertility Regulators		
CHORIONIC GONADOTROPIN IM	4	SP;PA
NOVAREL IM 10000 UNIT	4	SP;PA
PREGNYL W/DILUENT BENZYLALCOHOL/NACL IM	4	SP;PA
GnRH/LHRH Antagonists		
<i>cetorelix acetate</i>	4	PA
CETROTIDE .25 MG (Use <i>cetorelix acetate</i>)	4	PA
<i>ganirelix acetate</i>	4	PA
GANIRELIX ACETATE (Use <i>ganirelix acetate</i>)	NF	PA
Growth Hormone Receptor Antagonists		
SOMAVERT 10 MG, 15 MG, 20 MG	4	SP;PA
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA 2 MG	4	PA
EGRIFTA SV	4	PA
Growth Hormones		
NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP;PA
NORDITROPIN FLEXPPO SOPN 30 MG/3ML	4	PA
ZORBTIVE SC	4	SP;PA
Hormone Receptor Modulators		

Drug Name	Drug Tier	Requirements/Limits
EVISTA (Use <i>raloxifene hcl</i>)	NF	QL(1 ea daily)
OSPHENA	3	PA
<i>raloxifene hcl</i>	0	QL(1 ea daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	4	SP;PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI	4	SP;PA
LUPANETA PACK	4	PA
LUPRON DEPOT-PED (1-MONTH)	4	SP;PA
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP;PA
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	PA
SYNAREL	4	SP;PA
Metabolic Modifiers		
ALDURAZYME	4	SP;PA
<i>betaine</i>	4	SP;PA
BUPHENYL POWD (Use <i>sodium phenylbutyrate</i>)	NF	PA
BUPHENYL TABS (Use <i>sodium phenylbutyrate</i>)	NF	PA
<i>calcitriol soln or</i>	1B	
<i>calcitriol caps</i>	1B	
<i>cinacalcet hcl</i>	4	QL(4 ea daily);SP;PA
CYSTADANE (Use <i>betaine</i>)	4	SP;PA
<i>doxercalciferol soln</i>	1B	
<i>doxercalciferol caps</i>	1B	
ELAPRASE	4	SP;PA
FABRAZYME 35 MG	4	SP;PA

Drug Name	Drug Tier	Requirement s/Limits
GALAFOLD	4	QL(0.5 ea daily);PA
HECTOROL SOLN (<i>Use doxercalciferol</i>)	NF	
KUVAN TABS (<i>Use sapropterin dihydrochloride</i>)	NF	PA
KUVAN PACK (<i>Use sapropterin dihydrochloride</i>)	NF	PA
LUMIZYME	4	SP;PA
MYALEPT	4	PA
NAGLAZYME	4	SP;PA
<i>nitisinone caps</i>	4	SP;PA
ORFADIN CAPS (<i>Use nitisinone</i>)	NF	SP;PA
PALYNZIQ	4	PA
<i>paricalcitol caps</i>	1B	
<i>paricalcitol soln</i>	1B	
ROCALTROL SOLN OR (<i>Use calcitriol</i>)	NF	
ROCALTROL CAPS (<i>Use calcitriol</i>)	NF	
<i>sapropterin dihydrochloride pack</i>	4	PA
<i>sapropterin dihydrochloride tabs</i>	4	PA
SENSIPAR (<i>Use cinacalcet hcl</i>)	NF	QL(4 ea daily);SP;PA
<i>sodium phenylbutyrate tabs</i>	1B	PA
<i>sodium phenylbutyrate powd</i>	1B	PA
ZEMPLAR SOLN (<i>Use paricalcitol</i>)	NF	
ZEMPLAR CAPS 1 MCG, 2 MCG (<i>Use paricalcitol</i>)	NF	
Posterior Pituitary Hormones		

Drug Name	Drug Tier	Requirement s/Limits
DDAVP TABS .1 MG (<i>Use desmopressin acetate</i>)	NF	QL(6 ea daily)
DDAVP TABS .2 MG (<i>Use desmopressin acetate</i>)	NF	QL(8 ea daily)
DDAVP .01 % (<i>Use desmopressin acetate spray</i>)	NF	
DDAVP SOLN IJ 4 MCG/ML (<i>Use desmopressin acetate</i>)	NF	PA
<i>desmopressin acetate tabs .2 MG</i>	1B	QL(8 ea daily)
<i>desmopressin acetate tabs .1 MG</i>	1B	QL(6 ea daily)
<i>desmopressin acetate soln ij</i>	1B	PA
DESMOPRESSIN ACETATE SOLN NA	4	SP;PA
<i>desmopressin acetate spray</i>	1B	
<i>desmopressin acetate spray refrigerated</i>	1B	
STIMATE SOLN NA	4	SP;PA
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
LANREOTIDE ACETATE	4	QL(0.0179 ml daily);SP;PA
<i>octreotide acetate soln</i>	4	SP;PA
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>Use octreotide acetate</i>)	NF	SP;PA
SIGNIFOR	4	PA
SOMATULINE DEPOT 60 MG/0.2ML	4	QL(0.0075 ml daily);SP;PA

Drug Name	Drug Tier	Requirements/Limits
SOMATULINE DEPOT 120 MG/0.5ML	4	QL(0.0179 ml daily);SP;PA
SOMATULINE DEPOT 90 MG/0.3ML	4	QL(0.011 ml daily);SP;PA
Vasopressin Receptor Antagonists		
JYNARQUE TBPK 0	4	SP;PA
JYNARQUE TABS	4	QL(2 ea daily);SP;PA
SAMSCA TABS (Use <i>tolvaptan</i>)	4	QL(2 ea daily);SP;PA
<i>tolvaptan tabs</i>	4	QL(2 ea daily);SP;PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
CLIMARA PRO 0.015 MG/DAY-0.045 MG/DAY	3	
DUAVEE 20 MG-0.45 MG	3	PA
FEMHRT 2.5 MCG-0.5 MG (Use <i>norethindrone acetate-ethinyl estradiol</i>)	NF	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE 0.625 MG-5 MG	2	
PREMPRO	2	
Estrogens		
CLIMARA PTWK (Use <i>estradiol</i>)	NF	
DELESTROGEN	1B	
DELESTROGEN 20 MG/ML, 40 MG/ML (Use <i>estradiol valerate</i>)	NF	
DEPO-ESTRADIOL	3	

Drug Name	Drug Tier	Requirements/Limits
DIVIGEL GEL (Use <i>estradiol</i>)	3	
DIVIGEL GEL	3	
ELESTRIN GEL	3	
ESTRACE TABS (Use <i>estradiol</i>)	NF	
<i>estradiol tabs</i>	1B	
<i>estradiol gel</i>	1B	
<i>estradiol pttw</i>	1B	QL(0.286 ea daily)
<i>estradiol ptwk</i>	1B	
<i>estradiol valerate</i>	1B	
ESTROGEL GEL	3	
EVAMIST SOLN	3	
MENEST .3 MG, .625 MG, 1.25 MG	3	
MENOSTAR PTWK	3	
MINIVELLE PTTW (Use <i>estradiol</i>)	NF	QL(0.286 ea daily)
PREMARIN SOLR	2	
PREMARIN TABS	2	
VIVELLE-DOT PTTW (Use <i>estradiol</i>)	NF	QL(0.286 ea daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA TABS	3	PA
BAXDELA SOLR	3	PA
CIPRO SUSR	2	2 rtl MAX fill,30 rtl day(s) supply
CIPRO TABS 250 MG, 500 MG (Use <i>ciprofloxacin hcl</i>)	NF	
<i>ciprofloxacin hcl tabs</i>	1B	
<i>ciprofloxacin in d5w 200 MG/100ML-5 %</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin tabs 250 MG, 750 MG</i>	1B	
<i>levofloxacin soln or</i>	1B	
<i>levofloxacin tabs 500 MG</i>	1A	
<i>levofloxacin in d5w 500 MG/100ML-5 %</i>	1B	
<i>moxifloxacin hcl tabs</i>	1B	
<i>moxifloxacin hcl in sodium chloride 400 MG/250ML-0.8 %</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Bile Acid Synthesis Disorder Agents		
CHOLBAM	4	SP;PA
Gallstone Solubilizing Agents		
<i>ACTIGALL CAPS (Use ursodiol)</i>	NF	
<i>URSO 250 TABS (Use ursodiol)</i>	NF	
<i>URSO FORTE TABS (Use ursodiol)</i>	NF	
<i>ursodiol caps</i>	1B	
<i>ursodiol tabs</i>	1B	
Gastrointestinal Chloride Channel Activators		
<i>AMITIZA (Use lubiprostone)</i>	NF	QL(2 ea daily);PA
<i>lubiprostone</i>	1B	QL(2 ea daily);PA
<i>LUBIPROSTONE (Use lubiprostone)</i>	NF	QL(2 ea daily);PA
Gastrointestinal Stimulants		
<i>metoclopramide hcl soln ij 5 MG/ML</i>	1B	
<i>metoclopramide hcl tabs</i>	1A	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>metoclopramide hcl soln or 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ml daily)
REGLAN TABS (<i>Use metoclopramide hcl</i>)	NF	QL(6 ea daily)
Inflammatory Bowel Agents		
APRISO CP24 (<i>Use mesalamine</i>)	NF	PA
ASACOL HD TBEC (<i>Use mesalamine</i>)	NF	QL(6 ea daily)
AVSOLA	4	PA
AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NF	
AZULFIDINE EN-TABS TBEC (<i>Use sulfasalazine</i>)	NF	
<i>balsalazide disodium caps</i>	1B	
CANASA SUPP (<i>Use mesalamine</i>)	NF	
COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NF	
DELZICOL CPDR (<i>Use mesalamine</i>)	NF	
DIPENTUM	2	
INFLECTRA	4	PA
LIALDA TBEC (<i>Use mesalamine</i>)	NF	
<i>mesalamine tbec 1.2 GM</i>	1B	
<i>mesalamine supp</i>	1B	
<i>mesalamine cp24</i>	1B	PA
<i>mesalamine tbec 800 MG</i>	1B	QL(6 ea daily)
<i>mesalamine cpdr</i>	1B	
<i>mesalamine enem</i>	1B	
RENFLEXIS	4	PA
STELARA 130 MG/26ML	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>sulfasalazine tbec</i>	1B	
<i>sulfasalazine tabs</i>	1B	
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 ea daily)
LINZESS	2	QL(1 ea daily);PA
LOTRONEX (<i>Use alosetron hcl</i>)	NF	QL(2 ea daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	
ENTEREG (<i>Use alvimopan</i>)	NF	
RELISTOR SOLN	3	PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) caps</i>	1B	
<i>calcium acetate (phosphate binder) tabs</i>	1B	RX/OTC
FOSRENOL CHEW (<i>Use lanthanum carbonate</i>)	NF	
<i>lanthanum carbonate chew</i>	1B	
PHOSLYRA SOLN	2	
RENVELA PACK (<i>Use sevelamer carbonate</i>)	NF	
RENVELA TABS (<i>Use sevelamer carbonate</i>)	NF	
<i>sevelamer carbonate tabs</i>	1B	
<i>sevelamer carbonate pack</i>	1B	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		

Drug Name	Drug Tier	Requirements/Limits
Alkalinizers		
<i>potassium citrate (alkalinizer) tbc 10 MEQ, 1080 MG</i>	1B	
<i>sodium citrate & citric acid 334 MG/5ML-500 MG/5ML</i>	1B	RX/OTC
UROKIT-K 10 TBCR (<i>Use potassium citrate (alkalinizer)</i>)	NF	
Cystinosis Agents		
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid .25 %</i>	1B	
<i>glycine (gu irrigant) soln 1.5 %</i>	1B	
RESECTISOL	1B	
<i>sodium chloride (gu irrigant) .9 %</i>	1B	
SORBITOL 3 %, 3.3 %	1B	
SORBITOL/MANNITOL IRRIGATION 0.54 GM/100ML-2.7 GM/100ML	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 ea daily)
AVODART (<i>Use dutasteride</i>)	NF	QL(1 ea daily)
<i>dutasteride</i>	1B	QL(1 ea daily)
<i>dutasteride-tamsulosin hcl 0.5 MG-0.4 MG</i>	3	PA
<i>finasteride</i>	1B	5 mg only
FLOMAX (<i>Use tamsulosin hcl</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
JALYN 0.5 MG-0.4 MG (Use dutasteride-tamsulosin hcl)	3	PA
PROSCAR (Use finasteride)	NF	5 mg only
RAPAFLO (Use silodosin)	NF	
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
UROXATRAL (Use alfuzosin hcl)	NF	QL(1 ea daily)
Urinary Analgesics		
<i>phenazopyridine hcl tabs 100 MG, 100 MG, 200 MG</i>	1B	
PYRIDIUM TABS (Use phenazopyridine hcl)	NF	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid 0.5 MG-500 MG</i>	1B	
Gout Agents		
<i>allopurinol</i>	1B	
<i>colchicine tabs</i>	1B	
COLCRYS TABS (Use colchicine)	NF	
<i>febuxostat</i>	1B	QL(1 ea daily);PA
ULORIC (Use febuxostat)	NF	QL(1 ea daily);PA
ZYLOPRIM (Use allopurinol)	NF	
Uricosurics		
<i>probenecid</i>	1B	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		

Drug Name	Drug Tier	Requirements/Limits
FIRAZYR (Use icanitibant acetate)	NF	QL(9 ml daily);PA
<i>icanitibant acetate</i>	4	QL(9 ml daily);PA
Complement Inhibitors		
CINRYZE SOLR IV	4	PA
HAEGARDA SOLR SC	4	PA
RUCONEST	4	QL(0.143 ea daily);PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 ea daily)
Plasma Kallikrein Inhibitors		
TAKHZYRO SOLN	4	PA
Platelet Aggregation Inhibitors		
AGRYLIN .5 MG (Use anagrelide hcl)	NF	
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole 200 MG-25 MG</i>	1B	QL(2 ea daily);PA
BRILINTA	2	QL(2 ea daily)
CABLIVI	4	PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1B	QL(1 ea daily)
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>dipyridamole</i>	1B	
EFFIENT (Use prasugrel hcl)	NF	QL(1 ea daily)
PLAVIX 75 MG (Use clopidogrel bisulfate)	NF	QL(1 ea daily)
<i>prasugrel hcl</i>	1B	QL(1 ea daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 ea daily);PA

Drug Name	Drug Tier	Requirements/Limits
CEREZYME 400 UNIT	4	SP;PA
<i>miglustat</i>	4	QL(3 ea daily);SP;PA
ZAVESCA (<i>Use miglustat</i>)	NF	QL(3 ea daily);SP;PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
OXBRYTA TABS	4	PA
Cobalamins		
<i>cyanocobalamin soln ij</i>	1B	QL(1 ml daily)
Folic Acid/Folates		
<i>folic acid tabs</i>	0	
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP;PA
ARANESP ALBUMIN FREE SOLN 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP;PA
ARANESP ALBUMIN FREE SOLN 25 MCG/ML	4	SP
DOPTELET	4	QL(3 ea daily);PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	3	SP;PA
LEUKINE SOLR IJ	4	SP;PA
MIRCERA	4	PA
MULPLETA	4	QL(1 ea daily);PA
NPLATE 250 MCG, 500 MCG	4	SP;PA

Drug Name	Drug Tier	Requirements/Limits
PROCRIT 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	3	SP;PA
PROCRIT 40000 UNIT/ML	4	SP;PA
PROMACTA PACK 12.5 MG	4	QL(1 ea daily);PA
PROMACTA TABS	4	SP;PA
RETACRIT	4	PA
RETACRIT	4	PA
ZARXIO	4	PA
ZIEXTENZO	4	PA
Hematopoietic Mixtures		
<i>ferrous fumarate-folic acid 324 MG-1 MG</i>	1B	QL(1 ea daily)
Iron		
FER-IN-SOL SOLN (<i>Use ferrous sulfate</i>)	0	AL(Up to 1 yrs old)
<i>ferrous sulfate tabs 65 MG, 325 MG</i>	0	
<i>ferrous sulfate tbec</i>	0	
<i>ferrous sulfate soln</i>	0	AL(Up to 1 yrs old)
Stem Cell Mobilizers		
MOZOBIL	4	SP;PA
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
AMICAR TABS (<i>Use aminocaproic acid</i>)	NF	PA
<i>aminocaproic acid tabs</i>	1B	PA
CYKLOKAPRON SOLN (<i>Use tranexamic acid</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
LYSTEDA TABS (<i>Use tranexamic acid</i>)	NF	
<i>tranexamic acid tabs</i>	1B	
<i>tranexamic acid soln 1000 MG/10ML</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital elix</i>	1B	
<i>phenobarbital tabs 15 MG, 16.2 MG, 30 MG, 32.4 MG, 64.8 MG, 97.2 MG, 100 MG</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 ea daily);PA
SILENOR (<i>Use doxepin hcl (sleep)</i>)	NF	QL(1 ea daily);PA
Non-Barbiturate Hypnotics		
AMBIEN TABS (<i>Use zolpidem tartrate</i>)	NF	QL(1 ea daily);AL(At least 18 yrs old)
AMBIEN CR TBCR (<i>Use zolpidem tartrate</i>)	NF	QL(1 ea daily)
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 ea daily);AL(At least 18 yrs old);ST
HALCION .25 MG (<i>Use triazolam</i>)	NF	
LUNESTA (<i>Use eszopiclone</i>)	NF	QL(1 ea daily);AL(At least 18 yrs old);ST
RESTORIL (<i>Use temazepam</i>)	NF	QL(1 ea daily)
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 ea daily)
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 ea daily)
<i>triazolam</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>zaleplon 10 MG</i>	1B	QL(2 ea daily);AL(At least 18 yrs old)
<i>zaleplon 5 MG</i>	1B	QL(1 ea daily);AL(At least 18 yrs old)
<i>zolpidem tartrate tbc</i>	1B	QL(1 ea daily)
<i>zolpidem tartrate tabs</i>	1A	QL(1 ea daily);AL(At least 18 yrs old)
Orexin Receptor Antagonists		
BELSOMRA	3	PA
Selective Melatonin Receptor Agonists		
HETLIOZ CAPS	3	QL(1 ea daily);PA
<i>ramelteon</i>	1B	QL(1 ea daily);AL(At least 18 yrs old)
ROZEREM (<i>Use ramelteon</i>)	NF	QL(1 ea daily);AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil tabs</i>	1B	
FIBERCON TABS (<i>Use calcium polycarbophil</i>)	NF	
Laxative Combinations		
GOLYTELY SOLR 236 GM-6.74 GM-2.97 GM-5.86 GM-22.74 GM (<i>Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	0	
MOVIPREP 100 GM-4.7 GM-5.9 GM-1.015 GM-2.691 GM-7.5 GM (<i>Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	NF	

Drug Name	Drug Tier	Requirement s/Limits
NULYTELY 420 GM-5.72 GM-1.48 GM-11.2 GM (Use peg 3350-potassium chloride-sod bicarbonate-sod chloride)	3	PA
NULYTELY/FLAVOR PACKS 420 GM-5.72 GM-1.48 GM-11.2 GM (Use peg 3350-potassium chloride-sod bicarbonate-sod chloride)	3	PA
peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid 100 GM-4.7 GM-5.9 GM-1.015 GM-2.691 GM-7.5 GM	1B	
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr 236 GM-6.74 GM-2.97 GM-5.86 GM-22.74 GM	0	
peg 3350-potassium chloride-sod bicarbonate-sod chloride 420 GM-5.72 GM-1.48 GM-11.2 GM	1B	PA
Laxatives - Miscellaneous		
<i>lactulose soln</i>	1B	
Saline Laxatives		
OSMOPREP 1.102 GM-0.398 GM	3	PA
Stimulant Laxatives		
<i>bisacodyl tbec</i>	1A	
<i>bisacodyl supp</i>	1A	
DULCOLAX SUPP (Use <i>bisacodyl</i>)	NF	

Drug Name	Drug Tier	Requirement s/Limits
DULCOLAX TBEC (Use <i>bisacodyl</i>)	NF	
DULCOLAX PINK LAXATIVE TBEC (Use <i>bisacodyl</i>)	NF	
Surfactant Laxatives		
COLACE CAPS 100 MG (Use <i>docusate sodium</i>)	NF	
<i>docusate calcium</i>	1A	
<i>docusate sodium caps 100 MG, 250 MG</i>	1A	
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) soln .5 %, 1 %, 2 %</i>	1B	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin solr</i>	1B	
<i>azithromycin tabs 250 MG</i>	1B	QL(6 ea per fill retail,6 per fill mail MG)
<i>azithromycin tabs 500 MG</i>	1B	QL(4 ea per fill retail,4 per fill mail MG)
<i>azithromycin tabs 600 MG</i>	1B	QL(0.286 ea daily)
<i>azithromycin susr</i>	1B	
<i>azithromycin pack</i>	1B	
ZITHROMAX TABS 250 MG (Use <i>azithromycin</i>)	NF	QL(6 ea per fill retail,6 per fill mail MG)
ZITHROMAX PACK (Use <i>azithromycin</i>)	NF	
ZITHROMAX TABS 500 MG (Use <i>azithromycin</i>)	NF	QL(4 ea per fill retail,4 per fill mail MG)

Drug Name	Drug Tier	Requirements/Limits
ZITHROMAX SUSR (Use azithromycin)	NF	
ZITHROMAX SOLR (Use azithromycin)	NF	
ZITHROMAX TRI-PAK TABS (Use azithromycin)	NF	QL(4 ea per fill retail,4 per fill mail MG)
ZITHROMAX Z-PAK TABS (Use azithromycin)	NF	QL(6 ea per fill retail,6 per fill mail MG)
Clarithromycin		
clarithromycin susr	1B	
clarithromycin tb24	1B	
clarithromycin tabs	1B	
Erythromycins		
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	NF	
ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	NF	
ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	3	
erythromycin base tbec	1B	
erythromycin base cpep	3	
erythromycin base tabs	3	
erythromycin ethylsuccinate tabs	3	
erythromycin ethylsuccinate susr	1B	
Fidaxomicin		
DIFICID TABS	2	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
CAYA DPRH	0	
DUREX EXTRA SENSITIVE DEVI	0	QL(2 ea daily)
FANTASY LUBRICATED MISC	0	QL(2 ea daily)
FANTASY LUBRICATED/SPERMIC IDE MISC	0	QL(2 ea daily)
FC2 FEMALE CONDOM	0	QL(4 ea per fill retail,4 per fill mail)
FEMCAP DEVI 0	0	
KAMELEON LUBRICATED MISC	0	QL(2 ea daily)
KIMONO COLORS DEVI	0	QL(2 ea daily)
KIMONO LUBRICATED MISC	0	QL(2 ea daily)
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PLUS SPERMICIDE/LUBRICA TED MISC	0	QL(2 ea daily)
KIMONO PS LUBRICATED MISC	0	QL(2 ea daily)
KIMONO PS PLUS SPERMICIDE/LUBRICA TED MISC	0	QL(2 ea daily)
KIMONO SENSATION LUBRICATED MISC	0	QL(2 ea daily)
KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
KIMONO SPECIAL DEVI	0	QL(2 ea daily)
K-Y ME & YOU EXTRA LUBRICATED DEVI	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
K-Y ME & YOU INTENSE DEVI	0	QL(2 ea daily)
MAXX LUBRICATED MISC	0	QL(2 ea daily)
MAXX PLUS SPERMICIDE LUBRICATED MISC	0	QL(2 ea daily)
OMNIFLEX DIAPHRAGM	0	
PREMIUM CONDOMS LUBRICATED MISC	0	QL(2 ea daily)
REALITY LATEX CONDOMS/LUBRICATED MISC	0	QL(2 ea daily)
REALITY LATEX/ULTRA TEXTURED DEVI	0	QL(2 ea daily)
REALITY LATEX/ULTRA THIN DEVI	0	QL(2 ea daily)
TRUSTEX COLOR CONDOMS + LUBE MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED EXTRALARGE MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED/RIBBED/STUDED MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED/SPERMICIDE EXTRA LARGE MISC	0	QL(2 ea daily)
TRUSTEX LUBRICATED/SPERMICIDE EXTRA STRENGTH MISC	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	0	QL(2 ea daily)
TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	0	QL(2 ea daily)
TRUSTEX/RIA LUBRICATED MISC	0	QL(2 ea daily)
TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	0	QL(2 ea daily)
TRUSTEX/RIA LUBRICATED/SPERMICIDE MISC	0	QL(2 ea daily)
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	0	
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	0	
Diabetic Supplies		
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	3	QL(1 ea per 365 days retail);PA
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.072 ea daily);PA
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	3	QL(1 ea per 365 days retail);PA

Drug Name	Drug Tier	Requirements/Limits
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	3	QL(0.072 ea daily);PA
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	3	QL(1 ea per 365 days retail);PA
FREESTYLE LIBRE/SENSOR/FLASH MONITORING SYSTEM	3	QL(0.1 ea daily);PA
LANCETS 28G	1B	QL(6.6667 ea daily)
LANCETS ULTRA FINE	1B	QL(6.6667 ea daily)
PHARMACIST CHOICE ULTRA THIN LANCETS 33G	1B	QL(6.6667 ea daily)
SAFETY SEAL LANCETS 28G	1B	QL(6.6667 ea daily)
SAFETY SEAL LANCETS 30G	1B	QL(6.6667 ea daily)
SELECT LANCETS	1B	6.66/day
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	1B	
Parenteral Therapy Supplies		
SELECT INSULIN SYRINGES	1B	5/day
TRUEPLUS PEN NEEDLES 31GX5MM	1B	QL(5 ea daily);RX/OTC
ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32G X 1/4"/SHARPS CONTAIN	1B	QL(5 ea daily)
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ml daily);PA

Drug Name	Drug Tier	Requirements/Limits
EMGALITY SOAJ	2	QL(0.07 ml daily);PA
EMGALITY SOSY 120 MG/ML	2	QL(0.07 ml daily);PA
EMGALITY SOSY 100 MG/ML	3	QL(0.1 ml daily);PA
UBRELVY	3	QL(10 ea per 30 days retail);ST
Migraine Combinations		
CAFERGOT TABS 1 MG-100 MG (<i>Use ergotamine w/ caffeine</i>)	NF	QL(1.5 ea daily)
<i>ergotamine w/ caffeine tabs 1 MG-100 MG</i>	1B	QL(1.5 ea daily)
<i>sumatriptan-naproxen sodium 85 MG-500 MG</i>	3	QL(10 ea per 30 days retail,10 ea per 30 days mail)
TREXIMET 85 MG-500 MG (<i>Use sumatriptan-naproxen sodium</i>)	NF	QL(10 ea per 30 days retail,10 ea per 30 days mail)
Migraine Products		
D.H.E. 45 SOLN IJ (<i>Use dihydroergotamine mesylate</i>)	NF	
<i>dihydroergotamine mesylate soln na 4 MG/ML</i>	1B	
ERGOMAR SUBL	3	QL(0.667 ea daily)
MIGRANAL SOLN NA (<i>Use dihydroergotamine mesylate</i>)	NF	
Serotonin Agonists		
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 ea daily);AL(At least 12 yrs old);ST
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 ea daily);AL(At least 12 yrs old);ST

Drug Name	Drug Tier	Requirement s/Limits
AMERGE (Use naratriptan hcl)	NF	QL(0.3 ea daily);AL(At least 18 yrs old)
eletriptan hydrobromide	1B	QL(0.2 ea daily);AL(At least 18 yrs old);ST
FROVA (Use frovatriptan succinate)	NF	QL(0.4 ea daily);AL(At least 18 yrs old);ST
frovatriptan succinate	1B	QL(0.4 ea daily);AL(At least 18 yrs old);ST
IMITREX 5 MG/ACT, 20 MG/ACT (Use sumatriptan)	NF	QL(0.2 ea daily);AL(At least 18 yrs old)
IMITREX TABS (Use sumatriptan succinate)	NF	QL(0.3 ea daily);AL(At least 18 yrs old)
IMITREX SOLN 6 MG/0.5ML (Use sumatriptan succinate)	NF	QL(0.134 ml daily);AL(At least 18 yrs old)
IMITREX STATDOSE REFILL SOCT (Use sumatriptan succinate)	NF	QL(0.134 ml daily);AL(At least 18 yrs old)
IMITREX STATDOSE SYSTEM SOAJ (Use sumatriptan succinate)	NF	QL(0.134 ml daily);AL(At least 18 yrs old)
MAXALT TABS 10 MG (Use rizatriptan benzoate)	NF	QL(0.6 ea daily);AL(At least 6 yrs old)
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)	NF	QL(0.6 ea daily);AL(At least 6 yrs old)
naratriptan hcl	1B	QL(0.3 ea daily);AL(At least 18 yrs old)
RELPAK (Use eletriptan hydrobromide)	NF	QL(0.2 ea daily);AL(At least 18 yrs old);ST

Drug Name	Drug Tier	Requirement s/Limits
rizatriptan benzoate tabs 5 MG	1B	QL(0.4 ea daily);AL(At least 6 yrs old)
rizatriptan benzoate tabs 10 MG	1B	QL(0.6 ea daily);AL(At least 6 yrs old)
rizatriptan benzoate tbdp 10 MG	1B	QL(0.6 ea daily);AL(At least 6 yrs old)
rizatriptan benzoate tbdp 5 MG	1B	QL(0.4 ea daily);AL(At least 6 yrs old)
sumatriptan	1B	QL(0.2 ea daily);AL(At least 18 yrs old)
sumatriptan succinate soln 6 MG/0.5ML	1B	QL(0.134 ml daily);AL(At least 18 yrs old)
sumatriptan succinate soaj	1B	QL(0.134 ml daily);AL(At least 18 yrs old)
sumatriptan succinate soct	1B	QL(0.134 ml daily);AL(At least 18 yrs old)
sumatriptan succinate sosy 6 MG/0.5ML	1B	QL(0.134 ml daily);AL(At least 18 yrs old)
sumatriptan succinate tabs	1B	QL(0.3 ea daily);AL(At least 18 yrs old)
zolmitriptan soln	1B	QL(0.2 ea daily);AL(At least 12 yrs old);ST
zolmitriptan tabs	1B	QL(0.3 ea daily);AL(At least 12 yrs old);ST
zolmitriptan tbdp	1B	QL(0.3 ea daily);AL(At least 12 yrs old);ST
ZOMIG TABS 2.5 MG, 5 MG (Use zolmitriptan)	NF	QL(0.3 ea daily);AL(At least 12 yrs old);ST

Drug Name	Drug Tier	Requirement s/Limits
ZOMIG SOLN (<i>Use zolmitriptan</i>)	3	QL(0.2 ea daily);AL(At least 12 yrs old);ST
ZOMIG ZMT TBDP (<i>Use zolmitriptan</i>)	NF	QL(0.3 ea daily);AL(At least 12 yrs old);ST
MINERALS & ELECTROLYTES		
Bicarbonates		
<i>sodium acetate soln</i>	1B	
SODIUM ACETATE SOLN (<i>Use sodium acetate</i>)	1B	
Calcium		
<i>calcium chloride (dihydrate) soln</i>	1B	
Electrolyte Mixtures		
<i>dextrose in lactated ringers</i>	1B	
IONOSOL-MB/DEXTROSE 5% 23 MEQ/L-5 %-3 MMEQ/L-22 MEQ/L-25 MEQ/L-3 MEQ/L-20 MEQ/L	1B	
ISOLYTE-P/DEXTROSE 5% 20 MEQ/L-5 %-23 MEQ/L-3 MEQ/L-23 MEQ/L-25 MEQ/L-3 MEQ/L	1B	
ISOLYTE-S 5 MEQ/L-27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L	1B	
KCL 0.3%/D5W/NACL 0.9% 0.9 %-5 %-40 MEQ/L	1B	
<i>lactated ringer's 28 MEQ/L-3 MEQ/L-109 MEQ/L-130 MEQ/L-4 MEQ/L</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
NORMOSOL-M IN D5W 13 MEQ/L-5 %-16 MEQ/L-40 MEQ/L-40 MEQ/L-3 MEQ/L	1B	
NORMOSOL-M/D5W 13 MEQ/L-5 %-16 MEQ/L-40 MEQ/L-40 MEQ/L-3 MEQ/L	1B	
NORMOSOL-R 98 MEQ/L-27 MEQ/L-23 MEQ/L-3 MEQ/L-5 MEQ/L-140 MEQ/L	1B	
PLASMA-LYTE A 5 MEQ/L-27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L	1B	
PLASMA-LYTE-148 5 MEQ/L-27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L	1B	
<i>potassium chloride in dextrose 20 MEQ/L-5 %</i>	1B	
<i>potassium chloride in dextrose & sodium chloride 0.2 %-5 %-20 MEQ/L, 0.45 %-5 %-0.075 %, 0.45 %-5 %-10 MEQ/L, 0.45 %-5 %-20 MEQ/L, 0.45 %-5 %-30 MEQ/L, 0.45 %-5 %-40 MEQ/L, 0.9 %-5 %-0.15 %, 0.9 %-5 %-20 MEQ/L, 0.9 %-5 %-40 MEQ/L</i>	1B	
<i>potassium chloride in nacl</i>	1B	
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	1B	

Drug Name	Drug Tier	Requirement s/Limits
POTASSIUM CHLORIDE/SODIUM CHLORIDE (Use potassium chloride in nacl)	NF	
ringer's 4 MEQ/L-4 MEQ/L-155 MEQ/L-147 MEQ/L	1B	
Fluoride		
sodium fluoride chew .25 MG, .5 MG, 1 MG, 2.2 MG	0	QL(1 ea daily)
Magnesium		
magnesium sulfate ij 50 %	1B	
Phosphate		
potassium phosphates 224 MG/ML-236 MG/ML	1B	
Potassium		
K-TAB TBCR (Use potassium chloride)	NF	
potassium acetate soln 2 MEQ/ML	1B	
potassium bicarbonate tbeF	1B	
potassium chloride soln or 10 %	1B	
potassium chloride cpcr	1B	
potassium chloride tbcR 8 MEQ, 10 MEQ	1B	
potassium chloride pack or 20 MEQ	1B	PA
POTASSIUM CHLORIDE SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML (Use potassium chloride)	1B	

Drug Name	Drug Tier	Requirement s/Limits
potassium chloride microencapsulated crystals er	1B	
Sodium		
sodium chloride soln iv .45 %, .9 %, 3 %, 4 MEQ/ML, 5 %	1B	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
CUPRIMINE CAPS (Use penicillamine)	NF	PA
DEPEN TITRATABS TABS (Use penicillamine)	NF	QL(8 ea daily)
penicillamine tabs	1B	QL(8 ea daily)
penicillamine caps	1B	PA
SYPRINE (Use trientine hcl)	NF	QL(8 ea daily);SP;PA
trientine hcl	4	QL(8 ea daily);SP;PA
Immunomodulators		
lenalidomide 20 MG	4	PA
lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	4	QL(1 ea daily);SP;PA
REVLIMID 20 MG	4	PA
REVLIMID 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	4	QL(1 ea daily);SP;PA
THALOMID	4	QL(3 ea daily);SP;PA
Immunosuppressive Agents		
ATGAM	4	SP;PA
azathioprine tabs	1B	
AZATHIOPRINE	1B	
CELLCEPT TABS (Use mycophenolate mofetil)	NF	

Drug Name	Drug Tier	Requirements/Limits
CELLCEPT CAPS (Use mycophenolate mofetil)	NF	
cyclosporine caps	1B	
cyclosporine soln iv 50 MG/ML	1B	
cyclosporine modified (for microemulsion) caps	1B	
cyclosporine modified (for microemulsion) soln	1B	
everolimus (immunosuppressant) .25 MG, .5 MG, .75 MG	4	QL(20 ea daily);SP;PA
IMURAN TABS (Use azathioprine)	NF	
mycophenolate mofetil caps	1B	
mycophenolate mofetil tabs	1B	
mycophenolate sodium	1B	
MYFORTIC (Use mycophenolate sodium)	NF	
NEORAL CAPS (Use cyclosporine modified (for microemulsion))	NF	
NEORAL SOLN (Use cyclosporine modified (for microemulsion))	NF	
NULOJIX	4	SP;PA
PROGRAF CAPS (Use tacrolimus)	NF	
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
RAPAMUNE TABS (Use sirolimus)	NF	

Drug Name	Drug Tier	Requirements/Limits
SANDIMMUNE SOLN IV 50 MG/ML (Use cyclosporine)	NF	
SANDIMMUNE CAPS (Use cyclosporine)	NF	
SIMULECT	3	
sirolimus tabs	1B	
tacrolimus caps	1B	
THYMOGLOBULIN	4	SP;PA
ZORTRESS .25 MG, .5 MG, .75 MG (Use everolimus (immunosuppressant))	NF	QL(20 ea daily);SP;PA
Irrigation Solutions		
irrigation solutions, physiological 30 MG/100ML-222 MG/100ML-502 MG/100ML-37 MG/100ML-526 MG/100ML	1B	
lactated ringer's (irrigation) 20 MG/100ML-310 MG/100ML-30 MG/100ML-600 MG/100ML	1B	
ringer's irrigation 4 MEQ/L-4.5 MEQ/L-156 MEQ/L-147.5 MEQ/L	1B	
water for irrigation, sterile	1B	
Potassium Removing Agents		
sodium polystyrene sulfonate susp or 15 GM/60ML	1B	
sodium polystyrene sulfonate powd	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ml daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
Anti-infectives - Throat		
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
DEBACTEROL 50 %-30 %	2	
PERIDEX (Use <i>chlorhexidine gluconate (mouth-throat)</i>)	NF	
Dental Products		
<i>stannous fluoride conc</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
EVOXAC (Use <i>cevimeline hcl</i>)	NF	
<i>pilocarpine hcl (oral)</i>	1B	
SALAGEN (Use <i>pilocarpine hcl (oral)</i>)	NF	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl chew</i>	1A	RX/OTC
Prenatal Vitamins		

Drug Name	Drug Tier	Requirements/Limits
CLASSIC PRENATAL TABS 200 MG-60 MG-4 MG-800 MCG-400 UNIT-8 MCG-2 MG-20 MG-8000 UNIT-28 MG-1.7 MG-100 MG-150 MCG-30 UNIT	2	QL(1 ea daily)
CVS PRENATAL TABS	2	QL(1 ea daily)
EQL PRENATAL FORMULA TABS 4000 UNIT-120 MG-2.6 MG-30 UNIT-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG	2	QL(1 ea daily)
GNP PRENATAL TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
GOODSENSE PRENATAL VITAMINS TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
KP PRENATAL MULTIVITAMINS TABS 30 UNIT-120 MG-2.6 MG-0.8 MG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
MASONATAL TABS 8 MCG-120 MG-800 MCG-1.8 MG-20 MG-2.6 MG-1.7 MG-28 MG-10 MCG-13.5 MG-25 MG-244 MG-600 MCG	2	QL(1 ea daily)
M-NATAL PLUS TABS 22 UNIT-120 MG-10 MG-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG-200 MG	2	QL(1 ea daily);RX/OTC
MULTI PRENATAL TABS 200 MG-400 UNIT-100 MG-2.6 MG-800 MCG-4 MCG-1.7 MG-18 MG-4000 UNIT-27 MG-1.5 MG-25 MG-11 UNIT	2	QL(1 ea daily)
NEONATAL COMPLETE TABS	2	QL(1 ea daily);RX/OTC
NEONATAL PLUS TABS 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-5 MG-27 MG-10 MCG-9.2 MG-0.2 MG-2 MG-25 MG-200 MG-1200 MCG-2 MG	2	QL(1 ea daily);RX/OTC

Drug Name	Drug Tier	Requirements/Limits
NEONATAL PRENATAL VITAMIN TABS 0.05 MG-50 MG-1 MG-0.8 MG-400 UNIT-2 MCG-4000 UNIT-2 MG-10 MG-27 MG-3 MG-0.15 MG-0.085 MG-0.01 MG-0.15 MG-250 MG-0.835 MG, 0.2 MG-100 MG-2.6 MG-0.8 MG-10 MCG-4 MCG-1.7 MG-5 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-4.6 MG-1200 MCG-2 MG, 0.2 MG-100 MG-2.6 MG-800 MCG-1.5 MG-10 MCG-4 MCG-1.7 MG-5 MG-1.8 MG-1200 MCG-27 MG-263 MG-25 MG-4.6 MG-2 MG, 0.2 MG-120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-9.2 MG-1200 MCG-2 MG, 0.2 MG-120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG, 0.2 MG-20 MG-10 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-9.2 MG-2 MG, 10 MG-120 MG-10 MG-1	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirement s/Limits
MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG, 11 UNIT-100 MG-2.6 MG-0.8 MG-400 UNIT-4 MCG-1.7 MG-18 MG-4000 UNIT-27 MG-1.5 MG-25 MG-263 MG, 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-27 MG-10 MCG-9.9 MG-2 MG-25 MG-200 MG-1200 MCG, 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-400 UNIT-22 MG-27 MG-2 MG-25 MG-200 MG-4000 UNIT, 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-5 MG-27 MG-10 MCG-9.2 MG-0.2 MG-2 MG-25 MG-200 MG-1200 MCG-2 MG, 1200 MCG-120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-9.9 MG, 160 MG-100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-4000 UNIT-27 MG-1.84 MG-25 MG-200 MG-11 UNIT, 20 MG-85 MG-1.9 MG-1000 MCG-15 MCG-2.6 MCG-27		

Drug Name	Drug Tier	Requirement s/Limits
MG-330 MCG-44 MG, 200 MG-100 MG-1 MG-1.6 MG-20 MG-3.1 MG-12 MCG-1.6 MG-27 MG-10 MCG-30 UNIT-2 MG-10 MG, 200 MG-100 MG-2.6 MG-5 MG-800 MCG-10 MCG-4 MCG-1.7 MG-18 MG-1200 MCG-27 MG-1.5 MG-25 MG, 200 MG-120 MG-10 MG-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG-22 MG, 200 MG-120 MG-10 MG-22 UNIT-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG, 200 MG-400 UNIT-100 MG-2.6 MG-800 MCG-4 MCG-1.7 MG-18 MG-4000 UNIT-27 MG-1.5 MG-25 MG-11 UNIT, 200 MG-400 UNIT-3 MG-100 MCG-15 UNIT-800 MCG-2 MG-10 MCG-2000 UNIT-3 MG-20 MG-10 MG-27 MG-2 MG-15 MG-60 MG-100 MG-2 MG, 200 MG-60 MG-4 MG-800 MCG-400 UNIT-8 MCG-2 MG-20 MG-8000 UNIT-28 MG-1.7 MG-100 MG-150 MCG-30		

Drug Name	Drug Tier	Requirements/Limits
UNIT, 22 MG-120		
MG-10 MG-1 MG-400		
UNIT-12 MCG-3		
MG-20 MG-4000		
UNIT-27 MG-200		
MG-1.84 MG-25 MG-2		
MG, 22 UNIT-120		
MG-10 MG-1 MG-400		
UNIT-12 MCG-3		
MG-20 MG-4000		
UNIT-27 MG-1.84		
MG-25 MG-2 MG-200		
MG, 25 MG-100		
MG-2.6 MG-11		
MG-0.8 MG-400		
UNIT-4 MCG-1.7		
MG-18 MG-4000		
UNIT-27 MG-200		
MG-1.5 MG, 30		
UNIT-120 MG-2.6		
MG-0.8 MG-400		
UNIT-8 MCG-1.7		
MG-20 MG-28		
MG-200 MG-1.8		
MG-25 MG-4000		
UNIT, 30 UNIT-120		
MG-2.6 MG-800		
MCG-400 UNIT-8		
MCG-1.7 MG-20		
MG-28 MG-1.8 MG-25		
MG-4000 UNIT-200		
MG, 30 UNIT-120		
MG-2.6 MG-800		
MCG-400 UNIT-8		
MCG-1.7 MG-20		
MG-28 MG-200		
MG-1.8 MG-25		
MG-4000 UNIT, 30		
UNIT-120 MG-2.6		
MG-800 MCG-400		
UNIT-8 MCG-4000		
UNIT-1.7 MG-20		
MG-28 MG-200		
MG-1.8 MG-25 MG,		
30 UNIT-120 MG-800		

Drug Name	Drug Tier	Requirements/Limits
MCG-2.6 MG-400		
UNIT-8 MCG-1.7		
MG-20 MG-28		
MG-200 MG-1.8		
MG-25 MG-4000		
UNIT, 4000 UNIT-100		
MG-2.6 MG-800		
MCG-400 UNIT-4		
MCG-1.7 MG-18		
MG-27 MG-1.5 MG-25		
MG-263 MG-11 UNIT,		
4000 UNIT-120		
MG-2.6 MG-30		
UNIT-800 MCG-400		
UNIT-8 MCG-1.7		
MG-20 MG-28		
MG-200 MG-1.8		
MG-25 MG, 4000		
UNIT-120 MG-2.6		
MG-800 MCG-400		
UNIT-8 MCG-1.7		
MG-20 MG-28 MG-1.8		
MG-25 MG-200		
MG-30 UNIT, 4000		
UNIT-120 MG-2.6		
MG-800 MCG-400		
UNIT-8 MCG-1.7		
MG-20 MG-28		
MG-200 MG-1.8		
MG-25 MG-30 UNIT,		
45 MCG-120 MG-50		
MG-1000 MCG-20		
MCG-10 MCG-3.4		
MG-55 MG-20		
MG-1720 MCG-27		
MG-200 MG-3		
MG-200 MG-25		
MG-1.3 MG-150		
MCG-30 MG-2.6		
MG-50 MCG-70 MCG,		
50 MCG-50 MG-1		
MG-800 MCG-400		
UNIT-2 MCG-2 MG-10		
MG-4000 UNIT-27		
MG-300 MG-3		

Drug Name	Drug Tier	Requirements/Limits
MG-150 MCG-88 MCG-150 MCG-835 MCG-10 MCG, 70 MCG-100 MG-12 MG-30 MCG-1 MG-2000 UNIT-12 MCG-1.7 MG-50 MG-20 MG-6 MG-27 MG-140 MG-1.5 MG-50 MG-2 MG-30 UNIT-15 MG-3000 UNIT-50 MCG-220 MCG-30 MCG, 70 MCG-120 MG-50 MG-1000 MCG-20 MCG-10 MCG-3.4 MG-55 MG-20 MG-1500 MCG-27 MG-200 MG-3 MG-200 MG-25 MG-150 MCG-30 MG-2.6 MG-45 MCG-50 MCG, 8 MCG-120 MG-800 MCG-1.8 MG-20 MG-2.6 MG-1.7 MG-28 MG-10 MCG-13.5 MG-25 MG-244 MG-600 MCG		
NEONATAL VITAMIN TABS 0.2 MG-100 MG-2.6 MG-800 MCG-1.5 MG-10 MCG-4 MCG-1.7 MG-5 MG-1.8 MG-1200 MCG-27 MG-263 MG-25 MG-4.6 MG-2 MG	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
NIVA-PLUS TABS 200 MG-120 MG-10 MG-22 UNIT-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG	2	QL(1 ea daily);RX/OTC
ONE VITE WOMENS PRENATALVITAMIN TABS 0.2 MG-100 MG-2.6 MG-0.8 MG-10 MCG-4 MCG-1.7 MG-5 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-4.6 MG-1200 MCG-2 MG	2	QL(1 ea daily)
ONE VITE WOMENS PRENATALVITAMIN PLUS TABS 0.2 MG-120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-9.2 MG-1200 MCG-2 MG	2	QL(1 ea daily);RX/OTC
PRENATAL TABS	2	QL(1 ea daily)
PRENATAL LOW IRON TABS	2	QL(1 ea daily)
PRENATAL MULTIVITAMIN TABS 30 UNIT-120 MG-800 MCG-2.6 MG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
PRENATAL ONE DAILY TABS 200 MG-400 UNIT-3 MG-100 MCG-15 UNIT-800 MCG-2 MG-10 MCG-2000 UNIT-3 MG-20 MG-10 MG-27 MG-2 MG-15 MG-60 MG-100 MG-2 MG	2	QL(1 ea daily)
PRENATAL PLUS TABS 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-400 UNIT-22 MG-27 MG-2 MG-25 MG-200 MG-4000 UNIT	2	QL(1 ea daily);RX/OTC
PRENATAL PLUS VITAMIN ANDMINERAL TABS 12 MCG-120 MG-1 MG-1.84 MG-20 MG-10 MG-3 MG-27 MG-10 MCG-9.9 MG-2 MG-25 MG-200 MG-1200 MCG	2	QL(1 ea daily);RX/OTC
PRENATAL VITAMIN TABS 50 MCG-50 MG-1 MG-800 MCG-400 UNIT-2 MCG-2 MG-10 MG-4000 UNIT-27 MG-300 MG-3 MG-150 MCG-88 MCG-150 MCG-835 MCG-10 MCG	2	QL(1 ea daily)
PRENATAL VITAMIN & MINERAL TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-4000 UNIT-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
PRENATAL VITAMIN/IRON TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
PRENATAL VITAMINS TABS	2	QL(1 ea daily)
PRENATAL VITAMINS PLUS LOW IRON TABS 22 MG-120 MG-10 MG-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-200 MG-1.84 MG-25 MG-2 MG	2	QL(1 ea daily);RX/OTC
PRENATRIX TABS 45 MCG-120 MG-50 MG-1000 MCG-20 MCG-10 MCG-3.4 MG-55 MG-20 MG-1720 MCG-27 MG-200 MG-3 MG-200 MG-25 MG-1.3 MG-150 MCG-30 MG-2.6 MG-50 MCG-70 MCG	2	QL(1 ea daily);RX/OTC
PRENATRYL TABS 70 MCG-120 MG-50 MG-1000 MCG-20 MCG-10 MCG-3.4 MG-55 MG-20 MG-1500 MCG-27 MG-200 MG-3 MG-200 MG-25 MG-150 MCG-30 MG-2.6 MG-45 MCG-50 MCG	2	QL(1 ea daily);RX/OTC

Drug Name	Drug Tier	Requirements/Limits
PREPLUS TABS 22 UNIT-120 MG-10 MG-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG-200 MG	2	QL(1 ea daily);RX/OTC
PX PRENATAL MULTIVITAMINS TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
QC PRENATAL TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
RA PRENATAL TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
RA PRENATAL FORMULA/FOLICACID TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
RIGHT STEP PRENATAL TABS 0.05 MG-50 MG-1 MG-0.8 MG-400 UNIT-2 MCG-4000 UNIT-2 MG-10 MG-27 MG-3 MG-0.15 MG-0.085 MG-0.01 MG-0.15 MG-250 MG-0.835 MG	2	QL(1 ea daily)
SM PRENATAL VITAMINS TABS 30 UNIT-120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT	2	QL(1 ea daily)
THERANATAL CORE NUTRITION TABS 70 MCG-100 MG-12 MG-30 MCG-1 MG-2000 UNIT-12 MCG-1.7 MG-50 MG-20 MG-6 MG-27 MG-140 MG-1.5 MG-50 MG-2 MG-30 UNIT-15 MG-3000 UNIT-50 MCG-220 MCG-30 MCG	2	QL(1 ea daily);RX/OTC
TRICARE TABS 200 MG-100 MG-1 MG-1.6 MG-20 MG-3.1 MG-12 MCG-1.6 MG-27 MG-10 MCG-30 UNIT-2 MG-10 MG	2	QL(1 ea daily);RX/OTC
VITATHELY/GINGER TABS 20 MG-85 MG-1.9 MG-1000 MCG-15 MCG-2.6 MCG-27 MG-330 MCG-44 MG	2	QL(1 ea daily);RX/OTC

Drug Name	Drug Tier	Requirements/Limits
VOL-PLUS TABS 200 MG-120 MG-10 MG-1 MG-400 UNIT-12 MCG-3 MG-20 MG-4000 UNIT-27 MG-1.84 MG-25 MG-2 MG-22 MG	2	QL(1 ea daily);RX/OTC
WESTAB PLUS TABS 1200 MCG-120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-9.9 MG	2	QL(1 ea daily);RX/OTC
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen tabs 10 MG, 20 MG</i>	1B	
<i>carisoprodol tabs</i>	1B	
<i>chlorzoxazone tabs 500 MG</i>	1B	QL(6 ea daily)
<i>cyclobenzaprine hcl tabs 5 MG, 10 MG</i>	1A	QL(3 ea daily)
<i>metaxalone 800 MG</i>	1B	QL(4 ea daily)
<i>methocarbamol tabs</i>	1B	
<i>orphenadrine citrate tb12</i>	1B	QL(2 ea daily)
ROBAXIN-750 TABS (Use <i>methocarbamol</i>)	NF	
SKELAXIN (Use <i>metaxalone</i>)	NF	QL(4 ea daily)
SOMA TABS (Use <i>carisoprodol</i>)	NF	
<i>tizanidine hcl tabs</i>	1B	
<i>tizanidine hcl caps</i>	1B	
ZANAFLEX CAPS (Use <i>tizanidine hcl</i>)	NF	
ZANAFLEX TABS 4 MG (Use <i>tizanidine hcl</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
Direct Muscle Relaxants		
DANTRIUM CAPS 25 MG, 50 MG (Use <i>dantrolene sodium</i>)	NF	QL(4 ea daily)
<i>dantrolene sodium caps</i>	1B	QL(4 ea daily)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	RX/OTC
<i>olopatadine hcl (nasal)</i>	1B	
PATANASE (Use <i>olopatadine hcl (nasal)</i>)	NF	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) .03 %</i>	1B	QL(1 ml daily)
<i>ipratropium bromide (nasal) .06 %</i>	1B	
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
FLONASE ALLERGY RELIEF SUSP (Use <i>fluticasone propionate (nasal)</i>)	NF	Limit 2 inhalers per month;QL(32 ml per 30 days retail);RX/OTC
FLONASE ALLERGY RELIEF CHILDRENS SUSP (Use <i>fluticasone propionate (nasal)</i>)	NF	Limit 2 inhalers per month;QL(32 ml per 30 days retail);RX/OTC
<i>flunisolide (nasal) .025 %</i>	1B	1 rtl pack lmt per fill
<i>fluticasone propionate (nasal) susp</i>	1B	Limit 2 inhalers per month;QL(32 ml per 30 days retail);RX/OTC
<i>mometasone furoate (nasal) susp</i>	1B	QL(1.14 gm daily);PA

Drug Name	Drug Tier	Requirements/Limits
NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	NF	
NASACORT ALLERGY 24HR CHILDRENS AERO (Use triamcinolone acetonide (nasal))	NF	
NASONEX SUSP (Use mometasone furoate (nasal))	NF	QL(1.14 gm daily);PA
<i>triamcinolone acetonide (nasal) aero</i>	1B	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RILUTEK TABS (Use riluzole)	NF	
<i>riluzole tabs</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX IJ	3	PA
DYSPORE	3	PA
XEOMIN	3	PA
NUTRIENTS		
Proteins		

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX 4.25%/DEXTROSE 10% 17 MEQ/L-10 GM/100ML-438 MG/100ML-880 MG/100ML-213 MG/100ML-17 MG/100ML-311 MG/100ML-170 MG/100ML-238 MG/100ML-204 MG/100ML-37 MEQ/L-247 MG/100ML-179 MG/100ML-77 MG/100ML-255 MG/100ML-489 MG/100ML-289 MG/100ML-247 MG/100ML	3	
CLINIMIX 4.25%/DEXTROSE 5% 17 MEQ/L-5 GM/100ML-438 MG/100ML-880 MG/100ML-213 MG/100ML-17 MG/100ML-311 MG/100ML-170 MG/100ML-238 MG/100ML-204 MG/100ML-37 MEQ/L-247 MG/100ML-179 MG/100ML-77 MG/100ML-255 MG/100ML-489 MG/100ML-289 MG/100ML-247 MG/100ML	3	

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX E 5%/DEXTROSE 20% 33 MG/100ML-20 GM/100ML-515 MG/100ML-1035 MG/100ML-250 MG/100ML-20 MG/100ML-365 MG/100ML-200 MG/100ML-280 MG/100ML-240 MG/100ML-290 MG/100ML-210 MG/100ML-90 MG/100ML-300 MG/100ML-575 MG/100ML-340 MG/100ML-290 MG/100ML-340 MG/100ML-59 MG/100ML-826 MG/100ML-261 MG/100ML-51 MG/100ML	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
LACRISERT	3	
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) soln</i>	1B	
<i>brimonidine tartrate-timolol maleate 0.2 %-0.5 %</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
COMBIGAN 0.2 %-0.5 % (Use <i>brimonidine tartrate-timolol maleate</i>)	2	
COSOPT (Use <i>dorzolamide hcl-timolol maleate</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl .5 %</i>	1B	
<i>timolol maleate (ophth) solg</i>	1B	
<i>timolol maleate (ophth) soln</i>	1B	
TIMOPTIC SOLN (Use <i>timolol maleate (ophth)</i>)	NF	
TIMOPTIC-XE SOLG (Use <i>timolol maleate (ophth)</i>)	NF	
Cycloplegic Mydriatics		
MYDRIACYL SOLN (Use <i>tropicamide</i>)	NF	
<i>tropicamide soln</i>	1B	
Miotics		
ISOPTO CARPINE SOLN (Use <i>pilocarpine hcl</i>)	NF	
PHOSPHOLINE IODIDE	3	
<i>pilocarpine hcl soln 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		
ALPHAGAN P (Use <i>brimonidine tartrate</i>)	NF	
<i>apraclonidine hcl</i>	1B	
<i>brimonidine tartrate</i>	1B	
IOPIDINE	3	
SIMBRINZA 1 %-0.2 %	3	PA
Ophthalmic Anti-infectives		
AZASITE	3	
BACIGUENT	3	
<i>bacitracin (ophthalmic)</i>	3	

Drug Name	Drug Tier	Requirements/Limits
BLEPH-10 SOLN (Use sulfacetamide sodium (ophth))	NF	
CILOXAN SOLN (Use ciprofloxacin hcl (ophth))	NF	
ciprofloxacin hcl (ophth) soln	1B	
erythromycin (ophth)	1B	
gatifloxacin (ophth)	1B	
gentamicin sulfate (ophth) soln	1B	
gentamicin sulfate (ophth) oint	1B	
KLARITY-A	3	
levofloxacin (ophth) .5 %	1B	
MOXEZA SOLN OP (Use moxifloxacin hcl (ophth))	NF	
moxifloxacin hcl (ophth) soln op	1B	
NATACYN	2	
neomycin-bacitracin zn-polymyxin 400 UNIT/GM-3.5 MG/GM-10000 UNIT/GM	1B	
OCUFLOX (Use ofloxacin (ophth))	NF	
ofloxacin (ophth)	1B	
polymyxin b-trimethoprim 0.1 %-10000 UNIT/ML	1B	
POLYTRIM 0.1 %-10000 UNIT/ML (Use polymyxin b-trimethoprim)	NF	
sulfacetamide sodium (ophth) soln	1B	

Drug Name	Drug Tier	Requirements/Limits
tobramycin (ophth) soln	1B	
TOBEX SOLN (Use tobramycin (ophth))	NF	
trifluridine	1B	
VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	NF	
ZIRGAN GEL	2	
ZYMAXID (Use gatifloxacin (ophth))	NF	
Ophthalmic Immunomodulators		
cyclosporine (ophth) emul	3	PA
RESTASIS EMUL (Use cyclosporine (ophth))	NF	PA
Ophthalmic Local Anesthetics		
ALCAINE (Use proparacaine hcl)	NF	
proparacaine hcl	1B	
Ophthalmic Nerve Growth Factors		
OXERVATE	4	PA
Ophthalmic Steroids		
ALREX SUSP	3	PA
dexamethasone sodium phosphate (ophth)	1B	
difluprednate	1B	PA
DUREZOL (Use difluprednate)	3	PA
fluorometholone (ophth) susp	1B	
FML OINT	3	PA
FML FORTE SUSP	3	PA
FML LIQUIFILM SUSP (Use fluorometholone (ophth))	NF	

Drug Name	Drug Tier	Requirement s/Limits
LOTEMAX SUSP (<i>Use loteprednol etabonate</i>)	NF	PA
LOTEMAX GEL (<i>Use loteprednol etabonate</i>)	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate susp</i>	1B	PA
<i>loteprednol etabonate gel</i>	1B	PA
MAXIDEX SUSP OP	3	PA
MAXITROL SUSP 10000 UNIT/ML-0.1 %-3.5 MG/ML (<i>Use neomycin-polymy-dexameth</i>)	NF	
MAXITROL OINT 10000 UNIT/GM-0.1 %-3.5 MG/GM (<i>Use neomycin-polymy-dexameth</i>)	NF	
<i>neomycin-polymy-dexameth susp 10000 UNIT/ML-0.1 %-3.5 MG/ML</i>	1B	
<i>neomycin-polymy-dexameth oint 10000 UNIT/GM-0.1 %-3.5 MG/GM</i>	1B	
<i>neomycin-polymyxin-hc (ophth) 10000 UNIT/ML-1 %-3.5 MG/ML</i>	1B	
PRED FORTE (<i>Use prednisolone acetate (ophth)</i>)	NF	
PRED MILD	3	PA
PRED-G SUSP 0.3 %-1 %	3	PA
<i>prednisolone acetate (ophth)</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone soln 10 %-0.23 %</i>	3	PA
TOBRADEX SUSP (<i>Use tobramycin-dexamethasone</i>)	NF	
<i>tobramycin-dexamethasone susp 0.3 %-0.1 %</i>	1B	
ZYLET 0.5 %-0.3 %	3	PA
Ophthalmics - Misc.		
ACULAR (<i>Use ketorolac tromethamine (ophth)</i>)	NF	
ACULAR LS (<i>Use ketorolac tromethamine (ophth)</i>)	NF	
ALOCRIAL	3	PA
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1B	
<i>bepotastine besilate</i>	3	PA
BEPREVE (<i>Use bepotastine besilate</i>)	3	PA
<i>bromfenac sodium (ophth)</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	
CYSTARAN	2	QL(2.143 ml daily);PA
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
ILEVRO	3	QL(0.2 ml daily);ST
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) .025 %</i>	1B	
LASTACAFT	3	PA;RX/OTC
NEVANAC	3	QL(0.2 ml daily);ST
<i>olopatadine hcl</i>	1B	RX/OTC
PATADAY (Use <i>olopatadine hcl</i>)	NF	RX/OTC
TRUSOPT (Use <i>dorzolamide hcl</i>)	NF	
ZADITOR (Use <i>ketotifen fumarate (ophth)</i>)	NF	
ZERVIAE	3	PA
Prostaglandins - Ophthalmic		
<i>bimatoprost soln</i>	3	
<i>latanoprost soln</i>	1B	
<i>tafluprost .015 MG/ML</i>	1B	
TRAVATAN Z (Use <i>travoprost</i>)	NF	
<i>travoprost</i>	1B	
XALATAN SOLN (Use <i>latanoprost</i>)	NF	
ZIOPTAN	2	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	
Otic Anti-infectives		
CETRAXAL (Use <i>ciprofloxacin hcl (otic)</i>)	NF	
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
Otic Combinations		
CIPRO HC 0.2 %-1 %	3	
CIPRODEX 0.3 %-0.1 % (Use <i>ciprofloxacin-dexamethasone</i>)	NF	PA
<i>ciprofloxacin-dexamethasone 0.3 %-0.1 %</i>	1B	PA
<i>ciprofloxacin-fluocinolone acetonide 0.3 %-0.025 %</i>	1B	QL(0.5 ea daily);PA
CORTISPORIN-TC 3.3 MG/ML-10 MG/ML-0.5 MG/ML-3 MG/ML	3	
<i>neomycin-polymyxin-hc (otic) soln 10000 UNIT/ML-1 %-3.5 MG/ML</i>	1B	
<i>neomycin-polymyxin-hc (otic) susp 10000 UNIT/ML-1 %-3.5 MG/ML</i>	1B	
OTOVEL 0.3 %-0.025 % (Use <i>ciprofloxacin-fluocinolone acetonide</i>)	NF	QL(0.5 ea daily);PA
Otic Steroids		
DERMOTIC (Use <i>fluocinolone acetonide (otic)</i>)	NF	
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid 2 %-1 %</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		

Drug Name	Drug Tier	Requirement s/Limits
CUVITRU SOLN 1 GM/5ML, 2 GM/10ML, 4 GM/20ML, 10 GM/50ML	4	SP;PA
GAMMAGARD LIQUID 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	4	SP;PA
GAMMAGARD LIQUID 30 GM/300ML	4	PA
GAMMAGARD LIQUID 1 GM/10ML	4	SP;PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	4	SP;PA
GAMMAKED	4	SP;PA
GAMMAKED 1 GM/10ML	4	SP;PA
GAMUNEX-C 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	4	SP;PA
GAMUNEX-C 1 GM/10ML	4	SP;PA
HIZENTRA SOLN	4	SP;PA
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin tabs</i>	1B	
<i>amoxicillin susr 125 MG/5ML</i>	1A	
<i>amoxicillin caps</i>	1A	

Drug Name	Drug Tier	Requirement s/Limits
<i>amoxicillin susr 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin chew 125 MG, 250 MG</i>	1B	
<i>ampicillin caps 500 MG</i>	1B	
<i>ampicillin sodium ij 1 GM</i>	1B	
Natural Penicillins		
<i>penicillin g potassium 5000000 UNIT</i>	1B	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
PENICILLIN G PROCAINE	3	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium tabs</i>	1B	
<i>penicillin v potassium solr</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate tabs</i>	1B	
<i>amoxicillin & pot clavulanate susr</i>	1B	
<i>amoxicillin & pot clavulanate chew</i>	1B	
<i>amoxicillin & pot clavulanate tb12 1000 MG-62.5 MG</i>	1B	
<i>ampicillin & sulbactam sodium ij 0.5 GM-1 GM, 1 GM-2 GM</i>	1B	

Drug Name	Drug Tier	Requirement s/Limits
AUGMENTIN TABS 500 MG-125 MG (Use amoxicillin & pot clavulanate)	NF	
AUGMENTIN SUSR (Use amoxicillin & pot clavulanate)	NF	
AUGMENTIN ES-600 SUSR 600 MG/5ML-42.9 MG/5ML (Use amoxicillin & pot clavulanate)	NF	
<i>piperacillin sodium-tazobactam sodium</i>	1B	
UNASYN IJ 0.5 GM-1 GM, 1 GM-2 GM (Use ampicillin & sulbactam sodium)	NF	
UNASYN BULK PACK IV 5 GM-10 GM (Use ampicillin & sulbactam sodium)	NF	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>nafcillin sodium iv 10 GM</i>	1B	
<i>oxacillin sodium iv 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
AYGESTIN TABS (Use norethindrone acetate)	NF	
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B	
<i>medroxyprogesterone acetate 10 MG</i>	1A	
<i>megestrol acetate (appetite)</i>	1B	PA

Drug Name	Drug Tier	Requirement s/Limits
<i>norethindrone acetate tabs</i>	0	
<i>progesterone caps</i>	1B	
PROMETRIUM CAPS (Use progesterone)	NF	
PROVERA (Use medroxyprogesterone acetate)	NF	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	1B	
<i>disulfiram</i>	1B	
LUCEMYRA	2	QL(224 ea per 14 days retail)
Antidementia Agents		
ARICEPT TABS 5 MG (Use donepezil hydrochloride)	NF	QL(1 ea daily)
ARICEPT TABS 10 MG (Use donepezil hydrochloride)	NF	QL(2 ea daily)
<i>donepezil hydrochloride tbdp 5 MG</i>	1B	QL(1 ea daily)
<i>donepezil hydrochloride tabs 5 MG</i>	1B	QL(1 ea daily)
<i>donepezil hydrochloride tabs 10 MG</i>	1B	QL(2 ea daily)
<i>donepezil hydrochloride tbdp 10 MG</i>	1B	QL(2 ea daily)
<i>galantamine hydrobromide tabs</i>	1B	QL(2 ea daily)
<i>galantamine hydrobromide soln</i>	1B	QL(6 ml daily)

Drug Name	Drug Tier	Requirements/Limits
<i>galantamine hydrobromide cp24</i>	1B	QL(1 ea daily)
<i>memantine hcl tabs</i>	1B	QL(2 ea daily)
<i>memantine hcl tabs</i>	1B	
NAMENDA TABS (Use <i>memantine hcl</i>)	NF	QL(2 ea daily)
NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i>)	NF	
RAZADYNE ER CP24 (Use <i>galantamine hydrobromide</i>)	NF	QL(1 ea daily)
<i>rivastigmine tartrate caps</i>	1B	
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline 12.5 MG-5 MG</i>	3	PA
<i>perphenazine-amitriptyline</i>	1B	QL(4 ea daily)
Fibromyalgia Agents		
SAVELLA TABS	2	QL(2 ea daily);PA
SAVELLA TITRATION PACK MISC	2	PA
Movement Disorder Drug Therapy		
AUSTEDO	4	QL(4 ea daily);PA
INGREZZA CAPS	4	QL(1 ea daily);PA
INGREZZA CPPK	4	1 rtl MAX fill,180 rtl day(s) supply;PA
<i>tetrabenazine</i>	4	QL(3 ea daily);SP;PA
XENAZINE (Use <i>tetrabenazine</i>)	NF	QL(3 ea daily);SP;PA
Multiple Sclerosis Agents		
AMPYRA (Use <i>dalfampridine</i>)	NF	QL(2 ea daily);SP;PA
AUBAGIO	4	PA

Drug Name	Drug Tier	Requirements/Limits
AVONEX PSKT	4	QL(0.0714 ml daily);SP;PA
AVONEX PEN AJKT	4	QL(0.0714 ml daily);SP;PA
BETASERON KIT	4	QL(0.0357 ea daily);SP;PA
COPAXONE SOSY 40 MG/ML	3	QL(0.43 ml daily);PA
COPAXONE SOSY 20 MG/ML	3	QL(1 ml daily);PA
<i>dalfampridine</i>	4	QL(2 ea daily);SP;PA
<i>dimethyl fumarate misc</i>	4	PA
<i>dimethyl fumarate cpdr</i>	4	PA
EXTAVIA KIT	4	QL(0.0357 ea daily);SP;PA
<i> fingolimod hcl</i>	4	PA
GILENYA .5 MG	4	PA
GILENYA .25 MG	4	PA
<i>glatiramer acetate sosy 40 MG/ML</i>	3	QL(0.43 ml daily);PA
<i>glatiramer acetate sosy 20 MG/ML</i>	3	QL(1 ml daily);PA
KESIMPTA	4	QL(0.0144 ml daily);PA
MAVENCLAD	4	PA
OCREVUS	4	PA
PLEGRIDY SOPN	4	QL(0.036 ml daily);PA
PLEGRIDY SOSY SC	4	QL(0.036 ml daily);PA
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ml daily);PA
PLEGRIDY STARTER PACK SOPN	4	QL(0.036 ml daily);PA

Drug Name	Drug Tier	Requirements/Limits
REBIF SOSY	4	QL(0.214 ml daily);SP;PA
REBIF REBIDOSE SOAJ	4	QL(0.214 ml daily);SP;PA
REBIF REBIDOSE TITRATIONPACK SOAJ	4	SP;PA
REBIF TITRATION PACK SOSY	4	SP;PA
TECFIDERA CPDR (Use dimethyl fumarate)	NF	PA
TECFIDERA STARTER PACK MISC (Use dimethyl fumarate)	NF	PA
TYSABRI	4	QL(0.536 ml daily);SP;PA
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
LYRICA CR 330 MG (Use pregabalin (once-daily))	3	QL(2 ea daily);PA
LYRICA CR 82.5 MG, 165 MG (Use pregabalin (once-daily))	3	QL(1 ea daily);PA
pregabalin (once-daily) 82.5 MG, 165 MG	3	QL(1 ea daily);PA
pregabalin (once-daily) 330 MG	3	QL(2 ea daily);PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA 10 MG-20 MG	3	PA
Psychotherapeutic and Neurological Agents - Misc.		
ergoloid mesylates tabs	1B	
pimozide	1B	
Restless Leg Syndrome (RLS) Agents		
HORIZANT	3	QL(2 ea daily);PA
Smoking Deterrents		

Drug Name	Drug Tier	Requirements/Limits
APO-VARENICLINE TABS	0	QL(2 ea daily)
bupropion hcl (smoking deterrent)	0	QL(2 ea daily)
CHANTIX TABS (Use varenicline tartrate)	NF	QL(2 ea daily)
CHANTIX CONTINUING MONTHPAK TABS (Use varenicline tartrate)	NF	QL(2 ea daily)
CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate)	NF	
NICODERM CQ PT24 (Use nicotine)	NF	QL(1 ea daily)
NICORETTE GUM (Use nicotine polacrilex)	NF	
NICORETTE LOZG (Use nicotine polacrilex)	NF	
NICORETTE MINI LOZG (Use nicotine polacrilex)	NF	
NICORETTE STARTER KIT GUM (Use nicotine polacrilex)	NF	
nicotine pt24 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	0	QL(1 ea daily)
nicotine polacrilex gum	0	
nicotine polacrilex lozg	0	
NICOTINE TRANSDERMAL SYSTEM KIT	0	
NICOTROL INHALER INHA	0	
NICOTROL NS SOLN	0	
varenicline tartrate tabs	0	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>varenicline tartrate tbpk</i>	0	
Transthyretin Amyloidosis Agents		
TEGSEDI	4	PA
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 500 MG	4	PA
ARALAST NP SOLR 1000 MG	4	SP;PA
PROLASTIN-C SOLR	4	SP;PA
PROLASTIN-C SOLN	4	PA
ZEMAIRA SOLR	4	SP;PA
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 ea daily);SP;PA
ORKAMBI TABS	4	QL(4 ea daily);PA
ORKAMBI PACK 100 MG-125 MG, 150 MG-188 MG	4	QL(2 ea daily);PA
PULMOZYME	4	QL(2.5 ml daily);SP;PA
TRIKAFTA 50 MG-100 MG	4	QL(3 ea daily);PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS	4	QL(1 ea daily);PA
ESBRIET TABS (<i>Use pirfenidone</i>)	4	QL(1 ea daily);PA
OFEV	4	QL(2 ea daily);PA
<i>pirfenidone tabs 534 MG</i>	4	QL(3 ea daily);PA
<i>pirfenidone tabs 267 MG, 801 MG</i>	4	QL(1 ea daily);PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		

Drug Name	Drug Tier	Requirements/Limits
<i>sulfadiazine tabs</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Glycylcyclines		
<i>tigecycline</i>	1B	
TYGACIL (<i>Use tigecycline</i>)	NF	
Tetracyclines		
<i>demeclocycline hcl tabs</i>	1B	
<i>doxycycline (monohydrate) tabs 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline (monohydrate) tabs 50 MG</i>	1B	
<i>doxycycline (monohydrate) caps 75 MG</i>	1B	
<i>doxycycline (monohydrate) caps 50 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate caps</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate tabs 20 MG, 100 MG</i>	1B	QL(2 ea daily)
<i>doxycycline hyclate solr</i>	1B	
<i>minocycline hcl tabs</i>	1B	QL(3 ea daily)
<i>minocycline hcl caps</i>	1B	QL(3 ea daily)
<i>tetracycline hcl caps</i>	1B	QL(8 ea daily)
VIBRAMYCIN CAPS (<i>Use doxycycline hyclate</i>)	NF	QL(2 ea daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole tabs</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>propylthiouracil</i>	1B	
TAPAZOLE TABS 10 MG (Use <i>methimazole</i>)	NF	
Thyroid Hormones		
ARMOUR THYROID TABS	2	QL(1 ea daily)
CYTOMEL TABS (Use <i>liothyronine sodium</i>)	NF	
<i>levothyroxine sodium tabs</i>	1B	
<i>liothyronine sodium soln</i>	1B	
<i>liothyronine sodium tabs</i>	1B	
SYNTHROID TABS (Use <i>levothyroxine sodium</i>)	2	
<i>thyroid tabs 15 MG, 30 MG, 60 MG, 90 MG, 120 MG</i>	1B	QL(1 ea daily)
TRIOSTAT SOLN (Use <i>liothyronine sodium</i>)	NF	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP 15.5 MCG/0.5ML-2 LF/0.5ML-5 LF/0.5ML	0	
BOOSTRIX SUSY 18.5 MCG/0.5ML-2.5 LF/0.5ML-5 LF/0.5ML	0	
BOOSTRIX SUSP 18.5 MCG/0.5ML-2.5 LF/0.5ML-5 LF/0.5ML	0	
DAPTACEL 23 MCG/0.5ML-15 LF/0.5ML-5 LF/0.5ML	0	
DIPHtheria/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP 5 LFU/0.5ML-25 LFU/0.5ML	0	

Drug Name	Drug Tier	Requirements/Limits
INFANRIX 58 MCG/0.5ML-25 LFU/0.5ML-10 LFU/0.5ML	0	
KINRIX SUSP 58 MCG/0.5ML-25 LFU/0.5ML-10 LFU/0.5ML	0	
KINRIX SUSY 58 MCG/0.5ML-25 LFU/0.5ML-10 LFU/0.5ML	0	
PEDIARIX SUSY 58 MCG/0.5ML-10 MCG/0.5ML-25 LFU/0.5ML-10 LFU/0.5ML	0	
PENTACEL 48 MCG/0.5ML-15 LFU/0.5ML-5 LFU/0.5ML	0	
QUADRACEL SUSP 48 MCG/0.5ML-15 LFU/0.5ML-5 LFU/0.5ML	0	
QUADRACEL SUSY 48 MCG/0.5ML-15 LFU/0.5ML-5 LFU/0.5ML	0	
TDVAX SUSP 2 LF/0.5ML-2 LF/0.5ML	0	
TENIVAC INJ 5 LFU-2 LFU	0	
TETANUS/DIPHtheria TOXOIDS-ADSORBED ADULT SUSP 2 LF/0.5ML-2 LF/0.5ML	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate sosy ij .25 MG/5ML</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>atropine sulfate soln ij .4 MG/ML, 1 MG/ML</i>	1B	
ATROPINE SULFATE SOSY IJ (Use atropine sulfate)	NF	
<i>chlordiazepoxide hcl-clidinium bromide 2.5 MG-5 MG</i>	1B	
<i>dicyclomine hcl tabs</i>	1B	
<i>dicyclomine hcl caps</i>	1B	
<i>dicyclomine hcl soln or</i>	1B	
<i>glycopyrrolate soln ij 4 MG/20ML</i>	1B	
<i>glycopyrrolate tabs 1 MG, 2 MG</i>	1B	
LIBRAX 2.5 MG-5 MG (Use chlordiazepoxide hcl-clidinium bromide)	NF	
<i>methscopolamine bromide</i>	1B	
ROBINUL TABS (Use glycopyrrolate)	NF	
ROBINUL FORTE TABS (Use glycopyrrolate)	NF	
H-2 Antagonists		
<i>cimetidine tabs</i>	1B	RX/OTC
<i>cimetidine hcl or 300 MG/5ML, 400 MG/6.67ML</i>	1B	QL(20 ml daily)
<i>famotidine soln 40 MG/4ML, 200 MG/20ML</i>	1B	
<i>famotidine soln 20 MG/2ML</i>	1A	
<i>famotidine tabs 20 MG, 40 MG</i>	1B	RX/OTC
<i>famotidine susr</i>	1B	QL(10 ml daily)
<i>famotidine in nacl soln 0.4 MG/ML-0.9 %</i>	1B	
<i>nizatidine caps</i>	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>nizatidine soln</i>	1B	QL(20 ml daily)
PEPCID TABS (Use famotidine)	NF	RX/OTC
PEPCID AC TABS (Use famotidine)	NF	RX/OTC
PEPCID AC MAXIMUM STRENGTH TABS (Use famotidine)	NF	RX/OTC
<i>ranitidine hcl tabs 150 MG</i>	1B	
TAGAMET HB TABS (Use cimetidine)	NF	RX/OTC
Misc. Anti-Ulcer		
CARAFATE TABS (Use sucralfate)	NF	QL(4 ea daily)
CARAFATE SUSP (Use sucralfate)	NF	QL(40 ml daily)
<i>sucralfate tabs</i>	1B	QL(4 ea daily)
<i>sucralfate susp</i>	1B	QL(40 ml daily)
Proton Pump Inhibitors		
ACIPHEX TBEC (Use rabeprazole sodium)	NF	QL(1 ea daily)
<i>esomeprazole magnesium cpdr 40 MG</i>	3	QL(1 ea daily)
<i>esomeprazole magnesium cpdr 20 MG</i>	1B	QL(2 ea daily);RX/OTC
<i>esomeprazole magnesium tbec</i>	1B	QL(2 ea daily)
<i>lansoprazole cpdr 15 MG</i>	1B	QL(2 ea daily);RX/OTC
<i>lansoprazole cpdr 30 MG</i>	1B	
NEXIUM CPDR 40 MG (Use esomeprazole magnesium)	NF	QL(1 ea daily)
NEXIUM CPDR 20 MG (Use esomeprazole magnesium)	NF	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
NEXIUM 24HR TBEC (Use esomeprazole magnesium)	1B	QL(2 ea daily)
omeprazole tbec	1B	QL(2 ea daily)
omeprazole cpdr	1B	QL(2 ea daily);RX/OTC
omeprazole magnesium cpdr	1B	QL(4 ea daily)
pantoprazole sodium tbec 40 MG	1B	
pantoprazole sodium tbec 20 MG	1B	QL(1 ea daily)
PREVACID CPDR 15 MG (Use lansoprazole)	NF	QL(2 ea daily);RX/OTC
PREVACID CPDR 30 MG (Use lansoprazole)	NF	
PREVACID 24HR CPDR (Use lansoprazole)	NF	QL(2 ea daily);RX/OTC
PROTONIX TBEC 20 MG (Use pantoprazole sodium)	NF	QL(1 ea daily)
PROTONIX TBEC 40 MG (Use pantoprazole sodium)	NF	
rabeprazole sodium tbec	1B	QL(1 ea daily)
Ulcer Drugs - Prostaglandins		
CYTOTEC (Use misoprostol)	NF	QL(4 ea daily)
misoprostol	1B	QL(4 ea daily)
Ulcer Therapy Combinations		
amoxicillin-clarithromycin w/ lansoprazole 30 MG-500 MG-500 MG	1B	14 rti MAX day(s) supply,365 rti lmt day(s);14 mail MAX day(s) supply,365 mail lmt day(s)
omeprazole-sodium bicarbonate caps 20 MG-1100 MG	1B	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
ZEGERID CAPS (Use omeprazole-sodium bicarbonate)	NF	RX/OTC
ZEGERID OTC CAPS 20 MG-1100 MG (Use omeprazole-sodium bicarbonate)	NF	RX/OTC
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
darifenacin hydrobromide	1B	QL(1 ea daily)
DETROL TABS (Use tolterodine tartrate)	NF	
DETROL LA CP24 (Use tolterodine tartrate)	NF	QL(1 ea daily)
DITROPAN XL TB24 5 MG, 10 MG (Use oxybutynin chloride)	NF	
ENABLEX 7.5 MG (Use darifenacin hydrobromide)	NF	QL(1 ea daily)
fesoterodine fumarate	1B	QL(1 ea daily);PA
oxybutynin chloride tabs	1B	
oxybutynin chloride syrp	1B	
oxybutynin chloride tb24	1B	
solifenacin succinate tabs	1B	QL(1 ea daily);PA
tolterodine tartrate cp24	1B	QL(1 ea daily)
tolterodine tartrate tabs	1B	
TOVIAZ (Use fesoterodine fumarate)	3	QL(1 ea daily);PA
tropium chloride tabs	1B	

Drug Name	Drug Tier	Requirements/Limits
<i>tropium chloride cp24</i>	1B	QL(1 ea daily)
VESICARE TABS (<i>Use solifenacin succinate</i>)	NF	QL(1 ea daily);PA
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 ea daily)
<i>bethanechol chloride 25 MG</i>	1B	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	1B	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	0	
BEXSERO	0	
HIBERIX SOLR IJ	0	
MENACTRA	0	
MENQUADFI	0	
MENVEO	0	
PEDVAX HIB SUSP	0	
PNEUMOVAX 23	0	
PNEUMOVAX 23/1 DOSE	0	
PREVNAR 13	0	
PREVNAR 20	0	1 rtl MAX fill,999 rtl day(s) supply
TRUMENBA	0	
VAXNEUVANCE	0	1 rtl MAX fill,999 rtl day(s) supply
Viral Vaccines		
AFLURIA QUADRIVALENT 2020-2021 SUSY 0	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply

Drug Name	Drug Tier	Requirements/Limits
AFLURIA QUADRIVALENT 2020-2021 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
AFLURIA QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
AFLURIA QUADRIVALENT 2021-2022 SUSY 0	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
AFLURIA QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
AFLURIA QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
ENGERIX-B SUSP 20 MCG/ML	0	3 rtl MAX fill,365 rtl day(s) supply;3 mail MAX fill
FLUAD 2020-2021	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUAD QUADRIVALENT 2021-2022	0	1 rtl MAX fill,180 rtl day(s) supply
FLUAD QUADRIVALENT 2022-2023	0	1 rtl MAX fill,180 rtl day(s) supply
FLUAD QUADRIVALENT INFLUENZA VACCINE FOR ADULTS	0	1 rtl MAX fill,180 rtl day(s) supply
FLUARIX QUADRIVALENT 2020-2021 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply

Drug Name	Drug Tier	Requirement s/Limits
FLUARIX QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUARIX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2020-2021	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2021-2022	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUBLOK QUADRIVALENT 2022-2023	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2020-2021 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2020-2021 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2021-2022 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply

Drug Name	Drug Tier	Requirement s/Limits
FLULAVAL QUADRIVALENT 2020-2021 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLULAVAL QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLULAVAL QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUMIST QUADRIVALENT	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUZONE HIGH-DOSE PF 2020-2021	0	1 rtl MAX fill,180 rtl day(s) supply
FLUZONE HIGH-DOSE PF 2021-2022	0	1 rtl MAX fill,180 rtl day(s) supply
FLUZONE HIGH-DOSE PF 2022-2023	0	1 rtl MAX fill,180 rtl day(s) supply
FLUZONE QUADRIVALENT 2020-2021 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUZONE QUADRIVALENT 2020-2021 SUSP 0	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUZONE QUADRIVALENT 2021-2022 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUZONE QUADRIVALENT 2021-2022 SUSP 0	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
FLUZONE QUADRIVALENT 2022-2023 SUSP 0	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply

Drug Name	Drug Tier	Requirements/Limits
FLUZONE QUADRIVALENT 2022-2023 SUSY	0	Limit 1 dose per season;1 rtl MAX fill,180 rtl day(s) supply
GARDASIL 9 SUSY	0	3 rtl MAX fill,365 rtl day(s) supply
GARDASIL 9 SUSP	0	3 rtl MAX fill,365 rtl day(s) supply
HAVRIX	0	
HEPLISAV-B SOSY	0	2 rtl MAX fill,365 rtl day(s) supply;2 mail MAX fill
IPOL INACTIVATED IPV	0	
M-M-R II SOLR	0	1 rtl MAX fill,365 rtl day(s) supply
RECOMBIVAX HB SUSP	0	
ROTARIX	0	
ROTATEQ SOLN	0	
SHINGRIX	0	2 rtl MAX fill,999 rtl day(s) supply;AL(At least 18 yrs old)
TWINRIX SUSY 720 ELU/ML-20 MCG/ML	0	
VAQTA	0	
VARIVAX INJ	0	2 rtl MAX fill,365 rtl day(s) supply
VAGINAL AND RELATED PRODUCTS		
Miscellaneous Vaginal Products		
INTRAROSA	3	PA
Spermicides		
SHUR-SEAL GEL	0	
TODAY SPONGE MISC	0	
Vaginal Anti-infectives		
CLEOCIN CREA (Use clindamycin phosphate vaginal)	NF	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate vaginal crea</i>	1B	
<i>clotrimazole vaginal crea 1 %</i>	1B	
GYNAZOLE-1	3	
GYNE-LOTRIMIN CREA (Use clotrimazole vaginal)	NF	
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal supp 200 MG</i>	1B	
<i>terconazole vaginal crea</i>	1B	
<i>terconazole vaginal supp</i>	1B	
Vaginal Contraceptive - pH Modulators		
PHEXXI 0.4 %-1.8 %-1 %	0	PV
Vaginal Estrogens		
ESTRACE CREA (Use estradiol vaginal)	NF	
<i>estradiol vaginal crea</i>	1B	
<i>estradiol vaginal tabs</i>	1B	
FEMRING	3	PA
PREMARIN	2	
VAGIFEM TABS (Use estradiol vaginal)	NF	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) soaj .3 MG/0.3ML</i>	2	2 rtl MAX fill,365 rtl day(s) supply;QL(2 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits
<i>epinephrine (anaphylaxis) soaj .15 MG/0.3ML</i>	1B	2 rtl MAX fill,365 rtl day(s) supply;2 mail MAX fill;QL(2 ea per fill retail,2 per fill mail MG/0.3ML)
EPIPEN 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	NF	
EPIPEN-JR 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	2	2 rtl MAX fill,365 rtl day(s) supply;2 mail MAX fill;QL(2 ea per fill retail,2 per fill mail MG/0.3ML)
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol caps 1.25 MG, 1.25 MG, 50 MCG, 400 UNIT, 2000 UNIT, 50000 UNIT</i>	1A	
<i>cholecalciferol tabs 400 UNIT</i>	0	
DRISDOL CAPS (Use <i>ergocalciferol</i>)	0	
<i>ergocalciferol soln or ergocalciferol caps</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
<i>niacin cpcr 250 MG, 500 MG</i>	1A	
<i>niacin tabs</i>	1A	
<i>niacin tbc</i>	1A	
NIACIN TR TBCR	1B	

Drug Name	Drug Tier	Requirements/Limits
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<i>chlordiazepoxide hcl-clidinium bromide</i>	105	<i>ciprofloxacin hcl (otic)</i>	98	CLINIMIX 4.25%/DEXTROSE 10%	94
<i>chlordiazepoxide-amitriptyline</i>	101	<i>ciprofloxacin in d5w</i>	72	CLINIMIX 4.25%/DEXTROSE 5%	94
<i>chlorhexidine gluconate (mouth-throat)</i>	86	<i>ciprofloxacin-dexamethasone</i> 98		CLINIMIX E 5%/DEXTROSE 20%	95
<i>chloroquine phosphate</i>	35	<i>ciprofloxacin-fluocinolone acetoneide</i>	98	<i>clobazam</i>	15
<i>chlorpromazine hcl</i>	46	<i>cisplatin</i>	36	<i>clobetasol propionate</i>	64
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<i>haloperidol decanoate</i>	45	<i>hydrocortisone</i>	57	<i>imipenem-cilastatin</i>	33
<i>haloperidol lactate</i>	45	<i>hydrocortisone (intrarectal)</i> ...	10	<i>imipramine hcl</i>	22
HAVRIX.....	109	<i>hydrocortisone (rectal)</i>	10	<i>imipramine pamoate</i>	22
HECTOROL.....	71	<i>hydrocortisone (topical)</i>	65	<i>imiquimod</i>	66
HEMANGEOL.....	51	<i>hydrocortisone acetate (rectal)</i>	10	IMITREX.....	82
<i>heparin sodium (porcine)</i>	15	<i>hydrocortisone butyrate</i>	65	IMITREX STATDOSE REFILL.....	82
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				INSULIN DEGLUDEC.....	24
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INTELENCE.....	47	<i>ivermectin (pediculicide)</i>	67	<i>ketorolac tromethamine (ophth)</i>	98
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INTUNIV.....	2	JADENU SPRINKLE.....	25	KEVEYIS.....	68
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<i>isoniazid</i>	36	KENALOG-40.....	57	KLARON.....	59
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<i>isosorbide dinitrate-hydralazine hcl</i>	52	KEPPRA XR.....	16	KOSELUGO.....	40
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K-Y ME & YOU INTENSE.....	80	LENVIMA 14 MG DAILY DOSE.	37	LIALDA.....	73
KYPROLIS.....	40	LENVIMA 18 MG DAILY DOSE.	37	LIBRAX.....	105
<i>labetalol hcl</i>	50	LENVIMA 20 MG DAILY DOSE.	37	<i>lidocaine</i>	66
<i>lacosamide</i>	16	LENVIMA 24 MG DAILY DOSE.	37	<i>lidocaine hcl</i>	66
LACRISERT.....	95	LENVIMA 4 MG DAILY DOSE...	37	<i>lidocaine hcl (local anesth.)</i>	78
<i>lactated ringer's</i>	83	LENVIMA 8 MG DAILY DOSE...	37	<i>lidocaine hcl (mouth-throat)</i> ..	86
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LANREOTIDE ACETATE.....	71	<i>levofloxacin (ophth)</i>	96	LODINE.....	5
<i>lansoprazole</i>	105	<i>levofloxacin in d5w</i>	73	LODOSYN.....	43
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<i>lapatinib ditosylate</i>	40	<i>levonorgestrel (emergency oc)</i>	56	<i>loperamide hcl</i>	25
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LASTACFT.....	98	<i>levonorgestrel-ethinyl estradiol</i> (91-day).....	55	<i>lopinavir-ritonavir</i>	48
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LORBRENA.....	40	LUZU.....	61	<i>medroxyprogesterone acetate (contraceptive)</i>	56
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	<i>olmesartan medoxomil-</i> <i>hydrochlorothiazide</i>	<i>oxazepam</i>
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ULTRACET.....	9	VASCEPA.....	28	<i>vincristine sulfate</i>	42
ULTRAM.....	8	VASERETIC.....	32	<i>vinorelbine tartrate</i>	42
UNASYN.....	100	VASOTEC.....	30	VIRACEPT.....	49
UNASYN BULK PACK.....	100	VAXNEUVANCE.....	107	VIRAMUNE.....	49
UPTRAVI.....	53	VECAMEYL.....	32	VIRAMUNE XR.....	49
UPTRAVI TITRATION PACK.....	53	VECTIBIX.....	38	VIREAD.....	49
UROCIT-K 10.....	74	VECTICAL.....	63	VISTARIL.....	11
UROXATRAL.....	75	VELCADE.....	41	VISTOGARD.....	25
URSO 250.....	73	VELETRI.....	53	VITAMIN D2.....	110
URSO FORTE.....	73	VELTIN.....	60	VITATHELY/GINGER.....	92
<i>ursodiol</i>	73	VEMLIDY.....	49	VITRAKVI.....	41
UTIBRON NEOHALER.....	14	<i>venlafaxine hcl</i>	22	VIVITROL.....	25
UVADEX.....	42	VENTAVIS.....	53	VIZIMPRO.....	38
VAGIFEM.....	109	VENTOLIN HFA.....	14	VOL-PLUS.....	93
<i>valacyclovir hcl</i>	50	<i>verapamil hcl</i>	52	VOLTAREN.....	62
VALCYTE.....	49	VEREGEN.....	60	VORAXAZE.....	42
<i>valganciclovir hcl</i>	49	VERELAN.....	52	<i>voriconazole</i>	27
VALIUM.....	11	VERELAN PM.....	52	VOSEVI.....	50
<i>valproate sodium</i>	19	VERZENIO.....	41	VOTRIENT.....	41
<i>valproic acid</i>	19	VESICARE.....	107	VYNDAMAX.....	53
<i>valrubicin</i>	39	VFEND.....	27	VYNDAQEL.....	53
				VYTORIN.....	28

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<i>warfarin sodium</i>	14	XOLAIR.....	12	ZELBORAF.....	41
<i>water for irrigation, sterile</i>	85	XOPENEX.....	14	ZEMAIRA.....	103
WELCHOL.....	29	XOPENEX CONCENTRATE.....	14	ZEMPLAR.....	71
WELLBUTRIN SR.....	19	XOPENEX HFA.....	14	ZENPEP.....	68
WELLBUTRIN XL.....	19	XOSPATA.....	41	ZEPATIER.....	50
WESTAB PLUS.....	93	XPOVIO 100 MG ONCE WEEKLY	39	ZERVIATE.....	98
WIDE-SEAL SILICONE DIAPHRAGM KIT 60.....	80	XPOVIO 60 MG ONCE WEEKLY	39	ZESTORETIC.....	32
WIDE-SEAL SILICONE DIAPHRAGM KIT 65.....	80	XPOVIO 80 MG ONCE WEEKLY	39	ZESTRIL.....	30
WIDE-SEAL SILICONE DIAPHRAGM KIT 70.....	80	XPOVIO 80 MG TWICE WEEKLY	39	ZETIA.....	29
WIDE-SEAL SILICONE DIAPHRAGM KIT 75.....	80	XTAMPZA ER.....	8	ZIAC.....	32
WIDE-SEAL SILICONE DIAPHRAGM KIT 80.....	80	XTANDI.....	39	ZIAGEN.....	49
WIDE-SEAL SILICONE DIAPHRAGM KIT 85.....	80	XULTOPHY 100/3.6.....	23	ZIANA.....	60
WIDE-SEAL SILICONE DIAPHRAGM KIT 90.....	80	XYZAL ALLERGY 24HR.....	28	<i>zidovudine</i>	49
WIDE-SEAL SILICONE DIAPHRAGM KIT 95.....	80	XYZAL ALLERGY 24HR CHILDRENS.....	28	ZIEXTENZO.....	76
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XALKORI.....	41	YAZ.....	56	ZIOPTAN.....	98
XANAX.....	11	YERVOY.....	38	<i>ziprasidone hcl</i>	44
XANAX XR.....	11	YONSA.....	39	ZIRABEV.....	37
XARELTO.....	14	ZADITOR.....	98	ZIRGAN.....	96
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XELODA.....	37	ZANAFLEX.....	93	ZOCOR.....	29
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XEOMIN.....	94	ZARONTIN.....	19	ZOHYDRO ER.....	8
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				ZOLOFT.....	21
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