



# 2023 High Performance Formulary

## (List of Covered Drugs)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION  
ABOUT THE DRUGS WE COVER IN THIS PLAN**

This formulary was updated on 5/1/2023. For more recent information or other questions, please contact The Health Plan Pharmacy Services at 1.800.624.6961 extension 7914, or visit [www.healthplan.org](http://www.healthplan.org).

## **Pharmacy Benefit Programs**

Prescription drugs are an integral component of a comprehensive health maintenance plan. Pharmacy benefit programs at The Health Plan are developed through recommendations of participating physicians and pharmacists. This group of professional health care providers, known as the Pharmacy and Therapeutics Committee, evaluates therapeutic classes of drugs and recommends coverage guidelines for our pharmacy benefit programs. The committee uses current medical and pharmaceutical literature along with recommendations of experts in various clinical specialties in its evaluation of our pharmacy benefit programs. The result is a list of drugs (formulary) to allow for the availability of appropriate medications for our members' needs. Also, the formulary and coverage guidelines allow prescription costs and your premium to be maintained at affordable levels.

## **Definitions**

**Prescription** – Drugs which can only be dispensed upon order (prescription) by a qualified provider of care. Additionally, only drugs which are labeled “Caution: Federal law prohibits dispensing without prescription” will be considered eligible.

**Generic Drug** – A drug available as a chemically and therapeutically equivalent copy of a brand-name drug. It is usually available from several manufacturers.

**Brand Drug** – A prescription item only available from a single-source supplier.

**Multi-Source Brand Drugs** – Brand-name drugs which are manufactured by more than one producer. These agents are usually available as generic equivalents.

## **How to Use Your Prescription Benefit**

Please present The Health Plan ID card to the pharmacist with your prescription. You will be required to pay a copayment (“copay”) at the time of service based on the prescription plan in which you are enrolled. Your copayment levels are found under the pharmacy benefit section Pharmacy Benefit of your Summary of Benefits. Your ID card also contains important information to allow the pharmacy to correctly submit your claim. Please take it with you to the pharmacy.

## **Specialty Pharmacy Program**

Specialty drugs are high-cost medications including drugs manufactured by biotechnology. Specialty drugs may be administered by injection, oral, transdermal, or inhaled. Specialty drugs are used to treat very specific diseases and require extensive management for safety and effectiveness. Dosages need to be monitored for effect and adjustments might be needed for adequate response to effectively treat the disease.

Specialty drug require prior authorization to assure appropriate candidate for the drug. Additionally, oversight is an integral part of the prior authorization process. Dispensing might be limited to pharmacies with specific skills and distribution programs to assure proper delivery of these medications. Diseases targeted to receive therapy are, but not limited to, rheumatoid arthritis, severe chronic psoriasis, multiple sclerosis, hepatitis C, hemophilia, certain cancers, growth deficiency, cystic fibrosis, Crohn's disease and organ transplant.

Coverage for these agents are provided under your Specialty Pharmacy Benefit.

**Drugs Requiring Prior Authorization**

Certain medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A coverage determination request can be made by the member, member's representative or physician. To request a coverage determination please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for coverage determinations will be processed within 7 days. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within 48 hours.

**Quantity Per Dispensing Event (QPC rules)**

Generally, The Health Plan allows dispensing of approved medications up to a 34-day supply per co-pay at the retail pharmacy network. Quantity per dispensing event rules (QPC) set thresholds that reduce exposure to unnecessary cost, without creating obstacles to access for most members. Drugs that are subject to QPC rules usually have specific limitations for use approved by the FDA. Examples include drugs to treat migraine headaches. These drugs, known as "triptans," are to be used in specific doses up to a defined number of headaches per month. The QPC rules allow this specific number of triptan medications to be dispensed per 34-day benefit period. To inquire about QPC limits to request an exemption, have your provider contact pharmacy services at 1.800.624.6961, ext. 7914.

**Non-Formulary Coverage Review**

Certain non-formulary medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A non-formulary

exception request can be made by the member, member's representative or physician. To request an exception please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for exceptions will be processed within 7 calendar days of receipt of the request. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within 48 hours of receipt.

**Generic Difference Policy****(copayment policy for multi-source drugs)**

If a prescription order specifies that a brand-name drug must be dispensed when the generic equivalent is available, or the prescription order allows for generic substitution and the member elects to have the prescription filled with a brand-name drug instead, the member must pay the brand copayment plus the difference between The Health Plan cost of a brand-name and its generic equivalent (i.e., The Health Plan only pays for the generic cost). Please note: Non-formulary brand versions of generic drugs require coverage review as outlined above.

**Out-of-Area Emergencies**

In situations of emergency need for a prescription outside The Health Plan service area, please contact The Health Plan for the location of a participating pharmacy in that area. Present The Health Plan ID card with the emergency prescription and pay your copayment. If no pharmacy in the area participates with The Health Plan, purchase the emergency prescription and send your receipt to The Health Plan. You will be reimbursed in full, less your applicable copayment, for the prescription provided the prescription meets the guidelines specified in this document.

### **Exclusions and Limitations**

The following will not be covered or paid for by The Health Plan:

- The charge for any prescription refill other than the number set by the prescriber. Additionally, no refills dispensed more than one year from the date or the original prescription.
- The charge for any prescription, oral or topical, that is prescribed for cosmetic purposes.
- The charge for any medications not FDA-approved for use in the general population.
- Off label use of a drug which is not medically accepted. The Health Plan uses the same guidelines as CMS for determining whether a proposed use is medically accepted.
- The charge for a drug not prescribed by a Health Plan qualified provider except in an emergency situation.
- The charge for any medication covered by any Worker's Compensation or occupational disease laws, any other group policy, or government program which is not The Health Plan's program.
- Dental-related prescriptions such as, but not limited to, oral fluorides, dental mouth washes, devices used in dental therapy. Certain oral fluoride products may be covered as a preventative medication.
- The charge for prescription drugs or devices used to promote weight loss.
- Prescriptions used to treat sexual dysfunction, either oral or topical, or devices used for impotence.
- Appliances and therapeutic devices which may require a prescription are not covered. These include, but are not limited to, garments, splints, bandages, or braces regardless of intended use.

• Charges for lost or stolen prescription drugs unless noted within your Summary of Benefits. Please contact The Health plan for details.

- Certain legend drugs when any version or strength become available over the counter.

### **Pain Management Program and Opiate/Opioid Management**

Pain Management Program will apply to plans within the value program.

The acute use of opioid medications for moderate to severe pain from acute injury, medical treatment or surgical procedure will be limited. The first fill of an opioid medication will be limited to a 5 day supply. This limit is for the first fill of an opioid medication for a member who has no history of opioid usage in the past 130 days.

For those members needing further management of their pain, a prior authorization will be required if:

- The opioid exceeds 80 morphine milligram equivalents
- Is taken for greater than 90 consecutive days
- Is a long acting opioid
- Is being taken with a medication that could cause respiratory depression.

A pharmacist will review the case to evaluate that the opioid is being utilized safely and appropriately. Additionally, the member can be limited to one prescriber and one pharmacy, if needed.

Formulary medications will be preferred over non-formulary medications. Step therapy rules will be applied when reviewing a request for non-formulary medications. Also, dosing and quantities may be limited.

## List of Abbreviations

**1: Preferred Generic**

**2: Preferred Brand**

**3: Non-preferred Drug**

**4: Specialty Drug**

**5: Medical Services Drug**

**6: ACA Preventive Medication**

**ACA:** Affordable Care Act.

**LA:** Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

**OTC:** Over the Counter. An OTC drug is a non-prescription drug.

**DME:** Durable Medical Equipment. Will pull the DME benefit.

**PA:** Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

**QL:** Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

**SP:** Specialty Drug

**ST:** Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

\*Note: Some plans may have one specialty drug copay structure for specialty preferred generic, preferred brands and non-preferred brands. Please refer to your plan document.

**This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.**

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## List of Abbreviations

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**OTC:** Over the Counter. An OTC drug is a non-prescription drug.

**PA:** Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

**QL:** Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

**ST:** Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
<b>ANTI - INFECTIVES</b>		
<b>ANTIFUNGAL AGENTS</b>		
<i>clotrimazole</i>	1	
CRESEMBA	2	PA
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>flucytosine</i>	1	
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole</i>	1	QL
<i>ketoconazole</i>	1	
NOXAFIL	2	PA
<i>nystatin</i>	1	
<i>posaconazole</i>	1	PA
<i>terbinafine hcl</i>	1	
<i>voriconazole</i>	1	PA
<b>ANTIVIRALS</b>		
<i>abacavir</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>acyclovir</i>	1	
<i>adefovir</i>	1	
<i>amantadine hcl</i>	1	
APTIVUS	2	
<i>atazanavir</i>	1	
BARACLUDE	2	

Drug Name	Drug Tier	Requirements / Limits
BIKTARVY	2	
CIMDUO	2	
DESCOVY	2	
<i>didanosine</i>	1	
DOVATO	2	
EDURANT	2	
<i>efavirenz</i>	1	
<i>efavirenz-emtricitabin-tenofovir</i>	1	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	
<i>emtricitabine</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	6	ACA
EMTRIVA	2	
<i>entecavir</i>	1	
EPCLUSA	4	PA; QL
<i>etravirine</i>	1	
EVOTAZ	3	
<i>famciclovir</i>	1	QL
<i>fosamprenavir</i>	1	
FUZEON	2	PA; QL
GENVOYA	2	
HARVONI	4	PA; QL
INTELENCE	2	
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.



Drug Name	Drug Tier	Requirements / Limits
LAGEVRIO (EUA)	2	QL
<i>lamivudine</i>	1	
<i>lamivudine-zidovudine</i>	1	
LEXIVA	2	
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
<i>nevirapine</i>	1	
NORVIR	2	
ODEFSEY	2	
<i>oseltamivir</i>	1	QL
PAXLOVID (EUA)	2	QL
PREVYMIS	2	QL
PREZISTA	2	
RELENZA DISKHALER	3	QL
REYATAZ	2	
<i>ribavirin</i>	1	PA
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	
SELZENTRY	2	
<i>stavudine</i>	1	
SYNAGIS	4	PA; LA
TEMIXYS	2	
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
TROGARZO	4	PA
<i>valacyclovir</i>	1	QL
<i>valganciclovir</i>	1	

Drug Name	Drug Tier	Requirements / Limits
VEMLIDY	2	
VIRACEPT	2	
VIREAD	2	
ZEPATIER	4	PA; QL
<i>zidovudine</i>	1	
<b>CEPHALOSPORINS</b>		
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefdinir</i>	1	
<i>cefditoren pivoxil</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime</i>	1	
<i>cefprozil</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
<b>ERYTHROMYCINS &amp; OTHER MACROLIDES</b>		
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
<i>e.e.s. 400</i>	1	
<i>ery-tab</i>	1	
<i>erythrocine (as stearate)</i>	1	
<i>erythromycin</i>	1	
<i>erythromycin ethylsuccinate</i>	1	
<b>MISCELLANEOUS ANTIINFECTIVES</b>		
<i>albendazole</i>	1	QL
ALINIA	2	QL
ARIKAYCE	4	PA; LA
<i>atovaquone</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>atovaquone-proguanil</i>	1	QL
BENZNIDAZOLE	2	QL
CAYSTON	4	PA; LA; QL
<i>chloroquine phosphate</i>	1	
<i>clindamycin hcl</i>	1	
<i>clindamycin pediatric</i>	1	
COARTEM	2	QL
CYCLOSERINE	3	
<i>dapsone</i>	1	
EMVERM	2	QL
<i>ethambutol</i>	1	
<i>hydroxychloroquine</i>	1	
IMPAVIDO	2	PA; QL
<i>isoniazid</i>	1	
<i>ivermectin</i>	1	PA; QL
KITABIS PAK	4	PA; QL
<i>linezolid</i>	1	PA
<i>mefloquine</i>	1	QL
<i>metronidazole</i>	1	
<i>neomycin</i>	1	
<i>nitazoxanide</i>	1	QL
<i>paromomycin</i>	1	
<i>pentamidine</i>	1	QL
<i>praziquantel</i>	1	
PRIFTIN	2	
<i>primaquine</i>	1	QL
<i>pyrazinamide</i>	1	
<i>quinine sulfate</i>	1	QL
<i>rifabutin</i>	1	
<i>rifampin</i>	1	

Drug Name	Drug Tier	Requirements / Limits
SIRTURO	2	PA; LA
SIVEXTRO	3	PA
<i>tinidazole</i>	1	QL
<i>tobramycin</i>	4	PA; QL
<i>tobramycin in 0.225 % nacl</i>	4	PA; QL
TRECATOR	3	
XIFAXAN	2	PA; QL
<b>PENICILLINS</b>		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin</i>	1	
<i>dicloxacillin</i>	1	
<i>penicillin v potassium</i>	1	
<b>QUINOLONES</b>		
<i>ciprofloxacin hcl</i>	1	
FACTIVE	3	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
<i>ofloxacin</i>	1	
<b>SULFA'S &amp; RELATED AGENTS</b>		
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
<b>TETRACYCLINES</b>		
<i>avidoxy</i>	1	
<i>demeclocycline</i>	1	
<i>doxycycline hyclate oral capsule</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec)</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline</i>	1	
<i>mondoxyne nl</i>	1	
<i>morgidox</i>	1	
<i>tetracycline</i>	1	
<b>URINARY TRACT AGENTS</b>		
<i>fosfomycin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nitrofurantoin monohyd/m-cryst</i>	1	
<i>trimethoprim</i>	1	
<b>VANCOMYCIN</b>		
<i>vancomycin</i>	1	QL
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<b>ADJUNCTIVE AGENTS</b>		
KEPIVANCE	4	PA
<i>leucovorin calcium</i>	1	
MESNEX	2	
VISTOGARD	4	PA; QL
XGEVA	4	PA; QL
<b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b>		
<i>abiraterone</i>	4	PA; QL
ADAKVEO	4	PA
ALECENSA	4	PA; QL
ALIQOPA	4	PA; LA
ALUNBRIG	4	PA; QL
<i>anastrozole</i>	1	
<i>azathioprine</i>	1	
BALVERSA	4	PA; LA
BAVENCIO	4	PA; LA
BESPONSА	4	PA
<i>bexarotene</i>	4	PA
<i>bicalutamide</i>	1	
BLINCYTO	4	PA
BOSULIF	4	PA; QL
CABOMETYX	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CALQUENCE (ACALABRUTINIB MAL)	4	PA; LA; QL
<i>capecitabine</i>	4	PA; QL
CAPRELSA	4	PA; LA; QL
COMETRIQ	4	PA; QL
COTELLIC	4	PA; LA; QL
<i>cyclophosphamide</i>	1	
<i>cyclosporine</i>	1	
<i>cyclosporine modified</i>	1	
CYRAMZA	4	PA
DARZALEX	4	PA; LA
DROXIA	2	
ELIGARD	4	PA
ELIGARD (3 MONTH)	4	PA
ELIGARD (4 MONTH)	4	PA
ELIGARD (6 MONTH)	4	PA
ELZONRIS	4	PA
EMCYT	2	
ENSPRYNG	4	PA
ERBITUX	4	PA
ERIVEDGE	4	PA; QL
ERLEADA ORAL TABLET 240 MG	4	PA
ERLEADA ORAL TABLET 60 MG	4	PA; QL
<i>erlotinib</i>	4	PA; QL
<i>etoposide</i>	1	
<i>everolimus (antineoplastic)</i>	4	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>everolimus (immunosuppressive)</i>	1	
<i>exemestane</i>	1	
<i>fludarabine</i>	1	
GAMIFANT	4	PA
GAVRETO	4	PA; LA; QL
GAZYVA	4	PA
<i>gengraf</i>	1	
GILOTRIF	4	PA; QL
GLEOSTINE	2	
HYCAMTIN	4	PA
<i>hydroxyurea</i>	1	
IBRANCE	4	PA; QL
ICLUSIG	4	PA; QL
IDHIFA	4	PA; LA; QL
<i>imatinib</i>	4	PA; QL
IMBRUVICA	4	PA; QL
IMFINZI	4	PA; LA
INLYTA	4	PA; QL
IRESSA	4	PA; QL
JAKAFI	4	PA; QL
KADCYLA	4	PA
KANJINTI	4	PA
KEYTRUDA	4	PA
KYMRIAH	4	PA
KYPROLIS	4	PA
<i>lapatinib</i>	4	PA; QL
<i>lenalidomide</i>	4	PA; QL
LENVIMA	4	PA; QL
<i>letrozole</i>	1	
LEUKERAN	2	
<i>leuprolide</i>	4	PA

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Drug Name	Drug Tier	Requirements / Limits
LIBTAYO	4	PA
LONSURF	4	PA
LORBRENA	4	PA; QL
LUPRON DEPOT	4	PA
LUPRON DEPOT (3 MONTH)	4	PA
LUPRON DEPOT-PED	4	PA
LUPRON DEPOT-PED (3 MONTH)	4	PA
LYNPARZA	4	PA; QL
LYSODREN	4	
LYTGOBI	4	PA
MATULANE	4	PA
<i>megestrol</i>	1	
MEKINIST	4	PA; QL
<i>melphalan</i>	1	
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf)</i>	1	
<i>mitoxantrone</i>	4	PA
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate sodium</i>	1	
MYLERAN	2	
MYLOTARG	4	PA; LA
NERLYNX	4	PA; LA
<i>nilutamide</i>	1	PA
NINLARO	4	PA; QL
NUBEQA	4	PA; LA; QL
ODOMZO	4	PA; LA; QL
ONIVYDE	4	PA

Drug Name	Drug Tier	Requirements / Limits
OPDIVO	4	PA
PEMAZYRE	4	PA; LA; QL
POMALYST	4	PA; LA
POTELIGEO	4	PA
PROGRAF	2	
PURIXAN	4	PA
REVLIMID	4	PA; LA; QL
ROZLYTREK	4	PA; LA; QL
RUBRACA	4	PA; LA; QL
RUXIENCE	4	PA
RYDAPT	4	PA; QL
SANDIMMUNE	2	
SIGNIFOR	4	PA
<i>sirolimus</i>	1	
SOLTAMOX	3	
SOMATULINE DEPOT	4	PA; QL
<i>sorafenib</i>	4	PA; QL
SPRYCEL	4	PA; QL
STIVARGA	4	PA; QL
<i>sunitinib malate</i>	4	PA; QL
SYLVANT	4	PA
TABRECTA	4	PA
<i>tacrolimus</i>	1	
TAFINLAR	4	PA; QL
TAGRISO	4	PA; LA; QL
TALZENNA	4	PA; QL
<i>tamoxifen</i>	1	
TASIGNA	4	PA; QL
TECENTRIQ	4	PA; LA
<i>temozolomide</i>	4	PA
THALOMID	4	PA; QL

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Drug Name	Drug Tier	Requirements / Limits
TIBSOVO	4	PA
<i>toremifene</i>	1	
TRAZIMERA	4	PA
<i>tretinoin (antineoplastic)</i>	1	
TRIPTODUR	4	PA
UNITUXIN	4	PA
VENCLEXTA	4	PA; LA; QL
VENCLEXTA STARTING PACK	4	PA; QL
VERZENIO	4	PA; LA; QL
VIJOICE	4	PA; QL
VITRAKVI	4	PA; LA; QL
VIZIMPRO	4	PA; QL
VONJO	4	PA; QL
VOTRIENT	4	PA; QL
VYXEOS	4	PA
XALKORI	4	PA; QL
XERMELO	4	PA; LA; QL
XOSPATA	4	PA; LA; QL
YERVOY	4	PA
YESCARTA	4	PA
YONDELIS	4	PA
YONSA	4	PA; QL
ZEJULA	4	PA; LA; QL
ZELBORAF	4	PA; QL
ZIRABEV	4	PA
ZOLADEX	4	PA
ZOLINZA	4	PA; QL
ZYDELIG	4	PA; QL
ZYKADIA	4	PA; QL

## AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

Drug Name	Drug Tier	Requirements / Limits
<b>ANTICONVULSANTS</b>		
APTIOM	3	
<i>carbamazepine</i>	1	
CELONTIN	2	
<i>clobazam</i>	1	PA
<i>clonazepam</i>	1	
DIACOMIT	4	PA
<i>diazepam</i>	1	
DILANTIN	2	
<i>divalproex</i>	1	
EPIDIOLEX	4	PA; LA
<i>epitol</i>	1	
<i>ethosuximide</i>	1	
<i>felbamate</i>	1	
<i>gabapentin</i>	1	
<i>lacosamide</i>	1	
<i>lamotrigine</i>	1	
<i>levetiracetam</i>	1	
NAYZILAM	2	PA; QL
<i>oxcarbazepine</i>	1	
<i>phenobarbital</i>	1	
<i>phenytoin</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin</i>	1	
<i>primidone</i>	1	
<i>roweepra</i>	1	
<i>rufinamide</i>	1	PA
<i>subvenite</i>	1	
<i>subvenite starter (blue) kit</i>	1	
<i>subvenite starter (green) kit</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>subvenite starter (orange) kit</i>	1	
<i>tiagabine</i>	1	
<i>topiramate oral capsule, sprinkle</i>	1	
<i>topiramate oral capsule, extended release 24hr</i>	1	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	1	ST
<i>topiramate oral tablet</i>	1	
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt)</i>	1	
<i>vigabatrin</i>	4	PA; LA; QL
<i>vigadrone</i>	4	PA; QL
<i>zonisamide</i>	1	
ZTALMY	4	PA
<b>ANTIPARKINSONISM AGENTS</b>		
<i>apomorphine</i>	4	PA; QL
<i>benztropine</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	1	PA
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>entacapone</i>	1	
INBRIJA	4	PA; QL
KYNMOBI	2	PA; QL
NEUPRO	3	
<i>pramipexole</i>	1	
<i>rasagiline</i>	1	
<i>ropinirole</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>selegiline hcl</i>	1	
<i>tolcapone</i>	1	PA
<i>trihexyphenidyl</i>	1	
<b>MIGRAINE &amp; CLUSTER HEADACHE THERAPY</b>		
<i>almotriptan malate</i>	1	QL
<i>dihydroergotamine injection</i>	1	PA
<i>dihydroergotamine nasal</i>	1	ST; QL
<i>eletriptan</i>	1	QL
<i>ergotamine-caffeine</i>	1	
<i>frovatriptan</i>	1	QL
<i>migergot</i>	1	
<i>naratriptan</i>	1	QL
<i>rizatriptan</i>	1	QL
<i>sumatriptan</i>	1	QL
<i>sumatriptan succinate</i>	1	QL
<i>sumatriptan-naproxen</i>	1	ST; QL
<i>zolmitriptan nasal</i>	1	ST; QL
<i>zolmitriptan oral</i>	1	QL
<b>MISCELLANEOUS NEUROLOGICAL THERAPY</b>		
<i>dalfampridine</i>	4	PA; QL
<i>dichlorphenamide</i>	4	PA
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>donepezil oral tablet 23 mg</i>	1	PA
<i>donepezil oral tablet, disintegrating</i>	1	
FIRDAPSE	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>galantamine</i>	1	
<i>memantine</i>	1	
NUEDEXTA	2	PA
RADICAVA	4	PA
RADICAVA ORS STARTER KIT SUSP	4	PA
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
TEGSEDI	4	PA; LA; QL
<i>tetrabenazine</i>	4	PA; QL
TYSABRI	4	PA; LA; QL
ZEPOSIA	4	PA; QL
ZEPOSIA STARTER KIT	4	PA; QL
ZEPOSIA STARTER PACK	4	PA; QL
ZOLGENSMA	4	PA
<b>MUSCLE RELAXANTS &amp; ANTISPASMODIC THERAPY</b>		
<i>baclofen</i>	1	
<i>carisoprodol</i>	1	
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine</i>	1	
<i>dantrolene</i>	1	
<i>meprobamate</i>	1	
<i>metaxalone</i>	1	
<i>methocarbamol</i>	1	
<i>orphenadrine citrate</i>	1	
<i>orphenadrine-asa-caffeine</i>	1	
<i>orphengesic forte</i>	1	
<i>pyridostigmine bromide</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>tizanidine</i>	1	
<b>NARCOTIC ANALGESICS</b>		
<i>acetaminophen-caff-dihydrocod</i>	1	ST; QL
<i>acetaminophen-codeine</i>	1	ST; QL
<i>ascomp with codeine</i>	1	
<i>buprenorphine</i>	1	ST
<i>buprenorphine hcl</i>	1	
<i>butalbital compound w/codeine</i>	1	
<i>butalbital-acetaminop-caf-cod</i>	1	
<i>butalbital-acetaminophen</i>	1	
<i>butalbital-acetaminophen-caff</i>	1	
<i>butalbital-aspirin-caffeine</i>	1	
<i>codeine sulfate</i>	1	ST; QL
<i>codeine-bitalbital-asa-caff</i>	1	
<i>diskets</i>	1	PA
<i>endocet</i>	1	ST; QL
<i>fentanyl</i>	1	ST; QL
<i>fentanyl citrate</i>	1	PA; QL
<i>hydrocodone bitartrate</i>	1	ST; QL
<i>hydrocodone-acetaminophen</i>	1	ST; QL
<i>hydrocodone-ibuprofen</i>	1	ST; QL
<i>hydromorphone oral liquid</i>	1	ST; QL
<i>hydromorphone oral tablet</i>	1	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.



Drug Name	Drug Tier	Requirements / Limits
<i>hydromorphone oral tablet extended release 24 hr</i>	1	PA; QL
<i>hydromorphone rectal</i>	1	ST; QL
<i>levorphanol tartrate</i>	1	ST; QL
<i>methadone injection</i>	1	
<i>methadone oral</i>	1	PA
<i>methadose</i>	1	PA
<i>morphine concentrate</i>	1	ST; QL
<i>morphine oral capsule, er multiphase 24 hr</i>	1	PA; QL
<i>morphine oral capsule, extend. release pellets</i>	1	PA; QL
<i>morphine oral solution</i>	1	ST; QL
<i>morphine oral tablet</i>	1	ST; QL
<i>morphine oral tablet extended release</i>	1	PA; QL
<i>morphine rectal</i>	1	ST; QL
<i>oxycodone</i>	1	ST; QL
<i>oxycodone-acetaminophen</i>	1	ST; QL
<b>OXYCONTIN</b>	3	PA; QL
<i>oxymorphone oral tablet</i>	1	ST; QL
<i>oxymorphone oral tablet extended release 12 hr</i>	1	PA; QL
<i>prolate</i>	1	ST; QL
<b>SUBLOCADE</b>	4	
<i>tencon</i>	1	
<i>zebutal</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>NON-NARCOTIC ANALGESICS</b>		
<i>aspirin</i>	6	ACA; OTC
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol</i>	1	PA; QL
<i>celecoxib</i>	1	ST
<i>diclofenac potassium oral capsule</i>	1	
<i>diclofenac potassium oral powder in packet</i>	1	ST; QL
<i>diclofenac potassium oral tablet 25 mg</i>	1	ST
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical</i>	1	ST; QL
<i>diclofenac-misoprostol</i>	1	
<i>diflunisal</i>	1	
<i>etodolac</i>	1	
<i>fenoprofen</i>	1	ST
<i>flurbiprofen</i>	1	
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
<i>indomethacin</i>	1	
<i>ketoprofen oral capsule 25 mg</i>	1	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ketorolac</i>	1	QL
KLOXXADO	2	QL
<i>lofena</i>	1	ST
<i>meclofenamate</i>	1	
<i>mefenamic acid</i>	1	
<i>meloxicam</i>	1	QL
<i>meloxicam submicronized</i>	1	ST; QL
<i>nabumetone</i>	1	
<i>naloxone injection</i>	1	PA
<i>naloxone nasal</i>	1	QL
<i>naltrexone</i>	1	
<i>naproxen oral suspension</i>	1	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	
<i>naproxen sodium</i>	1	
NUCYNTA	3	ST; QL
NUCYNTA ER	3	PA; QL
<i>oxaprozin</i>	1	
<i>pentazocine-naloxone</i>	1	ST; QL
<i>piroxicam</i>	1	
<i>salsalate</i>	1	
<i>sulindac</i>	1	
<i>tramadol</i>	1	ST; QL
<i>tramadol-acetaminophen</i>	1	ST; QL
<i>tri-buffered aspirin</i>	6	ACA; OTC
VISCO-3	4	PA
VIVITROL	4	
ZUBSOLV	2	

Drug Name	Drug Tier	Requirements / Limits
<b>PSYCHOTHERAPEUTIC DRUGS</b>		
ABILIFY MAINTENA	2	
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine sulfate</i>	1	PA
<i>aripiprazole oral solution</i>	1	
<i>aripiprazole oral tablet</i>	1	QL
<i>aripiprazole oral tablet, disintegrating</i>	1	QL
ARISTADA	2	
ARISTADA INITIO	2	
<i>armodafinil</i>	1	PA; QL
<i>asenapine maleate</i>	1	QL
<i>atomoxetine</i>	1	PA
BELSOMRA	3	PA; QL
<i>bupropion hcl oral tablet</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr</i>	1	QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	QL
<i>buspirone</i>	1	
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	1	
<i>citalopram oral solution</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>citalopram oral tablet</i>	1	QL
<i>clomipramine</i>	1	
<i>clonidine hcl</i>	1	PA
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
<i>desipramine</i>	1	
<i>desvenlafaxine succinate</i>	1	ST; QL
<i>dexmethylphenidate</i>	1	PA
<i>dextroamphetamine sulfate</i>	1	PA
<i>dextroamphetamine-amphetamine</i>	1	PA
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
<i>doxepin oral capsule</i>	1	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	1	PA; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	QL
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; QL
<i>ergoloid</i>	1	
<i>escitalopram oxalate oral solution</i>	1	ST
<i>escitalopram oxalate oral tablet</i>	1	QL
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL
FETZIMA	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	ST; QL
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet</i>	1	ST; QL
<i>fluphenazine hcl</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	ST; QL
<i>fluvoxamine oral tablet</i>	1	QL
<i>guanfacine</i>	1	PA
<i>haloperidol</i>	1	
<i>haloperidol lactate</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
<i>lithium carbonate</i>	1	
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
<i>loxapine succinate</i>	1	
<i>lurasidone</i>	1	QL
MARPLAN	3	
<i>methamphetamine</i>	1	PA
<i>methylphenidate</i>	1	ST
<i>methylphenidate hcl oral cap, er sprinkle, biphaseic 40-60</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	PA
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	1	PA
<i>methylphenidate hcl oral solution</i>	1	PA
<i>methylphenidate hcl oral tablet</i>	1	PA
<i>methylphenidate hcl oral tablet extended release</i>	1	PA
<i>methylphenidate hcl oral tablet extended release 24hr</i>	1	PA
<i>methylphenidate hcl oral tablet,chewable</i>	1	PA
<i>midazolam</i>	1	
<i>mirtazapine</i>	1	
<i>modafinil</i>	1	PA; QL
<i>molindone</i>	1	
<i>nortriptyline</i>	1	
<i>olanzapine</i>	1	QL
<i>olanzapine-fluoxetine</i>	1	
<i>oxazepam</i>	1	
<i>paliperidone</i>	1	QL
<i>paroxetine hcl oral suspension</i>	1	ST
<i>paroxetine hcl oral tablet</i>	1	QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>paroxetine mesylate(menop.sym )</i>	1	ST; QL
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
<i>phenelzine</i>	1	
<i>pimozide</i>	1	
<i>procentra</i>	1	PA
<i>protriptyline</i>	1	
QUAZEPAM	3	
<i>quetiapine</i>	1	QL
<i>ramelteon</i>	1	QL
REXULTI	3	QL
RISPERDAL CONSTA	2	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	QL
<i>risperidone oral tablet,disintegrating</i>	1	QL
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet</i>	1	QL
SODIUM OXYBATE	4	PA; QL
SUNOSI	2	PA; QL
<i>temazepam</i>	1	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranlycypromine</i>	1	
<i>trazodone</i>	1	
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>trimipramine</i>	1	
TRINTELLIX	3	PA; QL
<i>venlafaxine</i>	1	QL
<i>vilazodone</i>	1	PA; QL
XYREM	4	PA; LA; QL
XYWAV	4	PA; LA; QL
<i>zaleplon</i>	1	QL
<i>zenzedi</i>	1	PA
<i>ziprasidone hcl</i>	1	QL
<i>zolpidem</i>	1	QL
ZULRESSO	4	PA

## CARDIOVASCULAR, HYPERTENSION & LIPIDS

### ANTIARRHYTHMIC AGENTS

<i>amiodarone</i>	1	
<i>disopyramide phosphate</i>	1	
<i>dofetilide</i>	1	
<i>flecainide</i>	1	
<i>mexiletine</i>	1	
MULTAQ	3	
<i>pacerone</i>	1	
<i>propafenone</i>	1	
<i>quinidine gluconate</i>	1	
<i>quinidine sulfate</i>	1	
<i>sorine</i>	1	
<i>sotalol</i>	1	
<i>sotalol af</i>	1	
SOTYLIZE	2	

### ANTIHYPERTENSIVE THERAPY

<i>acebutolol</i>	1	
<i>aliskiren</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide</i>	1	
<i>candesartan</i>	1	
<i>candesartan-hydrochlorothiazid</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	1	
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	QL
<i>clonidine hcl</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>diltiazem</i>	1	
<i>dilt-xr</i>	1	
<i>doxazosin</i>	1	QL
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	1	
<i>epoprostenol</i>	4	PA
<i>epoprostenol (glycine)</i>	4	PA
<i>eprosartan</i>	1	
<i>ethacrynic acid</i>	1	
<i>felodipine</i>	1	
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide</i>	1	
<i>guanfacine</i>	1	
<i>hydralazine</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	1	
<i>isradipine</i>	1	
KERENDIA	2	PA; QL
<i>labetalol</i>	1	
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
<i>losartan</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>losartan-hydrochlorothiazide</i>	1	
<i>matzim la</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	1	
<i>metoprolol tartrate</i>	1	
<i>metirosine</i>	1	PA
<i>minoxidil</i>	1	
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nebivolol</i>	1	
<i>nicardipine</i>	1	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1	
<i>nisoldipine</i>	1	
<i>olmesartan</i>	1	
<i>olmesartan-amlodipin-hcthiacid</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	1	PA
<i>pindolol</i>	1	
<i>prazosin</i>	1	
<i>propranolol</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
<i>spironolactone</i>	1	
<i>spironolacton-hydrochlorothiaz</i>	1	
<i>taztia xt</i>	1	
TEKTURNA HCT	3	
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazid</i>	1	
<i>terazosin</i>	1	QL
<i>tiadylt er</i>	1	
<i>timolol maleate</i>	1	
<i>torse mide</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	1	
<i>treprostinil sodium</i>	4	PA
<i>triamterene</i>	1	
<i>triamterene-hydrochlorothiazid</i>	1	
UPTRAVI	4	PA; LA; QL
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
<i>veletri</i>	4	PA
<i>verapamil</i>	1	
<b>CARDIAC GLYCOSIDES</b>		
<i>digitek</i>	1	
<i>digox</i>	1	
<i>digoxin</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>COAGULATION THERAPY</b>		
ADVATE	4	PA
ADYNOVATE	4	PA
AFSTYLA	4	PA
ALPHANATE	4	PA
ALPROLIX	4	PA
<i>aminocaproic acid</i>	1	
<i>aspirin-dipyridamole</i>	1	
BENEFIX	4	PA
BRILINTA	2	
CABLIVI	4	PA; LA
CEPROTIN (BLUE BAR)	4	PA
CEPROTIN (GREEN BAR)	4	PA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
COAGADEX	4	PA
CORIFACT	4	PA
<i>dabigatran etexilate</i>	1	PA
<i>dipyridamole</i>	1	
DOPTLET (15 TAB PACK)	4	PA; LA; QL
ELIQUIS	2	PA
ELIQUIS DVT-PE TREAT 30D START	2	PA
ELOCTATE	4	PA
<i>enoxaparin</i>	4	PA
ESPEROCT	4	PA
FEIBA NF	4	PA
<i>fondaparinux</i>	4	PA
HEMLIBRA	4	PA
HEMOFIL M HIGH	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
HEMOFIL M LOW	4	PA
HEMOFIL M MID	4	PA
HEMOFIL M SUPER HIGH	4	PA
<i>heparin (porcine) in 5 % dex</i>	1	PA
<i>heparin (porcine) in nacl (pf)</i>	1	PA
<i>heparin(porcine) in 0.45% nacl</i>	1	PA
<i>heparin, porcine (pf)</i>	1	PA
HUMATE-P	4	PA
IXINITY	4	PA
<i>jantoven</i>	1	
JIVI	4	PA
KOGENATE FS	4	PA
KOVALTRY	4	PA
NOVOEIGHT	4	PA
NPLATE	4	PA
OBIZUR	4	PA
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1)</i>	1	PA; QL
<i>prasugrel</i>	1	
PROFILNINE	4	PA
PROMACTA	4	PA; LA
SEVENFACT	4	PA
TAVALISSE	4	PA; LA; QL
TRETTEN	4	PA
<i>vitamin k</i>	1	PA
VONVENDI	4	PA
<i>warfarin</i>	1	
XARELTO	2	PA

Drug Name	Drug Tier	Requirements / Limits
XARELTO DVT-PE TREAT 30D START	2	PA
ZONTIVITY	3	PA
<b>LIPID/CHOLESTEROL LOWERING AGENTS</b>		
<i>amlodipine-atorvastatin</i>	1	QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	6	ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	1	
<i>colestipol</i>	1	
<i>ezetimibe</i>	1	ST
<i>ezetimibe-simvastatin</i>	1	QL
<i>fenofibrate</i>	1	
<i>fenofibrate micronized</i>	1	
<i>fenofibrate nanocrystallized</i>	1	
<i>fenofibric acid</i>	1	
<i>fluvastatin</i>	6	ACA; QL
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA
JUXTAPID	4	PA; LA
<i>lovastatin</i>	6	ACA; QL
<i>niacin</i>	1	
<i>omega-3 acid ethyl esters</i>	1	PA
<i>pravastatin</i>	6	ACA; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>prevalite</i>	1	
REPATHA PUSHTRONEX	2	PA
REPATHA SURECLICK	2	PA
REPATHA SYRINGE	2	PA
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	6	ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	6	ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	QL
<b>MISCELLANEOUS CARDIOVASCULAR AGENTS</b>		
CAMZYOS	4	PA; QL
ENTRESTO	2	QL
<i>ranolazine</i>	1	
VERQUVO	2	QL
VYNDAMAX	4	PA
VYNDAQEL	4	PA
<b>NITRATES</b>		
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>nitro-bid</i>	1	
<i>nitroglycerin</i>	1	
<i>nitro-time</i>	1	
<b>DERMATOLOGICALS/TOPICAL THERAPY</b>		
<b>ANTIPSORIATIC / ANTISEBORRHEIC</b>		

Drug Name	Drug Tier	Requirements / Limits
<i>acitretin</i>	1	
<i>calcipotriene</i>	1	QL
<i>calcipotriene- betamethasone topical ointment</i>	1	ST; QL
<i>calcipotriene- betamethasone topical suspension</i>	1	QL
<i>calcitriol</i>	1	
<i>hydrocortisone- pramoxine</i>	1	ST
<i>selenium sulfide</i>	1	
SKYRIZI	4	PA; QL
STELARA	4	PA; QL
<i>sulfacetamide sodium</i>	1	
TALTZ AUTOINJECTOR	4	PA; QL
TALTZ AUTOINJECTOR (2 PACK)	4	PA; QL
TALTZ AUTOINJECTOR (3 PACK)	4	PA; QL
TALTZ SYRINGE	4	PA; QL
TREMFYA	4	PA; QL
<b>BURN THERAPY</b>		
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
<b>MISCELLANEOUS DERMATOLOGICALS</b>		
ADBRY	4	PA; QL
<i>ammonium lactate</i>	1	
CIBINQO	4	PA; QL
<i>doxepin</i>	1	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
DUPIXENT PEN	4	PA; QL
DUPIXENT SYRINGE	4	PA; QL
<i>fluorouracil</i>	1	
<i>iodine-sodium iodide</i>	1	
<i>methoxsalen</i>	1	
<i>methyl salicylate</i>	1	
<i>pimecrolimus</i>	1	PA; QL
<i>podofilox</i>	1	
<i>pradoxin</i>	1	ST; QL
REGRANEX	2	QL
<i>tacrolimus</i>	1	PA; QL
VALCHLOR	4	PA
VEREGEN	3	PA; QL
<i>wintergreen oil</i>	1	
<b>THERAPY FOR ACNE</b>		
<i>acutane</i>	1	
<i>adapalene-benzoyl peroxide</i>	1	
<i>amnesteem</i>	1	
<i>avar</i>	1	
<i>avita</i>	1	
<i>azelaic acid</i>	1	
<i>benzepro</i>	1	
<i>benzoyl peroxide</i>	1	
<i>bp 10-1</i>	1	ST
<i>brimonidine</i>	1	PA
<i>claravis</i>	1	
<i>clindacin</i>	1	QL
<i>clindacin etz</i>	1	
<i>clindacin p</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical foam</i>	1	QL
<i>clindamycin phosphate topical gel</i>	1	QL
<i>clindamycin phosphate topical gel, once daily</i>	1	QL
<i>clindamycin phosphate topical lotion</i>	1	QL
<i>clindamycin phosphate topical solution</i>	1	QL
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
<i>clindamycin-tretinoin</i>	1	
<i>dapsone</i>	1	
<i>ery pads</i>	1	
<i>erygel</i>	1	
<i>erythromycin with ethanol</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
<i>isotretinoin</i>	1	
<i>ivermectin</i>	1	QL
<i>metronidazole</i>	1	
<i>neuac</i>	1	
<i>rosadan</i>	1	
<i>rosula cleansing cloths</i>	1	
<i>sss 10-5</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur</i>	1	
<i>sulfacleanse 8-4</i>	1	ST
<i>tazarotene</i>	1	PA
<i>tretinoin</i>	1	
<i>tretinoin microspheres</i>	1	
<i>zenatane</i>	1	

### TOPICAL ANESTHETICS

<i>lidocaine hcl</i>	1	
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine topical adhesive patch,medicated</i>	1	PA
<i>lidocaine topical ointment</i>	1	QL
<i>lidocaine viscous</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL
<i>lidocaine-prilocaine topical kit</i>	1	
<i>lidocort</i>	1	
<i>lta pre-attached</i>	1	
ZTLIDO	2	PA

### TOPICAL ANTIBACTERIALS

<i>gentamicin</i>	1	QL
<i>lugols</i>	1	
<i>mafenide acetate</i>	1	
<i>mupirocin</i>	1	QL
<i>strong iodine</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	2	

### TOPICAL ANTIFUNGALS

Drug Name	Drug Tier	Requirements / Limits
<i>ciclodan topical cream</i>	1	QL
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL
<i>ciclopirox topical gel</i>	1	QL
<i>ciclopirox topical shampoo</i>	1	QL
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL
<i>ciclopirox-ure-camph-menth-euc</i>	1	
<i>clotrimazole</i>	1	QL
<i>clotrimazole-betamethasone</i>	1	QL
<i>econazole</i>	1	QL
ERTACZO	3	QL
EXELDERM	3	QL
JUBLIA	3	ST
<i>ketoconazole</i>	1	QL
<i>ketodan</i>	1	QL
<i>ketodan kit</i>	1	
LULICONAZOLE	3	QL
MENTAX	3	QL
<i>naftifine</i>	1	QL
<i>nyamyc</i>	1	QL
<i>nystatin</i>	1	QL
<i>nystatin-triamcinolone</i>	1	QL
<i>nystop</i>	1	QL
<i>oxiconazole</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>tavaborole</i>	1	ST
<b>TOPICAL ANTIVIRALS</b>		
<i>acyclovir</i>	1	PA; QL
<i>penciclovir</i>	1	
XERESE	3	
<b>TOPICAL CORTICOSTEROIDS</b>		
<i>ala-cort</i>	1	
<i>alclometasone</i>	1	
<i>apexicon e</i>	1	ST
<i>baser</i>	1	ST
<i>betamethasone dipropionate</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	ST
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented</i>	1	
<i>clobetasol scalp</i>	1	QL
<i>clobetasol topical cream</i>	1	QL
<i>clobetasol topical foam</i>	1	ST; QL
<i>clobetasol topical gel</i>	1	QL
<i>clobetasol topical lotion</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol topical ointment</i>	1	QL
<i>clobetasol topical shampoo</i>	1	ST; QL
<i>clobetasol topical spray, non-aerosol</i>	1	ST; QL
<i>clobetasol-emollient topical cream</i>	1	QL
<i>clobetasol-emollient topical foam</i>	1	ST; QL
<i>clocortolone pivalate</i>	1	
<i>clodan</i>	1	ST; QL
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	1	ST
<i>desonide topical lotion</i>	1	ST
<i>desonide topical ointment</i>	1	
<i>desoximetasone</i>	1	ST
<i>desrx</i>	1	ST
<i>diflorasone</i>	1	ST; QL
<i>fluocinolone</i>	1	
<i>fluocinolone and shower cap</i>	1	
<i>fluocinonide</i>	1	QL
<i>fluocinonide-e</i>	1	QL
<i>flurandrenolide</i>	1	ST; QL
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical lotion</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	1	ST
<i>halobetasol propionate</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone butyrate topical cream</i>	1	QL
<i>hydrocortisone butyrate topical lotion</i>	1	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	1	ST; QL
<i>hydrocortisone butyrate topical solution</i>	1	ST; QL
<i>hydrocortisone butyr-emollient</i>	1	QL
<i>hydrocortisone valerate</i>	1	
<i>mometasone</i>	1	
<i>nolix</i>	1	ST; QL
<i>prednicarbate</i>	1	
<i>scalacort</i>	1	
<i>tovet emollient</i>	1	ST; QL
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>trianex</i>	1	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
<i>tritocin</i>	1	ST
<b>TOPICAL ENZYMES</b>		
SANTYL	2	QL
<b>TOPICAL SCABICIDES / PEDICULICIDES</b>		
<i>crotan</i>	1	
<i>lindane</i>	1	
<i>malathion</i>	1	
<i>permethrin</i>	1	
<i>spinosad</i>	1	
<b>DIAGNOSTICS &amp; MISCELLANEOUS AGENTS</b>		
<b>IRRIGATING SOLUTIONS</b>		
<i>lactated ringers</i>	1	
<i>neomycin-polymyxin b gu</i>	1	
<i>ringer's</i>	1	
<i>tis-u-sol pentalyte</i>	1	
<b>MISCELLANEOUS AGENTS</b>		
<i>acamprosate</i>	1	
<i>acetic acid</i>	1	
<i>anagrelide</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>aqua care sodium chloride</i>	1	
<i>aqua care sterile water</i>	1	
<i>caffeine citrate</i>	1	
CARBAGLU	4	PA; LA
<i>carglumic acid</i>	4	PA
<i>cevimeline</i>	1	
CHEMET	2	PA
<i>deferasirox</i>	4	PA
<i>deferiprone</i>	4	PA
<i>disulfiram</i>	1	
EMPAVELI	4	PA
ENJAYMO	4	PA
FERRIPROX	4	PA
FERRIPROX (2 TIMES A DAY)	4	PA
INCRELEX	4	PA; LA
<i>levocarnitine</i>	1	
<i>levocarnitine (with sugar)</i>	1	
<i>midodrine</i>	1	
<i>nitisinone</i>	4	PA; LA
NITYR	4	PA; LA
PHEBURANE	4	PA
<i>pilocarpine hcl</i>	1	
RAVICTI	4	PA
REVCovi	4	PA; LA
<i>riluzole</i>	1	PA
<i>risedronate</i>	1	QL
<i>sodium chloride</i>	1	
<i>sodium phenylbutyrate</i>	1	PA
SOLIRIS	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tiopronin</i>	4	PA
<i>trientine</i>	1	PA
<i>water for irrigation, sterile</i>	1	
XURIDEN	4	PA
ZEMAIRA	4	PA; LA
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl (smoking deter)</i>	6	ACA
<i>nicorette buccal gum</i>	6	ACA; OTC
NICORETTE BUCCAL LOZENGE	2	OTC
NICORETTE BUCCAL MINI LOZENGE	2	OTC
<i>nicotine</i>	6	ACA; OTC
<i>nicotine (polacrilex)</i>	6	ACA; OTC
NICOTROL	6	ACA
NICOTROL NS	6	ACA
<i>quit 2</i>	6	ACA; OTC
<i>quit 4</i>	6	ACA; OTC
<i>stop smoking aid</i>	6	ACA; OTC
<i>varenicline</i>	6	ACA
<b>EAR, NOSE &amp; THROAT MEDICATIONS</b>		
<b>MISCELLANEOUS AGENTS</b>		
<i>azelastine nasal aerosol, spray</i>	1	QL
<i>azelastine nasal spray, non-aerosol</i>	1	
<i>chlorhexidine gluconate</i>	1	
<i>ipratropium bromide</i>	1	QL
<i>olopatadine</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>oralone</i>	1	
<i>paroex oral rinse</i>	1	
<i>perio gard</i>	1	
<i>pilocarpine hcl</i>	1	
<i>triamcinolone acetonide</i>	1	
<b>MISCELLANEOUS OTIC PREPARATIONS</b>		
<i>acetic acid</i>	1	
<i>ciprofloxacin hcl</i>	1	
<i>flac otic oil</i>	1	QL
<i>fluocinolone acetonide oil</i>	1	QL
<i>hydrocortisone-acetic acid</i>	1	QL
<i>ofloxacin</i>	1	QL
<b>OTIC STEROID / ANTIBIOTIC</b>		
CIPRO HC	3	
<i>ciprofloxacin-dexamethasone</i>	1	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
<b>ENDOCRINE/DIABETES</b>		
<b>ADRENAL HORMONES</b>		
<i>cortisone</i>	1	
<i>dexabliss</i>	1	
<i>dexamethasone</i>	1	
<i>dexamethasone intensol</i>	1	
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	1	
<i>methylprednisolone</i>	1	
<i>millipred</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>millipred dp</i>	1	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
<b>ANTITHYROID AGENTS</b>		
<i>methimazole</i>	1	
<i>potassium iodide</i>	1	
<i>propylthiouracil</i>	1	
<b>BLOOD GLUCOSE MONITORING DEVICES &amp; SUPPLIES</b>		
FREESTYLE INSULINX	2	OTC
FREESTYLE INSULINX TEST STRIPS	2	OTC
FREESTYLE LITE STRIPS	2	OTC
FREESTYLE TEST	2	OTC
PRECISION XTRA TEST	2	OTC
<b>DIABETES, SUPPLIES, &amp; DURABLE MEDICAL EQUIPMENT</b>		
ACE AEROSOL CLOUD ENHANCER	2	
AEROCHAMBER MINI	2	
AEROCHAMBER PLUS FLOW-VU	2	
AEROCHAMBER PLUS Z STAT	2	
AEROTRACH PLUS	2	
AEROVENT PLUS	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
BREATHERITE MDI SPACER	2	
COMPACT SPACE CHAMBER	2	
EASIVENT HOLDING CHAMBER	2	
FLEXICHAMBER	2	
INSPIRACHAMBER	2	
LITEAIRE MDI CHAMBER	2	
MICROCHAMBER	2	
MICROSPACER	2	
OPTICHAMBER DIAMOND VHC	2	
POCKET CHAMBER	2	
PRIMEAIRE	2	
PROCHAMBER	2	
RITEFLO AEROCHAMBER	2	
SPACE CHAMBER	2	
VORTEX HOLDING CHAMBER	2	
<b>GLUCOSE ELEVATING AGENTS</b>		
BAQSIMI	2	QL
<i>diazoxide</i>	1	
GLUCAGON EMERGENCY KIT (HUMAN)	2	QL
GVOKE	2	QL
GVOKE HYPOPEN 2-PACK	2	QL

Drug Name	Drug Tier	Requirements / Limits
GVOKE PFS 2-PACK SYRINGE	2	QL
<b>INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU</b>		
BD INTEGRA NEEDLE	2	
BD MICROTAINER LANCET	2	OTC
BD SPECIALTY USE NEEDLES	2	
BD ULTRA FINE LANCETS	2	OTC
BD ULTRA-FINE NANO PEN NEEDLE	2	OTC
CEQR SIMPLICITY	2	
FREESTYLE CONTROL	2	OTC
FREESTYLE FLASH SYSTEM	2	OTC; QL
FREESTYLE FREEDOM	2	OTC; QL
FREESTYLE FREEDOM LITE	2	OTC; QL
FREESTYLE INSULINX	2	OTC; QL
FREESTYLE LIBRE 14 DAY READER	DME	PA
FREESTYLE LIBRE 14 DAY SENSOR	DME	PA; QL
FREESTYLE LIBRE 2 READER	DME	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.



Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 2 SENSOR	DME	PA; QL
FREESTYLE LIBRE 3 SENSOR	DME	PA; QL
FREESTYLE LITE METER	2	OTC; QL
FREESTYLE SIDEKICK II	2	OTC; QL
FREESTYLE SYSTEM KIT	2	OTC; QL
LANCETS	2	OTC
LANCING DEVICE	2	OTC
MEDISENSE	2	OTC
MEDISENSE GLUCOSE KETONE	2	OTC
OMNIPOD 5 G6 INTRO KIT (GEN 5)	2	QL
OMNIPOD 5 G6 PODS (GEN 5)	2	QL
OMNIPOD CLASSIC PODS (GEN 3)	2	PA; QL
OMNIPOD DASH INTRO KIT (GEN 4)	2	QL
OMNIPOD DASH PODS (GEN 4)	2	PA; QL
PRECISION XTRA KETONE-GLUCOSE	2	OTC
PRECISION XTRA MONITOR	2	OTC; QL
SAFE-CLIP NEEDLE STORAGE DEV	2	OTC
V-GO 20	2	

Drug Name	Drug Tier	Requirements / Limits
V-GO 30	2	
V-GO 40	2	
<b>INSULIN THERAPY</b>		
APIDRA SOLOSTAR U-100 INSULIN	3	
APIDRA U-100 INSULIN	3	
HUMALOG JUNIOR KWIKPEN U-100	2	
HUMALOG KWIKPEN INSULIN	2	
HUMALOG MIX 50-50 INSULN U-100	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG MIX 75-25(U-100)INSULN	2	
HUMALOG U-100 INSULIN	2	
HUMULIN 70/30 U-100 INSULIN	2	
HUMULIN 70/30 U-100 KWIKPEN	2	
HUMULIN N NPH INSULIN KWIKPEN	2	
HUMULIN N NPH U-100 INSULIN	2	
HUMULIN R REGULAR U-100 INSULN	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
HUMULIN R U-500 (CONC) INSULIN	2	
HUMULIN R U-500 (CONC) KWIKPEN	2	
LEVEMIR FLEXPEN	3	
LEVEMIR FLEXTOUCH U100 INSULIN	3	
LEVEMIR U-100 INSULIN	3	
LYUMJEV KWIKPEN U-100 INSULIN	2	
LYUMJEV KWIKPEN U-200 INSULIN	2	
LYUMJEV U-100 INSULIN	2	
NOVOLOG FLEXPEN U-100 INSULIN	3	
NOVOLOG MIX 70-30 U-100 INSULIN	3	
NOVOLOG MIX 70-30FLEXPEN U-100	3	
NOVOLOG PENFILL U-100 INSULIN	3	
NOVOLOG U-100 INSULIN ASPART	3	
RELION NOVOLIN 70/30	3	
RELION NOVOLIN N	3	
RELION NOVOLIN R	3	

Drug Name	Drug Tier	Requirements / Limits
SEMGLEE(INSULIN GLARGINE-YFGN)	2	
SEMGLEE(INSULIN GLARG-YFGN)PEN	2	
TOUJEO MAX U-300 SOLOSTAR	2	
TOUJEO SOLOSTAR U-300 INSULIN	2	
<b>MISCELLANEOUS HORMONES</b>		
ALDURAZYME	4	PA
BRINEURA	4	PA
<i>cabergoline</i>	1	QL
<i>calcitonin (salmon) injection</i>	1	PA
<i>calcitonin (salmon) nasal</i>	1	
CERDELGA	4	PA; QL
CEREZYME	4	PA
<i>cinacalcet</i>	1	PA
<i>clomiphene citrate</i>	1	
CRYSVITA	4	PA; QL
<i>danazol</i>	1	
<i>desmopressin injection</i>	4	PA
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	PA
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>desmopressin oral</i>	1	
<i>doxercalciferol</i>	1	ST
ELAPRASE	4	PA
FABRAZYME	4	PA
<i>javygtor</i>	4	PA
KANUMA	4	PA
LUMIZYME	4	PA
MEPSEVII	4	PA
METHITEST	2	PA
<i>methyltestosterone</i>	1	PA
<i>miglustat</i>	4	PA; LA; QL
MYALEPT	4	PA; LA
NAGLAZYME	4	PA; LA
ORILISSA	2	PA; QL
<i>oxandrolone</i>	1	
PALYNZIQ	4	PA; LA; QL
<i>paricalcitol</i>	1	ST
<i>sapropterin</i>	4	PA
SOMAVERT	4	PA
STRENSIQ	4	PA; LA
<i>testosterone</i>	1	PA; QL
<i>testosterone cypionate</i>	1	PA
<i>testosterone enanthate</i>	1	PA
<i>tolvaptan</i>	4	PA; LA; QL
VIMIZIM	4	PA
<i>zoledronic acid</i>	4	PA
<b>NON-INSULIN HYPOGLYCEMIC AGENTS</b>		
<i>acarbose</i>	1	
BYDUREON BCISE	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
BYETTA	2	PA; QL
FARXIGA	2	ST; QL
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYXAMBI	2	ST; QL
JANUMET	2	ST; QL
JANUMET XR	2	ST; QL
JANUVIA	2	ST; QL
JARDIANCE	2	ST; QL
<i>metformin oral solution</i>	1	ST
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	QL
<i>miglitol</i>	1	
MOUNJARO	2	PA; QL
<i>nateglinide</i>	1	
<i>pioglitazone</i>	1	QL
<i>pioglitazone-glimepiride</i>	1	QL
<i>pioglitazone-metformin</i>	1	QL
<i>repaglinide</i>	1	
SEGLUROMET	2	ST; QL
STEGLATRO	2	ST; QL
STEGLUJAN	2	ST; QL
SYMLINPEN 120	2	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SYMLINPEN 60	2	PA; QL
SYNJARDY	2	ST; QL
SYNJARDY XR	2	ST; QL
TRIJARDY XR	2	ST
TRULICITY	2	PA; QL
XIGDUO XR	2	ST; QL

### THYROID HORMONES

ARMOUR THYROID	2	
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine</i>	1	
<i>np thyroid</i>	1	
<i>unithroid</i>	1	

### GASTROENTEROLOGY

#### ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz</i>	1	
<i>belladonna alkaloids-opium</i>	1	ST; QL
<i>chlordiazepoxide-clidinium</i>	1	
<i>dicyclomine</i>	1	
<i>diphenoxylate-atropine</i>	1	
<i>ed-spaz</i>	1	
<i>glycopyrrolate</i>	1	
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
<i>loperamide</i>	1	
<i>methscopolamine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>opium tincture</i>	1	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>phenobarb-hyoscy-atropine-scop</i>	1	
<i>phenohydro</i>	1	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	

### MISCELLANEOUS AGENTS

<i>lanthanum</i>	1	QL
LOKELMA	2	QL
<i>sevelamer carbonate</i>	1	QL
<i>sevelamer hcl</i>	1	QL
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	
VELPHORO	3	QL

### MISCELLANEOUS GASTROINTESTINAL AGENTS

<i>alosetron</i>	1	
<i>alvimopan</i>	1	
<i>anucort-hc</i>	1	
<i>aprepitant</i>	1	QL
<i>balsalazide</i>	1	
<i>betaine</i>	4	PA
<i>budesonide</i>	1	
CHENODAL	4	PA; LA
CHOLBAM ORAL CAPSULE 250 MG	4	PA
CHOLBAM ORAL CAPSULE 50 MG	4	PA; QL
<i>citrate of magnesia</i>	6	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>citroma</i>	6	ACA; OTC
<i>clearlax</i>	6	ACA; OTC
<i>compro</i>	1	
CREON	2	
<i>cromolyn</i>	1	
DIPENTUM	3	
<i>dronabinol</i>	1	PA
<i>dulcolax</i> (magnesium hydroxide)	6	ACA; OTC
ENTYVIO	4	PA
<i>enulose</i>	1	
<i>gavilax</i>	6	ACA; OTC
<i>gavilyte-c</i>	6	ACA
<i>gavilyte-g</i>	6	ACA
<i>generlac</i>	1	
<i>gentle laxative</i> (bisacodyl)	6	ACA; OTC
<i>gentlelax</i>	6	ACA; OTC
<i>granisetron hcl</i>	1	QL
<i>hemmorex-hc</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone acetate</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
INFLECTRA	4	PA
<i>lactulose</i>	1	
<i>laxative (bisacodyl)</i>	6	ACA; OTC
<i>laxative peg 3350</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine-hydrocortisone-aloe</i>	1	
<i>lubiprostone</i>	1	QL
<i>magnesium citrate</i>	6	ACA; OTC
<i>meclizine</i>	1	
<i>mesalamine</i>	1	
<i>mesalamine with cleansing wipe</i>	1	
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	6	ACA; OTC
<i>milk of magnesia concentrated</i>	6	ACA; OTC
MOVANTIK	2	QL
<i>natura-lax</i>	6	ACA; OTC
OICALIVA	4	PA; LA; QL
<i>ondansetron</i>	1	QL
<i>ondansetron hcl</i>	1	QL
<i>oral saline laxative</i>	6	ACA; OTC
PANCREAZE	2	
<i>peg 3350-electrolytes</i>	6	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	6	ACA
<i>peg-electrolyte soln</i>	6	ACA
PENTASA	2	
<i>phosphate laxative</i>	6	ACA; OTC
<i>polyethylene glycol 3350</i>	6	ACA; OTC
<i>powderlax</i>	6	ACA; OTC
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax</i>	6	ACA; OTC
RECTIV	2	
RELISTOR	2	PA
<i>scopolamine base</i>	1	
SKYRIZI	4	PA; QL
<i>smoothlax</i>	6	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	6	ACA
SUCRAID	4	PA
<i>sulfasalazine</i>	1	
<i>trimethobenzamide</i>	1	
TRULANCE	2	
UCERIS	2	
<i>ursodiol</i>	1	
VARUBI	2	QL
VIBERZI	2	
VIOKACE	2	
<i>women's gentle laxative(bisac)</i>	6	ACA; OTC
ZENPEP	2	
<b>ULCER THERAPY</b>		
<i>amoxicil-clarithromy-lansopraz</i>	1	QL
<i>bismuth subcit k-metronidz-tcn</i>	1	
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg</i>	1	QL
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i>	1	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	PA; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	PA
<i>famotidine</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	1	QL
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	1	
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg</i>	1	ST; QL
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	1	ST
<i>misoprostol</i>	1	
<i>nizatidine</i>	1	
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 40 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>pantoprazole oral granules dr for susp in packet</i>	1	ST
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	
<i>rabeprazole</i>	1	
<i>sucralfate</i>	1	

## IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

### ANTIVIRALS

<i>ribavirin</i>	4	PA
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### BIOTECHNOLOGY DRUGS

FULPHILA	4	PA; QL
ILARIS (PF)	4	PA; LA
LEUKINE	4	PA
MOZOBIL	4	PA
NIVESTYM	4	PA
PROLEUKIN	4	PA
RETACRIT	4	PA
ZIEXTENZO	4	PA; QL

### GROWTH HORMONES

EGRIFTA SV	4	PA
OMNITROPE	4	PA

### INTERFERONS

ACTIMMUNE	4	PA
ALFERON N	2	PA
PEGASYS	4	PA; QL

### MULTIPLE SCLEROSIS AGENTS

Drug Name	Drug Tier	Requirements / Limits
AVONEX	4	PA; QL
BAFIERTAM	4	PA; QL
BETASERON	4	PA; QL
<i>dimethyl fumarate</i>	4	PA; QL
<i> fingolimod</i>	4	PA; QL
<i>glatiramer</i>	4	PA; QL
<i>glatopa</i>	4	PA; QL
KESIMPTA PEN	4	PA; QL
MAYZENT	4	PA; QL
MAYZENT STARTER(FOR 1MG MAINT)	4	PA; QL
MAYZENT STARTER(FOR 2MG MAINT)	4	PA; QL
OCREVUS	4	PA; QL
PLEGRIDY	4	PA; QL
PONVORY	4	PA; QL
PONVORY 14-DAY STARTER PACK	4	PA; QL
REBIF (WITH ALBUMIN)	4	PA; QL
REBIF REBIDOSE	4	PA; QL
REBIF TITRATION PACK	4	PA; QL
<i>teriflunomide</i>	1	PA; QL
VUMERITY	4	PA; QL

### VACCINES & MISCELLANEOUS IMMUNOLOGICALS

ADACEL(TDAP ADOLESN/ADULT )(PF)	6	ACA
AFLURIA QD 2022-23(3YR UP)(PF)	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AFLURIA QUAD 2022-2023(6MO UP)	6	ACA
BEXSERO	6	ACA
BIOTHRAX	2	
BOOSTRIX TDAP	6	ACA
BOTOX	4	PA
COMIRNATY TRIS VACCINE(PF)	6	ACA
DAPTACEL (DTAP PEDIATRIC) (PF)	6	ACA
DENGVAIXA (PF)	6	ACA
ENGERIX-B (PF)	6	ACA
ENGERIX-B PEDIATRIC (PF)	6	ACA
FLUAD QUAD 2022-23(65Y UP)(PF)	6	ACA
FLUARIX QUAD 2022-2023 (PF)	6	ACA
FLUBLOK QUAD 2022-2023 (PF)	6	ACA
FLUCELVAX QUAD 2022-2023	6	ACA
FLUCELVAX QUAD 2022-2023 (PF)	6	ACA
FLULAVAL QUAD 2022-2023 (PF)	6	ACA
FLUMIST QUAD 2022-2023	6	ACA
FLUZONE HIGHDOSE QUAD 22-23 PF	6	ACA
FLUZONE QUAD 2022-2023	6	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUZONE QUAD 2022-2023 (PF)	6	ACA
GAMASTAN	4	PA
GAMASTAN S/D	4	PA
GAMMAGARD LIQUID	4	PA
GAMMAGARD S-D (IGA < 1 MCG/ML)	4	PA
GAMUNEX-C	4	PA
GARDASIL 9 (PF)	6	ACA
GRASTEK	2	PA
HAVRIX (PF)	6	ACA
HIBERIX (PF)	6	ACA
IMOVAX RABIES VACCINE (PF)	2	
INFANRIX (DTAP) (PF)	6	ACA
IPOL	6	ACA
IXIARO (PF)	2	
JANSSEN COVID-19 VACCINE (EUA)	6	ACA
MENACTRA (PF)	6	ACA
MENVEO A-C-Y-W-135-DIP (PF)	6	ACA
M-M-R II (PF)	6	ACA
MODERNA COVID BIVAL(6M-5Y)-PF	6	ACA
MODERNA COVID BIVAL(6Y UP)(PF)	6	ACA
NOVAVAX COVID-19 VACC,ADJ(EUA)	6	ACA
ODACTRA	2	
PEDVAX HIB (PF)	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.



Drug Name	Drug Tier	Requirements / Limits
PFIZER COVID BIVAL(12Y UP)(PF)	6	ACA
PFIZER COVID BIVAL(5-11YR)(PF)	6	ACA
PFIZER COVID BIVAL(6MO-4Y)(PF)	6	ACA
PNEUMOVAX-23	6	ACA
PREHEVBRIO (PF)	6	ACA
PREVNAR 13 (PF)	6	ACA
PREVNAR 20 (PF)	6	ACA
PRIORIX (PF)	6	ACA
PROQUAD (PF)	6	ACA
QUADRACEL (PF)	6	ACA
RABAVERT (PF)	2	
RAGWITEK	2	PA
RECOMBIVAX HB (PF)	6	ACA
ROTARIX	6	ACA
ROTATEQ VACCINE	6	ACA
SHINGRIX (PF)	6	ACA
SPIKEVAX (PF)	6	ACA
STAMARIL (PF)	2	
TDVAX	6	ACA
TICOVAC	2	
TRUMENBA	6	ACA
TWINRIX (PF)	6	ACA
TYPHIM VI	2	
VARIVAX (PF)	6	ACA
VAXNEUVANCE (PF)	6	ACA
VIVOTIF	2	

Drug Name	Drug Tier	Requirements / Limits
XEMBIFY	4	PA
YF-VAX (PF)	2	
<b>IMMUNOLOGY</b>		
<b>INTERLEUKINS</b>		
<i>imiquimod</i>	1	
<b>MUSCULOSKELETAL &amp; RHEUMATOLOGY</b>		
<b>GOUT THERAPY</b>		
<i>allopurinol</i>	1	
<i>colchicine</i>	1	
<i>febuxostat</i>	1	ST
MITIGARE	2	
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	
<b>OSTEOPOROSIS THERAPY</b>		
<i>alendronate</i>	1	QL
FOSAMAX PLUS D	3	ST; QL
<i>ibandronate intravenous</i>	4	PA
<i>ibandronate oral</i>	1	QL
<i>raloxifene</i>	1	
<i>risedronate</i>	1	QL
TYMLOS	4	PA; QL
<b>OTHER RHEUMATOLOGICALS</b>		
ACTEMRA ACTPEN	4	PA; QL
ACTEMRA INTRAVENOUS	4	PA
ACTEMRA SUBCUTANEOUS	4	PA; QL
AMJEVITA	4	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AMJEVITA AUTOINJECTOR	4	PA; QL
BENLYSTA INTRAVENOUS	4	PA
BENLYSTA SUBCUTANEOUS	4	PA; QL
ENBREL	4	PA; QL
ENBREL MINI	4	PA; QL
ENBREL SURECLICK	4	PA; QL
HUMIRA	4	PA; QL
HUMIRA PEN	4	PA; QL
HUMIRA PEN CROHNS-UC-HS START	4	PA; QL
HUMIRA PEN PSOR-UEITS-ADOL HS	4	PA; QL
HUMIRA(CF)	4	PA; QL
HUMIRA(CF) PEDI CROHNS STARTER	4	PA; QL
HUMIRA(CF) PEN	4	PA; QL
HUMIRA(CF) PEN CROHNS-UC-HS	4	PA; QL
HUMIRA(CF) PEN PEDIATRIC UC	4	PA; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS	4	PA; QL
<i>leflunomide</i>	1	QL
OTEZLA	4	PA; QL
OTEZLA STARTER	4	PA; QL
<i>penicillamine</i>	1	
RIDAURA	2	
RINVOQ	4	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SAVELLA	2	ST; QL
SIMPONI	4	PA; QL
XELJANZ	4	PA; QL
XELJANZ XR	4	PA; QL
<b>OBSTETRICS &amp; GYNECOLOGY</b>		
<b>DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES</b>		
CAYA CONTOURED	6	ACA
CONDOMS-PREM LUBRICATED	6	ACA; OTC
FC2 FEMALE CONDOM	6	ACA; OTC
FEMCAP	6	ACA
KYLEENA	4	
MIRENA	6	ACA
PARAGARD T 380A	6	ACA
SKYLA	4	
TRUSTEX-RIA NON-LUB CONDOMS	6	ACA; OTC
<b>ESTROGENS &amp; PROGESTINS</b>		
<i>amabelz</i>	1	
<i>camila</i>	6	ACA
<i>covaryx</i>	1	
<i>covaryx h.s.</i>	1	
<i>deblitane</i>	6	ACA
<i>dotti</i>	1	QL
DUAVEE	3	
<i>eemt</i>	1	
<i>eemt hs</i>	1	
<i>errin</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>estradiol oral</i>	1	
<i>estradiol transdermal</i>	1	QL
<i>estradiol vaginal</i>	1	
<i>estradiol valerate</i>	1	
<i>estradiol-norethindrone acet</i>	1	
<i>estrogens-methyltestosterone</i>	1	
<i>fyavolv</i>	1	
<i>heather</i>	6	ACA
<i>incassia</i>	6	ACA
<i>jencycla</i>	6	ACA
<i>jinteli</i>	1	
<i>lyleq</i>	6	ACA
<i>lyllana</i>	1	QL
<i>lyza</i>	6	ACA
<i>medroxyprogesterone intramuscular</i>	6	ACA; QL
<i>medroxyprogesterone oral</i>	1	
<i>mimvey</i>	1	
<i>nora-be</i>	6	ACA
<i>norethindrone (contraceptive)</i>	6	ACA
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol</i>	1	
<i>progesterone</i>	4	PA
<i>progesterone micronized</i>	1	
<i>sharobel</i>	6	ACA
<i>tulana</i>	6	ACA
<i>yuvafem</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>MISCELLANEOUS OB/GYN</b>		
<i>clindamycin phosphate</i>	1	
<i>eluryng</i>	6	ACA
<i>etonogestrel-ethinyl estradiol</i>	6	ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	6	ACA
<i>isoxsuprine</i>	1	
<i>metronidazole</i>	1	
<i>miconazole-3</i>	1	
MYFEMBREE	2	PA
NEXPLANON	6	ACA
ORIAHNN	2	PA
OSPHENA	3	PA
<i>terconazole</i>	1	
TODAY CONTRACEPTIVE SPONGE	6	ACA; OTC
<i>tranexamic acid</i>	1	
TRIMO-SAN JELLY	2	
<i>vandazole</i>	1	
VCF CONTRACEPTIVE FILM	2	OTC
VCF CONTRACEPTIVE GEL	2	OTC
<i>xulane</i>	6	ACA
<i>zafemy</i>	6	ACA
<b>ORAL CONTRACEPTIVES &amp; RELATED AGENTS</b>		
<i>afirmelle</i>	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>after pill</i>	6	ACA; OTC; QL
<i>altavera (28)</i>	6	ACA
<i>alyacen 1/35 (28)</i>	6	ACA
<i>alyacen 7/7/7 (28)</i>	6	ACA
<i>amethia</i>	6	ACA
<i>amethyst (28)</i>	6	ACA
<i>apri</i>	6	ACA
<i>aranelle (28)</i>	6	ACA
<i>ashlyna</i>	6	ACA
<i>aubra</i>	6	ACA
<i>aubra eq</i>	6	ACA
<i>aurovela 1.5/30 (21)</i>	6	ACA
<i>aurovela 1/20 (21)</i>	6	ACA
<i>aurovela 24 fe</i>	6	ACA
<i>aurovela fe 1.5/30 (28)</i>	6	ACA
<i>aurovela fe 1-20 (28)</i>	6	ACA
<i>aviane</i>	6	ACA
<i>ayuna</i>	6	ACA
<i>azurette (28)</i>	6	ACA
<i>balziva (28)</i>	6	ACA
<i>blisovi 24 fe</i>	6	ACA
<i>blisovi fe 1.5/30 (28)</i>	6	ACA
<i>blisovi fe 1/20 (28)</i>	6	ACA
<i>briellyn</i>	6	ACA
<i>camrese</i>	6	ACA
<i>camrese lo</i>	6	ACA
<i>caziant (28)</i>	6	ACA
<i>charlotte 24 fe</i>	6	ACA
<i>chateal (28)</i>	6	ACA
<i>chateal eq (28)</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>cryselle (28)</i>	6	ACA
<i>cyred</i>	6	ACA
<i>cyred eq</i>	6	ACA
<i>dasetta 1/35 (28)</i>	6	ACA
<i>dasetta 7/7/7 (28)</i>	6	ACA
<i>daysee</i>	6	ACA
<i>desog-e.estradiol/e.estradiol</i>	6	ACA
<i>desogestrel-ethinyl estradiol</i>	6	ACA
<i>dolishale</i>	6	ACA
<i>drospirenone-e.estradiol-lm.fa</i>	6	ACA
<i>drospirenone-ethinyl estradiol</i>	6	ACA
<i>econtra ez</i>	6	ACA; OTC; QL
<i>econtra one-step</i>	6	ACA; OTC; QL
<i>elinest</i>	6	ACA
<i>ELLA</i>	6	ACA; QL
<i>enpresse</i>	6	ACA
<i>enskyce</i>	6	ACA
<i>estarylla</i>	6	ACA
<i>ethynodiol diac-eth estradiol</i>	6	ACA
<i>falmina (28)</i>	6	ACA
<i>finzala</i>	6	ACA
<i>gemmily</i>	6	ACA
<i>hailey</i>	6	ACA
<i>hailey 24 fe</i>	6	ACA
<i>hailey fe 1.5/30 (28)</i>	6	ACA
<i>hailey fe 1/20 (28)</i>	6	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>her style</i>	6	ACA; OTC; QL
<i>iclevia</i>	6	ACA
<i>isibloom</i>	6	ACA
<i>jaimiess</i>	6	ACA
<i>jasmiel (28)</i>	6	ACA
<i>jolessa</i>	6	ACA
<i>juleber</i>	6	ACA
<i>junel 1.5/30 (21)</i>	6	ACA
<i>junel 1/20 (21)</i>	6	ACA
<i>junel fe 1.5/30 (28)</i>	6	ACA
<i>junel fe 1/20 (28)</i>	6	ACA
<i>junel fe 24</i>	6	ACA
<i>kaitlib fe</i>	6	ACA
<i>kalliga</i>	6	ACA
<i>kariva (28)</i>	6	ACA
<i>kelnor 1/35 (28)</i>	6	ACA
<i>kelnor 1-50 (28)</i>	6	ACA
<i>kurvelo (28)</i>	6	ACA
<i>l norgest/e.estradiol-e.estradiol</i>	6	ACA
<i>larin 1.5/30 (21)</i>	6	ACA
<i>larin 1/20 (21)</i>	6	ACA
<i>larin 24 fe</i>	6	ACA
<i>larin fe 1.5/30 (28)</i>	6	ACA
<i>larin fe 1/20 (28)</i>	6	ACA
<i>layolis fe</i>	6	ACA
<i>leena 28</i>	6	ACA
<i>lessina</i>	6	ACA
<i>levonest (28)</i>	6	ACA
<i>levonorgestrel</i>	6	ACA; OTC; QL

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad</i>	6	ACA
<i>levonorg-eth estrad triphasic</i>	6	ACA
<i>levora-28</i>	6	ACA
<i>lojaimiess</i>	6	ACA
<i>loryna (28)</i>	6	ACA
<i>low-ogestrel (28)</i>	6	ACA
<i>lo-zumandimine (28)</i>	6	ACA
<i>lutra (28)</i>	6	ACA
<i>marlissa (28)</i>	6	ACA
<i>merzee</i>	6	ACA
<i>mibelas 24 fe</i>	6	ACA
<i>microgestin 1.5/30 (21)</i>	6	ACA
<i>microgestin 1/20 (21)</i>	6	ACA
<i>microgestin 24 fe</i>	6	ACA
<i>microgestin fe 1.5/30 (28)</i>	6	ACA
<i>microgestin fe 1/20 (28)</i>	6	ACA
<i>mili</i>	6	ACA
<i>mono-lynyah</i>	6	ACA
<i>my choice</i>	6	ACA; OTC; QL
<i>my way</i>	6	ACA; OTC; QL
<i>necon 0.5/35 (28)</i>	6	ACA
<i>new day</i>	6	ACA; OTC; QL
<i>nikki (28)</i>	6	ACA
<i>noreth-ethinyl estradiol-iron</i>	6	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone ac-eth estradiol</i>	6	ACA
<i>norethindrone-e.estradiol-iron</i>	6	ACA
<i>norgestimate-ethinyl estradiol</i>	6	ACA
<i>nortrel 0.5/35 (28)</i>	6	ACA
<i>nortrel 1/35 (21)</i>	6	ACA
<i>nortrel 1/35 (28)</i>	6	ACA
<i>nortrel 7/7/7 (28)</i>	6	ACA
<i>nylia 1/35 (28)</i>	6	ACA
<i>nylia 7/7/7 (28)</i>	6	ACA
<i>nymyo</i>	6	ACA
<i>ocella</i>	6	ACA
<i>opcicon one-step</i>	6	ACA; OTC; QL
<i>option-2</i>	6	ACA; OTC; QL
<i>philith</i>	6	ACA
<i>pimtrea (28)</i>	6	ACA
<i>pirmella</i>	6	ACA
<i>portia 28</i>	6	ACA
<i>reclipsen (28)</i>	6	ACA
<i>rivelsa</i>	6	ACA
<i>setlakin</i>	6	ACA
<i>simliya (28)</i>	6	ACA
<i>simpesse</i>	6	ACA
<i>sprintec (28)</i>	6	ACA
<i>sronyx</i>	6	ACA
<i>syeda</i>	6	ACA
<i>tarina 24 fe</i>	6	ACA
<i>tarina fe 1/20 (28)</i>	6	ACA
<i>taysofy</i>	6	ACA
<i>tilia fe</i>	6	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>tri-estarylla</i>	6	ACA
<i>tri-legest fe</i>	6	ACA
<i>tri-linyah</i>	6	ACA
<i>tri-lo-estarylla</i>	6	ACA
<i>tri-lo-marzia</i>	6	ACA
<i>tri-lo-mili</i>	6	ACA
<i>tri-lo-sprintec</i>	6	ACA
<i>tri-mili</i>	6	ACA
<i>tri-nymyo</i>	6	ACA
<i>tri-sprintec (28)</i>	6	ACA
<i>trivora (28)</i>	6	ACA
<i>tri-vylibra</i>	6	ACA
<i>tri-vylibra lo</i>	6	ACA
<i>tydemy</i>	6	ACA
<i>velivet triphasic regimen (28)</i>	6	ACA
<i>vestura (28)</i>	6	ACA
<i>vienva</i>	6	ACA
<i>viorele (28)</i>	6	ACA
<i>volnea (28)</i>	6	ACA
<i>vyfemla (28)</i>	6	ACA
<i>vylibra</i>	6	ACA
<i>wera (28)</i>	6	ACA
<i>wymzya fe</i>	6	ACA
<i>zarah</i>	6	ACA
<i>zovia 1-35 (28)</i>	6	ACA
<i>zumandimine (28)</i>	6	ACA
<b>OXYTOCICS</b>		
<i>methergine</i>	1	QL
<i>methylergonovine</i>	1	QL
<b>OPHTHALMOLOGY</b>		
<b>ANTIBIOTICS</b>		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AZASITE	3	QL
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	3	
<i>ciprofloxacin hcl</i>	1	QL
<i>erythromycin</i>	1	
<i>gatifloxacin</i>	1	QL
<i>gentamicin</i>	1	QL
<i>levofloxacin</i>	1	QL
<i>moxifloxacin ophthalmic (eye) drops</i>	1	QL
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	1	
NATACYN	2	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	QL
<i>neo-polycin</i>	1	
<i>ofloxacin</i>	1	QL
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	QL
<i>tobramycin</i>	1	QL
<b>ANTIVIRALS</b>		
<i>trifluridine</i>	1	QL
<b>BETA-BLOCKERS</b>		
<i>betaxolol</i>	1	QL
<i>carteolol</i>	1	QL
<i>levobunolol</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>timolol maleate (pf)</i>	1	
<i>timolol maleate ophthalmic (eye) drops</i>	1	QL
<i>timolol maleate ophthalmic (eye) drops, once daily</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	1	
<b>CHOLINESTERASE INHIBITOR MIOTICS</b>		
PHOSPHOLINE IODIDE	4	
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>atropine ophthalmic (eye) drops</i>	1	QL
<i>atropine ophthalmic (eye) ointment</i>	1	
<i>cyclopentolate</i>	1	QL
<i>homatropaire</i>	1	
<i>tropicamide</i>	1	QL
<b>DIRECT ACTING MIOTICS</b>		
<i>pilocarpine hcl</i>	1	QL
<b>MISCELLANEOUS OPHTHALMOLOGICS</b>		
<i>alaway</i>	1	OTC; QL
<i>allergy eye (ketotifen)</i>	1	OTC; QL
ALOCRIAL	3	ST
ALOMIDE	3	ST
<i>altacaine</i>	1	
<i>azelastine</i>	1	QL
<i>bepotastine besilate</i>	1	QL
BYOOVIZ	4	PA

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Drug Name	Drug Tier	Requirements / Limits
<i>children's alaway</i>	1	OTC; QL
CIMERLI	4	PA
<i>cromolyn</i>	1	QL
<i>cyclosporine</i>	1	PA; QL
CYSTARAN	4	PA
<i>epinastine</i>	1	QL
<i>eye allergy itch relief</i>	1	OTC; QL
<i>eye allergy itch-redness rlf</i>	1	OTC; QL
<i>eye itch relief</i>	1	OTC; QL
<i>fluorescein-proparacaine</i>	1	
<i>ketotifen fumarate</i>	1	OTC; QL
LUXTURNA	4	PA
<i>olopatadine</i>	1	QL
OXERVATE	4	PA; QL
<i>proparacaine</i>	1	QL
RESTASIS MULTIDOSE	2	PA; QL
<i>tetracaine hcl</i>	1	
<i>wal-zyr (ketotifen)</i>	1	OTC; QL
ZADITOR	2	OTC; QL
<b>NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<i>bromfenac</i>	1	QL
<i>flurbiprofen sodium</i>	1	QL
<i>ketorolac</i>	1	QL
NEVANAC	3	ST
<b>ORAL DRUGS FOR GLAUCOMA</b>		
<i>acetazolamide</i>	1	
<i>methazolamide</i>	1	
<b>OTHER GLAUCOMA DRUGS</b>		

Drug Name	Drug Tier	Requirements / Limits
<i>bimatoprost</i>	1	ST; QL
<i>brimonidine-timolol</i>	1	QL
<i>brinzolamide</i>	1	
<i>dorzolamide</i>	1	QL
<i>dorzolamide-timolol</i>	1	QL
<i>dorzolamide-timolol (pf)</i>	1	
<i>latanoprost</i>	1	ST; QL
<i>miostat</i>	1	
<i>tafluprost (pf)</i>	1	ST
<i>travoprost</i>	1	ST; QL
VYZULTA	3	ST; QL
<b>STEROID-ANTIBIOTIC COMBINATIONS</b>		
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	
<i>tobramycin-dexamethasone</i>	1	
<b>STERIODS</b>		
<i>dexamethasone sodium phosphate</i>	1	QL
<i>difluprednate</i>	1	QL
<i>fluorometholone</i>	1	
<i>loteprednol etabonate</i>	1	
OZURDEX	4	PA
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.



Drug Name	Drug Tier	Requirements / Limits
<b>STEROID-SULFONAMIDE COMBINATIONS</b>		
<i>sulfacetamide-prednisolone</i>	1	
<b>SULFONAMIDES</b>		
<i>sulfacetamide sodium ophthalmic (eye) drops</i>	1	QL
<i>sulfacetamide sodium ophthalmic (eye) ointment</i>	1	
<b>SYMPATHOMIMETICS</b>		
<i>apraclonidine</i>	1	QL
<i>brimonidine</i>	1	QL
<b>VASOCONSTRICTOR DECONGESTANTS</b>		
<i>phenylephrine hcl</i>	1	
<b>RESPIRATORY, ALLERGY, COUGH &amp; COLD</b>		
<b>ANTI HISTAMINE &amp; ANTIALLERGENIC AGENTS</b>		
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine</i>	1	
<i>clemastine</i>	1	
<i>ciproheptadine</i>	1	
<i>desloratadine</i>	1	QL
<i>dexchlorpheniramine maleate</i>	1	
<i>epinephrine</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1	
<i>levocetirizine oral solution</i>	1	
<i>levocetirizine oral tablet</i>	1	QL
<i>promethazine</i>	1	
<i>promethgan</i>	1	
<b>COUGH &amp; COLD THERAPY</b>		
<i>benzonatate</i>	1	
<i>brompheniramine-pseudoeph-dm</i>	1	
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine vc-codeine</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
<b>PULMONARY AGENTS</b>		
<i>acetylcysteine</i>	1	
ADEMPAS	4	PA; LA; QL
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral</i>	1	
ALVESCO	3	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>alyq</i>	4	PA; QL
<i>ambrisentan</i>	4	PA; LA; QL
ANORO ELLIPTA	2	QL
<i>arformoterol</i>	1	QL
ARNUIITY ELLIPTA	3	QL
ASMANEX HFA	3	QL
<i>azelastine-fluticasone</i>	1	ST; QL
BEVESPI AEROSPHERE	2	QL
<i>bosentan</i>	4	PA; QL
BREO ELLIPTA	2	ST; QL
<i>budesonide</i>	1	QL
CINRYZE	4	PA; QL
COMBIVENT RESPIMAT	2	QL
<i>cromolyn</i>	1	
DULERA	2	ST; QL
<i>epinephrine hcl</i>	1	
FASENRA	4	PA; QL
FASENRA PEN	4	PA; QL
<i>flunisolide</i>	1	ST; QL
<i>fluticasone propionate</i>	1	QL
FLUTICASONE PROPION-SALMETEROL INHALATION AEROSOL POWDR BREATH ACTIVATED	2	ST; QL
<i>fluticasone propion-salmeterol inhalation blister with device</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>formoterol fumarate</i>	1	QL
<i>icatibant</i>	4	PA; QL
INCRUSE ELLIPTA	2	QL
<i>ipratropium bromide</i>	1	
<i>ipratropium-albuterol</i>	1	QL
KALYDECO	4	PA; QL
<i>levalbuterol hcl</i>	1	
<i>mometasone</i>	1	ST; QL
<i>montelukast</i>	1	
<i>nebusal</i>	1	
NUCALA	4	PA; LA; QL
OFEV	4	PA; QL
OPSUMIT	4	PA; LA; QL
ORKAMBI	4	PA; QL
<i>pirfenidone</i>	4	PA; QL
<i>pulmosal</i>	1	
PULMOZYME	4	PA
QVAR REDIHALER	2	QL
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST	4	PA; QL
<i>sajazir</i>	4	PA; QL
<i>sildenafil (pulm.hypertension)</i>	4	PA; QL
<i>sodium chloride</i>	1	
SPIRIVA RESPIMAT	2	QL
SPIRIVA WITH HANDIHALER	2	QL

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Drug Name	Drug Tier	Requirements / Limits
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	ST; QL
SYMDEKO	4	PA; QL
<i>tadalafil (pulm. hypertension)</i>	4	PA; QL
TAKHZYRO	4	PA; LA; QL
<i>terbutaline</i>	1	
TEZSPIRE	4	PA
<i>theophylline</i>	1	
TRACLEER	4	PA; LA; QL
TRELEGY ELLIPTA	2	QL
TRIKAFTA	4	PA; QL
TYVASO	4	PA
TYVASO DPI	4	PA
TYVASO REFILL KIT	4	PA
TYVASO STARTER KIT	4	PA
<i>wixela inhub</i>	1	ST; QL
XOLAIR	4	PA; LA; QL
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	

## UROLOGICALS

### ANTICHOLINERGICS & ANTISPASMODICS

<i>darifenacin</i>	1	
<i>fesoterodine</i>	1	
<i>flavoxate</i>	1	
<i>oxybutynin chloride</i>	1	
<i>solifenacin</i>	1	
<i>tolterodine</i>	1	
<i>trospium</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<b>BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY</b>		
<i>alfuzosin</i>	1	
<i>dutasteride</i>	1	PA
<i>dutasteride-tamsulosin</i>	1	PA
<i>finasteride</i>	1	
<i>silodosin</i>	1	
<i>tadalafil</i>	1	PA; QL
<i>tamsulosin</i>	1	
<b>CHOLINERGIC STIMULANTS</b>		
<i>bethanechol chloride</i>	1	
<b>MISCELLANEOUS UROLOGICALS</b>		
CYSTAGON	4	LA
ELMIRON	2	
<i>hyophen</i>	1	
K-PHOS ORIGINAL	2	
<i>methen-sod phos-meth blue-hyos</i>	1	
<i>phosphasal</i>	1	
<i>potassium citrate</i>	1	
RENACIDIN	2	
<i>uretron d-s</i>	1	
<i>urimar-t</i>	1	
<i>uro-458</i>	1	
<i>urogesic-blue</i>	1	
<i>uro-mp</i>	1	
<i>uro-sp</i>	1	
<i>uryl</i>	1	
<i>ustell</i>	1	
<i>utira-c</i>	1	
<b>URINARY ANESTHETICS</b>		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>phenazopyridine</i>	1	
<b>VITAMINS, HEMATINICS &amp; ELECTROLYTES</b>		
<b>ELECTROLYTES</b>		
<i>calcium acetate(phosphat bind)</i>	1	QL
<i>effer-k</i>	1	
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
<i>lugols</i>	1	
<i>potassium chloride</i>	1	
<i>strong iodine</i>	1	
<b>VITAMINS &amp; HEMATINICS</b>		
<i>b complex 1 (with folic acid)</i>	6	ACA; OTC
<i>b complex-vitamin c-folic acid</i>	6	ACA; OTC
<i>balanced b-100</i>	6	ACA; OTC
<i>bal-care dha</i>	1	
<i>b-complex with vitamin c</i>	6	ACA; OTC
<i>classic prenatal</i>	6	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
<i>dialyvite 800</i>	6	ACA; OTC
<i>ergocalciferol (vitamin d2)</i>	1	
<i>fluoride (sodium)</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>folic acid</i>	6	ACA; OTC
<i>folitab</i>	6	ACA; OTC
<i>foltabs 800</i>	6	ACA; OTC
<i>full spectrum b-vitamin c</i>	6	ACA; OTC
<i>hydroxocobalamin</i>	1	PA
<i>kobee</i>	6	ACA; OTC
<i>kpn</i>	6	ACA; OTC
<i>ludent fluoride</i>	6	ACA; OTC
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride</i>	6	ACA; OTC
<i>multivitamins with fluoride</i>	6	ACA; OTC
<i>mvc-fluoride</i>	6	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
<i>newgen</i>	1	
<i>one daily prenatal</i>	6	ACA; OTC
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prenal chew</i>	1	
<i>prenal pearl</i>	1	
<i>prenal true</i>	1	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal</i>	6	ACA; OTC
<i>prenatal complete</i>	6	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>prenatal multi-dha (algal oil)</i>	6	ACA; OTC
<i>prenatal multivitamins</i>	6	ACA; OTC
<i>prenatal one daily</i>	6	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
<i>prenatal vit no.179-iron-folic</i>	6	ACA; OTC
<i>prenatal vitamin</i>	6	ACA; OTC
<i>prenatal vitamin with minerals</i>	6	ACA; OTC
<i>rena-vite</i>	6	ACA; OTC
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>stress formula with iron</i>	6	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>stress formula with iron(sulf)</i>	6	ACA; OTC
<i>super b maxi complex</i>	6	ACA; OTC
<i>super quint</i>	6	ACA; OTC
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
<i>tri-vitamin with fluoride</i>	6	ACA; OTC
<i>virt-nate dha</i>	1	
<i>vitamin b complex-folic acid</i>	6	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	6	ACA; OTC
<i>wesnate dha</i>	1	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

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