

Fallon Medicare Plus™

2020 Formulary (List of Covered Drugs)

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

Formulary ID: 00020239 Version: 13

This formulary was updated on 01/29/2020. For more recent information or other questions, please contact Fallon Medicare Plus at 1-800-325-5669, or, for TTY users, TRS 711, 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/medicare.

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

When this drug list (formulary) refers to “we,” “us,” or “our,” it means Fallon Health. When it refers to “plan” or “our plan,” it means Fallon Medicare Plus.

This document includes a list of the drugs (formulary) for our plan which is current as of 01/29/2020. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2021, and from time to time during the year.

What is the Fallon Medicare Plus Formulary?

A formulary is a list of covered drugs selected by Fallon Medicare Plus in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Fallon Medicare Plus will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Fallon Medicare Plus network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your *Evidence of Coverage*.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but Fallon Medicare Plus may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year.

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Fallon Medicare Plus Formulary?”
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand name drug currently on the formulary or add new restrictions to the brand name drug or move it to a different cost-sharing tier. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.
 - If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Fallon Medicare Plus Formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2020 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2020 coverage year except as described above. This means that these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year.

The enclosed formulary is current as of 01/29/2020. To get updated information about the drugs covered by Fallon Medicare Plus, please contact us. Our contact information appears on the front and back cover pages. All members will be mailed an update to their printed formulary that details all non-maintenance formulary changes when they occur. The formulary and any addenda will also be available online at fallonhealth.org/medicare.

How do I use the Formulary?

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

Medical Condition

The formulary begins on page 3. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Cardiovascular Agents. If you know what your drug is used for, look for the category name in the list that begins on page 3. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 69. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

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

Are there any restrictions on my coverage?

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

- **Prior Authorization:** Fallon Medicare Plus requires you or your provider to get prior authorization for certain drugs. This means that you will need to get approval from Fallon Medicare Plus before you fill your prescriptions. If you don't get approval, Fallon Medicare Plus may not cover the drug.
- **Quantity Limits:** For certain drugs, Fallon Medicare Plus limits the amount of the drug that Fallon Medicare Plus will cover. For example, Fallon Medicare Plus provides 2 each per 1 day per prescription for JANUMET. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Fallon Medicare Plus 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, Fallon Medicare Plus may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Fallon Medicare Plus will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 3. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior

authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask Fallon Medicare Plus to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the Fallon Medicare Plus formulary?” on page iv for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Service and ask if your drug is covered.

If you learn that Fallon Medicare Plus does not cover your drug, you have two options:

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

How do I request an exception to the Fallon Medicare Plus Formulary?

You can ask Fallon Medicare Plus to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Fallon Medicare Plus limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, Fallon Medicare Plus will only approve your request for an exception if the alternative drugs included on the plan’s formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary or utilization restriction exception. **When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber’s supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

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

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

If you are a current member being admitted to or discharged from a long-term care facility, you will be able to get an early refill on your medications if needed.

For more information

For more detailed information about your Fallon Medicare Plus prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

If you have questions about Fallon Medicare Plus, please contact us. Our contact information, along with the last date we updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

Fallon Medicare Plus Formulary

The formulary that begins on the next page provides coverage information about the drugs covered by Fallon Medicare Plus. If you have trouble finding your drug in the list, turn to the Index that begins on page 69.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., HUMIRA) and generic drugs are listed in lower-case italics (e.g., *amoxicillin*).

The information in the Requirements/Limits column tells you if Fallon Medicare Plus has any special requirements for coverage of your drug.

Abbreviation	Explanation
B/D	This prescription drug has a Part B versus Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.
LA	Limited Access. This prescription may be available only at certain pharmacies. For more information consult your <i>Pharmacy Directory</i> or call Customer Service at 1-800-325-5669 (TRS 711), Monday–Friday, 8 a.m.–8 p.m. (Oct. 1–March 31, seven days a week).
MO	Mail-Order Drug. This prescription drug is available through our mail-order service.
NEDS	Non Extended Day Supply. This drug is limited to a 30-day supply per prescription fill.
PA	Prior Authorization. Fallon Medicare Plus requires your provider to get prior authorization for certain drugs. This means that you will need to get approval from Fallon Medicare Plus before you fill your prescriptions. If you don't get approval, Fallon Medicare Plus may not cover the drug.
QL	Quantity limit. For certain drugs, Fallon Medicare Plus limits the amount of the drug that Fallon Medicare Plus will cover. For example, Fallon Medicare Plus provides 2 each per 1 day per prescription for JANUMET. This may be in addition to a standard one-month or three-month supply.
ST	Step Therapy. In some cases, Fallon Medicare Plus 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, Fallon Medicare Plus may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Fallon Medicare Plus will then cover Drug B.

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Drug	Status	Requirements/Limits
Analgesics		
Nonsteroidal Anti-Inflammatory Drugs		
<i>celecoxib oral capsule</i>	Tier 1	
<i>choline & mag trisalicylate oral tablet 1000 mg</i>	Tier 2	
<i>diclofenac potassium oral tablet</i>	Tier 1	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	Tier 1	
<i>diclofenac sodium oral tablet delayed release</i>	Tier 1	
<i>diflunisal oral tablet</i>	Tier 1	
<i>etodolac er oral tablet extended release 24 hour</i>	Tier 1	
<i>fenoprofen calcium oral capsule 400 mg</i>	Tier 1	
<i>fenoprofen calcium oral tablet</i>	Tier 1	
<i>ibuprofen oral suspension</i>	Tier 1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	Tier 1	
<i>indomethacin er oral capsule extended release</i>	Tier 1	
<i>indomethacin oral capsule</i>	Tier 1	
<i>ketoprofen er oral capsule extended release 24 hour</i>	Tier 1	
<i>ketoprofen oral capsule</i>	Tier 1	
<i>meclofenamate sodium oral capsule</i>	Tier 1	
<i>meloxicam oral suspension</i>	Tier 2	
<i>meloxicam oral tablet</i>	Tier 1	
<i>nabumetone oral tablet</i>	Tier 1	
<i>naproxen dr oral tablet delayed release</i>	Tier 1	
<i>naproxen oral suspension</i>	Tier 1	
<i>naproxen oral tablet</i>	Tier 1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	Tier 1	
<i>oxaprozin oral tablet</i>	Tier 1	
<i>piroxicam oral capsule</i>	Tier 1	
<i>salsalate oral tablet</i>	Tier 2	
<i>sulindac oral tablet</i>	Tier 1	
<i>tolmetin sodium oral capsule</i>	Tier 1	
<i>tolmetin sodium oral tablet 200 mg</i>	Tier 2	
<i>tolmetin sodium oral tablet 600 mg</i>	Tier 1	
Opioid Analgesics, Long-Acting		
EMBEDA ORAL CAPSULE EXTENDED RELEASE	Tier 4	PA
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>levorphanol tartrate oral tablet</i>	Tier 2	
<i>methadone hcl injection solution</i>	Tier 2	
<i>methadone hcl oral solution</i>	Tier 2	
<i>methadone hcl oral tablet</i>	Tier 2	
<i>morphine sulfate er oral tablet extended release</i>	Tier 1	
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent</i>	Tier 1	PA; QL (2 EA per 1 day)
Opioid Analgesics, Short-Acting		
<i>acetaminophen-codeine #3 oral tablet</i>	Tier 1	
<i>acetaminophen-codeine oral solution</i>	Tier 1	
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-60 mg</i>	Tier 1	
<i>butorphanol tartrate nasal solution</i>	Tier 2	
<i>codeine sulfate oral tablet</i>	Tier 2	
<i>duramorph injection solution</i>	Tier 1	
<i>endocet oral tablet 5-325 mg</i>	Tier 2	
<i>fentanyl citrate buccal lozenge on a handle 200 mcg</i>	Tier 2	PA; QL (4 EA per 1 day)
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	Tier 1	
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	Tier 1	
<i>hydromorphone hcl oral liquid</i>	Tier 2	
<i>hydromorphone hcl oral tablet</i>	Tier 2	
<i>meperidine hcl injection solution 10 mg/ml, 100 mg/ml, 25 mg/ml, 50 mg/ml</i>	Tier 2	
<i>meperidine hcl oral solution</i>	Tier 2	
<i>meperidine hcl oral tablet</i>	Tier 2	
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	Tier 1	
<i>morphine sulfate (pf) injection solution 1 mg/ml</i>	Tier 1	
MORPHINE SULFATE INJECTION SOLUTION 5 MG/ML	Tier 4	
<i>morphine sulfate oral solution</i>	Tier 1	
<i>morphine sulfate oral tablet</i>	Tier 1	
<i>oxycodone hcl oral capsule</i>	Tier 2	
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	Tier 2	
<i>oxycodone hcl oral solution</i>	Tier 2	
<i>oxycodone hcl oral tablet</i>	Tier 2	
<i>oxycodone-acetaminophen oral solution</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 2	
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	Tier 2	
<i>oxycodone-ibuprofen oral tablet</i>	Tier 2	
ROXICET ORAL SOLUTION	Tier 4	
<i>roxicet oral tablet 5-325 mg</i>	Tier 2	
<i>tramadol hcl oral tablet</i>	Tier 1	
<i>tramadol-acetaminophen oral tablet</i>	Tier 2	
Anesthetics		
Local Anesthetics		
<i>lidocaine external ointment</i>	Tier 1	QL (200 GM per 30 days)
<i>lidocaine external patch 5 %</i>	Tier 1	PA; QL (3 EA per 1 day)
<i>lidocaine hcl (pf) injection solution 1 %</i>	Tier 1	
<i>lidocaine hcl external solution</i>	Tier 1	
<i>lidocaine hcl injection solution 1 %, 2 %</i>	Tier 1	
<i>lidocaine hcl urethral/mucosal external gel</i>	Tier 1	
<i>lidocaine viscous hcl mouth/throat solution</i>	Tier 1	
<i>lidocaine-prilocaine external cream</i>	Tier 1	QL (200 GM per 30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-Craving		
<i>acamprosate calcium oral tablet delayed release</i>	Tier 2	
<i>disulfiram oral tablet</i>	Tier 2	
Opioid Dependence Treatments		
<i>buprenorphine hcl injection solution</i>	Tier 2	
LUCEMYRA ORAL TABLET	Tier 4	
<i>naltrexone hcl oral tablet</i>	Tier 1	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier 3	
Smoking Cessation Agents		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	Tier 2	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	Tier 4	
CHANTIX ORAL TABLET	Tier 4	
CHANTIX STARTING MONTH PAK ORAL TABLET	Tier 4	
NICOTROL INHALATION INHALER	Tier 4	

Drug	Status	Requirements/Limits
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate injection solution 500 mg/2ml</i>	Tier 2	
<i>gentak ophthalmic ointment</i>	Tier 1	
<i>gentamicin sulfate external cream</i>	Tier 2	
<i>gentamicin sulfate external ointment</i>	Tier 2	
<i>gentamicin sulfate injection solution</i>	Tier 2	
<i>gentamicin sulfate intravenous solution</i>	Tier 2	
<i>gentamicin sulfate ophthalmic ointment</i>	Tier 2	
<i>gentamicin sulfate ophthalmic solution</i>	Tier 1	
<i>neomycin sulfate oral tablet</i>	Tier 2	
<i>paromomycin sulfate oral capsule</i>	Tier 2	
STREPTOMYCIN SULFATE INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier 4	
<i>tobramycin ophthalmic solution</i>	Tier 1	
<i>tobramycin sulfate injection solution 10 mg/ml</i>	Tier 2	
TOBREX OPHTHALMIC OINTMENT	Tier 3	
Antibacterials		
<i>colistimethate sodium (cba) injection solution reconstituted</i>	Tier 2	
<i>tinidazole oral tablet</i>	Tier 2	
Antibacterials, Other		
<i>bacitracin ophthalmic ointment</i>	Tier 2	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	Tier 2	
CHLORAMPHENICOL SOD SUCCINATE INTRAVENOUS SOLUTION RECONSTITUTED	Tier 4	
CLEOCIN VAGINAL SUPPOSITORY	Tier 4	
<i>clindamycin hcl oral capsule</i>	Tier 2	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	Tier 2	
<i>clindamycin phosphate external gel</i>	Tier 2	
<i>clindamycin phosphate external lotion</i>	Tier 2	
<i>clindamycin phosphate external solution</i>	Tier 2	
<i>clindamycin phosphate injection solution 600 mg/4ml</i>	Tier 2	
<i>clindamycin phosphate vaginal cream</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>colistimethate sodium injection solution reconstituted</i>	Tier 2	
<i>daptomycin intravenous solution reconstituted</i>	Tier 2	
<i>firvanq oral solution reconstituted</i>	Tier 1	
FLAGYL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 4	
GLOBAL ALCOHOL PREP EASE PAD	Tier 4	
<i>linezolid oral tablet</i>	Tier 2	PA
<i>methenamine hippurate oral tablet</i>	Tier 2	
<i>metronidazole external cream</i>	Tier 2	
<i>metronidazole external gel</i>	Tier 2	
<i>metronidazole external lotion</i>	Tier 2	
<i>metronidazole in nacl intravenous solution 500-0.79 mg/100ml-%</i>	Tier 2	
<i>metronidazole oral tablet</i>	Tier 1	
<i>metronidazole vaginal gel</i>	Tier 2	
MONUROL ORAL PACKET	Tier 4	
<i>mupirocin external ointment</i>	Tier 2	
<i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>	Tier 2	
<i>nitrofurantoin macrocrystal oral capsule</i>	Tier 2	QL (56 EA per 14 days)
<i>nitrofurantoin monohyd macro oral capsule</i>	Tier 2	QL (28 EA per 14 days)
<i>nitrofurantoin oral suspension</i>	Tier 2	QL (1120 ML per 14 days)
<i>polymyxin b sulfate injection solution reconstituted</i>	Tier 2	
PRIMSOL ORAL SOLUTION	Tier 4	
<i>silver sulfadiazine external cream</i>	Tier 2	
<i>ssd external cream</i>	Tier 2	
SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED	Tier 4	
<i>tigecycline intravenous solution reconstituted</i>	Tier 2	PA
<i>trimethoprim oral tablet</i>	Tier 2	
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	Tier 4	PA
<i>vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 250 mg, 750 mg</i>	Tier 2	
VANCOMYCIN HCL ORAL CAPSULE	Tier 3	PA
XIFAXAN ORAL TABLET 550 MG	Tier 3	QL (3 EA per 1 day)

Drug	Status	Requirements/Limits
Beta-Lactam, Cephalosporins		
CEFACTOR ER ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier 4	
<i>cefaclor oral capsule</i>	Tier 2	
<i>cefadroxil oral capsule</i>	Tier 2	
<i>cefadroxil oral suspension reconstituted</i>	Tier 2	
<i>cefadroxil oral tablet</i>	Tier 2	
<i>cefazolin sodium injection solution reconstituted 10 gm</i>	Tier 2	
<i>cefdinir oral capsule</i>	Tier 2	
<i>cefdinir oral suspension reconstituted</i>	Tier 2	
<i>cefepime hcl injection solution reconstituted</i>	Tier 2	
<i>cefixime oral capsule</i>	Tier 2	
<i>cefixime oral suspension reconstituted</i>	Tier 2	
<i>cefotaxime sodium injection solution reconstituted 1 gm</i>	Tier 2	
<i>cefoxitin sodium intravenous solution reconstituted 1 gm</i>	Tier 2	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	Tier 2	
<i>cefpodoxime proxetil oral tablet</i>	Tier 2	
<i>cefprozil oral suspension reconstituted</i>	Tier 2	
<i>cefprozil oral tablet</i>	Tier 2	
<i>ceftazidime injection solution reconstituted 1 gm</i>	Tier 2	
CEFTIN ORAL SUSPENSION RECONSTITUTED 250 MG/5ML	Tier 4	
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 500 mg</i>	Tier 2	
<i>cefuroxime axetil oral tablet</i>	Tier 2	
<i>cefuroxime sodium injection solution reconstituted 7.5 gm</i>	Tier 2	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	Tier 1	
<i>cephalexin oral capsule 750 mg</i>	Tier 2	
<i>cephalexin oral suspension reconstituted</i>	Tier 2	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	Tier 4	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	Tier 4	
Beta-Lactam, Other		
AZACTAM INJECTION SOLUTION RECONSTITUTED	Tier 4	

Drug	Status	Requirements/Limits
<i>aztreonam injection solution reconstituted 1 gm</i>	Tier 2	
<i>doripenem intravenous solution reconstituted 500 mg</i>	Tier 2	
<i>ertapenem sodium injection solution reconstituted</i>	Tier 2	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	Tier 2	
<i>meropenem intravenous solution reconstituted</i>	Tier 2	
Beta-Lactam, Penicillins		
<i>amoxicillin oral capsule</i>	Tier 1	
<i>amoxicillin oral suspension reconstituted</i>	Tier 1	
<i>amoxicillin oral tablet</i>	Tier 1	
<i>amoxicillin oral tablet chewable 125 mg</i>	Tier 2	
<i>amoxicillin oral tablet chewable 250 mg</i>	Tier 1	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	Tier 2	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	Tier 2	
<i>amoxicillin-pot clavulanate oral tablet</i>	Tier 2	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	Tier 2	
<i>ampicillin oral capsule</i>	Tier 1	
<i>ampicillin oral suspension reconstituted</i>	Tier 2	
<i>ampicillin sodium injection solution reconstituted 1 gm</i>	Tier 2	
<i>ampicillin-sulbactam sodium injection solution reconstituted 3 (2-1) gm</i>	Tier 2	
<i>ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm</i>	Tier 2	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	Tier 4	
<i>dicloxacillin sodium oral capsule</i>	Tier 2	
<i>nafcillin sodium injection solution reconstituted</i>	Tier 2	
<i>oxacillin sodium injection solution reconstituted 1 gm, 2 gm</i>	Tier 2	
<i>penicillin g potassium injection solution reconstituted</i>	Tier 2	
<i>penicillin v potassium oral solution reconstituted</i>	Tier 1	
<i>penicillin v potassium oral tablet</i>	Tier 1	
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 3.375 (3-0.375) gm</i>	Tier 2	
Macrolides		
AZASITE OPHTHALMIC SOLUTION	Tier 4	

Drug	Status	Requirements/Limits
<i>azithromycin intravenous solution reconstituted</i>	Tier 2	
<i>azithromycin oral suspension reconstituted</i>	Tier 2	
<i>azithromycin oral tablet 250 mg, 500 mg</i>	Tier 1	
<i>azithromycin oral tablet 600 mg</i>	Tier 2	
<i>clarithromycin er oral tablet extended release 24 hour</i>	Tier 2	
<i>clarithromycin oral suspension reconstituted</i>	Tier 2	
<i>clarithromycin oral tablet</i>	Tier 2	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	Tier 4	
<i>erythromycin base oral capsule delayed release particles</i>	Tier 2	
<i>erythromycin base oral tablet</i>	Tier 2	
<i>erythromycin base oral tablet delayed release</i>	Tier 1	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	Tier 2	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	Tier 1	
<i>erythromycin ethylsuccinate oral tablet</i>	Tier 2	
<i>erythromycin ophthalmic ointment</i>	Tier 1	
<i>erythromycin stearate oral tablet 250 mg</i>	Tier 2	
<i>romycin ophthalmic ointment</i>	Tier 1	
ZMAX ORAL SUSPENSION RECONSTITUTED	Tier 4	
Quinolones		
CILOXAN OPHTHALMIC OINTMENT	Tier 3	
<i>ciprofloxacin hcl ophthalmic solution</i>	Tier 2	
<i>ciprofloxacin hcl oral tablet 100 mg</i>	Tier 2	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	Tier 1	
<i>ciprofloxacin in d5w intravenous solution 200 mg/100ml</i>	Tier 2	
<i>ciprofloxacin oral suspension reconstituted</i>	Tier 2	
<i>ciprofloxacin-ciproflox hcl er oral tablet extended release 24 hour</i>	Tier 2	
<i>gatifloxacin ophthalmic solution</i>	Tier 2	
<i>levofloxacin intravenous solution</i>	Tier 2	
<i>levofloxacin ophthalmic solution</i>	Tier 2	
<i>levofloxacin oral solution</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>levofloxacin oral tablet</i>	Tier 1	
<i>moxifloxacin hcl ophthalmic solution</i>	Tier 2	
<i>moxifloxacin hcl oral tablet</i>	Tier 2	
<i>ofloxacin ophthalmic solution</i>	Tier 2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	Tier 2	
<i>ofloxacin otic solution</i>	Tier 2	
Sulfonamides		
SULFACETAMIDE SODIUM OPTHALMIC OINTMENT	Tier 4	
<i>sulfacetamide sodium ophthalmic solution</i>	Tier 2	
SULFADIAZINE ORAL TABLET	Tier 4	
<i>sulfamethoxazole-trimethoprim intravenous solution</i>	Tier 2	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	Tier 2	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	Tier 1	
Tetracyclines		
<i>doxy 100 intravenous solution reconstituted</i>	Tier 2	
<i>doxycycline hyclate intravenous solution reconstituted</i>	Tier 2	ST
<i>doxycycline hyclate oral capsule</i>	Tier 2	ST
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	Tier 2	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	Tier 2	
<i>doxycycline monohydrate oral tablet 150 mg, 50 mg, 75 mg</i>	Tier 2	
<i>minocycline hcl oral capsule</i>	Tier 2	
<i>minocycline hcl oral tablet</i>	Tier 2	
<i>tetracycline hcl oral capsule</i>	Tier 2	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT ORAL SOLUTION	Tier 4	PA
<i>levetiracetam er oral tablet extended release 24 hour</i>	Tier 2	
LEVETIRACETAM IN NAACL INTRAVENOUS SOLUTION	Tier 4	
<i>levetiracetam intravenous solution</i>	Tier 2	
<i>levetiracetam oral solution</i>	Tier 2	
<i>levetiracetam oral tablet</i>	Tier 2	
POTIGA ORAL TABLET	Tier 4	PA

Drug	Status	Requirements/Limits
<i>roweepra xr oral tablet extended release 24 hour</i>	Tier 2	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	Tier 4	
Calcium Channel Modifying Agents		
CELONTIN ORAL CAPSULE	Tier 4	
<i>ethosuximide oral capsule</i>	Tier 2	
<i>ethosuximide oral solution</i>	Tier 2	
<i>zonisamide oral capsule</i>	Tier 2	
Gamma-Aminobutyric Acid (Gaba) Augmenting Agents		
<i>clobazam oral suspension</i>	Tier 2	PA
<i>clobazam oral tablet</i>	Tier 2	PA
<i>clonazepam oral tablet</i>	Tier 1	
<i>clonazepam oral tablet dispersible</i>	Tier 2	
DIASTAT ACUDIAL RECTAL GEL	Tier 4	
DIASTAT PEDIATRIC RECTAL GEL	Tier 4	
<i>diazepam rectal gel</i>	Tier 2	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	Tier 2	
EPIDIOLEX ORAL SOLUTION	Tier 4	
<i>gabapentin oral capsule</i>	Tier 2	
<i>gabapentin oral solution 250 mg/5ml</i>	Tier 2	
<i>gabapentin oral tablet</i>	Tier 2	
NAYZILAM NASAL SOLUTION	Tier 4	QL (5 EA per 30 days)
<i>phenobarbital oral elixir</i>	Tier 2	
<i>phenobarbital oral tablet</i>	Tier 2	
<i>primidone oral tablet</i>	Tier 2	
SYMPAZAN ORAL FILM	Tier 4	PA
<i>tiagabine hcl oral tablet</i>	Tier 2	
<i>valproate sodium intravenous solution 100 mg/ml</i>	Tier 2	
<i>valproic acid oral capsule</i>	Tier 2	
<i>valproic acid oral solution</i>	Tier 2	
Glutamate Reducing Agents		
<i>felbamate oral suspension</i>	Tier 2	
<i>felbamate oral tablet</i>	Tier 2	
FYCOMPA ORAL SUSPENSION	Tier 4	PA
FYCOMPA ORAL TABLET	Tier 4	PA
<i>lamotrigine starter kit-blue oral kit</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>lamotrigine starter kit-green oral kit</i>	Tier 2	
<i>lamotrigine starter kit-orange oral kit</i>	Tier 2	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	Tier 4	
<i>topiramate er oral capsule er 24 hour sprinkle</i>	Tier 2	
<i>topiramate oral capsule sprinkle</i>	Tier 2	
<i>topiramate oral tablet</i>	Tier 1	
Sodium Channel Agents		
APTIOM ORAL TABLET	Tier 4	PA
BANZEL ORAL TABLET 200 MG	Tier 4	PA
<i>carbamazepine er oral capsule extended release 12 hour</i>	Tier 2	
<i>carbamazepine er oral tablet extended release 12 hour</i>	Tier 2	
<i>carbamazepine oral suspension</i>	Tier 2	
<i>carbamazepine oral tablet</i>	Tier 2	
<i>carbamazepine oral tablet chewable</i>	Tier 2	
DILANTIN INFATABS ORAL TABLET CHEWABLE	Tier 3	
DILANTIN ORAL CAPSULE	Tier 3	
DILANTIN ORAL SUSPENSION	Tier 3	
<i>epitol oral tablet</i>	Tier 2	
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier 4	
<i>fosphenytoin sodium injection solution 100 mg pe/2ml</i>	Tier 2	
<i>oxcarbazepine oral suspension</i>	Tier 2	
<i>oxcarbazepine oral tablet</i>	Tier 2	
PEGANONE ORAL TABLET	Tier 4	
PHENYTEK ORAL CAPSULE	Tier 4	
<i>phenytoin oral suspension 125 mg/5ml</i>	Tier 2	
<i>phenytoin oral tablet chewable</i>	Tier 2	
<i>phenytoin sodium extended oral capsule</i>	Tier 2	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG	Tier 4	
VIMPAT INTRAVENOUS SOLUTION	Tier 4	PA
VIMPAT ORAL SOLUTION	Tier 4	PA
VIMPAT ORAL TABLET	Tier 4	PA

Drug	Status	Requirements/Limits
Antidementia Agents		
Antidementia Agents, Other		
<i>ergoloid mesylates oral tablet</i>	Tier 2	
Cholinesterase Inhibitors		
<i>donepezil hcl oral tablet</i>	Tier 2	
<i>donepezil hcl oral tablet dispersible</i>	Tier 2	
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	Tier 2	
<i>galantamine hydrobromide oral solution</i>	Tier 2	
<i>galantamine hydrobromide oral tablet</i>	Tier 2	
<i>rivastigmine tartrate oral capsule</i>	Tier 2	
<i>rivastigmine transdermal patch 24 hour</i>	Tier 2	QL (1 EA per 1 day)
N-Methyl-D-Aspartate (Nmda) Receptor Antagonist		
<i>memantine hcl er oral capsule extended release 24 hour</i>	Tier 2	QL (1 EA per 1 day)
<i>memantine hcl oral solution 2 mg/ml</i>	Tier 2	
<i>memantine hcl oral tablet</i>	Tier 2	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 28 MG	Tier 4	QL (1 EA per 1 day)
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier 4	QL (1 EA per 1 day)
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	Tier 4	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier 4	
Antidepressants		
Antidepressants, Other		
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	Tier 2	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour</i>	Tier 2	
<i>bupropion hcl oral tablet</i>	Tier 2	
<i>mirtazapine oral tablet</i>	Tier 2	
<i>mirtazapine oral tablet dispersible</i>	Tier 2	
TRINTELLIX ORAL TABLET	Tier 4	PA
Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR	Tier 4	PA
MARPLAN ORAL TABLET	Tier 3	

Drug	Status	Requirements/Limits
<i>phenelzine sulfate oral tablet</i>	Tier 2	
<i>tranylcypromine sulfate oral tablet</i>	Tier 2	
Ssris/Snris (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitor)		
BRINTELLIX ORAL TABLET	Tier 4	PA
<i>citalopram hydrobromide oral solution</i>	Tier 2	
<i>citalopram hydrobromide oral tablet</i>	Tier 1	
DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 4	QL (1 EA per 1 day)
<i>desvenlafaxine succinate er oral tablet extended release 24 hour</i>	Tier 2	
<i>escitalopram oxalate oral solution</i>	Tier 2	
<i>escitalopram oxalate oral tablet</i>	Tier 1	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier 4	PA
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	Tier 4	PA
<i>fluoxetine hcl oral capsule 10 mg, 20 mg</i>	Tier 1	
<i>fluoxetine hcl oral capsule 40 mg</i>	Tier 2	
<i>fluoxetine hcl oral capsule delayed release</i>	Tier 2	QL (4 EA per 28 days)
<i>fluoxetine hcl oral solution</i>	Tier 2	
<i>fluoxetine hcl oral tablet 10 mg, 20 mg</i>	Tier 2	
FLUOXETINE HCL ORAL TABLET 60 MG	Tier 3	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	Tier 2	
<i>fluvoxamine maleate oral tablet</i>	Tier 2	
<i>maprotiline hcl oral tablet</i>	Tier 2	
<i>nefazodone hcl oral tablet</i>	Tier 2	
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	Tier 2	
PAXIL ORAL SUSPENSION	Tier 4	
<i>sertraline hcl oral concentrate</i>	Tier 2	
<i>sertraline hcl oral tablet</i>	Tier 1	
<i>trazodone hcl oral tablet 100 mg, 50 mg</i>	Tier 1	
<i>trazodone hcl oral tablet 150 mg, 300 mg</i>	Tier 2	
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	Tier 2	
<i>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	Tier 2	

Drug	Status	Requirements/Limits
VENLAFAXINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 225 MG	Tier 4	
VIIBRYD ORAL KIT	Tier 4	PA
VIIBRYD ORAL TABLET	Tier 4	PA
VIIBRYD STARTER PACK ORAL KIT	Tier 4	PA
Tricyclics		
<i>amitriptyline hcl oral tablet</i>	Tier 2	PA
AMOXAPINE ORAL TABLET	Tier 4	
<i>chlordiazepoxide-amitriptyline oral tablet</i>	Tier 2	
<i>clomipramine hcl oral capsule</i>	Tier 2	
<i>desipramine hcl oral tablet</i>	Tier 2	
<i>doxepin hcl oral capsule</i>	Tier 2	PA
<i>doxepin hcl oral concentrate</i>	Tier 2	PA
<i>imipramine hcl oral tablet</i>	Tier 2	
<i>nortriptyline hcl oral capsule</i>	Tier 1	
<i>nortriptyline hcl oral solution</i>	Tier 2	
<i>perphenazine-amitriptyline oral tablet</i>	Tier 2	
<i>protriptyline hcl oral tablet</i>	Tier 2	
<i>trimipramine maleate oral capsule</i>	Tier 2	
Antiemetics		
Antiemetics, Other		
<i>meclizine hcl oral tablet</i>	Tier 1	
<i>phenadoz rectal suppository 12.5 mg</i>	Tier 2	
<i>promethazine hcl injection solution</i>	Tier 2	
<i>promethazine hcl oral syrup</i>	Tier 1	
<i>promethazine hcl oral tablet</i>	Tier 1	
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	Tier 2	
<i>promethegan rectal suppository 25 mg, 50 mg</i>	Tier 2	
<i>scopolamine transdermal patch 72 hour</i>	Tier 2	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	Tier 4	
Emetogenic Therapy Adjuncts		
<i>aprepitant oral capsule</i>	Tier 2	PA
CINVANTI INTRAVENOUS EMULSION	Tier 4	
<i>dronabinol oral capsule</i>	Tier 2	
EMEND ORAL SUSPENSION RECONSTITUTED	Tier 4	PA
<i>granisetron hcl oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>ondansetron hcl injection solution 4 mg/2ml</i>	Tier 2	
<i>ondansetron hcl oral solution</i>	Tier 2	
<i>ondansetron hcl oral tablet</i>	Tier 2	
<i>ondansetron oral tablet dispersible</i>	Tier 2	
SYNDROS ORAL SOLUTION	Tier 4	
Antifungals		
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	Tier 4	
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	Tier 4	
AMPHOTERICIN B INTRAVENOUS SOLUTION RECONSTITUTED	Tier 4	
<i>ciclopirox external gel</i>	Tier 2	
<i>ciclopirox external shampoo</i>	Tier 2	
<i>ciclopirox external solution</i>	Tier 2	
<i>ciclopirox olamine external cream</i>	Tier 2	
<i>ciclopirox olamine external suspension</i>	Tier 2	
<i>clotrimazole external cream</i>	Tier 2	
<i>clotrimazole external solution</i>	Tier 2	
<i>clotrimazole mouth/throat lozenge</i>	Tier 2	
<i>econazole nitrate external cream</i>	Tier 2	
EXELDERM EXTERNAL CREAM	Tier 3	
EXELDERM EXTERNAL SOLUTION	Tier 3	
<i>fluconazole in sodium chloride intravenous solution 400-0.9 mg/200ml-%</i>	Tier 2	
<i>fluconazole oral suspension reconstituted</i>	Tier 2	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	Tier 2	
<i>fluconazole oral tablet 150 mg</i>	Tier 1	
<i>griseofulvin microsize oral suspension</i>	Tier 2	
<i>griseofulvin microsize oral tablet</i>	Tier 2	
<i>griseofulvin ultramicrosize oral tablet</i>	Tier 2	
<i>itraconazole oral capsule</i>	Tier 2	
<i>itraconazole oral solution</i>	Tier 2	
<i>ketoconazole external cream</i>	Tier 2	QL (120 GM per 30 days)
<i>ketoconazole external shampoo 2 %</i>	Tier 2	
<i>ketoconazole oral tablet</i>	Tier 2	
<i>miconazole 3 vaginal suppository</i>	Tier 2	
<i>naftifine hcl external cream 1 %</i>	Tier 2	
NAFTIN EXTERNAL GEL 1 %	Tier 4	

Drug	Status	Requirements/Limits
NATACYN OPHTHALMIC SUSPENSION	Tier 4	
NOXAFIL ORAL SUSPENSION	Tier 4	PA
<i>nystatin external cream</i>	Tier 2	
<i>nystatin external ointment</i>	Tier 2	
<i>nystatin external powder</i>	Tier 2	
<i>nystatin mouth/throat suspension</i>	Tier 2	
<i>nystatin oral tablet</i>	Tier 2	
<i>nystatin-triamcinolone external cream</i>	Tier 2	
<i>nystatin-triamcinolone external ointment</i>	Tier 2	
<i>nystop external powder</i>	Tier 2	
<i>oxiconazole nitrate external cream</i>	Tier 2	
OXISTAT EXTERNAL LOTION	Tier 3	
<i>posaconazole oral tablet delayed release</i>	Tier 2	PA
<i>terbinafine hcl oral tablet</i>	Tier 1	
<i>terconazole vaginal cream</i>	Tier 2	
<i>terconazole vaginal suppository</i>	Tier 2	
<i>voriconazole intravenous solution reconstituted</i>	Tier 2	PA
<i>voriconazole oral suspension reconstituted</i>	Tier 2	PA
<i>zazole vaginal cream 0.8 %</i>	Tier 2	
<i>zazole vaginal suppository</i>	Tier 2	
Antigout Agents		
Antigout Agents		
<i>allopurinol oral tablet</i>	Tier 1	
<i>colchicine oral tablet</i>	Tier 2	
<i>colchicine-probenecid oral tablet</i>	Tier 2	
COLCRYS ORAL TABLET	Tier 3	
<i>probenecid oral tablet</i>	Tier 2	
Anti-Inflammatory Agents		
Glucocorticoids		
<i>methylprednisolone acetate injection suspension 40 mg/ml</i>	Tier 2	
<i>methylprednisolone sodium succ injection solution reconstituted 125 mg</i>	Tier 2	
Nonsteroidal Anti-Inflammatory Drugs		
<i>etodolac oral capsule</i>	Tier 1	
<i>etodolac oral tablet</i>	Tier 1	
<i>flurbiprofen oral tablet</i>	Tier 1	
<i>ibu oral tablet 600 mg, 800 mg</i>	Tier 1	

Drug	Status	Requirements/Limits
<i>profeno oral tablet</i>	Tier 1	
Antimigraine Agents		
Ergot Alkaloids		
<i>dihydroergotamine mesylate injection solution</i>	Tier 2	
<i>dihydroergotamine mesylate nasal solution</i>	Tier 2	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	Tier 3	
<i>ergotamine-caffeine oral tablet</i>	Tier 2	
Prophylactic		
AIMOVIG (140 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 3	PA; QL (2 ML per 30 days)
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 3	PA; QL (1 ML per 30 days)
<i>divalproex sodium er oral tablet extended release 24 hour</i>	Tier 2	
<i>timolol maleate oral tablet</i>	Tier 2	
Serotonin (5-Ht) 1B/1D Receptor Agonists		
<i>naratriptan hcl oral tablet</i>	Tier 2	QL (9 EA per 30 days)
<i>sumatriptan succinate oral tablet</i>	Tier 2	QL (9 EA per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	Tier 2	QL (8 ML per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
GUANIDINE HCL ORAL TABLET	Tier 4	
<i>pyridostigmine bromide er oral tablet extended release</i>	Tier 2	
<i>pyridostigmine bromide oral solution</i>	Tier 1	
<i>pyridostigmine bromide oral tablet</i>	Tier 2	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone oral tablet</i>	Tier 2	
<i>rifabutin oral capsule</i>	Tier 2	
Antituberculars		
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED	Tier 4	
<i>ethambutol hcl oral tablet</i>	Tier 2	
ISONIAZID ORAL SYRUP	Tier 4	

Drug	Status	Requirements/Limits
<i>isoniazid oral tablet</i>	Tier 1	
PASER ORAL PACKET	Tier 4	
<i>pretomanid oral tablet</i>	Tier 2	
PRIFTIN ORAL TABLET	Tier 4	
<i>pyrazinamide oral tablet</i>	Tier 2	
<i>rifampin intravenous solution reconstituted</i>	Tier 2	
<i>rifampin oral capsule</i>	Tier 2	
RIFATER ORAL TABLET	Tier 4	
TRECTOR ORAL TABLET	Tier 4	
Antineoplastics		
Alkylating Agents		
<i>cyclophosphamide oral capsule</i>	Tier 2	
GLEOSTINE ORAL CAPSULE	Tier 4	
LEUKERAN ORAL TABLET	Tier 3	
<i>lomustine oral capsule</i>	Tier 2	
Antiandrogens		
<i>bicalutamide oral tablet</i>	Tier 2	
<i>flutamide oral capsule</i>	Tier 2	
<i>nilutamide oral tablet</i>	Tier 2	
Antiestrogens/Modifiers		
EMCYT ORAL CAPSULE	Tier 3	
SOLTAMOX ORAL SOLUTION	Tier 4	
<i>tamoxifen citrate oral tablet</i>	Tier 2	
<i>toremifene citrate oral tablet</i>	Tier 2	
Antimetabolites		
<i>hydroxyurea oral capsule</i>	Tier 2	
<i>mercaptopurine oral tablet</i>	Tier 2	
PURIXAN ORAL SUSPENSION	Tier 4	
TABLOID ORAL TABLET	Tier 4	
Antineoplastics		
<i>fludarabine phosphate intravenous solution reconstituted</i>	Tier 2	
Antineoplastics, Other		
<i>bleomycin sulfate injection solution reconstituted 30 unit</i>	Tier 2	
<i>leucovorin calcium injection solution reconstituted 100 mg, 350 mg</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>mitoxantrone hcl intravenous concentrate 25 mg/12.5ml</i>	Tier 2	
<i>paclitaxel intravenous concentrate 100 mg/16.7ml, 300 mg/50ml</i>	Tier 2	
TRISENOX INTRAVENOUS SOLUTION 10 MG/10ML	Tier 4	
VENCLEXTA ORAL TABLET 10 MG, 50 MG	Tier 4	PA
Aromatase Inhibitors, 3Rd Generation		
<i>anastrozole oral tablet</i>	Tier 2	
<i>exemestane oral tablet</i>	Tier 2	
<i>letrozole oral tablet</i>	Tier 2	
Enzyme Inhibitors		
<i>etoposide intravenous solution 100 mg/5ml, 500 mg/25ml</i>	Tier 2	
<i>toposar intravenous solution 500 mg/25ml</i>	Tier 2	
<i>topotecan hcl intravenous solution reconstituted</i>	Tier 2	
Molecular Target Inhibitors		
<i>erlotinib hcl oral tablet</i>	Tier 1	PA
NEXAVAR ORAL TABLET	Tier 3	PA
SUTENT ORAL CAPSULE	Tier 3	PA
Retinoids		
PANRETIN EXTERNAL GEL	Tier 4	
TARGRETIN EXTERNAL GEL	Tier 3	
Treatment Adjuncts		
LEUCOVORIN CALCIUM ORAL TABLET 10 MG, 15 MG	Tier 4	
<i>leucovorin calcium oral tablet 25 mg, 5 mg</i>	Tier 2	
MESNEX ORAL TABLET	Tier 4	
Antiparasitics		
Anthelmintics		
<i>albendazole oral tablet</i>	Tier 1	
<i>ivermectin oral tablet</i>	Tier 2	
<i>praziquantel oral tablet</i>	Tier 2	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED	Tier 4	
ALINIA ORAL TABLET	Tier 4	
<i>atovaquone oral suspension</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>atovaquone-proguanil hcl oral tablet</i>	Tier 2	
<i>chloroquine phosphate oral tablet</i>	Tier 2	
COARTEM ORAL TABLET	Tier 4	
DARAPRIM ORAL TABLET	Tier 4	
<i>hydroxychloroquine sulfate oral tablet</i>	Tier 2	
KRINTAFEL ORAL TABLET	Tier 4	
<i>mefloquine hcl oral tablet</i>	Tier 2	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	Tier 4	
PENTAM INJECTION SOLUTION RECONSTITUTED	Tier 4	
<i>primaquine phosphate oral tablet</i>	Tier 2	
<i>quinine sulfate oral capsule</i>	Tier 2	
Pediculicides/Scabicides		
EURAX EXTERNAL CREAM	Tier 4	
<i>lindane external lotion</i>	Tier 2	
<i>lindane external shampoo</i>	Tier 2	
<i>malathion external lotion</i>	Tier 2	
<i>permethrin external cream</i>	Tier 2	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate oral tablet</i>	Tier 1	PA
<i>trihexyphenidyl hcl oral solution</i>	Tier 2	
<i>trihexyphenidyl hcl oral tablet</i>	Tier 1	
Antiparkinson Agents, Other		
<i>entacapone oral tablet</i>	Tier 2	
Dopamine Agonists		
<i>bromocriptine mesylate oral capsule</i>	Tier 2	
<i>bromocriptine mesylate oral tablet</i>	Tier 2	
NEUPRO TRANSDERMAL PATCH 24 HOUR	Tier 4	
<i>pramipexole dihydrochloride oral tablet</i>	Tier 2	
<i>ropinirole hcl oral tablet</i>	Tier 2	
Dopamine Precursors/L- Amino Acid Decarboxylase Inhibitors		
<i>carbidopa oral tablet</i>	Tier 2	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	Tier 2	
<i>carbidopa-levodopa oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>carbidopa-levodopa oral tablet dispersible</i>	Tier 2	
<i>carbidopa-levodopa-entacapone oral tablet</i>	Tier 2	
STALEVO 100 ORAL TABLET	Tier 4	
STALEVO 125 ORAL TABLET	Tier 4	
STALEVO 150 ORAL TABLET	Tier 4	
STALEVO 200 ORAL TABLET	Tier 4	
STALEVO 50 ORAL TABLET	Tier 4	
STALEVO 75 ORAL TABLET	Tier 4	
Monoamine Oxidase B (Mao-B) Inhibitors		
<i>rasagiline mesylate oral tablet</i>	Tier 2	
<i>selegiline hcl oral capsule</i>	Tier 2	
<i>selegiline hcl oral tablet</i>	Tier 2	
ZELAPAR ORAL TABLET DISPERSIBLE	Tier 4	
Antipsychotics		
1St Generation/Typical		
CHLORPROMAZINE HCL INJECTION SOLUTION 50 MG/2ML	Tier 4	
<i>chlorpromazine hcl oral tablet</i>	Tier 2	
<i>compro rectal suppository</i>	Tier 2	
<i>fluphenazine decanoate injection solution</i>	Tier 2	
FLUPHENAZINE HCL INJECTION SOLUTION	Tier 4	
FLUPHENAZINE HCL ORAL CONCENTRATE	Tier 4	
FLUPHENAZINE HCL ORAL ELIXIR	Tier 4	
<i>fluphenazine hcl oral tablet</i>	Tier 2	
<i>haloperidol decanoate intramuscular solution</i>	Tier 2	
<i>haloperidol lactate injection solution</i>	Tier 2	
<i>haloperidol lactate oral concentrate</i>	Tier 2	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 2 mg, 5 mg</i>	Tier 1	
<i>haloperidol oral tablet 10 mg, 20 mg</i>	Tier 2	
<i>loxapine succinate oral capsule</i>	Tier 2	
<i>molindone hcl oral tablet</i>	Tier 2	
<i>perphenazine oral tablet</i>	Tier 2	
<i>pimozide oral tablet</i>	Tier 2	
<i>prochlorperazine edisylate injection solution 5 mg/ml</i>	Tier 2	
<i>prochlorperazine maleate oral tablet</i>	Tier 1	

Drug	Status	Requirements/Limits
<i>prochlorperazine rectal suppository</i>	Tier 2	
<i>thioridazine hcl oral tablet 10 mg</i>	Tier 2	
<i>thioridazine hcl oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 1	
<i>thiothixene oral capsule</i>	Tier 2	
<i>trifluoperazine hcl oral tablet</i>	Tier 2	
2Nd Generation/Atypical		
<i>aripiprazole oral solution</i>	Tier 2	
<i>aripiprazole oral tablet</i>	Tier 2	
<i>aripiprazole oral tablet dispersible</i>	Tier 2	
FANAPT ORAL TABLET	Tier 4	PA
FANAPT TITRATION PACK ORAL TABLET	Tier 4	PA
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier 4	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 3	PA
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 3	PA
LATUDA ORAL TABLET	Tier 4	PA
<i>olanzapine intramuscular solution reconstituted</i>	Tier 2	
<i>olanzapine oral tablet</i>	Tier 2	
<i>olanzapine oral tablet dispersible</i>	Tier 2	
<i>paliperidone er oral tablet extended release 24 hour</i>	Tier 2	PA
<i>quetiapine fumarate oral tablet</i>	Tier 2	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Tier 3	
<i>risperidone oral solution</i>	Tier 2	QL (8 ML per 1 day)
<i>risperidone oral tablet</i>	Tier 2	QL (2 EA per 1 day)
<i>risperidone oral tablet dispersible</i>	Tier 2	QL (2 EA per 1 day)
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	Tier 4	PA
VRAYLAR ORAL CAPSULE THERAPY PACK	Tier 4	PA
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	Tier 4	
Treatment-Resistant		
<i>clozapine oral tablet</i>	Tier 2	
<i>clozapine oral tablet dispersible</i>	Tier 2	
VERSACLOZ ORAL SUSPENSION	Tier 4	

Drug	Status	Requirements/Limits
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral tablet</i>	Tier 2	
<i>dantrolene sodium oral capsule</i>	Tier 2	
<i>tizanidine hcl oral tablet</i>	Tier 2	
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
<i>ganciclovir sodium intravenous solution reconstituted</i>	Tier 2	
<i>valganciclovir hcl oral solution reconstituted</i>	Tier 2	
<i>valganciclovir hcl oral tablet</i>	Tier 2	
ZIRGAN OPHTHALMIC GEL	Tier 4	
Anti-Hepatitis B (Hbv) Agents		
BARACLUDE ORAL SOLUTION	Tier 4	PA
EPIVIR HBV ORAL SOLUTION	Tier 3	
INTRON A INJECTION SOLUTION	Tier 3	
INTRON A INJECTION SOLUTION RECONSTITUTED	Tier 3	
<i>lamivudine oral tablet 100 mg</i>	Tier 2	
<i>tenofovir disoproxil fumarate oral tablet</i>	Tier 2	
Anti-Hepatitis C (Hcv) Agents, Other		
REBETOL ORAL SOLUTION	Tier 4	
<i>ribasphere oral capsule</i>	Tier 2	
<i>ribasphere oral tablet 200 mg, 400 mg</i>	Tier 2	
<i>ribavirin oral capsule</i>	Tier 2	
<i>ribavirin oral tablet 200 mg</i>	Tier 2	
Antiherpetic Agents		
<i>acyclovir oral capsule</i>	Tier 1	
<i>acyclovir oral suspension</i>	Tier 2	
<i>acyclovir oral tablet</i>	Tier 1	
<i>acyclovir sodium intravenous solution</i>	Tier 2	
<i>famciclovir oral tablet</i>	Tier 2	
SITAVIG BUCCAL TABLET	Tier 4	
<i>trifluridine ophthalmic solution</i>	Tier 2	
<i>valacyclovir hcl oral tablet</i>	Tier 2	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
ISENTRESS ORAL PACKET	Tier 3	

Drug	Status	Requirements/Limits
ISENTRESS ORAL TABLET CHEWABLE	Tier 3	
TIVICAY ORAL TABLET	Tier 3	
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
<i>efavirenz oral capsule 200 mg</i>	Tier 1	
<i>efavirenz oral tablet</i>	Tier 1	
INTELENCE ORAL TABLET 25 MG	Tier 4	
<i>nevirapine er oral tablet extended release 24 hour</i>	Tier 2	
<i>nevirapine oral suspension</i>	Tier 2	
<i>nevirapine oral tablet</i>	Tier 2	
PIFELTRO ORAL TABLET	Tier 4	
RESCRIPTOR ORAL TABLET	Tier 3	
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir sulfate oral solution</i>	Tier 1	
<i>abacavir sulfate oral tablet</i>	Tier 2	
<i>abacavir sulfate-lamivudine oral tablet</i>	Tier 2	
CIMDUO ORAL TABLET	Tier 3	
DELSTRIGO ORAL TABLET	Tier 4	
<i>didanosine oral capsule delayed release</i>	Tier 2	
<i>efavirenz oral capsule 50 mg</i>	Tier 1	
EMTRIVA ORAL CAPSULE	Tier 4	
EMTRIVA ORAL SOLUTION	Tier 4	
<i>lamivudine oral solution</i>	Tier 2	
<i>lamivudine oral tablet 150 mg, 300 mg</i>	Tier 2	
<i>lamivudine-zidovudine oral tablet</i>	Tier 2	
RETROVIR INTRAVENOUS SOLUTION	Tier 3	
<i>stavudine oral capsule</i>	Tier 2	
<i>stavudine oral solution reconstituted</i>	Tier 2	
VIDEX EC ORAL CAPSULE DELAYED RELEASE 125 MG	Tier 4	
VIDEX ORAL SOLUTION RECONSTITUTED 2 GM	Tier 4	
VIREAD ORAL POWDER	Tier 3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Tier 3	

Drug	Status	Requirements/Limits
ZERIT ORAL SOLUTION RECONSTITUTED	Tier 4	
<i>zidovudine oral capsule</i>	Tier 2	
<i>zidovudine oral syrup</i>	Tier 2	
<i>zidovudine oral tablet</i>	Tier 2	
Anti-Hiv Agents, Other		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 3	
SELZENTRY ORAL SOLUTION	Tier 3	
SELZENTRY ORAL TABLET	Tier 3	
TYBOST ORAL TABLET	Tier 3	
Anti-Hiv Agents, Protease Inhibitors		
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG	Tier 3	
INVIRASE ORAL CAPSULE	Tier 3	
KALETRA ORAL TABLET 100-25 MG	Tier 3	
LEXIVA ORAL SUSPENSION	Tier 4	
<i>lopinavir-ritonavir oral solution</i>	Tier 2	
NORVIR ORAL CAPSULE	Tier 3	
NORVIR ORAL PACKET	Tier 3	
NORVIR ORAL SOLUTION	Tier 3	
NORVIR ORAL TABLET	Tier 3	
PREZISTA ORAL SUSPENSION	Tier 4	
PREZISTA ORAL TABLET 150 MG, 75 MG	Tier 4	
REYATAZ ORAL PACKET	Tier 4	
<i>ritonavir oral tablet</i>	Tier 1	
VIRACEPT ORAL TABLET 250 MG	Tier 3	
Anti-Influenza Agents		
<i>amantadine hcl oral capsule</i>	Tier 2	
<i>amantadine hcl oral syrup</i>	Tier 2	
<i>amantadine hcl oral tablet</i>	Tier 2	
<i>oseltamivir phosphate oral capsule</i>	Tier 2	QL (2 EA per 1 day)
<i>oseltamivir phosphate oral suspension reconstituted</i>	Tier 2	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 4	
<i>rimantadine hcl oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	Tier 4	
XOFLUZA ORAL TABLET THERAPY PACK	Tier 4	
Anxiolytics		
Anxiolytics, Other		
<i>bupirone hcl oral tablet</i>	Tier 2	
<i>hydroxyzine hcl oral syrup</i>	Tier 2	PA
<i>hydroxyzine hcl oral tablet</i>	Tier 2	PA
SILENOR ORAL TABLET	Tier 3	
<i>triazolam oral tablet 0.25 mg</i>	Tier 2	
Benzodiazepines		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg</i>	Tier 2	
<i>alprazolam oral tablet</i>	Tier 1	
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg</i>	Tier 2	
<i>chlordiazepoxide hcl oral capsule</i>	Tier 1	
<i>clorazepate dipotassium oral tablet</i>	Tier 2	
<i>diazepam oral solution 5 mg/5ml</i>	Tier 2	
<i>diazepam oral tablet</i>	Tier 1	
<i>estazolam oral tablet</i>	Tier 2	QL (1 EA per 1 day)
<i>lorazepam injection solution 2 mg/ml</i>	Tier 2	
<i>lorazepam oral concentrate 2 mg/ml</i>	Tier 2	
<i>lorazepam oral tablet</i>	Tier 1	
<i>oxazepam oral capsule</i>	Tier 2	
<i>triazolam oral tablet 0.125 mg</i>	Tier 2	
Ssris/Snris (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitor)		
<i>duloxetine hcl oral capsule delayed release particles 40 mg</i>	Tier 2	
<i>paroxetine hcl oral tablet</i>	Tier 1	
<i>venlafaxine hcl oral tablet</i>	Tier 2	
Bipolar Agents		
Bipolar Agents, Other		
ABILIFY DISCMELT ORAL TABLET DISPERSIBLE 10 MG	Tier 4	QL (3 EA per 1 day)

Drug	Status	Requirements/Limits
ABILIFY DISCMELT ORAL TABLET DISPERSIBLE 15 MG	Tier 4	QL (2 EA per 1 day)
ABILIFY INTRAMUSCULAR SOLUTION	Tier 4	
ABILIFY ORAL SOLUTION	Tier 4	QL (30 ML per 1 day)
<i>olanzapine-fluoxetine hcl oral capsule</i>	Tier 2	
<i>ziprasidone hcl oral capsule</i>	Tier 2	
Mood Stabilizers		
<i>divalproex sodium oral tablet delayed release</i>	Tier 2	
LAMICTAL STARTER ORAL KIT	Tier 4	
<i>lamotrigine oral tablet</i>	Tier 1	
<i>lamotrigine oral tablet chewable</i>	Tier 2	
<i>lithium carbonate er oral tablet extended release</i>	Tier 2	
<i>lithium carbonate oral capsule 150 mg, 300 mg</i>	Tier 1	
<i>lithium carbonate oral capsule 600 mg</i>	Tier 2	
<i>lithium carbonate oral tablet</i>	Tier 2	
LITHIUM ORAL SOLUTION	Tier 4	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose oral tablet</i>	Tier 2	QL (3 EA per 1 day)
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	Tier 3	
BYDUREON SUBCUTANEOUS PEN-INJECTOR	Tier 3	
BYDUREON SUBCUTANEOUS SUSPENSION RECONSTITUTED ER	Tier 3	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	
<i>colesevelam hcl oral tablet</i>	Tier 2	
CYCLOSET ORAL TABLET	Tier 4	
FARXIGA ORAL TABLET	Tier 3	
<i>glimepiride oral tablet</i>	Tier 1	
<i>glipizide er oral tablet extended release 24 hour</i>	Tier 2	
<i>glipizide oral tablet</i>	Tier 1	
<i>glyburide micronized oral tablet</i>	Tier 2	PA
<i>glyburide oral tablet</i>	Tier 2	PA
JANUVIA ORAL TABLET	Tier 3	QL (1 EA per 1 day)
JARDIANCE ORAL TABLET	Tier 3	

Drug	Status	Requirements/Limits
<i>metformin hcl er oral tablet extended release 24 hour</i>	Tier 1	
<i>metformin hcl oral tablet</i>	Tier 1	
<i>migliitol oral tablet</i>	Tier 1	
<i>nateglinide oral tablet</i>	Tier 2	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
<i>pioglitazone hcl oral tablet</i>	Tier 2	
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>	Tier 2	QL (4 EA per 1 day)
<i>repaglinide oral tablet 2 mg</i>	Tier 2	QL (8 EA per 1 day)
RIOMET ORAL SOLUTION	Tier 4	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA
SYNJARDY ORAL TABLET	Tier 3	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 3	
<i>tolazamide oral tablet</i>	Tier 2	
TOLBUTAMIDE ORAL TABLET	Tier 4	
TRADJENTA ORAL TABLET	Tier 3	QL (1 EA per 1 day)
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 3	
Blood Glucose Regulators		
ACTOPLUS MET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 3	
<i>glipizide-metformin hcl oral tablet</i>	Tier 2	
<i>glyburide-metformin oral tablet</i>	Tier 2	PA; QL (4 EA per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML	Tier 3	QL (0.4 ML per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	Tier 3	QL (0.8 ML per 1 day)
JANUMET ORAL TABLET	Tier 3	QL (2 EA per 1 day)

Drug	Status	Requirements/Limits
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 3	QL (2 EA per 1 day)
JENTADUETO ORAL TABLET	Tier 3	QL (2 EA per 1 day)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 3	QL (2 EA per 1 day)
<i>pioglitazone hcl-glimepiride oral tablet</i>	Tier 2	
<i>pioglitazone hcl-metformin hcl oral tablet</i>	Tier 2	
Glycemic Agents		
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	Tier 3	
GLUCAGON EMERGENCY INJECTION KIT	Tier 3	
PROGLYCEM ORAL SUSPENSION	Tier 4	
Insulins		
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 3	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	Tier 3	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 3	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	Tier 3	
HUMALOG SUBCUTANEOUS SOLUTION	Tier 3	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	Tier 3	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 3	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	Tier 3	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier 3	
HUMULIN N SUBCUTANEOUS SUSPENSION	Tier 3	
HUMULIN R INJECTION SOLUTION	Tier 3	

Drug	Status	Requirements/Limits
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Tier 3	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
INSULIN LISPRO SUBCUTANEOUS SOLUTION	Tier 3	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
LANTUS SUBCUTANEOUS SOLUTION	Tier 3	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
LEVEMIR SUBCUTANEOUS SOLUTION	Tier 3	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 3	
TRESIBA SUBCUTANEOUS SOLUTION	Tier 3	
Blood Glucose Supplies		
Glucose Monitoring Test Supplies		
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ACCU-CHEK COMPACT PLUS IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ACCU-CHEK GUIDE IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ACCU-CHEK SMARTVIEW IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ACCUTREND GLUCOSE IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ADVANCE INTUITION TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ADVANCE MICRO-DRAW TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ADVOCATE REDI-CODE IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ADVOCATE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)

Drug	Status	Requirements/Limits
AGAMATRIX AMP TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
AGAMATRIX JAZZ TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
AGAMATRIX KEYNOTE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
AGAMATRIX PRESTO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE 3 TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE 4 TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE II CHECK IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE II IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE PLATINUM IN VITRO STRIP	Tier 4	PA
ASSURE PRISM MULTI TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ASSURE PRO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
BIOSCANNER GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
BLOOD GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CARESENS N GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CARETOUCH TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHEK TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHOICE MICRO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHOICE NO CODING IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CONTOUR NEXT TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
CONTOUR TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
DEXCOM G6 RECEIVER DEVICE	Tier 4	PA
DEXCOM G6 SENSOR	Tier 4	PA
DEXCOM G6 TRANSMITTER	Tier 4	PA

Drug	Status	Requirements/Limits
EASY PLUS II GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASY STEP TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASY TOUCH HEALTHPRO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASY TOUCH TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASYGLUCO IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASYGLUCO PLUS IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EASYMAX 15 TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EVENCARE G2 TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EVENCARE G3 TEST IN VITRO STRIP	Tier 4	PA
EVENCARE MINI GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EXACTECH R-S-G TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
EXACTECH TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
FREESTYLE INSULINX TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
FREESTYLE LIBRE 14 DAY READER DEVICE	Tier 4	PA
FREESTYLE LIBRE 14 DAY SENSOR	Tier 4	PA
FREESTYLE LIBRE READER DEVICE	Tier 4	PA
FREESTYLE LIBRE SENSOR SYSTEM	Tier 4	PA
FREESTYLE LITE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
FREESTYLE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
ONETOUCH ULTRA BLUE IN VITRO STRIP	Tier 3	QL (5 EA per 1 day)
ONETOUCH VERIO IN VITRO STRIP	Tier 3	QL (5 EA per 1 day)
OPTIUM TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
OPTIUMEZ TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRECISION PCX IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRECISION PCX PLUS TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRECISION POINT OF CARE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRECISION QID TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)

Drug	Status	Requirements/Limits
PRECISION SOF-TACT TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
PTS PANELS GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
QUICKTEK TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
RELION BLOOD GLUCOSE TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
RELION CONFIRM/MICRO TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
RELION PRIME TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
RELION ULTIMA TEST IN VITRO STRIP	Tier 4	PA; QL (5 EA per 1 day)
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
COUMADIN ORAL TABLET	Tier 4	
ELIQUIS ORAL TABLET	Tier 3	
ELIQUIS STARTER PACK ORAL TABLET	Tier 3	
<i>enoxaparin sodium injection solution</i>	Tier 2	
<i>enoxaparin sodium subcutaneous solution</i>	Tier 2	
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	Tier 2	
FRAGMIN SUBCUTANEOUS SOLUTION 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	Tier 3	
<i>heparin (porcine) in nacl injection solution 2-0.9 unit/ml-%</i>	Tier 2	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	Tier 2	
HEPARIN SODIUM (PORCINE) INJECTION SOLUTION 2500 UNIT/ML	Tier 4	
<i>jantoven oral tablet</i>	Tier 1	
PRADAXA ORAL CAPSULE	Tier 4	
<i>warfarin sodium oral tablet</i>	Tier 1	
XARELTO ORAL TABLET	Tier 3	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Tier 3	
Blood Formation Modifiers		
<i>anagrelide hcl oral capsule</i>	Tier 2	

Drug	Status	Requirements/Limits
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier 3	PA
Hemostasis Agents		
<i>tranexamic acid intravenous solution 1000 mg/10ml</i>	Tier 2	
<i>tranexamic acid oral tablet</i>	Tier 2	
Platelet Modifying Agents		
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	Tier 2	
BRILINTA ORAL TABLET	Tier 3	
<i>cilostazol oral tablet</i>	Tier 2	
<i>clopidogrel bisulfate oral tablet 300 mg</i>	Tier 2	QL (1 EA per 30 days)
<i>clopidogrel bisulfate oral tablet 75 mg</i>	Tier 1	
<i>dipyridamole oral tablet</i>	Tier 2	
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet</i>	Tier 1	
<i>clonidine transdermal patch weekly</i>	Tier 2	
<i>guanfacine hcl oral tablet</i>	Tier 2	
<i>methyldopa oral tablet</i>	Tier 2	
<i>midodrine hcl oral tablet</i>	Tier 2	
Alpha-Adrenergic Blocking Agents		
<i>phenoxybenzamine hcl oral capsule</i>	Tier 2	
<i>prazosin hcl oral capsule</i>	Tier 2	
RESERPINE ORAL TABLET	Tier 4	
Angiotensin Ii Receptor Antagonists		
<i>candesartan cilxetil oral tablet</i>	Tier 2	
ENTRESTO ORAL TABLET	Tier 3	
<i>irbesartan oral tablet</i>	Tier 2	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>losartan potassium oral tablet</i>	Tier 1	
<i>losartan potassium-hctz oral tablet</i>	Tier 1	QL (1 EA per 1 day)
<i>olmesartan medoxomil oral tablet</i>	Tier 2	
<i>olmesartan medoxomil-hctz oral tablet</i>	Tier 2	
<i>telmisartan oral tablet</i>	Tier 2	
<i>valsartan oral tablet</i>	Tier 2	
<i>valsartan-hydrochlorothiazide oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
Angiotensin-Converting Enzyme (Ace) Inhibitors		
<i>benazepril hcl oral tablet</i>	Tier 1	
<i>benazepril-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>captopril oral tablet</i>	Tier 2	
<i>captopril-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>enalapril maleate oral tablet</i>	Tier 1	
<i>enalapril-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>fosinopril sodium oral tablet</i>	Tier 1	
<i>fosinopril sodium-hctz oral tablet</i>	Tier 2	
<i>lisinopril oral tablet</i>	Tier 1	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	Tier 1	
<i>moexipril hcl oral tablet</i>	Tier 2	
<i>moexipril-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>perindopril erbumine oral tablet</i>	Tier 2	
<i>quinapril hcl oral tablet</i>	Tier 1	QL (2 EA per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet</i>	Tier 2	QL (1 EA per 1 day)
<i>ramipril oral capsule</i>	Tier 1	
<i>trandolapril oral tablet</i>	Tier 2	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	Tier 2	
Antiarrhythmics		
<i>amiodarone hcl oral tablet</i>	Tier 2	
<i>disopyramide phosphate oral capsule</i>	Tier 2	
<i>dofetilide oral capsule</i>	Tier 2	
<i>flecainide acetate oral tablet</i>	Tier 2	
<i>mexiletine hcl oral capsule</i>	Tier 2	
MULTAQ ORAL TABLET	Tier 4	PA
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier 3	
<i>pacerone oral tablet 100 mg, 200 mg</i>	Tier 2	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	Tier 2	
<i>propafenone hcl oral tablet</i>	Tier 2	
<i>quinidine gluconate er oral tablet extended release</i>	Tier 2	
QUINIDINE SULFATE ER ORAL TABLET EXTENDED RELEASE	Tier 4	
<i>quinidine sulfate oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>sorine oral tablet</i>	Tier 2	
<i>sotalol hcl (af) oral tablet</i>	Tier 2	
<i>sotalol hcl oral tablet</i>	Tier 2	
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral capsule</i>	Tier 2	
<i>atenolol oral tablet</i>	Tier 1	
<i>atenolol-chlorthalidone oral tablet</i>	Tier 1	
<i>betaxolol hcl oral tablet</i>	Tier 2	
<i>bisoprolol fumarate oral tablet</i>	Tier 2	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	Tier 1	
BYSTOLIC ORAL TABLET	Tier 4	
<i>carvedilol oral tablet</i>	Tier 1	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	Tier 1	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 80 MG	Tier 4	
<i>labetalol hcl oral tablet</i>	Tier 2	
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	Tier 2	
<i>metoprolol tartrate oral tablet</i>	Tier 1	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	Tier 2	
<i>nadolol-bendroflumethiazide oral tablet</i>	Tier 2	
<i>pindolol oral tablet</i>	Tier 2	
<i>propranolol hcl er oral capsule extended release 24 hour</i>	Tier 2	
<i>propranolol hcl oral solution</i>	Tier 2	
<i>propranolol hcl oral tablet</i>	Tier 2	
<i>propranolol-hctz oral tablet</i>	Tier 2	
Calcium Channel Blocking Agents		
<i>amlodipine besy-benazepril hcl oral capsule</i>	Tier 2	
<i>amlodipine besylate oral tablet</i>	Tier 1	
<i>amlodipine besylate-valsartan oral tablet</i>	Tier 2	QL (1 EA per 1 day)
<i>amlodipine-valsartan-hctz oral tablet</i>	Tier 2	QL (1 EA per 1 day)
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	Tier 4	
<i>cartia xt oral capsule extended release 24 hour</i>	Tier 2	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 360 mg, 420 mg</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	Tier 2	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	Tier 2	
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	Tier 2	
<i>diltiazem hcl oral tablet 120 mg, 90 mg</i>	Tier 2	
<i>diltiazem hcl oral tablet 30 mg, 60 mg</i>	Tier 1	
<i>dilt-xr oral capsule extended release 24 hour 180 mg, 240 mg</i>	Tier 2	
<i>felodipine er oral tablet extended release 24 hour</i>	Tier 2	
<i>isradipine oral capsule</i>	Tier 2	
<i>matzim la oral tablet extended release 24 hour</i>	Tier 2	
<i>nicardipine hcl oral capsule</i>	Tier 2	
<i>nifedipine er oral tablet extended release 24 hour</i>	Tier 2	
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	Tier 2	
<i>taztia xt oral capsule extended release 24 hour</i>	Tier 2	
<i>verapamil hcl er oral capsule extended release 24 hour</i>	Tier 2	
<i>verapamil hcl er oral tablet extended release</i>	Tier 2	
<i>verapamil hcl oral tablet</i>	Tier 1	
Cardiovascular Agents, Other		
<i>aliskiren fumarate oral tablet</i>	Tier 2	
CORLANOR ORAL SOLUTION	Tier 4	PA
CORLANOR ORAL TABLET	Tier 4	PA
DEMSER ORAL CAPSULE	Tier 4	
<i>digox oral tablet</i>	Tier 2	
<i>digoxin oral solution</i>	Tier 2	
<i>digoxin oral tablet 125 mcg</i>	Tier 2	
<i>digoxin oral tablet 250 mcg</i>	Tier 2	PA
LANOXIN ORAL TABLET	Tier 4	
NORTHERA ORAL CAPSULE	Tier 4	PA
<i>pentoxifylline er oral tablet extended release</i>	Tier 2	
<i>ranolazine er oral tablet extended release 12 hour</i>	Tier 1	
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral tablet</i>	Tier 2	
<i>methazolamide oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
Diuretics, Loop		
<i>bumetanide oral tablet</i>	Tier 2	
<i>ethacrynic acid oral tablet</i>	Tier 2	
<i>furosemide injection solution 10 mg/ml</i>	Tier 2	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	Tier 2	
<i>furosemide oral tablet</i>	Tier 1	
<i>torseamide oral tablet</i>	Tier 2	
Diuretics, Potassium-Sparing		
ALDACTAZIDE ORAL TABLET 50-50 MG	Tier 4	
<i>amiloride hcl oral tablet</i>	Tier 2	
<i>amiloride-hydrochlorothiazide oral tablet</i>	Tier 2	
<i>eplerenone oral tablet</i>	Tier 2	
<i>spironolactone oral tablet 100 mg, 50 mg</i>	Tier 2	
<i>spironolactone oral tablet 25 mg</i>	Tier 1	
<i>spironolactone-hctz oral tablet</i>	Tier 2	
<i>triamterene oral capsule</i>	Tier 2	
<i>triamterene-hctz oral capsule</i>	Tier 2	
<i>triamterene-hctz oral tablet</i>	Tier 2	
Diuretics, Thiazide		
<i>chlorothiazide oral tablet</i>	Tier 1	
<i>chlorthalidone oral tablet</i>	Tier 2	
DIURIL ORAL SUSPENSION	Tier 4	
<i>hydrochlorothiazide oral capsule</i>	Tier 1	
<i>hydrochlorothiazide oral tablet</i>	Tier 1	
<i>indapamide oral tablet</i>	Tier 1	
METHYCLOTHIAZIDE ORAL TABLET	Tier 4	
<i>metolazone oral tablet</i>	Tier 2	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	Tier 2	
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	Tier 2	
<i>gemfibrozil oral tablet</i>	Tier 2	
Dyslipidemics, Hmg Coa Reductase Inhibitors		
<i>atorvastatin calcium oral tablet</i>	Tier 1	
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>fluvastatin sodium oral capsule</i>	Tier 2	
<i>lovastatin oral tablet</i>	Tier 2	
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg</i>	Tier 2	QL (1.5 EA per 1 day)
<i>pravastatin sodium oral tablet 80 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>rosuvastatin calcium oral tablet</i>	Tier 2	
<i>simvastatin oral tablet</i>	Tier 1	QL (1.5 EA per 1 day)
Dyslipidemics, Other		
<i>cholestyramine light oral packet</i>	Tier 2	
<i>cholestyramine light oral powder</i>	Tier 2	
<i>cholestyramine oral packet</i>	Tier 2	
<i>cholestyramine oral powder</i>	Tier 2	
<i>colesevelam hcl oral packet</i>	Tier 2	
<i>colestipol hcl oral packet</i>	Tier 2	
<i>colestipol hcl oral tablet</i>	Tier 2	
<i>ezetimibe oral tablet</i>	Tier 2	
<i>ezetimibe-simvastatin oral tablet</i>	Tier 2	
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	Tier 2	
<i>niacor oral tablet</i>	Tier 2	
<i>omega-3-acid ethyl esters oral capsule</i>	Tier 2	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 3	PA
<i>prevalite oral packet</i>	Tier 2	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	Tier 3	PA
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 3	PA
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 3	PA
VYTORIN ORAL TABLET	Tier 4	
WELCHOL ORAL PACKET	Tier 4	
Vasodilators, Direct-Acting Arterial		
<i>hydralazine hcl oral tablet</i>	Tier 2	
<i>minoxidil oral tablet</i>	Tier 2	
Vasodilators, Direct-Acting Arterial/Venous		
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE	Tier 3	

Drug	Status	Requirements/Limits
ISORDIL TITRADOSE ORAL TABLET 40 MG	Tier 4	
<i>isosorbide dinitrate er oral tablet extended release</i>	Tier 2	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	Tier 2	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	Tier 2	
<i>isosorbide mononitrate oral tablet</i>	Tier 2	
<i>minitran transdermal patch 24 hour</i>	Tier 2	
NITRO-BID TRANSDERMAL OINTMENT	Tier 4	
<i>nitroglycerin sublingual tablet sublingual</i>	Tier 2	
<i>nitroglycerin transdermal patch 24 hour</i>	Tier 2	
<i>nitroglycerin translingual solution</i>	Tier 2	
NITROMIST TRANSLINGUAL AEROSOL SOLUTION	Tier 4	
RECTIV RECTAL OINTMENT	Tier 4	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour</i>	Tier 2	
<i>amphetamine-dextroamphetamine oral tablet</i>	Tier 2	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	Tier 2	
<i>dextroamphetamine sulfate oral tablet</i>	Tier 2	
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
<i>atomoxetine hcl oral capsule</i>	Tier 2	
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour</i>	Tier 2	
<i>dexmethylphenidate hcl oral tablet</i>	Tier 2	
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	Tier 2	PA
<i>metadate er oral tablet extended release 20 mg</i>	Tier 2	
<i>methylphenidate hcl er (cd) oral capsule extended release</i>	Tier 2	
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg</i>	Tier 2	
<i>methylphenidate hcl er oral tablet extended release 10 mg, 20 mg, 72 mg</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>methylphenidate hcl er oral tablet extended release 18 mg, 27 mg, 54 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>	Tier 2	QL (2 EA per 1 day)
<i>methylphenidate hcl er oral tablet extended release 36 mg</i>	Tier 2	QL (2 EA per 1 day)
<i>methylphenidate hcl oral solution</i>	Tier 2	
<i>methylphenidate hcl oral tablet</i>	Tier 2	
<i>methylphenidate hcl oral tablet chewable</i>	Tier 2	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	Tier 4	
STRATTERA ORAL CAPSULE	Tier 4	PA
Central Nervous System, Other		
NUEDEXTA ORAL CAPSULE	Tier 4	PA
<i>riluzole oral tablet</i>	Tier 2	
Fibromyalgia Agents		
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>	Tier 2	
<i>pregabalin oral capsule</i>	Tier 2	PA
<i>pregabalin oral solution</i>	Tier 2	PA
SAVELLA ORAL TABLET	Tier 3	
SAVELLA TITRATION PACK ORAL	Tier 3	
Dental And Oral Agents		
Dental And Oral Agents		
<i>cevimeline hcl oral capsule</i>	Tier 2	
<i>chlorhexidine gluconate mouth/throat solution</i>	Tier 1	
<i>periogard mouth/throat solution</i>	Tier 1	
<i>pilocarpine hcl oral tablet</i>	Tier 2	
<i>triamcinolone acetonide mouth/throat paste</i>	Tier 2	
Dermatological Agents		
Dermatological Agents		
<i>acitretin oral capsule</i>	Tier 2	
<i>adapalene external cream</i>	Tier 2	
<i>adapalene external gel 0.1 %</i>	Tier 2	
<i>adapalene external solution</i>	Tier 2	
<i>ammonium lactate external cream</i>	Tier 2	
<i>ammonium lactate external lotion</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>calcipotriene external cream</i>	Tier 2	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	Tier 2	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	Tier 2	QL (120 ML per 30 days)
<i>claravis oral capsule 10 mg, 20 mg, 40 mg</i>	Tier 2	
<i>clotrimazole-betamethasone external cream</i>	Tier 2	
<i>clotrimazole-betamethasone external lotion</i>	Tier 2	
CONDYLOX EXTERNAL GEL	Tier 4	
CORTISPORIN EXTERNAL CREAM	Tier 4	
CORTISPORIN EXTERNAL OINTMENT	Tier 4	
CVS GAUZE STERILE PAD 2"X2"	Tier 4	
<i>diclofenac sodium transdermal gel 1 %</i>	Tier 2	QL (960 GM per 30 days)
<i>diclofenac sodium transdermal gel 3 %</i>	Tier 2	QL (200 GM per 30 days)
<i>doxepin hcl external cream</i>	Tier 2	QL (90 GM per 30 days)
<i>doxycycline oral capsule delayed release</i>	Tier 2	ST
<i>fluorouracil external cream</i>	Tier 2	
<i>fluorouracil external solution</i>	Tier 2	
<i>imiquimod external cream</i>	Tier 2	
<i>methoxsalen rapid oral capsule</i>	Tier 2	
<i>podofilox external solution</i>	Tier 2	
SANTYL EXTERNAL OINTMENT	Tier 3	QL (100 GM per 30 days)
<i>selenium sulfide external lotion</i>	Tier 2	
<i>tacrolimus external ointment</i>	Tier 2	
<i>tazarotene external cream</i>	Tier 2	
TAZORAC EXTERNAL CREAM 0.05 %	Tier 4	
TAZORAC EXTERNAL GEL	Tier 4	
TOLAK EXTERNAL CREAM	Tier 4	
<i>tretinoin external cream 0.1 %</i>	Tier 2	
Electrolytes/Minerals/ Metals/ Vitamins		
Electrolyte/Mineral Replacement		
AMINOSYN II INTRAVENOUS SOLUTION 7 %	Tier 4	
<i>aminosyn ii/electrolytes intravenous solution</i>	Tier 2	
<i>citric acid-sodium citrate oral solution</i>	Tier 2	
<i>cytra k crystals oral packet</i>	Tier 2	
<i>dextrose in lactated ringers intravenous solution</i>	Tier 2	
<i>dextrose intravenous solution 10 %, 5 %</i>	Tier 2	
DEXTROSE-NACL INTRAVENOUS SOLUTION 10-0.2 %	Tier 4	

Drug	Status	Requirements/Limits
<i>dextrose-nacl intravenous solution 2.5-0.45 %, 5-0.2 %, 5-0.45 %, 5-0.9 %</i>	Tier 2	
<i>kcl in dextrose-nacl intravenous solution 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%</i>	Tier 2	
<i>klor-con 10 oral tablet extended release</i>	Tier 2	
<i>klor-con m10 oral tablet extended release</i>	Tier 2	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	Tier 4	
<i>klor-con m20 oral tablet extended release</i>	Tier 2	
<i>klor-con oral packet 20 meq</i>	Tier 2	
KLOR-CON ORAL PACKET 25 MEQ	Tier 4	
<i>klor-con oral tablet extended release</i>	Tier 2	
K-PHOS NO 2 ORAL TABLET	Tier 4	
<i>lactated ringers intravenous solution</i>	Tier 2	
<i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>	Tier 2	
ORACIT ORAL SOLUTION	Tier 4	
<i>potassium chloride crys er oral tablet extended release</i>	Tier 2	
<i>potassium chloride er oral capsule extended release</i>	Tier 2	
<i>potassium chloride er oral tablet extended release</i>	Tier 2	
<i>potassium chloride intravenous solution 20 meq/100ml, 40 meq/100ml</i>	Tier 2	
<i>potassium chloride oral packet</i>	Tier 2	
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	Tier 2	
<i>potassium citrate er oral tablet extended release</i>	Tier 2	
<i>potassium citrate-citric acid oral solution</i>	Tier 2	
<i>sodium chloride intravenous solution 0.45 %, 0.9 %, 5 %</i>	Tier 2	
<i>sodium chloride irrigation solution 0.9 %</i>	Tier 2	
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	Tier 1	
SUPREP BOWEL PREP KIT ORAL SOLUTION	Tier 4	
<i>tpn electrolytes intravenous solution</i>	Tier 2	
TRAVASOL INTRAVENOUS SOLUTION	Tier 4	
Electrolyte/Mineral/Metal Modifiers		
<i>deferasirox oral tablet soluble 125 mg</i>	Tier 2	
<i>sodium polystyrene sulfonate oral powder</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>sodium polystyrene sulfonate oral suspension</i>	Tier 2	
VELTASSA ORAL PACKET	Tier 3	
Vitamins		
<i>doxercalciferol oral capsule</i>	Tier 2	
ELITE-OB ORAL TABLET	Tier 4	
<i>natacare plus oral tablet</i>	Tier 2	
<i>natatab fa oral tablet</i>	Tier 2	
<i>natatab rx oral tablet</i>	Tier 2	
PNV-DHA ORAL CAPSULE	Tier 4	
PRENATABS FA ORAL TABLET	Tier 4	
<i>prenatal oral tablet 27-1 mg</i>	Tier 2	
PRENATAL PLUS IRON ORAL TABLET	Tier 4	
<i>ultra natacare oral tablet</i>	Tier 2	
<i>vp-pnv-dha oral capsule</i>	Tier 2	
ZATEAN-PN ORAL TABLET	Tier 4	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
CANTIL ORAL TABLET	Tier 4	
<i>dicyclomine hcl oral capsule</i>	Tier 1	
<i>dicyclomine hcl oral solution</i>	Tier 2	
<i>dicyclomine hcl oral tablet</i>	Tier 1	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Tier 2	
<i>methscopolamine bromide oral tablet</i>	Tier 2	
PROPANTHELINE BROMIDE ORAL TABLET	Tier 4	
Gastrointestinal Agents, Other		
<i>diphenoxylate-atropine oral liquid</i>	Tier 2	
<i>diphenoxylate-atropine oral tablet</i>	Tier 2	
<i>loperamide hcl oral capsule</i>	Tier 2	
<i>metoclopramide hcl injection solution</i>	Tier 2	
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	Tier 1	
<i>metoclopramide hcl oral tablet</i>	Tier 1	
MOTOFEN ORAL TABLET	Tier 4	
MOVANTI ORAL TABLET	Tier 3	PA
OSMOPREP ORAL TABLET	Tier 4	
RELISTOR ORAL TABLET	Tier 4	PA
<i>ursodiol oral capsule</i>	Tier 2	
<i>ursodiol oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl oral solution</i>	Tier 2	
<i>cimetidine oral tablet</i>	Tier 2	
<i>famotidine oral suspension reconstituted</i>	Tier 2	
<i>famotidine oral tablet 20 mg</i>	Tier 2	
<i>famotidine oral tablet 40 mg</i>	Tier 2	
<i>ranitidine hcl injection solution 150 mg/6ml</i>	Tier 2	
<i>ranitidine hcl oral capsule</i>	Tier 2	
<i>ranitidine hcl oral syrup 75 mg/5ml</i>	Tier 2	
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	Tier 2	
Irritable Bowel Syndrome Agents		
<i>alosetron hcl oral tablet</i>	Tier 2	PA; QL (2 EA per 1 day)
AMITIZA ORAL CAPSULE	Tier 3	
LINZESS ORAL CAPSULE	Tier 3	
Laxatives		
<i>enulose oral solution</i>	Tier 2	
<i>gavilyte-c oral solution reconstituted</i>	Tier 2	
<i>gavilyte-g oral solution reconstituted</i>	Tier 2	
<i>gavilyte-n with flavor pack oral solution reconstituted</i>	Tier 2	
<i>lactulose oral solution 10 gm/15ml</i>	Tier 2	
MOVIPREP ORAL SOLUTION RECONSTITUTED	Tier 4	
<i>peg 3350/electrolytes oral solution reconstituted</i>	Tier 2	
<i>peg-3350/electrolytes oral solution reconstituted</i>	Tier 2	
<i>polyethylene glycol 3350 oral powder</i>	Tier 2	
<i>trilyte oral solution reconstituted</i>	Tier 2	
Protectants		
CARAFATE ORAL SUSPENSION	Tier 4	
<i>misoprostol oral tablet 100 mcg</i>	Tier 2	
<i>sucralfate oral tablet</i>	Tier 2	
Proton Pump Inhibitors		
DEXILANT ORAL CAPSULE DELAYED RELEASE	Tier 3	
<i>esomeprazole magnesium oral capsule delayed release</i>	Tier 2	
<i>esomeprazole sodium intravenous solution reconstituted 40 mg</i>	Tier 2	
<i>lansoprazole oral capsule delayed release</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>omeprazole oral capsule delayed release 10 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>omeprazole oral capsule delayed release 20 mg</i>	Tier 2	QL (2 EA per 1 day)
<i>omeprazole oral capsule delayed release 40 mg</i>	Tier 2	
<i>pantoprazole sodium oral tablet delayed release</i>	Tier 2	QL (2 EA per 1 day)
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier 3	
CYSTADANE ORAL POWDER	Tier 4	
CYSTAGON ORAL CAPSULE	Tier 4	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000 UNIT, 10000- 32000 UNIT, 15000-47000 UNIT, 15000-51000 UNIT, 20000-63000 UNIT, 20000-68000 UNIT, 25000 UNIT, 25000-79000 UNIT, 3000-14000 UNIT, 40000-126000 UNIT, 40000-136000 UNIT, 5000 UNIT, 5000-24000 UNIT	Tier 4	
Genitourinary Agents		
Antispasmodics, Urinary		
<i>flavoxate hcl oral tablet</i>	Tier 2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 4	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	Tier 2	
<i>oxybutynin chloride oral syrup</i>	Tier 1	
<i>oxybutynin chloride oral tablet</i>	Tier 1	
<i>solifenacin succinate oral tablet</i>	Tier 2	
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	Tier 2	
<i>tolterodine tartrate oral tablet</i>	Tier 2	
<i>tropium chloride er oral capsule extended release 24 hour</i>	Tier 2	
<i>tropium chloride oral tablet</i>	Tier 2	
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	Tier 2	QL (1 EA per 1 day)
<i>doxazosin mesylate oral tablet</i>	Tier 2	
<i>dutasteride oral capsule</i>	Tier 2	
<i>dutasteride-tamsulosin hcl oral capsule</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>finasteride oral tablet 5 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>tamsulosin hcl oral capsule</i>	Tier 2	
<i>terazosin hcl oral capsule</i>	Tier 1	
Genitourinary Agents, Other		
<i>bethanechol chloride oral tablet</i>	Tier 2	
ELMIRON ORAL CAPSULE	Tier 3	
Phosphate Binders		
AURYXIA ORAL TABLET	Tier 4	PA
<i>calcium acetate (phos binder) oral capsule</i>	Tier 2	
<i>sevelamer carbonate oral packet</i>	Tier 1	
<i>sevelamer carbonate oral tablet</i>	Tier 1	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>ala-cort external cream 1 %</i>	Tier 2	QL (240 GM per 30 days)
<i>alclometasone dipropionate external cream</i>	Tier 2	QL (240 GM per 30 days)
<i>alclometasone dipropionate external ointment</i>	Tier 2	QL (240 GM per 30 days)
<i>amcinonide external cream</i>	Tier 2	
<i>amcinonide external lotion</i>	Tier 2	QL (180 ML per 30 days)
AMCINONIDE EXTERNAL OINTMENT	Tier 4	
<i>betamethasone dipropionate aug external cream</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external gel</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone dipropionate aug external lotion</i>	Tier 2	
<i>betamethasone dipropionate aug external ointment</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone dipropionate external cream</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone dipropionate external lotion</i>	Tier 2	QL (150 ML per 30 days)
<i>betamethasone dipropionate external ointment</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone valerate external cream 0.1 %</i>	Tier 2	
<i>betamethasone valerate external cream 0.1 %</i>	Tier 2	QL (150 GM per 30 days)
<i>betamethasone valerate external lotion</i>	Tier 2	QL (180 ML per 30 days)
<i>betamethasone valerate external ointment</i>	Tier 2	QL (150 GM per 30 days)
CAPEX EXTERNAL SHAMPOO	Tier 4	
<i>clobetasol prop emollient base external cream</i>	Tier 2	QL (60 GM per 30 days)
<i>clobetasol propionate external cream</i>	Tier 2	QL (60 GM per 30 days)

Drug	Status	Requirements/Limits
<i>clobetasol propionate external gel</i>	Tier 2	QL (60 GM per 30 days)
<i>clobetasol propionate external ointment</i>	Tier 2	QL (60 GM per 30 days)
<i>clobetasol propionate external solution</i>	Tier 2	QL (59 ML per 30 days)
<i>cortisone acetate oral tablet</i>	Tier 2	
<i>desonide external cream</i>	Tier 2	QL (240 GM per 30 days)
<i>desonide external lotion</i>	Tier 2	QL (240 ML per 30 days)
<i>desonide external ointment</i>	Tier 2	QL (240 GM per 30 days)
<i>desoximetasone external cream</i>	Tier 2	QL (180 GM per 30 days)
<i>desoximetasone external gel</i>	Tier 2	QL (180 GM per 30 days)
<i>desoximetasone external ointment</i>	Tier 2	QL (180 GM per 30 days)
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	Tier 4	
<i>dexamethasone oral elixir</i>	Tier 2	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	Tier 1	
DEXAMETHASONE ORAL TABLET 1 MG	Tier 4	
<i>dexamethasone oral tablet therapy pack</i>	Tier 2	
<i>dexamethasone sodium phosphate injection solution 120 mg/30ml</i>	Tier 2	
<i>dexpak 13 day oral tablet therapy pack</i>	Tier 2	
<i>diflorasone diacetate external cream</i>	Tier 2	QL (180 GM per 30 days)
<i>diflorasone diacetate external ointment</i>	Tier 2	QL (180 GM per 30 days)
<i>fludrocortisone acetate oral tablet</i>	Tier 2	
<i>fluocinolone acetonide body external oil</i>	Tier 2	
<i>fluocinolone acetonide external cream</i>	Tier 2	QL (240 GM per 30 days)
<i>fluocinolone acetonide external ointment</i>	Tier 2	QL (240 GM per 30 days)
<i>fluocinolone acetonide external solution</i>	Tier 2	
<i>fluocinolone acetonide scalp external oil</i>	Tier 2	
<i>fluocinonide emulsified base external cream</i>	Tier 2	
<i>fluocinonide external cream 0.05 %</i>	Tier 1	QL (60 GM per 30 days)
<i>fluocinonide external cream 0.1 %</i>	Tier 2	QL (60 GM per 30 days)
<i>fluocinonide external gel</i>	Tier 2	QL (60 GM per 30 days)
<i>fluocinonide external ointment</i>	Tier 2	QL (60 GM per 30 days)
<i>fluocinonide external solution</i>	Tier 2	QL (60 ML per 30 days)
<i>fluticasone propionate external cream</i>	Tier 2	QL (150 GM per 30 days)
<i>fluticasone propionate external lotion</i>	Tier 2	QL (240 ML per 30 days)
<i>fluticasone propionate external ointment</i>	Tier 2	QL (150 GM per 30 days)
<i>halcinonide external cream</i>	Tier 1	
<i>halobetasol propionate external cream</i>	Tier 2	QL (150 GM per 30 days)

Drug	Status	Requirements/Limits
<i>halobetasol propionate external ointment</i>	Tier 2	QL (150 GM per 30 days)
HALOG EXTERNAL OINTMENT	Tier 3	
<i>hydrocortisone butyrate external cream</i>	Tier 2	QL (180 GM per 30 days)
<i>hydrocortisone butyrate external ointment</i>	Tier 2	QL (180 GM per 30 days)
<i>hydrocortisone butyrate external solution</i>	Tier 2	
<i>hydrocortisone external cream 1 %, 2.5 %</i>	Tier 2	QL (240 GM per 30 days)
<i>hydrocortisone external lotion 2.5 %</i>	Tier 2	QL (240 ML per 30 days)
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	Tier 2	QL (240 GM per 30 days)
<i>hydrocortisone valerate external cream</i>	Tier 2	QL (180 GM per 30 days)
<i>hydrocortisone valerate external ointment</i>	Tier 2	QL (180 GM per 30 days)
MEDROL ORAL TABLET 2 MG	Tier 4	
<i>methylprednisolone oral tablet</i>	Tier 2	
<i>methylprednisolone oral tablet therapy pack</i>	Tier 2	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg</i>	Tier 2	
<i>mometasone furoate external cream</i>	Tier 2	QL (150 GM per 30 days)
<i>mometasone furoate external ointment</i>	Tier 2	QL (150 GM per 30 days)
<i>mometasone furoate external solution</i>	Tier 2	
<i>prednicarbate external cream</i>	Tier 2	QL (180 GM per 30 days)
<i>prednicarbate external ointment</i>	Tier 2	QL (180 GM per 30 days)
<i>prednisolone oral solution</i>	Tier 1	
<i>prednisolone sodium phosphate oral solution 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	Tier 2	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	Tier 2	
PREDNISONE INTENSOL ORAL CONCENTRATE	Tier 4	
<i>prednisone oral solution</i>	Tier 2	
<i>prednisone oral tablet</i>	Tier 1	
<i>prednisone oral tablet therapy pack</i>	Tier 2	
PROCTOFOAM HC RECTAL FOAM	Tier 4	
<i>procto-med hc rectal cream</i>	Tier 2	
<i>proctosol hc rectal cream</i>	Tier 2	
<i>proctozone-hc rectal cream</i>	Tier 2	
<i>scalacort external lotion</i>	Tier 2	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG	Tier 3	
<i>taperdex 7-day oral tablet therapy pack 1.5 mg (27)</i>	Tier 2	
TEXACORT EXTERNAL SOLUTION	Tier 4	

Drug	Status	Requirements/Limits
<i>triamcinolone acetonide external aerosol solution</i>	Tier 2	
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %</i>	Tier 1	QL (160 GM per 30 days)
<i>triamcinolone acetonide external cream 0.5 %</i>	Tier 2	QL (150 GM per 30 days)
<i>triamcinolone acetonide external lotion</i>	Tier 2	QL (180 ML per 30 days)
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %</i>	Tier 1	QL (160 GM per 30 days)
<i>triamcinolone acetonide external ointment 0.5 %</i>	Tier 2	QL (150 GM per 30 days)
<i>triderm external cream 0.1 %</i>	Tier 1	QL (160 GM per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>desmopressin ace rhinal tube nasal solution</i>	Tier 2	
<i>desmopressin ace spray refrig nasal solution</i>	Tier 2	
<i>desmopressin acetate injection solution</i>	Tier 2	
<i>desmopressin acetate oral tablet</i>	Tier 2	
<i>desmopressin acetate spray nasal solution</i>	Tier 2	
STIMATE NASAL SOLUTION	Tier 4	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
<i>misoprostol oral tablet 200 mcg</i>	Tier 2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
<i>oxandrolone oral tablet 2.5 mg</i>	Tier 2	PA
Androgens		
<i>danazol oral capsule</i>	Tier 2	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	Tier 2	
<i>testosterone enanthate intramuscular solution</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>testosterone transdermal gel 10 mg/act (2%), 50 mg/5gm (1%)</i>	Tier 2	PA
Estrogens		
ALORA TRANSDERMAL PATCH TWICE WEEKLY	Tier 4	QL (8 EA per 28 days)
<i>amethia oral tablet</i>	Tier 2	
<i>amethyst oral tablet</i>	Tier 2	
ANGELIQ ORAL TABLET 0.5-1 MG	Tier 4	
<i>apri oral tablet</i>	Tier 2	
<i>aranelle oral tablet</i>	Tier 2	
<i>aviane oral tablet</i>	Tier 2	
<i>balziva oral tablet</i>	Tier 2	
<i>briellyn oral tablet</i>	Tier 2	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	Tier 4	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	Tier 4	
<i>cryselle-28 oral tablet</i>	Tier 2	
<i>cyclafem 1/35 oral tablet</i>	Tier 2	
<i>cyclafem 7/7/7 oral tablet</i>	Tier 2	
<i>dotti transdermal patch twice weekly</i>	Tier 2	QL (8 EA per 28 days)
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	Tier 2	
<i>emoquette oral tablet</i>	Tier 2	
ENJUVIA ORAL TABLET	Tier 4	
<i>enpresse-28 oral tablet</i>	Tier 2	
<i>estradiol oral tablet</i>	Tier 1	
<i>estradiol transdermal patch twice weekly</i>	Tier 2	QL (8 EA per 28 days)
<i>estradiol transdermal patch weekly</i>	Tier 2	
<i>estradiol vaginal tablet</i>	Tier 2	
<i>estradiol-norethindrone acet oral tablet</i>	Tier 2	
ESTRING VAGINAL RING	Tier 4	
<i>estropipate oral tablet</i>	Tier 2	
FEMRING VAGINAL RING	Tier 4	
<i>gianvi oral tablet</i>	Tier 2	
<i>introvale oral tablet</i>	Tier 2	
<i>jinteli oral tablet</i>	Tier 2	
<i>junel 1.5/30 oral tablet</i>	Tier 2	
<i>junel 1/20 oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>junel fe 1.5/30 oral tablet</i>	Tier 2	
<i>junel fe 1/20 oral tablet</i>	Tier 2	
<i>junel fe 24 oral tablet</i>	Tier 2	
<i>kariva oral tablet</i>	Tier 2	
<i>kelnor 1/35 oral tablet</i>	Tier 2	
<i>leena oral tablet</i>	Tier 2	
<i>lessina oral tablet</i>	Tier 2	
<i>levonorgest-eth estrad 91-day oral tablet 0.15-0.03 &0.01 mg</i>	Tier 2	
<i>levora 0.15/30 (28) oral tablet</i>	Tier 2	
<i>low-ogestrel oral tablet</i>	Tier 2	
<i>lutura oral tablet</i>	Tier 2	
MENEST ORAL TABLET	Tier 3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	Tier 4	
<i>microgestin 1.5/30 oral tablet</i>	Tier 2	
<i>microgestin 1/20 oral tablet</i>	Tier 2	
<i>microgestin fe 1.5/30 oral tablet</i>	Tier 2	
<i>microgestin fe 1/20 oral tablet</i>	Tier 2	
<i>mononessa oral tablet</i>	Tier 2	
<i>necon 0.5/35 (28) oral tablet</i>	Tier 2	
<i>necon 1/35 (28) oral tablet</i>	Tier 2	
<i>necon 1/50 (28) oral tablet</i>	Tier 2	
NECON 10/11 (28) ORAL TABLET	Tier 4	
<i>necon 7/7/7 oral tablet</i>	Tier 2	
<i>norethindrone-eth estradiol oral tablet</i>	Tier 2	
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	Tier 2	
<i>nortrel 0.5/35 (28) oral tablet</i>	Tier 2	
<i>nortrel 1/35 (21) oral tablet</i>	Tier 2	
<i>nortrel 1/35 (28) oral tablet</i>	Tier 2	
<i>nortrel 7/7/7 oral tablet</i>	Tier 2	
NUVARING VAGINAL RING	Tier 4	
<i>ocella oral tablet</i>	Tier 2	
OGESTREL ORAL TABLET	Tier 4	
<i>orsythia oral tablet</i>	Tier 2	
<i>portia-28 oral tablet</i>	Tier 2	
PREFEST ORAL TABLET	Tier 4	
PREMARIN ORAL TABLET	Tier 4	

Drug	Status	Requirements/Limits
PREMARIN VAGINAL CREAM	Tier 3	
PREMPHASE ORAL TABLET	Tier 4	
PREMPRO ORAL TABLET	Tier 4	
<i>previfem oral tablet</i>	Tier 2	
<i>quasense oral tablet</i>	Tier 2	
<i>reclipsen oral tablet</i>	Tier 2	
<i>sprintec 28 oral tablet</i>	Tier 2	
<i>sronyx oral tablet</i>	Tier 2	
<i>tri-legest fe oral tablet</i>	Tier 2	
<i>trinessa (28) oral tablet</i>	Tier 2	
<i>tri-previfem oral tablet</i>	Tier 2	
<i>tri-sprintec oral tablet</i>	Tier 2	
<i>trivora (28) oral tablet</i>	Tier 2	
<i>velivet oral tablet</i>	Tier 2	
<i>wymzya fe oral tablet chewable</i>	Tier 2	
<i>yuvafem vaginal tablet</i>	Tier 2	
<i>zenchent fe oral tablet chewable</i>	Tier 2	
<i>zovia 1/35e (28) oral tablet</i>	Tier 2	
<i>zovia 1/50e (28) oral tablet</i>	Tier 2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
<i>altavera oral tablet</i>	Tier 2	
BIJUVA ORAL CAPSULE	Tier 4	
<i>cyred eq oral tablet</i>	Tier 2	
<i>enskyce oral tablet 0.15-30 mg-mcg</i>	Tier 2	
<i>estarylla oral tablet</i>	Tier 2	
<i>estradiol vaginal cream</i>	Tier 1	
<i>hailey 24 fe oral tablet</i>	Tier 2	
<i>incassia oral tablet</i>	Tier 2	
<i>kelnor 1/50 oral tablet</i>	Tier 2	
<i>kurvelo oral tablet</i>	Tier 2	
<i>levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg</i>	Tier 2	
<i>lopreeza oral tablet 1-0.5 mg</i>	Tier 2	
<i>mili oral tablet</i>	Tier 2	
<i>syeda oral tablet</i>	Tier 2	
<i>tarina 24 fe oral tablet</i>	Tier 2	
<i>tri-estarylla oral tablet</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>tri-mili oral tablet</i>	Tier 2	
<i>tri-vylibra lo oral tablet</i>	Tier 2	
<i>tri-vylibra oral tablet</i>	Tier 2	
<i>vylibra oral tablet</i>	Tier 2	
Progestins		
<i>camila oral tablet</i>	Tier 2	
CRINONE VAGINAL GEL	Tier 4	PA
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	Tier 3	QL (1 ML per 90 days)
<i>errin oral tablet</i>	Tier 2	
<i>hydroxyprogesterone caproate intramuscular solution</i>	Tier 2	
<i>jolivette oral tablet</i>	Tier 2	
<i>medroxyprogesterone acetate intramuscular suspension</i>	Tier 2	QL (1 ML per 90 days)
<i>medroxyprogesterone acetate oral tablet</i>	Tier 1	
<i>megestrol acetate oral suspension 40 mg/ml, 625 mg/5ml</i>	Tier 2	PA
<i>megestrol acetate oral tablet</i>	Tier 2	PA
<i>nora-be oral tablet</i>	Tier 2	
<i>norethindrone acetate oral tablet</i>	Tier 2	
<i>norethindrone oral tablet</i>	Tier 2	
<i>progesterone micronized oral capsule</i>	Tier 2	
Selective Estrogen Receptor Modifying Agents		
OSPHENA ORAL TABLET	Tier 4	
<i>raloxifene hcl oral tablet</i>	Tier 2	QL (1 EA per 1 day)
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>levo-t oral tablet</i>	Tier 1	
<i>levothyroxine sodium oral tablet</i>	Tier 1	
<i>levoxyl oral tablet</i>	Tier 1	
<i>liothyronine sodium oral tablet</i>	Tier 2	
SYNTHROID ORAL TABLET	Tier 4	

Drug	Status	Requirements/Limits
THYROLAR-1 ORAL TABLET 60 (12.5-50) MG (MCG)	Tier 3	
THYROLAR-1/2 ORAL TABLET 30 (6.25-25) MG (MCG)	Tier 3	
THYROLAR-1/4 ORAL TABLET 15 (3.1-12.5) MG (MCG)	Tier 3	
THYROLAR-2 ORAL TABLET 120 (25-100) MG (MCG)	Tier 3	
THYROLAR-3 ORAL TABLET 180 (37.5-150) MG (MCG)	Tier 3	
<i>unithroid oral tablet</i>	Tier 1	
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN ORAL TABLET	Tier 3	
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline oral tablet</i>	Tier 2	QL (32 EA per 30 days)
ELIGARD SUBCUTANEOUS KIT	Tier 4	
<i>leuprolide acetate injection kit</i>	Tier 2	
<i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>	Tier 2	
SYNAREL NASAL SOLUTION	Tier 4	
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral tablet</i>	Tier 2	
<i>propylthiouracil oral tablet</i>	Tier 2	
Immunological Agents		
Immune Suppressants		
AZASAN ORAL TABLET	Tier 4	
<i>azathioprine oral tablet</i>	Tier 2	
<i>azathioprine sodium injection solution reconstituted</i>	Tier 2	
<i>cyclosporine modified oral capsule 25 mg</i>	Tier 2	
CYCLOSPORINE MODIFIED ORAL CAPSULE 50 MG	Tier 4	

Drug	Status	Requirements/Limits
<i>cyclosporine modified oral solution</i>	Tier 2	
<i>cyclosporine oral capsule</i>	Tier 2	
<i>gengraf oral capsule</i>	Tier 2	
<i>gengraf oral solution</i>	Tier 2	
<i>methotrexate oral tablet</i>	Tier 2	
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i>	Tier 2	
<i>methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml</i>	Tier 2	
<i>methotrexate sodium injection solution reconstituted</i>	Tier 2	
<i>mycophenolate mofetil hcl intravenous solution reconstituted</i>	Tier 2	
<i>mycophenolate mofetil oral capsule</i>	Tier 2	
<i>mycophenolate mofetil oral suspension reconstituted</i>	Tier 2	
<i>mycophenolate mofetil oral tablet</i>	Tier 2	
<i>mycophenolate sodium oral tablet delayed release</i>	Tier 2	
PROGRAF ORAL PACKET	Tier 4	
RHEUMATREX ORAL TABLET	Tier 4	
SANDIMMUNE ORAL SOLUTION	Tier 4	
<i>sirolimus oral solution</i>	Tier 1	
<i>sirolimus oral tablet</i>	Tier 2	
<i>tacrolimus oral capsule</i>	Tier 2	
TREXALL ORAL TABLET	Tier 4	
XATMEP ORAL SOLUTION	Tier 4	
ZORTRESS ORAL TABLET 0.25 MG	Tier 4	
Immunizing Agents, Passive		
HYPERRAB S/D INTRAMUSCULAR INJECTABLE	Tier 4	
Immunomodulators		
<i>leflunomide oral tablet</i>	Tier 2	
RIDAURA ORAL CAPSULE	Tier 3	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
<i>balsalazide disodium oral capsule</i>	Tier 2	
<i>mesalamine oral tablet delayed release 800 mg</i>	Tier 2	
<i>mesalamine rectal enema</i>	Tier 2	
<i>mesalamine rectal suppository</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>mesalamine-cleanser rectal kit</i>	Tier 2	
Glucocorticoids		
<i>budesonide oral capsule delayed release particles</i>	Tier 2	
<i>colocort rectal enema</i>	Tier 2	
CORTIFOAM RECTAL FOAM	Tier 3	
<i>hydrocortisone oral tablet</i>	Tier 2	
<i>hydrocortisone rectal enema</i>	Tier 2	
<i>procto-pak rectal cream</i>	Tier 2	
Sulfonamides		
<i>sulfasalazine oral tablet</i>	Tier 2	
<i>sulfasalazine oral tablet delayed release</i>	Tier 2	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>	Tier 1	QL (1 EA per 1 day)
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	Tier 1	QL (4 EA per 28 days)
<i>alendronate sodium oral tablet 40 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>calcitonin (salmon) nasal solution</i>	Tier 2	
<i>calcitriol intravenous solution 1 mcg/ml</i>	Tier 2	
<i>calcitriol oral capsule</i>	Tier 2	
<i>calcitriol oral solution</i>	Tier 2	
<i>etidronate disodium oral tablet</i>	Tier 2	
<i>ibandronate sodium intravenous solution</i>	Tier 2	
<i>ibandronate sodium oral tablet</i>	Tier 2	QL (1 EA per 28 days)
MIACALCIN INJECTION SOLUTION	Tier 4	
<i>paricalcitol oral capsule</i>	Tier 2	PA
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA
<i>risedronate sodium oral tablet 150 mg</i>	Tier 2	QL (1 EA per 28 days)
<i>risedronate sodium oral tablet 30 mg, 5 mg</i>	Tier 2	QL (1 EA per 1 day)
<i>risedronate sodium oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)</i>	Tier 2	QL (4 EA per 28 days)
<i>zoledronic acid intravenous concentrate</i>	Tier 2	
<i>zoledronic acid intravenous solution 5 mg/100ml</i>	Tier 2	
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM	Tier 4	

Drug	Status	Requirements/Limits
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	Tier 4	
BD PEN NEEDLE ORIGINAL U/F	Tier 4	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML	Tier 4	
BD SYRINGE LUER-LOK 1 ML	Tier 4	
BD SYRINGE SLIP TIP 1 ML	Tier 4	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML	Tier 4	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	Tier 4	
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML	Tier 4	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	Tier 4	
INTRALIPID INTRAVENOUS EMULSION 30 %	Tier 4	
<i>levocarnitine oral solution</i>	Tier 2	
<i>levocarnitine oral tablet</i>	Tier 2	
LITETOUCH PEN NEEDLES 29G X 12.7MM	Tier 4	
<i>methylergonovine maleate oral tablet</i>	Tier 2	
MONOJECT HYPODERMIC NEEDLE 25G X 1" , 25G X 1-1/4" , 25G X 5/8" , 27G X 1/2" , 30G X 3/4"	Tier 4	
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, U-100 1 ML	Tier 4	
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML	Tier 4	
RELI-ON INSULIN SYRINGE 29G 0.3 ML	Tier 4	
RELION INSULIN SYRINGE 31G X 15/64" 1 ML	Tier 4	
SURE COMFORT PEN NEEDLES 29G X 12.7MM	Tier 4	
SURE-FINE PEN NEEDLES 29G X 12.7MM	Tier 4	
TECHLITE INSULIN SYRINGE 31G X 15/64" 1 ML	Tier 4	
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM	Tier 4	
ULTICARE PEN NEEDLES 29G X 12.7MM	Tier 4	
ULTILET PEN NEEDLE 29G X 12.7MM	Tier 4	

Drug	Status	Requirements/Limits
ULTRA-THIN II PEN NEEDLES	Tier 4	
Ophthalmic Agents		
Ophthalmic Prostaglandin And Prostamide Analogs		
COMBIGAN OPHTHALMIC SOLUTION	Tier 3	
<i>latanoprost ophthalmic solution</i>	Tier 2	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier 3	
RHOPRESSA OPHTHALMIC SOLUTION	Tier 4	
TRAVATAN Z OPHTHALMIC SOLUTION	Tier 3	
<i>travoprost ophthalmic solution</i>	Tier 2	
Ophthalmic Agents, Other		
<i>ak-poly-bac ophthalmic ointment</i>	Tier 2	
ATROPINE SULFATE OPHTHALMIC OINTMENT	Tier 4	
<i>atropine sulfate ophthalmic solution</i>	Tier 2	
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	Tier 2	
<i>cyclopentolate hcl ophthalmic solution 1 %</i>	Tier 2	
<i>homatropine hbr ophthalmic solution</i>	Tier 2	
<i>mydral ophthalmic solution</i>	Tier 2	
<i>naphazoline hcl ophthalmic solution</i>	Tier 2	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	Tier 2	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	Tier 2	
<i>polycin b ophthalmic ointment</i>	Tier 2	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	Tier 1	
<i>proparacaine hcl ophthalmic solution</i>	Tier 2	
RESTASIS OPHTHALMIC EMULSION	Tier 3	
Ophthalmic Anti-Allergy Agents		
ALOCRIAL OPHTHALMIC SOLUTION	Tier 4	
<i>azelastine hcl ophthalmic solution</i>	Tier 2	
<i>cromolyn sodium ophthalmic solution</i>	Tier 1	
EMADINE OPHTHALMIC SOLUTION	Tier 4	
<i>epinastine hcl ophthalmic solution</i>	Tier 2	
<i>olopatadine hcl ophthalmic solution 0.1 %</i>	Tier 2	

Drug	Status	Requirements/Limits
Ophthalmic Antiglaucoma Agents		
<i>acetazolamide er oral capsule extended release 12 hour</i>	Tier 2	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	Tier 3	
<i>apraclonidine hcl ophthalmic solution</i>	Tier 2	
AZOPT OPHTHALMIC SUSPENSION	Tier 3	
<i>betaxolol hcl ophthalmic solution</i>	Tier 2	
BETOPTIC-S OPHTHALMIC SUSPENSION	Tier 3	
<i>brimonidine tartrate ophthalmic solution</i>	Tier 2	
<i>carteolol hcl ophthalmic solution</i>	Tier 2	
<i>dorzolamide hcl ophthalmic solution</i>	Tier 2	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	Tier 2	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	Tier 2	
IOPIDINE OPHTHALMIC SOLUTION 1 %	Tier 3	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	Tier 2	
<i>metipranolol ophthalmic solution</i>	Tier 2	
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	Tier 4	
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	Tier 2	
SIMBRINZA OPHTHALMIC SUSPENSION	Tier 3	
<i>timolol maleate ophthalmic gel forming solution</i>	Tier 2	
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>	Tier 1	
<i>timolol maleate ophthalmic solution 0.5 % (daily)</i>	Tier 2	
Ophthalmic Anti-Inflammatories		
ALOMIDE OPHTHALMIC SOLUTION	Tier 4	
ALREX OPHTHALMIC SUSPENSION	Tier 3	
BLEPHAMIDE OPHTHALMIC SUSPENSION	Tier 3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	Tier 3	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	Tier 2	
<i>bromfenac sodium ophthalmic solution</i>	Tier 2	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	Tier 2	
<i>diclofenac sodium ophthalmic solution</i>	Tier 2	

Drug	Status	Requirements/Limits
DUREZOL OPHTHALMIC EMULSION	Tier 4	
<i>fluorometholone ophthalmic suspension</i>	Tier 2	
<i>flurbiprofen sodium ophthalmic solution</i>	Tier 2	
FML FORTE OPHTHALMIC SUSPENSION	Tier 3	
FML OPHTHALMIC OINTMENT	Tier 3	
INVELTYS OPHTHALMIC SUSPENSION	Tier 4	
<i>ketorolac tromethamine ophthalmic solution</i>	Tier 2	
<i>loteprednol etabonate ophthalmic suspension</i>	Tier 2	
MAXIDEX OPHTHALMIC SUSPENSION	Tier 3	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Tier 2	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Tier 2	
NEVANAC OPHTHALMIC SUSPENSION	Tier 4	
<i>poly-dex ophthalmic ointment</i>	Tier 2	
PRED MILD OPHTHALMIC SUSPENSION	Tier 4	
PRED-G OPHTHALMIC SUSPENSION	Tier 3	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Tier 3	
<i>prednisolone acetate ophthalmic suspension</i>	Tier 2	
PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION	Tier 4	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	Tier 2	
TOBRADEX OPHTHALMIC OINTMENT	Tier 3	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	Tier 2	
VEXOL OPHTHALMIC SUSPENSION	Tier 3	
Otic Agents		
Otic Agents		
<i>acetazol hc otic solution</i>	Tier 2	
<i>acetic acid otic solution</i>	Tier 2	
<i>acetic acid-aluminum acetate otic solution</i>	Tier 2	
CIPRO HC OTIC SUSPENSION	Tier 3	
CIPRODEX OTIC SUSPENSION	Tier 4	
COLY-MYCIN S OTIC SUSPENSION	Tier 4	
CORTISPORIN-TC OTIC SUSPENSION	Tier 4	
<i>fluocinolone acetonide otic oil</i>	Tier 2	
<i>hydrocortisone-acetic acid otic solution</i>	Tier 2	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	Tier 2	
<i>neomycin-polymyxin-hc otic suspension</i>	Tier 2	

Drug	Status	Requirements/Limits
Respiratory Tract/Pulmonary Agents		
Antihistamines		
<i>azelastine hcl nasal solution 0.1 %</i>	Tier 2	
<i>cyproheptadine hcl oral tablet</i>	Tier 2	
<i>diphenhydramine hcl injection solution</i>	Tier 2	
<i>hydroxyzine pamoate oral capsule</i>	Tier 2	PA
<i>levocetirizine dihydrochloride oral tablet</i>	Tier 2	QL (1 EA per 1 day)
<i>olopatadine hcl nasal solution</i>	Tier 2	
Anti-Inflammatories, Inhaled Corticosteroids		
ARNUTY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
<i>budesonide inhalation suspension</i>	Tier 2	
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
FLOVENT HFA INHALATION AEROSOL	Tier 3	
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	Tier 2	
<i>fluticasone propionate nasal suspension</i>	Tier 2	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 4	
Antileukotrienes		
<i>montelukast sodium oral packet</i>	Tier 2	
<i>montelukast sodium oral tablet</i>	Tier 2	
<i>montelukast sodium oral tablet chewable</i>	Tier 2	
<i>zafirlukast oral tablet</i>	Tier 2	QL (2 EA per 1 day)
<i>zileuton er oral tablet extended release 12 hour</i>	Tier 2	QL (4 EA per 1 day)
ZYFLO CR ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier 4	QL (4 EA per 1 day)
Bronchodilators, Anticholinergic		
ATROVENT HFA INHALATION AEROSOL SOLUTION	Tier 4	
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Tier 3	
<i>ipratropium bromide inhalation solution</i>	Tier 2	
<i>ipratropium bromide nasal solution</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>ipratropium-albuterol inhalation solution</i>	Tier 2	
SPIRIVA HANDHALER INHALATION CAPSULE	Tier 3	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	Tier 3	
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	Tier 3	
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate er oral tablet extended release 12 hour</i>	Tier 2	
<i>albuterol sulfate hfa inhalation aerosol solution</i>	Tier 1	
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml</i>	Tier 2	
<i>albuterol sulfate oral syrup</i>	Tier 1	
<i>albuterol sulfate oral tablet</i>	Tier 2	
<i>epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	Tier 2	
FORADIL AEROLIZER INHALATION CAPSULE	Tier 3	
<i>levalbuterol hcl inhalation nebulization solution</i>	Tier 2	
<i>levalbuterol tartrate inhalation aerosol</i>	Tier 2	
<i>metaproterenol sulfate oral syrup</i>	Tier 2	
METAPROTERENOL SULFATE ORAL TABLET	Tier 4	
PROAIR HFA INHALATION AEROSOL SOLUTION	Tier 3	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
<i>terbutaline sulfate oral tablet</i>	Tier 2	
XOPENEX HFA INHALATION AEROSOL	Tier 4	
Mast Cell Stabilizers		
<i>cromolyn sodium inhalation nebulization solution</i>	Tier 2	
<i>cromolyn sodium oral concentrate</i>	Tier 2	
Phosphodiesterase Inhibitors, Airways Disease		
DALIRESP ORAL TABLET 250 MCG	Tier 4	QL (30 EA per 30 days)

Drug	Status	Requirements/Limits
DALIRESP ORAL TABLET 500 MCG	Tier 4	QL (1 EA per 1 day)
ELIXOPHYLLIN ORAL ELIXIR	Tier 4	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier 3	
<i>theochron oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg</i>	Tier 2	
<i>theophylline er oral tablet extended release 12 hour</i>	Tier 2	
<i>theophylline er oral tablet extended release 24 hour</i>	Tier 2	
Pulmonary Antihypertensives		
<i>sildenafil citrate oral tablet 20 mg</i>	Tier 2	PA
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation solution</i>	Tier 2	
BEVESPI AEROSPHERE INHALATION AEROSOL	Tier 3	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	Tier 3	
SYMBICORT INHALATION AEROSOL	Tier 3	
TYZINE NASAL SOLUTION	Tier 3	
Respiratory Tract/Pulmonary Agents		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 2	
ADVAIR HFA INHALATION AEROSOL	Tier 3	
<i>mometasone furoate nasal suspension</i>	Tier 2	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier 3	
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>carisoprodol oral tablet</i>	Tier 1	PA
<i>cyclobenzaprine hcl oral tablet 10 mg</i>	Tier 1	PA
<i>cyclobenzaprine hcl oral tablet 5 mg</i>	Tier 2	PA
<i>methocarbamol oral tablet</i>	Tier 1	PA
<i>orphenadrine citrate er oral tablet extended release 12 hour</i>	Tier 2	
Sleep Disorder Agents		
Gaba Receptor Modulators		
<i>eszopiclone oral tablet</i>	Tier 2	PA
<i>flurazepam hcl oral capsule 15 mg</i>	Tier 2	

Drug	Status	Requirements/Limits
<i>flurazepam hcl oral capsule 30 mg</i>	Tier 1	
<i>temazepam oral capsule 15 mg, 30 mg</i>	Tier 1	
<i>zaleplon oral capsule</i>	Tier 2	PA; QL (1 EA per 1 day)
<i>zolpidem tartrate er oral tablet extended release</i>	Tier 2	PA
<i>zolpidem tartrate oral tablet</i>	Tier 1	PA; QL (1 EA per 1 day)
<i>zolpidem tartrate sublingual tablet sublingual</i>	Tier 2	PA
Sleep Disorders, Other		
<i>modafinil oral tablet</i>	Tier 2	PA; QL (1 EA per 1 day)
<i>ramelteon oral tablet</i>	Tier 2	PA

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<i>glyburide-metformin</i>	30	<i>hydroxyzine hcl</i>	28	<i>junel fe 1.5/30</i>	54
<i>glycopyrrolate</i>	46	<i>hydroxyzine pamoate</i>	64	<i>junel fe 1/20</i>	54
<i>granisetron hcl</i>	16	HYPERRAB S/D	58	<i>junel fe 24</i>	54
<i>griseofulvin microsize</i>	17	<i>ibandronate sodium</i>	59	KALETRA	27
<i>griseofulvin ultramicrosize</i>	17	<i>ibu</i>	18	<i>kariva</i>	54
<i>guanfacine hcl</i>	36	<i>ibuprofen</i>	3	<i>kcl in dextrose-nacl</i>	45
<i>guanfacine hcl er</i>	42	<i>imipenem-cilastatin</i>	9	<i>kelnor 1/35</i>	54
GUANIDINE HCL	19	<i>imipramine hcl</i>	16	<i>kelnor 1/50</i>	55
GVOKE PFS	30	<i>imiquimod</i>	44	<i>ketoconazole</i>	17
<i>hailey 24 fe</i>	55	<i>incassia</i>	55	<i>ketoprofen</i>	3
<i>halcinonide</i>	50	<i>indapamide</i>	40	<i>ketoprofen er</i>	3
<i>halobetasol propionate</i>	50, 51	<i>indomethacin</i>	3	<i>ketorolac tromethamine</i>	63
HALOG	51	<i>indomethacin er</i>	3	<i>klor-con</i>	45
<i>haloperidol</i>	23	INNOPRAN XL	38	KLOR-CON	45
<i>haloperidol decanoate</i>	23	INSULIN LISPRO	32	<i>klor-con 10</i>	45
<i>haloperidol lactate</i>	23	INSULIN LISPRO (1 UNIT		<i>klor-con m10</i>	45
<i>heparin (porcine) in nacl</i>	35	DIAL)	32	KLOR-CON M15	45
<i>heparin sodium (porcine)</i>	35	INTELENCE	26	<i>klor-con m20</i>	45
HEPARIN SODIUM		INTRALIPID	60	K-PHOS NO 2	45
(PORCINE)	35	INTRON A	25	KRINTAFEL	22
<i>homatropine hbr</i>	61	<i>introvale</i>	53	<i>kurvelo</i>	55
HUMALOG	31	INVEGA SUSTENNA	24	<i>labetalol hcl</i>	38
HUMALOG JUNIOR		INVEGA TRINZA	24	<i>lactated ringers</i>	45
KWIKPEN	31	INVELTYS	63	<i>lactulose</i>	47
HUMALOG KWIKPEN	31	INVIRASE	27	LAMICTAL STARTER	29
HUMALOG MIX 50/50	31	IOPIDINE	62	<i>lamivudine</i>	25, 26
HUMALOG MIX 50/50		<i>ipratropium bromide</i>	64	<i>lamivudine-zidovudine</i>	26
KWIKPEN	31	<i>ipratropium-albuterol</i>	65	<i>lamotrigine</i>	29
HUMALOG MIX 75/25	31	<i>irbesartan</i>	36	<i>lamotrigine starter kit-blue</i>	12

<i>lamotrigine starter kit-green</i>	13	<i>lithium carbonate er</i>	29	<i>methotrexate sodium (pf)</i>	58
<i>lamotrigine starter kit-orange</i>	13	<i>lomustine</i>	20	<i>methoxsalen rapid</i>	44
LANOXIN	39	<i>loperamide hcl</i>	46	<i>methscopolamine bromide</i>	46
<i>lansoprazole</i>	47	<i>lopinavir-ritonavir</i>	27	METHYCLOTHIAZIDE	40
LANTUS	32	<i>lopreeza</i>	55	<i>methyldopa</i>	36
LANTUS SOLOSTAR	32	<i>lorazepam</i>	28	<i>methylergonovine maleate</i>	60
<i>latanoprost</i>	61	<i>losartan potassium</i>	36	<i>methylphenidate hcl</i>	43
LATUDA	24	<i>losartan potassium-hctz</i>	36	<i>methylphenidate hcl er</i>	42, 43
<i>leena</i>	54	<i>loteprednol etabonate</i>	63	<i>methylphenidate hcl er (cd)</i>	42
<i>leflunomide</i>	58	<i>lovastatin</i>	41	<i>methylphenidate hcl er (la)</i>	42
<i>lessina</i>	54	<i>low-ogestrel</i>	54	<i>methylprednisolone</i>	51
<i>letrozole</i>	21	<i>loxapine succinate</i>	23	<i>methylprednisolone acetate</i>	18
<i>leucovorin calcium</i>	20, 21	LUCEMYRA	5	<i>methylprednisolone sodium succ</i>	18, 51
LEUCOVORIN CALCIUM	21	LUMIGAN	61	<i>metipranolol</i>	62
LEUKERAN	20	<i>lutura</i>	54	<i>metoclopramide hcl</i>	46
<i>leuprolide acetate</i>	57	LYSODREN	57	<i>metolazone</i>	40
<i>levabuterol hcl</i>	65	<i>magnesium sulfate</i>	45	<i>metoprolol succinate er</i>	38
<i>levabuterol tartrate</i>	65	<i>malathion</i>	22	<i>metoprolol tartrate</i>	38
LEVEMIR	32	<i>maprotiline hcl</i>	15	<i>metoprolol-hydrochlorothiazide</i> ..	38
LEVEMIR FLEXTOUCH	32	MARPLAN	14	<i>metronidazole</i>	7
<i>levetiracetam</i>	11	<i>matzim la</i>	39	<i>metronidazole in nacl</i>	7
<i>levetiracetam er</i>	11	MAXIDEX	63	<i>mexiletine hcl</i>	37
LEVETIRACETAM IN		<i>meclizine hcl</i>	16	MIACALCIN	59
NACL	11	<i>meclofenamate sodium</i>	3	<i>miconazole 3</i>	17
<i>levobunolol hcl</i>	62	MEDROL	51	<i>microgestin 1.5/30</i>	54
<i>levocarnitine</i>	60	<i>medroxyprogesterone acetate</i>	56	<i>microgestin 1/20</i>	54
<i>levocetirizine dihydrochloride</i>	64	<i>mefloquine hcl</i>	22	<i>microgestin fe 1.5/30</i>	54
<i>levofloxacin</i>	10, 11	<i>megestrol acetate</i>	56	<i>microgestin fe 1/20</i>	54
<i>levonorgest-eth estrad 91-day</i>	54	<i>meloxicam</i>	3	<i>midodrine hcl</i>	36
<i>levonorgestrel-ethinyl estrad</i>	55	<i>memantine hcl</i>	14	<i>miglitol</i>	30
<i>levora 0.15/30 (28)</i>	54	<i>memantine hcl er</i>	14	<i>mili</i>	55
<i>levorphanol tartrate</i>	4	MENEST	54	<i>minitran</i>	42
<i>levo-t</i>	56	MENOSTAR	54	<i>minocycline hcl</i>	11
<i>levothyroxine sodium</i>	56	<i>meperidine hcl</i>	4	<i>minoxidil</i>	41
<i>levoxyl</i>	56	<i>mercaptapurine</i>	20	<i>mirtazapine</i>	14
LEXIVA	27	<i>meropenem</i>	9	<i>misoprostol</i>	47, 52
<i>lidocaine</i>	5	<i>mesalamine</i>	58	<i>mitoxantrone hcl</i>	21
<i>lidocaine hcl</i>	5	<i>mesalamine-cleanser</i>	59	<i>modafinil</i>	67
<i>lidocaine hcl (pf)</i>	5	MESNEX	21	<i>moexipril hcl</i>	37
<i>lidocaine hcl urethral/mucosal</i>	5	<i>metadate er</i>	42	<i>moexipril-hydrochlorothiazide</i> ...	37
<i>lidocaine viscous hcl</i>	5	<i>metaproterenol sulfate</i>	65	<i>molindone hcl</i>	23
<i>lidocaine-prilocaine</i>	5	METAPROTERENOL		<i>mometasone furoate</i>	51, 66
<i>lindane</i>	22	SULFATE	65	MONOJECT	
<i>linezolid</i>	7	<i>metformin hcl</i>	30	HYPODERMIC NEEDLE	60
LINZESS	47	<i>metformin hcl er</i>	30	MONOJECT INSULIN	
<i>liothyronine sodium</i>	56	<i>methadone hcl</i>	4	SYRINGE	60
<i>lisinopril</i>	37	<i>methazolamide</i>	39	<i>mononessa</i>	54
<i>lisinopril-hydrochlorothiazide</i>	37	<i>methenamine hippurate</i>	7	<i>montelukast sodium</i>	64
LITETOUGH PEN		<i>methimazole</i>	57	MONUROL	7
NEEDLES	60	<i>methocarbamol</i>	66	MORPHINE SULFATE	4
LITHIUM	29	<i>methotrexate</i>	58	<i>morphine sulfate</i>	4
<i>lithium carbonate</i>	29	<i>methotrexate sodium</i>	58		

<i>morphine sulfate (concentrate)</i>	4	<i>nevirapine er</i>	26	<i>orphenadrine citrate er</i>	66
<i>morphine sulfate (pf)</i>	4	NEXAVAR	21	<i>orsythia</i>	54
<i>morphine sulfate er</i>	4	<i>niacin er (antihyperlipidemic)</i>	41	<i>oseltamivir phosphate</i>	27
MOTOFEN	46	<i>niacor</i>	41	OSMOPREP	46
MOVANTIK	46	<i>nicardipine hcl</i>	39	OSPHERA	56
MOVIPREP	47	NICOTROL	5	<i>oxacillin sodium</i>	9
<i>moxifloxacin hcl</i>	11	<i>nifedipine er</i>	39	<i>oxandrolone</i>	52
MULTAQ	37	<i>nifedipine er osmotic release</i>	39	<i>oxaprozin</i>	3
<i>mupirocin</i>	7	<i>nilutamide</i>	20	<i>oxazepam</i>	28
<i>mycophenolate mofetil</i>	58	NITRO-BID	42	<i>oxcarbazepine</i>	13
<i>mycophenolate mofetil hcl</i>	58	<i>nitrofurantoin</i>	7	<i>oxiconazole nitrate</i>	18
<i>mycophenolate sodium</i>	58	<i>nitrofurantoin macrocrystal</i>	7	OXISTAT	18
<i>mydral</i>	61	<i>nitrofurantoin monohyd macro</i>	7	<i>oxybutynin chloride</i>	48
MYRBETRIQ	48	<i>nitroglycerin</i>	42	<i>oxybutynin chloride er</i>	48
<i>nabumetone</i>	3	NITROMIST	42	<i>oxycodone hcl</i>	4
<i>nadolol</i>	38	<i>nora-be</i>	56	<i>oxycodone hcl er</i>	4
<i>nadolol-bendroflumethiazide</i>	38	<i>norethindrone</i>	56	<i>oxycodone-acetaminophen</i>	4, 5
<i>nafcillin sodium</i>	9	<i>norethindrone acetate</i>	56	<i>oxycodone-aspirin</i>	5
<i>naftifine hcl</i>	17	<i>norethindrone-eth estradiol</i>	54	<i>oxycodone-ibuprofen</i>	5
NAFTIN	17	<i>norgestim-eth estrad triphasic</i>	54	OZEMPIC (0.25 OR 0.5	
<i>naltrexone hcl</i>	5	NORPACE CR	37	MG/DOSE)	30
NAMENDA XR	14	NORTHERA	39	OZEMPIC (1 MG/DOSE)	30
NAMENDA XR TITRATION		<i>nortrel 0.5/35 (28)</i>	54	<i>pacerone</i>	37
PACK	14	<i>nortrel 1/35 (21)</i>	54	<i>paclitaxel</i>	21
NAMZARIC	14	<i>nortrel 1/35 (28)</i>	54	<i>paliperidone er</i>	24
<i>naphazoline hcl</i>	61	<i>nortrel 7/7/7</i>	54	PANRETIN	21
<i>naproxen</i>	3	<i>nortriptyline hcl</i>	16	<i>pantoprazole sodium</i>	48
<i>naproxen dr</i>	3	NORVIR	27	<i>paricalcitol</i>	59
<i>naproxen sodium</i>	3	NOXAFIL	18	<i>paromomycin sulfate</i>	6
<i>naratriptan hcl</i>	19	NUDEXTA	43	<i>paroxetine hcl</i>	28
NATACYN	18	NUVARING	54	<i>paroxetine hcl er</i>	15
<i>natalcare plus</i>	46	<i>nystatin</i>	18	PASER	20
<i>natatab fa</i>	46	<i>nystatin-triamcinolone</i>	18	PAXIL	15
<i>natatab rx</i>	46	<i>nystop</i>	18	<i>peg 3350/electrolytes</i>	47
<i>nateglinide</i>	30	<i>ocella</i>	54	<i>peg-3350/electrolytes</i>	47
NAYZILAM	12	<i>octreotide acetate</i>	57	PEGANONE	13
NEBUPENT	22	<i>ofloxacin</i>	11	<i>penicillin g potassium</i>	9
<i>necon 0.5/35 (28)</i>	54	OGESTREL	54	<i>penicillin v potassium</i>	9
<i>necon 1/35 (28)</i>	54	<i>olanzapine</i>	24	PENTAM	22
<i>necon 1/50 (28)</i>	54	<i>olanzapine-fluoxetine hcl</i>	29	<i>pentoxifylline er</i>	39
NECON 10/11 (28)	54	<i>olmesartan medoxomil</i>	36	<i>perindopril erbumine</i>	37
<i>necon 7/7/7</i>	54	<i>olmesartan medoxomil-hctz</i>	36	<i>periogard</i>	43
<i>nefazodone hcl</i>	15	<i>olopatadine hcl</i>	61, 64	<i>permethrin</i>	22
<i>neomycin sulfate</i>	6	<i>omega-3-acid ethyl esters</i>	41	<i>perphenazine</i>	23
<i>neomycin-bacitracin zn-</i>		<i>omeprazole</i>	48	<i>perphenazine-amitriptyline</i>	16
<i>polymyx</i>	61	<i>ondansetron</i>	17	<i>phenadoz</i>	16
<i>neomycin-polymyxin-dexameth</i> ...	63	<i>ondansetron hcl</i>	17	<i>phenelzine sulfate</i>	15
<i>neomycin-polymyxin-gramicidin</i>	61	ONETOUCH ULTRA BLUE ..	34	<i>phenobarbital</i>	12
<i>neomycin-polymyxin-hc</i>	7, 63	ONETOUCH VERIO	34	<i>phenoxybenzamine hcl</i>	36
NEUPRO	22	OPTIUM TEST	34	PHENYTEK	13
NEVANAC	63	OPTIUMEZ TEST	34	<i>phenytoin</i>	13
<i>nevirapine</i>	26	ORACIT	45	<i>phenytoin sodium extended</i>	13

PHOSPHOLINE IODIDE	62	PREFERRED PLUS		PURIXAN	20
PIFELTRO	26	INSULIN SYRINGE	60	<i>pyrazinamide</i>	20
<i>pilocarpine hcl</i>	43, 62	PREFEST	54	<i>pyridostigmine bromide</i>	19
<i>pimozide</i>	23	<i>pregabalin</i>	43	<i>pyridostigmine bromide er</i>	19
<i>pindolol</i>	38	PREMARIN	54, 55	<i>quasense</i>	55
<i>pioglitazone hcl</i>	30	PREMPHASE	55	QUDEXY XR	13
<i>pioglitazone hcl-glimepiride</i>	31	PREMPRO	55	<i>quetiapine fumarate</i>	24
<i>pioglitazone hcl-metformin hcl</i> ...	31	PRENATABS FA	46	QUICKTEK TEST	35
<i>piperacillin sod-tazobactam so</i>	9	<i>prenatal</i>	46	<i>quinapril hcl</i>	37
<i>piroxicam</i>	3	PRENATAL PLUS IRON	46	<i>quinapril-hydrochlorothiazide</i>	37
PNV-DHA	46	<i>pretomanid</i>	20	<i>quinidine gluconate er</i>	37
<i>podofilox</i>	44	<i>prevalite</i>	41	<i>quinidine sulfate</i>	37
<i>polycin b</i>	61	<i>previfem</i>	55	QUINIDINE SULFATE ER ...	37
<i>poly-dex</i>	63	PREZISTA	27	<i>quinine sulfate</i>	22
<i>polyethylene glycol 3350</i>	47	PRIFTIN	20	<i>raloxifene hcl</i>	56
<i>polymyxin b sulfate</i>	7	<i>primaquine phosphate</i>	22	<i>ramelteon</i>	67
<i>polymyxin b-trimethoprim</i>	61	<i>primidone</i>	12	<i>ramipril</i>	37
<i>portia-28</i>	54	PRIMSOL	7	<i>ranitidine hcl</i>	47
<i>posaconazole</i>	18	PROAIR HFA	65	<i>ranolazine er</i>	39
<i>potassium chloride</i>	45	PROAIR RESPICLICK	65	<i>rasagiline mesylate</i>	23
<i>potassium chloride crys er</i>	45	<i>probenecid</i>	18	REBETOL	25
<i>potassium chloride er</i>	45	<i>prochlorperazine</i>	24	<i>reclipsen</i>	55
<i>potassium citrate er</i>	45	<i>prochlorperazine edisylate</i>	23	RECTIV	42
<i>potassium citrate-citric acid</i>	45	<i>prochlorperazine maleate</i>	23	RELENZA DISKHALER	27
POTIGA	11	PROCRIT	36	RELION BLOOD GLUCOSE	
PRADAXA	35	PROCTOFOAM HC	51	TEST	35
PRALUENT	41	<i>procto-med hc</i>	51	RELION CONFIRM/MICRO	
<i>pramipexole dihydrochloride</i>	22	<i>procto-pak</i>	59	TEST	35
<i>pravastatin sodium</i>	41	<i>proctosol hc</i>	51	RELION INSULIN	
<i>praziquantel</i>	21	<i>proctozone-hc</i>	51	SYRINGE	60
<i>prazosin hcl</i>	36	PRODIGY NO CODING		RELI-ON INSULIN	
PRECISION PCX	34	BLOOD GLUC	35	SYRINGE	60
PRECISION PCX PLUS		<i>profeno</i>	19	RELION PRIME TEST	35
TEST	34	<i>progesterone micronized</i>	56	RELION ULTIMA TEST	35
PRECISION POINT OF		PROGLYCEM	31	RELISTOR	46
CARE TEST	34	PROGRAF	58	<i>repaglinide</i>	30
PRECISION QID TEST	34	PROLIA	59	REPATHA	41
PRECISION SOF-TACT		<i>promethazine hcl</i>	16	REPATHA PUSHTRONEX	
TEST	35	<i>promethegan</i>	16	SYSTEM	41
PRECISION XTRA BLOOD		<i>propafenone hcl</i>	37	REPATHA SURECLICK	41
GLUCOSE	35	<i>propafenone hcl er</i>	37	RESCRIPTOR	26
PRED MILD	63	PROPANTHELIN		RESERPINE	36
PRED-G	63	BROMIDE	46	RESTASIS	61
PRED-G S.O.P.	63	<i>proparacaine hcl</i>	61	RETROVIR	26
<i>prednicarbate</i>	51	<i>propranolol hcl</i>	38	REYATAZ	27
<i>prednisolone</i>	51	<i>propranolol hcl er</i>	38	RHEUMATREX	58
<i>prednisolone acetate</i>	63	<i>propranolol-hctz</i>	38	RHOPRESSA	61
<i>prednisolone sodium phosphate</i>	51	<i>propylthiouracil</i>	57	<i>ribasphere</i>	25
PREDNISOLONE SODIUM		<i>protriptyline hcl</i>	16	<i>ribavirin</i>	25
PHOSPHATE	63	PTS PANELS GLUCOSE		RIDAURA	58
<i>prednisone</i>	51	TEST	35	<i>rifabutin</i>	19
PREDNISONE INTENSOL	51	PULMICORT FLEXHALER ..	64	<i>rifampin</i>	20

RIFATER	20	<i>sprintec 28</i>	55	<i>taztia xt</i>	39
<i>riluzole</i>	43	SPRITAM	12	TECHLITE INSULIN	
<i>rimantadine hcl</i>	27	<i>sronyx</i>	55	SYRINGE	60
RIOMET	30	<i>ssd</i>	7	TEFLARO	8
<i>risedronate sodium</i>	59	STALEVO 100	23	TEGRETOL-XR	13
RISPERDAL CONSTA	24	STALEVO 125	23	<i>telmisartan</i>	36
<i>risperidone</i>	24	STALEVO 150	23	<i>temazepam</i>	67
RITALIN LA	43	STALEVO 200	23	<i>tenofovir disoproxil fumarate</i>	25
<i>ritonavir</i>	27	STALEVO 50	23	<i>terazosin hcl</i>	49
<i>rivastigmine</i>	14	STALEVO 75	23	<i>terbinafine hcl</i>	18
<i>rivastigmine tartrate</i>	14	<i>stavudine</i>	26	<i>terbutaline sulfate</i>	65
<i>romycin</i>	10	STIMATE	52	<i>terconazole</i>	18
<i>ropinirole hcl</i>	22	STIOLTO RESPIMAT	66	<i>testosterone</i>	53
<i>rosuvastatin calcium</i>	41	STRATTERA	43	<i>testosterone cypionate</i>	52
<i>roweepra xr</i>	12	STREPTOMYCIN SULFATE ..	6	<i>testosterone enanthate</i>	52
ROXICET	5	<i>sucralfate</i>	47	<i>tetracycline hcl</i>	11
<i>roxicet</i>	5	SULFACETAMIDE		TEXACORT	51
<i>salsalate</i>	3	SODIUM	11	THEO-24	66
SANDIMMUNE	58	<i>sulfacetamide sodium</i>	11	<i>theochron</i>	66
SANTYL	44	<i>sulfacetamide-prednisolone</i>	63	<i>theophylline er</i>	66
SAPHRIS	24	SULFADIAZINE	11	<i>thioridazine hcl</i>	24
SAVELLA	43	<i>sulfamethoxazole-trimethoprim</i> ..	11	<i>thiothixene</i>	24
SAVELLA TITRATION		<i>sulfasalazine</i>	59	THYROLAR-1	57
PACK	43	<i>sulindac</i>	3	THYROLAR-1/2	57
<i>scalacort</i>	51	<i>sumatriptan succinate</i>	19	THYROLAR-1/4	57
<i>scopolamine</i>	16	SUPRAX	8	THYROLAR-2	57
<i>selegiline hcl</i>	23	SUPREP BOWEL PREP KIT ..	45	THYROLAR-3	57
<i>selenium sulfide</i>	44	SURE COMFORT PEN		<i>tiagabine hcl</i>	12
SELZENTRY	27	NEEDLES	60	<i>tigecycline</i>	7
SEREVENT DISKUS	65	SURE-FINE PEN NEEDLES ..	60	<i>timolol maleate</i>	19, 62
<i>sertraline hcl</i>	15	SUTENT	21	<i>tinidazole</i>	6
<i>sevelamer carbonate</i>	49	<i>syeda</i>	55	TIVICAY	26
<i>sildenafil citrate</i>	66	SYMBICORT	66	<i>tizanidine hcl</i>	25
SILENOR	28	SYMLINPEN 120	30	TOBRADEX	63
<i>silver sulfadiazine</i>	7	SYMLINPEN 60	30	<i>tobramycin</i>	6
SIMBRINZA	62	SYMPAZAN	12	<i>tobramycin sulfate</i>	6
<i>simvastatin</i>	41	SYNAREL	57	<i>tobramycin-dexamethasone</i>	63
<i>sirolimus</i>	58	SYNDROS	17	TOBREX	6
SITAVIG	25	SYNERCID	7	TOLAK	44
<i>sodium chloride</i>	45	SYNJARDY	30	<i>tolazamide</i>	30
<i>sodium fluoride</i>	45	SYNJARDY XR	30	TOLBUTAMIDE	30
<i>sodium polystyrene sulfonate</i>	45, 46	SYNTHROID	56	<i>tolmetin sodium</i>	3
<i>solifenacin succinate</i>	48	TABLOID	20	<i>tolterodine tartrate</i>	48
SOLTAMOX	20	<i>tacrolimus</i>	44, 58	<i>tolterodine tartrate er</i>	48
SOLU-MEDROL	51	TAMIFLU	28	<i>topiramate</i>	13
<i>sorine</i>	38	<i>tamoxifen citrate</i>	20	<i>topiramate er</i>	13
<i>sotalol hcl</i>	38	<i>tamsulosin hcl</i>	49	<i>toposar</i>	21
<i>sotalol hcl (af)</i>	38	<i>taperdex 7-day</i>	51	<i>topotecan hcl</i>	21
SPIRIVA HANDHALER	65	TARGRETIN	21	<i>toremifene citrate</i>	20
SPIRIVA RESPIMAT	65	<i>tarina 24 fe</i>	55	<i>torse mide</i>	40
<i>spironolactone</i>	40	<i>tazarotene</i>	44	TOUJEO MAX SOLOSTAR ..	32
<i>spironolactone-hctz</i>	40	TAZORAC	44	TOUJEO SOLOSTAR	32

<i>tpn electrolytes</i>	45	ULTILET PEN NEEDLE	60	<i>zazole</i>	18
TRADJENTA	30	<i>ultra natalcare</i>	46	ZELAPAR	23
<i>tramadol hcl</i>	5	ULTRA-THIN II PEN		<i>zenchent fe</i>	55
<i>tramadol-acetaminophen</i>	5	NEEDLES	61	ZENPEP	48
<i>trandolapril</i>	37	<i>unithroid</i>	57	ZERIT	27
<i>trandolapril-verapamil hcl er</i>	37	<i>ursodiol</i>	46	<i>zidovudine</i>	27
<i>tranexamic acid</i>	36	<i>valacyclovir hcl</i>	25	<i>zileuton er</i>	64
TRANSDERM-SCOP (1.5		<i>valganciclovir hcl</i>	25	<i>ziprasidone hcl</i>	29
MG)	16	<i>valproate sodium</i>	12	ZIRGAN	25
<i>tranylcypramine sulfate</i>	15	<i>valproic acid</i>	12	ZMAX	10
TRAVASOL	45	<i>valsartan</i>	36	<i>zoledronic acid</i>	59
TRAVATAN Z	61	<i>valsartan-hydrochlorothiazide</i> ...	36	<i>zolpidem tartrate</i>	67
<i>travoprost</i>	61	<i>vancomycin hcl</i>	7	<i>zolpidem tartrate er</i>	67
<i>trazodone hcl</i>	15	VANCOMYCIN HCL	7	<i>zonisamide</i>	12
TRECTOR	20	<i>velivet</i>	55	ZORTRESS	58
TRELEGY ELLIPTA	66	VELTASSA	46	<i>zovia 1/35e (28)</i>	55
TRESIBA	32	VENCLEXTA	21	<i>zovia 1/50e (28)</i>	55
TRESIBA FLEXTOUCH	32	<i>venlafaxine hcl</i>	28	ZYFLO CR	64
<i>tretinoin</i>	44	<i>venlafaxine hcl er</i>	15	ZYPREXA RELPREVV	24
TREXALL	58	VENLAFAXINE HCL ER	16		
<i>triamcinolone acetonide</i>	43, 52	<i>verapamil hcl</i>	39		
<i>triamterene</i>	40	<i>verapamil hcl er</i>	39		
<i>triamterene-hctz</i>	40	VERSACLOZ	24		
<i>triazolam</i>	28	VEXOL	63		
<i>triderm</i>	52	VICTOZA	30		
<i>tri-estarylla</i>	55	VIDEX	26		
<i>trifluoperazine hcl</i>	24	VIDEX EC	26		
<i>trifluridine</i>	25	VIIBRYD	16		
<i>trihexyphenidyl hcl</i>	22	VIIBRYD STARTER PACK	16		
<i>tri-legest fe</i>	55	VIMPAT	13		
<i>trilyte</i>	47	VIRACEPT	27		
<i>trimethoprim</i>	7	VIREAD	26		
<i>tri-mili</i>	56	VIVITROL	5		
<i>trimipramine maleate</i>	16	<i>voriconazole</i>	18		
<i>trinessa (28)</i>	55	<i>vp-pnv-dha</i>	46		
TRINTELLIX	14	VRAYLAR	24		
<i>tri-previfem</i>	55	<i>vylibra</i>	56		
TRISENOX	21	VYTORIN	41		
<i>tri-sprintec</i>	55	<i>warfarin sodium</i>	35		
<i>trivora (28)</i>	55	WELCHOL	41		
<i>tri-vylibra</i>	56	<i>wymzya fe</i>	55		
<i>tri-vylibra lo</i>	56	XARELTO	35		
<i>tropium chloride</i>	48	XARELTO STARTER PACK	35		
<i>tropium chloride er</i>	48	XATMEP	58		
TRUEPLUS 5-BEVEL PEN		XIFAXAN	7		
NEEDLES	60	XIGDUO XR	30		
TRULICITY	30	XOFLUZA	28		
TUDORZA PRESSAIR	65	XOPENEX HFA	65		
TYBOST	27	<i>yuvafem</i>	55		
TYGACIL	7	<i>zafirlukast</i>	64		
TYZINE	66	<i>zaleplon</i>	67		
ULTICARE PEN NEEDLES	60	ZATEAN-PN	46		



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This formulary was updated on 01/29/2020. For more recent information or other questions, please contact Fallon Medicare Plus at 1-800-325-5669 or, for TTY users, TRS 711, 8 a.m.–8 p.m., Monday–Friday (Oct. 1–March 31, seven days a week), or visit fallonhealth.org/medicare.