

BLUE RX VALUE PLUSSM FORMULARY

HOW TO READ THE FORMULARY

All drugs are listed by their generic names and/or most common proprietary (brand) name. Specific drug listings may be accessed either by generic (in lowercase) or brand name (in UPPERCASE) and by therapeutic drug tier. Any drug not found in this formulary listing, or any formulary updates published by Wellmark, shall be considered excluded from your benefit.

Once the product is located, the following items can be viewed:

Drug Tier: Drugs are categorized within tiers on the formulary. Each tier is assigned a cost, which is determined by the member’s pharmacy benefit plan.

Tier Designation in Formulary Below

| | Formulary Tier 1 | Formulary Tier 2 | Formulary Tier 3 |
|------------------------|------------------------------------|----------------------------|------------------|
| Value Plus Plan 3 Tier | Tier 1 | Tier 2 | Tier 3 |
| Value Plus Plan 2 Tier | Tier 1 | Tier 2 and Tier 3 combined | |
| Value Plus Plan 1 Tier | Tier 1, Tier 2 and Tier 3 combined | | |

Pharmacy Durable Medical Equipment (Rx DME): Devices available on this tier include select durable medical equipment (DME) that are used in conjunction with a drug and may be obtained from a pharmacy.

Specialty Drugs: Specialty drugs are high-cost injectable, infused, oral or inhaled drugs for the ongoing treatment of a chronic condition. These drugs generally require close supervision and monitoring of the patient’s drug therapy. Specialty drugs may be categorized within tiers on the formulary or as drugs covered under your medical benefit.

- **Specialty Drugs Preferred (SP-P):** Drugs in this category will process with the preferred specialty drug cost-share.
- **Specialty Drugs Non-Preferred (SP-NP):** Drugs in this category will process with the non-preferred specialty cost-share, and will have a higher cost share than preferred specialty drugs.
- **Specialty Medical (SP-M):** Drugs in this category will be covered under your medical benefit.

Awaiting P&T Review (P&T): FDA-approved drugs are not a covered benefit until they have been evaluated and approved by Wellmark’s Pharmacy & Therapeutics (P&T) Committee and subsequently added to the Wellmark Drug List.

Drug Name: This lists the generic name for the product (lowercase) OR the brand name or common reference name for the product (UPPERCASE).

Requirements/Limits: This lists Wellmark Pharmacy programs that may impact a particular drug or class of drugs and are described in the legend below.

HEALTH CARE REFORM PREVENTIVE DRUGS

Preventive drugs with an “A” or “B” rating in the current recommendations of the United States Preventive Services Task Force and immunizations as recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention are not associated with any cost share for members on plans with this benefit.

A complete list of recommendations and guidelines related to preventive services can be found at [Healthcare.gov](https://www.healthcare.gov). Recommended preventive items and services are subject to change and are subject to medical management.

BENEFIT COVERAGE AND LIMITATIONS

This printed formulary does not define benefit coverage and limitations. Many members have specific benefit inclusions, exclusions, copayments or a lack of coverage, which are not reflected in the Blue Rx Value Plus formulary. Members should contact their plan sponsor or Wellmark Customer Service at the number on the back of their ID card if they have questions regarding their coverage. Please note that the formulary process is evolutionary and changes can occur throughout the year. The following topics may or may not be applicable depending on the parameters of your specific benefits.

FORMULARY EXCEPTION PROCESS

Drugs not included in this list shall be considered non-formulary and are **NOT COVERED**. In some instances, Wellmark will consider coverage exceptions. Coverage of non-formulary drugs may be requested by the health professional through an exception request for a non-formulary prescription drug (outlined below). Generally, one of the following guidelines must be documented in order for an exception to be granted:

- All covered formulary drugs on any tier will be ineffective; OR
- All covered formulary drugs on any tier have been ineffective; OR
- All covered formulary drugs on any tier would not be as effective as the non-formulary drug; OR
- All covered formulary drugs would have adverse effects.

COMMON DRUG EXCLUSIONS

Due to benefit design parameters, some plan sponsors may choose to exclude certain drug classes. Prior authorization is generally not available for drugs that are specifically excluded by benefit design. Common excluded drugs may include, but are not limited to:

- Over-the-counter (OTC) drugs or their equivalents unless otherwise specified in the formulary listing.
- Drug products used for cosmetic purposes.
- Experimental drug products, or any drug product used in an experimental manner.
- Replacement of a lost or stolen drug.
- Foreign drugs or drugs not approved by the United States Food & Drug Administration (FDA).

CONTACT INFORMATION

The Blue Rx Value Plus formulary is designed to assist physicians, members and other health care professionals in the selection of cost-effective treatments. Wellmark encourages your input and feedback on how we can assist in improving this document and the formulary management process.

Please direct your communications to:

Wellmark Blue Cross and Blue Shield
1331 Grand Avenue
P.O. Box 9232
Des Moines, IA 50306

In addition to the Blue Rx Value Plus formulary, other quick reference guides are available at [Wellmark.com](https://www.wellmark.com).

| LEGEND | | |
|--------|--|---|
| TIER | DESCRIPTION | |
| 1 | TIER 1 | |
| 2 | TIER 2 | |
| 3 | TIER 3 | |
| 4 | SP-P | |
| 5 | SP-NP | |
| 6 | RX-DME | |
| 7 | P&T | |
| 8 | SP-M | |
| TYPE | DESCRIPTION | |
| QL | Quantity Limit | There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame. Amounts over the specified quantity limits are not a covered benefit unless Post-Quantity Limit Prior Authorization is available. |
| PA | Prior Authorization | This indicates a drug requires prior authorization before it is covered under your benefit. Your health care provider will need to contact our Pharmacy program at 800-600-8065. Hours of operation are Monday- Friday: 8 a.m. to 6 p.m. CST. |
| AL | Age Limit | This prescription drug may only be covered if you meet the minimum or maximum age limit. |
| SBG | Specialty Biosimilars and Specialty Generics | This indicates a preferred biosimilar or generic specialty drug. Please read your enrollment information to see how specialty biosimilars and specialty generics are covered specific to your plan. |
| S | Specialty Drug | Specialty drugs are high-cost drugs for the ongoing treatment of a complex or rare condition. These drugs generally require close supervision and monitoring of the patient's drug therapy. |
| MN-PA | Medical Necessity Prior Authorization | This indicates a drug requires prior authorization before it is covered under your benefit. Your health care provider will need to contact our Pharmacy program at 800-600- 8065. Hours of operation are Monday - Friday: 8 a.m. to 6 p.m. CST. The intent of formulary medical necessity prior authorization is to confirm the appropriate coverage of the target drugs when evidence is provided documenting a trial and failure of the preferred formulary alternatives. |
| QLV | Quantity Limit (Varies) | A quantity limit on this drug limits the amount covered per prescription, or time period, and may vary based on the diagnosis. Amounts over the quantity limit are not a covered benefit unless Post Quantity Limit Prior Authorization is available. |

| | | |
|-------|---|---|
| PA-QL | Post-Quantity Limit Prior Authorization | This indicates a greater quantity may be covered under your benefit if Post-Quantity Limit Prior Authorization is obtained. Your health care provider will need to contact our Pharmacy program at 800-600-8065. Hours of operation are Monday-Friday: 8 a.m. to 6 p.m. CST |
| PAV | Prior Authorization Varies | This indicates a drug may require prior authorization before it is covered under your benefit and the requirement may vary based on the condition being treated, medication history, and the days supply on your prescription. |
| GA | Generic Available | Indicates a generic equivalent is available for a brand name drug. In most cases, when you purchase a brand name drug that has an FDA-approved A-rated generic equivalent, Wellmark will pay only what it would have paid for the equivalent generic drug. You will be responsible for your payment obligation for the equivalent generic drug and any remaining cost difference up to the maximum allowed fee for the brand name drug. |
| PV | Preventive | Preventive drugs are prescribed to prevent the occurrence of a disease or condition and are defined by the Internal Revenue Service. The preventive drug enhanced benefit is available on specific high deductible health plans. This is an optional benefit that waives the deductible for preventive drugs. Please read your enrollment information to see how preventive drugs are covered specific to your plan. |

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| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|---|--------|-----------------------|
| PENICILLINS | | | |
| NATURAL PENICILLINS | | | |
| BICILLIN L-A | BICILLIN L-A (600000 UNIT/ML SUSP PRSYR, 1200000 UNIT/2ML SUSP PRSYR, 2400000 UNIT/4ML SUSP PRSYR) <i>penicillin g benzathine</i> | TIER 1 | |
| <i>penicillin v potassium</i> | <i>penicillin v potassium (125 mg/5ml recon soln, 250 mg tab, 250 mg/5ml recon soln, 500 mg tab)</i> | TIER 1 | |
| AMINOPENICILLINS | | | |
| <i>amoxicillin</i> | <i>amoxicillin (125 mg chew tab, 125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 250 mg chew tab, 250 mg/5ml recon susp, 400 mg/5ml recon susp, 500 mg cap, 500 mg tab, 875 mg tab)</i> | TIER 1 | |
| <i>ampicillin</i> | <i>ampicillin 500 mg cap</i> | TIER 1 | |
| PENICILLINASE-RESISTANT PENICILLINS | | | |
| <i>dicloxacillin sodium</i> | <i>dicloxacillin sodium (250 mg cap, 500 mg cap)</i> | TIER 1 | |
| PENICILLIN COMBINATIONS | | | |
| <i>amoxicillin-pot clavulanate</i> | <i>amoxicillin-pot clavulanate (200-28.5 mg chew tab, 200-28.5 mg/5ml recon susp, 250-125 mg tab, 250-62.5 mg/5ml recon susp, 400-57 mg chew tab, 400-57 mg/5ml recon susp, 500-125 mg tab, 600-42.9 mg/5ml recon susp, 875-125 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|--|--------|-----------------------|
| AMOXICILLIN-POT CLAVULANATE ER | AMOXICILLIN-POT CLAVULANATE ER 1000- 62.5 MG TAB ER 12H <i>amoxicillin & pot clavulanate</i> | TIER 1 | |
| CEPHALOSPORINS | | | |
| CEPHALOSPORINS - 1ST GENERATION | | | |
| <i>cefadroxil</i> | <i>cefadroxil (1 gm tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp)</i> | TIER 1 | |
| <i>cephalexin</i> | <i>cephalexin (125 mg/5ml recon susp, 250 mg cap, 250 mg tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg tab, 750 mg cap)</i> | TIER 1 | |
| CEPHALOSPORINS - 2ND GENERATION | | | |
| CEFACLOR | CEFACLOR (125 MG/5ML RECON SUSP, 250 MG CAP, 250 MG/5ML RECON SUSP, 375 MG/5ML RECON SUSP, 500 MG CAP) <i>cefaclor</i> | TIER 1 | |
| CEFACLOR ER | CEFACLOR ER 500 MG TAB ER 12H <i>cefaclor monohydrate</i> | TIER 3 | |
| <i>cefprozil</i> | <i>cefprozil (125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab)</i> | TIER 1 | |
| <i>cefuroxime axetil</i> | <i>cefuroxime axetil (250 mg tab, 500 mg tab)</i> | TIER 1 | |
| CEPHALOSPORINS - 3RD GENERATION | | | |
| <i>cefdinir</i> | <i>cefdinir (125 mg/5ml recon susp, 250 mg/5ml recon susp, 300 mg cap)</i> | TIER 1 | |
| <i>cefixime</i> | <i>cefixime (100 mg/5ml recon susp, 200 mg/5ml recon susp, 400 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|---|--------|-----------------------|
| <i>cefepime proxetil</i> | <i>cefepime proxetil (50 mg/5ml recon susp, 100 mg tab, 100 mg/5ml recon susp, 200 mg tab)</i> | TIER 1 | |
| <i>ceftriaxone sodium</i> | <i>ceftriaxone sodium (1 gm recon soln, 250 mg recon soln, 500 mg recon soln)</i> | TIER 1 | |
| SUPRAX | SUPRAX (100 MG CHEW TAB, 200 MG CHEW TAB, 500 MG/5ML RECON SUSP) <i>cefixime</i> | TIER 3 | |
| CEPHALOSPORINS - 4TH GENERATION | | | |
| <i>cefepime hcl</i> | <i>cefepime hcl 1 gm recon soln</i> | TIER 2 | |
| CEFEPIME-DEXTROSE | CEFEPIME-DEXTROSE 1-5 GM-%(50ML) RECON SOLN <i>cefepime hcl-dextrose</i> | TIER 2 | |
| MACROLIDES | | | |
| ERYTHROMYCINS | | | |
| e.e.s. 400 | e.e.s. 400 400 mg tab | TIER 1 | |
| <i>ery-tab</i> | <i>ery-tab (250 mg tab dr, 333 mg tab dr, 500 mg tab dr)</i> | TIER 1 | |
| ERYTHROCIN STEARATE | ERYTHROCIN STEARATE 250 MG TAB <i>erythromycin stearate</i> | TIER 1 | |
| <i>erythromycin</i> | <i>erythromycin (250 mg tab dr, 333 mg tab dr, 500 mg tab dr)</i> | TIER 1 | |
| <i>erythromycin base</i> | <i>erythromycin base (250 mg cp dr part, 250 mg tab, 250 mg tab dr, 333 mg tab dr, 500 mg tab, 500 mg tab dr)</i> | TIER 1 | |
| <i>erythromycin ethylsuccinate</i> | <i>erythromycin ethylsuccinate (200 mg/5ml recon susp, 400 mg tab, 400 mg/5ml recon susp)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|-----------------------|
| AZITHROMYCIN | | | |
| <i>azithromycin</i> | <i>azithromycin (100 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg tab, 500 mg tab, 600 mg tab)</i> | TIER 1 | |
| CLARITHROMYCIN | | | |
| <i>clarithromycin</i> | <i>clarithromycin (125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab)</i> | TIER 1 | |
| <i>clarithromycin er</i> | <i>clarithromycin er 500 mg tab er 24h</i> | TIER 1 | |
| TETRACYCLINES | | | |
| <i>avidoxy</i> | <i>avidoxy 100 mg tab</i> | TIER 1 | |
| <i>coremino</i> | <i>coremino (45 mg tab er 24h, 90 mg tab er 24h, 135 mg tab er 24h)</i> | TIER 1 | PA |
| <i>demeclocycline hcl</i> | <i>demeclocycline hcl (150 mg tab, 300 mg tab)</i> | TIER 1 | |
| <i>doxycycline hyclate</i> | <i>doxycycline hyclate (20 mg tab, 50 mg cap, 100 mg cap, 100 mg tab)</i> | TIER 1 | |
| <i>doxycycline hyclate</i> | <i>doxycycline hyclate (50 mg tab dr, 75 mg tab dr, 100 mg tab dr, 150 mg tab dr)</i> | TIER 1 | PA |
| <i>doxycycline monohydrate</i> | <i>doxycycline monohydrate (25 mg/5ml recon susp, 50 mg cap, 50 mg tab, 75 mg tab, 100 mg cap, 100 mg tab)</i> | TIER 1 | |
| <i>lymepak</i> | <i>lymepak 100 mg tab</i> | TIER 1 | |
| <i>minocycline hcl</i> | <i>minocycline hcl (50 mg cap, 50 mg tab, 75 mg cap, 75 mg tab, 100 mg cap, 100 mg tab)</i> | TIER 1 | |
| <i>minocycline hcl er</i> | <i>minocycline hcl er (er 45 mg tab er 24h, er 90 mg tab er 24h, er 135 mg tab er 24h)</i> | TIER 1 | PA |
| <i>mondoxylene nl</i> | <i>mondoxylene nl 100 mg cap</i> | TIER 1 | |
| <i>morgidox</i> | <i>morgidox 100 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------|--|--------|----------------------------|
| SOLODYN | SOLODYN (55 MG TAB ER 24H, 65 MG TAB ER 24H, 80 MG TAB ER 24H, 105 MG TAB ER 24H, 115 MG TAB ER 24H) <i>minocycline hcl</i> | TIER 1 | PA, GA |
| <i>tetracycline hcl</i> | <i>tetracycline hcl (250 mg cap, 500 mg cap)</i> | TIER 1 | |
| VIBRAMYCIN | VIBRAMYCIN 50 MG/5ML SYRUP <i>doxycycline calcium</i> | TIER 3 | |
| FLUOROQUINOLONES | | | |
| CIPRO | CIPRO (250 (5%) RECON SUSP, 500 (10%) RECON SUSP) <i>ciprofloxacin</i> | TIER 1 | GA |
| <i>ciprofloxacin</i> | <i>ciprofloxacin (250 (5%) recon susp, 500 (10%) recon susp)</i> | TIER 1 | |
| <i>ciprofloxacin hcl</i> | <i>ciprofloxacin hcl (100 mg tab, 250 mg tab, 500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>levofloxacin</i> | <i>levofloxacin (25 mg/ml solution, 250 mg tab, 500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>moxifloxacin hcl</i> | <i>moxifloxacin hcl 400 mg tab</i> | TIER 1 | |
| <i>ofloxacin</i> | <i>ofloxacin (300 mg tab, 400 mg tab)</i> | TIER 1 | |
| AMINOGLYCOSIDES | | | |
| ARIKAYCE | ARIKAYCE 590 MG/8.4ML SUSPENSION <i>amikacin sulfate liposome</i> | SP-P | QL (236 PER 28 DAY(S)), S |
| BETHKIS | BETHKIS 300 MG/4ML NEBU SOLN <i>tobramycin</i> | SP-NP | QL (2 PER 1 DAY(S)), S, GA |
| KITABIS PAK | KITABIS PAK 300 MG/5ML NEBU SOLN <i>tobramycin</i> | SP-NP | QL (10 PER 1 DAY), S, GA |
| <i>neomycin sulfate</i> | <i>neomycin sulfate 500 mg tab</i> | TIER 1 | |
| TOBI | TOBI 300 MG/5ML NEBU SOLN <i>tobramycin</i> | SP-NP | QL (10 PER 1 DAY), S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|--|--------|--|
| TOBI PODHALER | TOBI PODHALER 28 MG CAP <i>tobramycin</i> | SP-P | QL (8 PER 1 DAY), S |
| <i>tobramycin</i> | <i>tobramycin 300 mg/4ml nebu soln</i> | SP-P | QL (2 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>tobramycin</i> | <i>tobramycin 300 mg/5ml nebu soln</i> | SP-P | QL (10 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>tobramycin sulfate</i> | <i>tobramycin sulfate (1.2 gm recon soln, 1.2 gm/30ml solution, 2 gm/50ml solution, 10 mg/ml solution, 80 mg/2ml solution)</i> | TIER 1 | |
| SULFONAMIDES | | | |
| <i>sulfadiazine</i> | <i>sulfadiazine 500 mg tab</i> | TIER 1 | |
| ANTIMYCOBACTERIAL AGENTS | | | |
| <i>cycloserine</i> | <i>cycloserine 250 mg cap</i> | TIER 1 | |
| <i>ethambutol hcl</i> | <i>ethambutol hcl (100 mg tab, 400 mg tab)</i> | TIER 1 | |
| <i>isoniazid</i> | <i>isoniazid (50 mg/5ml syrup, 100 mg tab, 300 mg tab)</i> | TIER 1 | |
| PASER | PASER 4 GM PACKET <i>aminosalicylic acid</i> | TIER 1 | |
| PRIFTIN | PRIFTIN 150 MG TAB <i>rifapentine</i> | TIER 3 | |
| <i>pyrazinamide</i> | <i>pyrazinamide 500 mg tab</i> | TIER 1 | |
| <i>rifabutin</i> | <i>rifabutin 150 mg cap</i> | TIER 1 | |
| <i>rifampin</i> | <i>rifampin 150 mg cap</i> | TIER 1 | |
| <i>rifampin</i> | <i>rifampin 300 mg cap</i> | TIER 1 | |
| TRECTOR | TRECTOR 250 MG TAB <i>ethionamide</i> | TIER 3 | |
| ANTIFUNGALS | | | |
| <i>flucytosine</i> | <i>flucytosine (250 mg cap, 500 mg cap)</i> | TIER 1 | |
| <i>griseofulvin microsize</i> | <i>griseofulvin microsize (125 mg/5ml suspension, 500 mg tab)</i> | TIER 1 | |
| <i>griseofulvin ultramicrosize</i> | <i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i> | TIER 1 | |
| <i>nystatin</i> | <i>nystatin 500000 unit tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| <i>terbinafine hcl</i> | <i>terbinafine hcl 250 mg tab</i> | TIER 1 | |
| IMIDAZOLES | | | |
| <i>ketoconazole</i> | <i>ketoconazole 200 mg tab</i> | TIER 1 | |
| TRIAZOLES | | | |
| <i>fluconazole</i> | <i>fluconazole (10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab)</i> | TIER 1 | |
| <i>itraconazole</i> | <i>itraconazole (10 mg/ml solution, 100 mg cap)</i> | TIER 1 | PA |
| <i>posaconazole</i> | <i>posaconazole (40 mg/ml suspension, 100 mg tab dr)</i> | TIER 1 | |
| VFEND IV | VFEND IV 200 MG RECON SOLN <i>voriconazole</i> | TIER 2 | GA |
| <i>voriconazole</i> | <i>voriconazole (40 mg/ml recon susp, 50 mg tab, 200 mg tab)</i> | TIER 1 | |
| <i>voriconazole</i> | <i>voriconazole 200 mg recon soln</i> | TIER 2 | |
| ANTIVIRALS | | | |
| ANTIRETROVIRALS - CAPSID INHIBITORS | | | |
| SUNLENCA | SUNLENCA (4 300 MG TAB THPK, 5 300 MG TAB THPK) <i>lenacapavir sodium</i> | SP-P | S |
| SUNLENCA | SUNLENCA 463.5 MG/1.5ML SOLUTION <i>lenacapavir sodium</i> | SP-M | S |
| ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR) | | | |
| <i>maraviroc</i> | <i>maraviroc (150 mg tab, 300 mg tab)</i> | TIER 1 | |
| SELZENTRY | SELZENTRY (25 MG TAB, 75 MG TAB) <i>maraviroc</i> | TIER 2 | |
| SELZENTRY | SELZENTRY 20 MG/ML SOLUTION <i>maraviroc</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| ANTIRETROVIRALS - CD4-DIRECTED POST-ATTACHMENT INHIBITOR | | | |
| TROGARZO | TROGARZO 200 MG/1.33ML SOLUTION <i>ibalizumab-uiyk</i> | SP-M | S |
| ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR | | | |
| RUKOBIA | RUKOBIA 600 MG TAB ER 12H <i>fostemsavir tromethamine</i> | SP-P | S |
| ANTIRETROVIRALS - FUSION INHIBITORS | | | |
| FUZEON | FUZEON 90 MG RECON SOLN <i>enfuvirtide</i> | SP-P | S |
| ANTIRETROVIRALS - INTEGRASE INHIBITORS | | | |
| APRETUDE | APRETUDE 600 MG/3ML SUSP <i>cabotegravir</i> | SP-M | S |
| ISENTRESS | ISENTRESS (25 MG CHEW TAB, 100 MG CHEW TAB, 400 MG TAB) <i>raltegravir potassium</i> | TIER 2 | |
| ISENTRESS | ISENTRESS 100 MG PACKET <i>raltegravir potassium</i> | TIER 3 | |
| ISENTRESS HD | ISENTRESS HD 600 MG TAB <i>raltegravir potassium</i> | TIER 2 | |
| TIVICAY | TIVICAY (10 MG TAB, 25 MG TAB, 50 MG TAB) <i>dolutegravir sodium</i> | TIER 2 | |
| TIVICAY PD | TIVICAY PD 5 MG TAB SOL <i>dolutegravir sodium</i> | TIER 2 | |
| ANTIRETROVIRALS - PROTEASE INHIBITORS | | | |
| APTIVUS | APTIVUS 100 MG/ML SOLUTION <i>tipranavir</i> | TIER 3 | |
| APTIVUS | APTIVUS 250 MG CAP <i>tipranavir</i> | TIER 2 | |
| <i>atazanavir sulfate</i> | <i>atazanavir sulfate (150 mg cap, 200 mg cap, 300 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| CRIXIVAN | CRIXIVAN (200 MG CAP, 400 MG CAP) <i>indinavir sulfate</i> | TIER 2 | |
| <i>darunavir</i> | <i>darunavir (600 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>fosamprenavir calcium</i> | <i>fosamprenavir calcium 700 mg tab</i> | TIER 1 | |
| INVIRASE | INVIRASE 500 MG TAB <i>saquinavir mesylate</i> | TIER 2 | |
| LEXIVA | LEXIVA 50 MG/ML SUSPENSION <i>fosamprenavir calcium</i> | TIER 3 | |
| NORVIR | NORVIR (80 MG/ML SOLUTION, 100 MG PACKET) <i>ritonavir</i> | TIER 3 | |
| NORVIR | NORVIR 100 MG CAP <i>ritonavir</i> | TIER 2 | |
| PREZISTA | PREZISTA (75 MG TAB, 150 MG TAB) <i>darunavir ethanolate</i> | TIER 2 | |
| PREZISTA | PREZISTA 100 MG/ML SUSPENSION <i>darunavir ethanolate</i> | TIER 3 | |
| REYATAZ | REYATAZ 50 MG PACKET <i>atazanavir sulfate</i> | TIER 3 | |
| <i>ritonavir</i> | <i>ritonavir 100 mg tab</i> | TIER 1 | |
| VIRACEPT | VIRACEPT (250 MG TAB, 625 MG TAB) <i>nelfinavir mesylate</i> | TIER 2 | |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES | | | |
| <i>abacavir sulfate</i> | <i>abacavir sulfate (20 mg/ml solution, 300 mg tab)</i> | TIER 1 | |
| DIDANOSINE | DIDANOSINE (200 MG CAP DR, 250 MG CAP DR, 400 MG CAP DR) <i>didanosine</i> | TIER 1 | |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES | | | |
| <i>emtricitabine</i> | <i>emtricitabine 200 mg cap</i> | TIER 1 | |
| EMTRIVA | EMTRIVA 10 MG/ML SOLUTION <i>emtricitabine</i> | TIER 2 | |
| <i>lamivudine</i> | <i>lamivudine (150 mg tab, 300 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| <i>lamivudine</i> | <i>lamivudine 10 mg/ml solution</i> | TIER 1 | |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES | | | |
| RETROVIR | RETROVIR 10 MG/ML SOLUTION <i>zidovudine</i> | SP-M | S |
| <i>stavudine</i> | <i>stavudine (15 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>zidovudine</i> | <i>zidovudine (50 mg/5ml syrup, 100 mg cap, 300 mg tab)</i> | TIER 1 | |
| ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES | | | |
| <i>tenofovir disoproxil fumarate</i> | <i>tenofovir disoproxil fumarate 300 mg tab</i> | TIER 1 | |
| VIREAD | VIREAD (150 MG TAB, 200 MG TAB, 250 MG TAB) <i>tenofovir disoproxil fumarate</i> | TIER 2 | |
| VIREAD | VIREAD 40 MG/GM POWDER <i>tenofovir disoproxil fumarate</i> | TIER 3 | |
| ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES | | | |
| EDURANT | EDURANT 25 MG TAB <i>rilpivirine hcl</i> | TIER 2 | |
| <i>efavirenz</i> | <i>efavirenz (50 mg cap, 200 mg cap, 600 mg tab)</i> | TIER 1 | |
| <i>etravirine</i> | <i>etravirine (100 mg tab, 200 mg tab)</i> | TIER 1 | |
| INTELENCE | INTELENCE 25 MG TAB <i>etravirine</i> | TIER 2 | |
| <i>nevirapine</i> | <i>nevirapine 200 mg tab</i> | TIER 1 | |
| NEVIRAPINE | NEVIRAPINE 50 MG/5ML SUSPENSION <i>nevirapine</i> | TIER 3 | |
| <i>nevirapine er</i> | <i>nevirapine er (er 100 mg tab er 24h, er 400 mg tab er 24h)</i> | TIER 1 | |
| PIFELTRO | PIFELTRO 100 MG TAB <i>doravirine</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| VIRAMUNE | VIRAMUNE 50 MG/5ML SUSPENSION <i>nevirapine</i> | TIER 3 | |
| ANTIRETROVIRALS ADJUVANTS | | | |
| TYBOST | TYBOST 150 MG TAB <i>cobicistat</i> | TIER 2 | |
| ANTIRETROVIRAL COMBINATIONS | | | |
| <i>abacavir sulfate-lamivudine</i> | <i>abacavir sulfate-lamivudine</i> 600-300 mg tab | TIER 1 | |
| <i>abacavir-lamivudine-zidovudine</i> | <i>abacavir-lamivudine-zidovudine</i> 300-150-300 mg tab | TIER 1 | |
| BIKTARVY | BIKTARVY (30-120-15 MG TAB, 50-200-25 MG TAB) <i>bictegravir-emtricitabine-tenofovir alafenamide fumarate</i> | TIER 2 | |
| CABENUVA | CABENUVA (400 600 MG/2ML SUSP, 600 900 MG/3ML SUSP) <i>cabotegravir & rilpivirine</i> | SP-M | S |
| CIMDUO | CIMDUO 300-300 MG TAB <i>lamivudine-tenofovir disoproxil fumarate</i> | TIER 2 | |
| COMPLERA | COMPLERA 200-25-300 MG TAB <i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i> | TIER 2 | |
| DELSTRIGO | DELSTRIGO 100-300-300 MG TAB <i>doravirine-lamivudine-tenofovir disoproxil fumarate</i> | TIER 2 | |
| DESCOVY | DESCOVY (120-15 MG TAB, 200-25 MG TAB) <i>emtricitabine-tenofovir alafenamide fumarate</i> | TIER 2 | |
| DOVATO | DOVATO 50-300 MG TAB <i>dolutegravir sodium-lamivudine</i> | TIER 2 | |
| <i>efavirenz-emtricitab-tenofo df</i> | <i>efavirenz-emtricitab-tenofo df</i> 600-200-300 mg tab | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| <i>efavirenz-lamivudine-tenofovir</i> | <i>efavirenz-lamivudine-tenofovir (400-300-300 mg tab, 600-300-300 mg tab)</i> | TIER 1 | |
| <i>emtricitabine-tenofovir df</i> | <i>emtricitabine-tenofovir df (100-150 mg tab, 133-200 mg tab, 167-250 mg tab, 200-300 mg tab)</i> | TIER 1 | PV |
| EVOTAZ | EVOTAZ 300-150 MG TAB <i>atazanavir sulfate-cobicistat</i> | TIER 3 | |
| GENVOYA | GENVOYA 150-150-200-10 MG TAB <i>elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide</i> | TIER 2 | |
| JULUCA | JULUCA 50-25 MG TAB <i>dolutegravir sodium-rilpivirine hcl</i> | TIER 2 | |
| <i>lamivudine-zidovudine</i> | <i>lamivudine-zidovudine 150-300 mg tab</i> | TIER 1 | |
| <i>lopinavir-ritonavir</i> | <i>lopinavir-ritonavir (100-25 mg tab, 200-50 mg tab, 400-100 mg/5ml solution)</i> | TIER 1 | |
| ODEFSEY | ODEFSEY 200-25-25 MG TAB <i>emtricitabine-rilpivirine-tenofovir alafenamide fumarate</i> | TIER 2 | |
| PREZCOBIX | PREZCOBIX 800-150 MG TAB <i>darunavir-cobicistat</i> | TIER 3 | |
| STRIBILD | STRIBILD 150-150-200-300 MG TAB <i>elvitegravir-cobicistat-emtricitabine-tenofovir df</i> | TIER 2 | |
| SYMTUZA | SYMTUZA 800-150-200-10 MG TAB <i>darunavir-cobicistat-emtricitabine-tenofovir alafenamide</i> | TIER 2 | |
| TEMIXYS | TEMIXYS 300-300 MG TAB <i>lamivudine-tenofovir disoproxil fumarate</i> | TIER 2 | |
| TRIUMEQ | TRIUMEQ 600-50-300 MG TAB <i>abacavir-dolutegravir-lamivudine</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------|--|--------|---|
| TRIUMEQ PD | TRIUMEQ PD 60-5-30 MG TAB SOL <i>abacavir-dolutegravir- lamivudine</i> | TIER 2 | |
| CMV AGENTS | | | |
| LIVTENCITY | LIVTENCITY 200 MG TAB <i>maribavir</i> | SP-P | QL (4 PER DAY(S)), S |
| <i>valganciclovir hcl</i> | <i>valganciclovir hcl 450 mg tab</i> | TIER 1 | QL (4 PER 1 DAY(S)) |
| <i>valganciclovir hcl</i> | <i>valganciclovir hcl 50 mg/ml recon soln</i> | TIER 1 | QL (1000 PER 30 DAY(S)) |
| HEPATITIS B AGENTS | | | |
| <i>adefovir dipivoxil</i> | <i>adefovir dipivoxil 10 mg tab</i> | TIER 1 | |
| <i>entecavir</i> | <i>entecavir (0.5 mg tab, 1 mg tab)</i> | TIER 1 | QL (1 PER 1 DAY(S)) |
| EPIVIR HBV | EPIVIR HBV 5 MG/ML SOLUTION <i>lamivudine (hbv)</i> | TIER 3 | |
| <i>lamivudine</i> | <i>lamivudine 100 mg tab</i> | TIER 1 | |
| VEMLIDY | VEMLIDY 25 MG TAB <i>tenofovir alafenamide fumarate</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| HEPATITIS C AGENTS | | | |
| PEGASYS | PEGASYS 180 MCG/0.5ML SOLN PRSYR <i>peginterferon alfa-2a</i> | SP-P | PA, QL (4 SYRINGES PER 28 DAY(S)), S |
| PEGASYS | PEGASYS 180 MCG/ML SOLUTION <i>peginterferon alfa-2a</i> | SP-P | PA, QL (4 PER 28 DAYS), S |
| PEGASYS PROCLICK | PEGASYS PROCLICK 180 MCG/0.5ML SOLN A-INJ <i>peginterferon alfa-2a</i> | SP-P | PA, QL (4 PER 28 DAYS), S |
| PEGINTRON | PEGINTRON 50 MCG/0.5ML KIT <i>peginterferon alfa-2b</i> | SP-P | S |
| <i>ribavirin</i> | <i>ribavirin (200 mg cap, 200 mg tab)</i> | SP-P | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|--|--------|------------------------------|
| HEPATITIS C AGENT - COMBINATIONS | | | |
| EPCLUSA | EPCLUSA (150-37.5 MG PACKET, 200-50 MG PACKET) <i>sofosbuvir-velpatasvir</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| EPCLUSA | EPCLUSA 200-50 MG TAB <i>sofosbuvir-velpatasvir</i> | SP-P | PA, QL (28 PER 28 DAY(S)), S |
| EPCLUSA | EPCLUSA 400-100 MG TAB <i>sofosbuvir-velpatasvir</i> | SP-P | PA, QL (28 PER 28 DAYS), S |
| HARVONI | HARVONI (33.75-150 MG PACKET, 45-200 MG PACKET, 45-200 MG TAB) <i>ledipasvir-sofosbuvir</i> | SP-P | PA, QL (28 PER 28 DAY(S)), S |
| HARVONI | HARVONI 90-400 MG TAB <i>ledipasvir-sofosbuvir</i> | SP-P | PA, QL (28 PER 28 DAYS), S |
| LEDIPASVIR-SOFOSBUVIR | LEDIPASVIR-SOFOSBUVIR 90-400 MG TAB <i>ledipasvir-sofosbuvir</i> | SP-P | PA, QL (28 PER 28 DAYS), S |
| MAVYRET | MAVYRET 100-40 MG TAB <i>glecaprevir-pibrentasvir</i> | SP-P | PA, QL (84 PER 28 DAY(S)), S |
| MAVYRET | MAVYRET 50-20 MG PACKET <i>glecaprevir-pibrentasvir</i> | SP-P | PA, QL (5 PER 1 DAY(S)), S |
| SOFOSBUVIR-VELPATASVIR | SOFOSBUVIR-VELPATASVIR 400-100 MG TAB <i>sofosbuvir-velpatasvir</i> | SP-P | PA, QL (28 PER 28 DAYS), S |
| VOSEVI | VOSEVI 400-100-100 MG TAB <i>sofosbuvir-velpatasvir-voxilaprevir</i> | SP-P | PA, QL (28 PER 28 DAY(S)), S |
| HERPES AGENTS - PURINE ANALOGUES | | | |
| <i>acyclovir</i> | <i>acyclovir (200 mg cap, 200 mg/5ml suspension, 400 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>valacyclovir hcl</i> | <i>valacyclovir hcl (1 gm tab, 500 mg tab)</i> | TIER 1 | |
| HERPES AGENTS - THYMIDINE ANALOGUES | | | |
| <i>famciclovir</i> | <i>famciclovir (125 mg tab, 250 mg tab, 500 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|--|--------|-----------------------|
| INFLUENZA AGENTS | | | |
| RIMANTADINE HCL | RIMANTADINE HCL 100 MG TAB <i>rimantadine hydrochloride</i> | TIER 1 | |
| PA ENDONUCLEASE INHIBITORS | | | |
| XOFLUZA (40 MG DOSE) | XOFLUZA (40 MG DOSE) (OFLUZA MG 1 40 MG TAB THPK, OFLUZA MG 20 MG TAB THPK) <i>baloxavir marboxil</i> | TIER 3 | |
| XOFLUZA (80 MG DOSE) | XOFLUZA (80 MG DOSE) (OFLUZA MG 1 80 MG TAB THPK, OFLUZA MG 2 40 MG TAB THPK) <i>baloxavir marboxil</i> | TIER 3 | |
| NEURAMINIDASE INHIBITORS | | | |
| <i>oseltamivir phosphate</i> | <i>oseltamivir phosphate (6 mg/ml recon susp, 30 mg cap, 45 mg cap, 75 mg cap)</i> | TIER 1 | |
| RELENZA DISKHALER | RELENZA DISKHALER 5 MG/ACT AER POW BA <i>zanamivir</i> | TIER 2 | |
| ANTIVIRAL COMBINATIONS | | | |
| PAXLOVID (150/100) | PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK <i>nirmatrelvir-ritonavir</i> | TIER 2 | QL (2 PER 1 YEAR(S)) |
| PAXLOVID (300/100) | PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK <i>nirmatrelvir-ritonavir</i> | TIER 2 | QL (2 PER 1 YEAR(S)) |
| ANTIMALARIALS | | | |
| <i>chloroquine phosphate</i> | <i>chloroquine phosphate (250 mg tab, 500 mg tab)</i> | TIER 1 | |
| <i>hydroxychloroquine sulfate</i> | <i>hydroxychloroquine sulfate 200 mg tab</i> | TIER 1 | |
| <i>mefloquine hcl</i> | <i>mefloquine hcl 250 mg tab</i> | TIER 1 | |
| <i>primaquine phosphate</i> | <i>primaquine phosphate 26.3 (15 base) mg tab</i> | TIER 1 | |
| <i>pyrimethamine</i> | <i>pyrimethamine 25 mg tab</i> | TIER 1 | |
| <i>quinine sulfate</i> | <i>quinine sulfate 324 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|--------|--------------------------|
| ANTIMALARIAL COMBINATIONS | | | |
| <i>atovaquone-proguanil hcl</i> | <i>atovaquone-proguanil hcl 250-100 mg tab</i> | TIER 1 | |
| <i>atovaquone-proguanil hcl</i> | <i>atovaquone-proguanil hcl 62.5-25 mg tab</i> | TIER 1 | |
| ANTHELMINTICS | | | |
| <i>albendazole</i> | <i>albendazole 200 mg tab</i> | TIER 1 | |
| <i>ivermectin</i> | <i>ivermectin 3 mg tab</i> | TIER 1 | |
| <i>praziquantel</i> | <i>praziquantel 600 mg tab</i> | TIER 1 | |
| ANTI-INFECTIVE AGENTS - MISC. | | | |
| IMPAVIDO | IMPAVIDO 50 MG CAP <i>miltefosine</i> | TIER 3 | |
| LIKMEZ | LIKMEZ 500 MG/5ML SUSPENSION <i>metronidazole</i> | TIER 3 | PA, QL (200 PER FILL(S)) |
| <i>metronidazole</i> | <i>metronidazole (250 mg tab, 375 mg cap)</i> | TIER 1 | |
| <i>metronidazole</i> | <i>metronidazole 500 mg tab</i> | TIER 1 | |
| <i>pentamidine isethionate</i> | <i>pentamidine isethionate 300 mg recon soln</i> | TIER 1 | |
| PRIMSOL | PRIMSOL 50 MG/5ML SOLUTION <i>trimethoprim hcl</i> | TIER 3 | |
| <i>tinidazole</i> | <i>tinidazole (250 mg tab, 500 mg tab)</i> | TIER 1 | |
| <i>trimethoprim</i> | <i>trimethoprim 100 mg tab</i> | TIER 1 | |
| XIFAXAN | XIFAXAN (200 MG TAB, 550 MG TAB) <i>rifaximin</i> | TIER 2 | |
| MONOBACTAMS | | | |
| CAYSTON | CAYSTON 75 MG RECON SOLN <i>aztreonam lysine</i> | SP-P | QL (3 PER 1 DAY), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|--------|---|
| LINCOSAMIDES | | | |
| CLEOCIN PHOSPHATE | CLEOCIN PHOSPHATE (300 MG/2ML SOLUTION, 600 MG/4ML SOLUTION, 900 MG/6ML SOLUTION) <i>clindamycin phosphate</i> | TIER 1 | GA |
| <i>clindamycin hcl</i> | <i>clindamycin hcl (75 mg cap, 150 mg cap, 300 mg cap)</i> | TIER 1 | |
| <i>clindamycin palmitate hcl</i> | <i>clindamycin palmitate hcl 75 mg/5ml recon soln</i> | TIER 1 | |
| <i>clindamycin phosphate</i> | <i>clindamycin phosphate (300 mg/2ml solution, 600 mg/4ml solution, 900 mg/6ml solution)</i> | TIER 1 | |
| OXAZOLIDINONES | | | |
| <i>linezolid</i> | <i>linezolid (100 mg/5ml recon susp, 600 mg tab)</i> | TIER 1 | |
| SIVEXTRO | SIVEXTRO 200 MG TAB <i>tedizolid phosphate</i> | TIER 3 | |
| GLYCOPEPTIDES | | | |
| FIRVANQ | FIRVANQ (25 MG/ML RECON SOLN, 50 MG/ML RECON SOLN) <i>vancomycin hcl</i> | TIER 2 | QL (450 PER 23 DAY(S)), GA |
| <i>vancomycin hcl</i> | <i>vancomycin hcl (25 mg/ml recon soln, 50 mg/ml recon soln)</i> | TIER 2 | QL (450 PER 23 DAY(S)) |
| <i>vancomycin hcl</i> | <i>vancomycin hcl (5 gm recon soln, 750 mg recon soln)</i> | TIER 1 | |
| LEPROSTATICS | | | |
| <i>dapsone</i> | <i>dapsone (25 mg tab, 100 mg tab)</i> | TIER 1 | |
| ANTIPROTOZOAL AGENTS | | | |
| ALINIA | ALINIA 100 MG/5ML RECON SUSP <i>nitazoxanide</i> | TIER 3 | QL (540 PER 10 DAY(S)), PA-QL (QL varies) |
| <i>atovaquone</i> | <i>atovaquone 750 mg/5ml suspension</i> | TIER 1 | |
| <i>nitazoxanide</i> | <i>nitazoxanide 500 mg tab</i> | TIER 1 | QL (20 PER 10 DAY(S)), PA-QL (QL varies) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|--------|-----------------------|
| URINARY ANTI-INFECTIVES | | | |
| <i>fosfomycin tromethamine</i> | <i>fosfomycin tromethamine 3 gm packet</i> | TIER 1 | |
| <i>methenamine hippurate</i> | <i>methenamine hippurate 1 gm tab</i> | TIER 1 | |
| <i>nitrofurantoin</i> | <i>nitrofurantoin (25 mg/5ml suspension, 50 mg/10ml suspension)</i> | TIER 1 | |
| <i>nitrofurantoin macrocrystal</i> | <i>nitrofurantoin macrocrystal (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |
| <i>nitrofurantoin monohyd macro</i> | <i>nitrofurantoin monohyd macro 100 mg cap</i> | TIER 1 | |
| ANTI-INFECTIVE MISC. - COMBINATIONS | | | |
| <i>sulfamethoxazole-trimethoprim</i> | <i>sulfamethoxazole-trimethoprim (200-40 mg/5ml suspension, 400-80 mg tab, 800-160 mg tab, 800-160 mg/20ml suspension)</i> | TIER 1 | |
| <i>sulfatrim pediatric</i> | <i>sulfatrim pediatric 200-40 mg/5ml suspension</i> | TIER 1 | |
| VACCINES | | | |
| VIRAL VACCINES | | | |
| ABRYSVO | ABRYSVO 120 MCG/0.5ML RECON SOLN rsv pre-fusion f a&b protein vaccine recombinant | TIER 2 | QL (1 PER LIFETIME) |
| AFLURIA | AFLURIA SUSPENSION influenza virus vaccine split | TIER 2 | PV |
| AFLURIA PRESERVATIVE FREE | AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR influenza virus vaccine split preservative free | TIER 2 | PV |
| AFLURIA QUADRIVALENT | AFLURIA QUADRIVALENT (0.25 ML SUSP PRSYR, 0.5 ML SUSP PRSYR, SUSPENSION) influenza virus vaccine split quadrivalent | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|--|--------|--|
| AREXVY | AREXVY 120 MCG/0.5ML RECON SUSP <i>rsv pre-fusion f3 protein (rsvpref3) vac recomb adjuvanted</i> | TIER 2 | QL (1 PER LIFETIME), AL (At least 60 yrs old) |
| AUDENZ | AUDENZ (0.5MLPRSYR, EMULSION) <i>influenza a (h5n1) tissue- cultured subunit adjuvant vaccine</i> | TIER 2 | |
| COMIRNATY | COMIRNATY (30 SUSP PRSYR, 30 SUSPENSION) <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| ENGERIX-B | ENGERIX-B (10 MCG/0.5ML SUSP PRSYR, 20 MCG/ML SUSP PRSYR, 20 MCG/ML SUSPENSION) <i>hepatitis b vaccine (recomb)</i> | TIER 2 | |
| FLUAD | FLUAD 0.5 ML SUSP PRSYR <i>influenza virus vaccine types a & b surface antigen adjuvant</i> | TIER 2 | PV |
| FLUAD QUADRIVALENT | FLUAD QUADRIVALENT 0.5 ML PRSYR <i>influenza virus vacc types a & b surf antigen adjuvant quad</i> | TIER 2 | PV |
| FLUARIX | FLUARIX 0.5 ML SUSP PRSYR <i>influenza virus vaccine split preservative free</i> | TIER 2 | PV |
| FLUARIX QUADRIVALENT | FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR <i>influenza virus vaccine split quadrivalent</i> | TIER 2 | PV |
| FLUBLOK | FLUBLOK 0.5 ML SOLN PRSYR <i>influenza virus vaccine recombinant hemagglutinin (ha)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------|---|--------|-----------------------|
| FLUBLOK QUADRIVALENT | FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR <i>influenza virus vac recomb hemagglutinin (ha) quadrivalent</i> | TIER 2 | PV |
| FLUCELVAX | FLUCELVAX (0.5MLSUSPPRSYR, SUSPENSION) <i>influenza virus vaccine tissue-cultured subunit</i> | TIER 2 | PV |
| FLUCELVAX QUADRIVALENT | FLUCELVAX QUADRIVALENT (0.5MLSUSPPRSYR, SUSPENSION) <i>influenza virus vaccine tissue-cultured subunit quadrivalent</i> | TIER 2 | PV |
| FLULAVAL | FLULAVAL 0.5 ML SUSP PRSYR <i>influenza virus vaccine split preservative free</i> | TIER 2 | PV |
| FLULAVAL QUADRIVALENT | FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR <i>influenza virus vaccine split quadrivalent</i> | TIER 2 | PV |
| FLUMIST | FLUMIST LIQUID <i>influenza virus vaccine live</i> | TIER 2 | PV |
| FLUMIST QUADRIVALENT | FLUMIST QUADRIVALENT SUSPENSION <i>influenza virus vaccine live quadrivalent</i> | TIER 2 | PV |
| FLUZONE | FLUZONE (0.5MLSUSPPRSYR, SUSPENSION) <i>influenza virus vaccine split preservative free</i> | TIER 2 | PV |
| FLUZONE HIGH- DOSE | FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR <i>influenza virus vaccine split high-dose preservative free</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|-----------------------|
| FLUZONE HIGH-DOSE QUADRIVALENT | FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR <i>influenza virus vac split high-dose quad preservative free</i> | TIER 2 | PV |
| FLUZONE QUADRIVALENT | FLUZONE QUADRIVALENT (0.5 ML SUSP PRSYR, 0.5 ML SUSPENSION, SUSPENSION) <i>influenza virus vaccine split quadrivalent</i> | TIER 2 | |
| GARDASIL 9 | GARDASIL 9 (9SUSPENSION, 9SUSPPRSYR) <i>human papillomavirus (hvp) 9-valent recombinant vaccine</i> | TIER 2 | AL (9 to 45 yrs old) |
| HAVRIX | HAVRIX (720 U/0.5ML SUSPENSION, 1440 U/ML SUSPENSION) <i>hepatitis a vaccine</i> | TIER 2 | |
| HEPLISAV-B | HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR <i>hepatitis b vaccine recombinant adjuvanted</i> | TIER 2 | |
| IPOL | IPOL INJECTABLE <i>poliovirus vaccine, ipv</i> | TIER 2 | |
| JANSSEN COVID-19 VACCINE | JANSSEN COVID-19 VACCINE 0.5 ML SUSPENSION <i>covid-19 (sars-cov-2) adenovirus vaccine</i> | TIER 2 | |
| MODERNA COVID-19 BIVAL 6M-5Y | MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (moderna)</i> | TIER 2 | |
| MODERNA COVID-19 BIVAL BOOSTER | MODERNA COVID-19 BIVAL BOOSTER 50 MCG/0.5ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (moderna)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| MODERNA COVID-19 BIVALENT | MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (moderna)</i> | TIER 2 | |
| MODERNA COVID-19 VAC (BOOSTER) | MODERNA COVID-19 VAC (BOOSTER) 50 MCG/0.5ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| MODERNA COVID-19 VAC 6M-11Y | MODERNA COVID-19 VAC 6M-11Y (25 SUSP PRSYR, 25 SUSPENSION) <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| MODERNA COVID-19 VACC 6-11Y | MODERNA COVID-19 VACC 6-11Y 50 MCG/0.5ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| MODERNA COVID-19 VACC 6M-5Y | MODERNA COVID-19 VACC 6M-5Y 25 MCG/0.25ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| MODERNA COVID-19 VACCINE | MODERNA COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| MRESVIA | MRESVIA 50 MCG/0.5ML SUSP PRSYR <i>rsv mrna pre-fusion virus vaccine</i> | TIER 2 | |
| NOVAVAX COVID-19 VACCINE | NOVAVAX COVID-19 VACCINE (5 SUSP PRSYR, 5 SUSPENSION) <i>covid-19 (sars-cov-2) subunit (spike) protein virus vaccine</i> | TIER 2 | |
| PFIZER COVID-19 BIVAL 6MO-4YR | PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (pfizer)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| PFIZER COVID-19 VAC BIVAL 5-11 | PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (pfizer)</i> | TIER 2 | |
| PFIZER COVID-19 VAC BIVALENT | PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION <i>covid-19 mrna bivalent virus vaccine (pfizer)</i> | TIER 2 | |
| PFIZER COVID-19 VAC-TRIS 5-11Y | PFIZER COVID-19 VAC-TRIS 5-11Y (10 MCG/0.2ML SUSPENSION, 10 MCG/0.3ML SUSPENSION) <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| PFIZER COVID-19 VAC-TRIS 6M-4Y | PFIZER COVID-19 VAC-TRIS 6M-4Y (3 MCG/0.2ML SUSPENSION, 3 MCG/0.3ML SUSPENSION) <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| PFIZER-BIONT COVID-19 VAC-TRIS | PFIZER-BIONT COVID-19 VAC-TRIS 30 MCG/0.3ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| PFIZER-BIONTECH COVID-19 VACC | PFIZER-BIONTECH COVID-19 VACC 30 MCG/0.3ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| PREHEVBRIO | PREHEVBRIO 10 MCG/ML SUSPENSION <i>hepatitis b vaccine 3-antigen recombinant</i> | TIER 2 | |
| RECOMBIVAX HB | RECOMBIVAX HB (5 MCG/0.5ML SUSP PRSYR, 5 MCG/0.5ML SUSPENSION, 10 MCG/ML SUSP PRSYR, 10 MCG/ML SUSPENSION, 40 MCG/ML SUSPENSION) <i>hepatitis b vaccine (recomb)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------|---|--------|---|
| ROTARIX | ROTARIX (RECONSUSP, SUSPENSION) <i>rotavirus vaccine, live oral</i> | TIER 2 | |
| ROTATEQ | ROTATEQ SOLUTION <i>rotavirus vaccine, live oral pentavalent</i> | TIER 2 | |
| SHINGRIX | SHINGRIX 50 MCG/0.5ML RECON SUSP <i>zoster vaccine recombinant adjuvanted</i> | TIER 2 | QL (2 PER LIFETIME), AL (At least 19 yrs old), PV |
| SPIKEVAX | SPIKEVAX (50 SUSP PRSYR, 50 SUSPENSION) <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| SPIKEVAX COVID-19 VACCINE | SPIKEVAX COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i> | TIER 2 | |
| VAQTA | VAQTA (25 UNIT/0.5ML SUSPENSION, 50 UNIT/ML SUSPENSION) <i>hepatitis a vaccine</i> | TIER 2 | |
| VARIVAX | VARIVAX 1350 PFU/0.5ML RECON SUSP <i>varicella virus vaccine live</i> | TIER 2 | |
| VIRAL VACCINE COMBINATIONS | | | |
| M-M-R II | M-M-R II RECON SOLN <i>measles, mumps & rubella virus vaccines</i> | TIER 2 | PV |
| PRIORIX | PRIORIX RECON SUSP <i>measles, mumps & rubella virus vaccines</i> | TIER 2 | |
| PROQUAD | PROQUAD RECON SUSP <i>measles-mumps-rubella-varicella virus vaccines</i> | TIER 2 | PV |
| TWINRIX | TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR <i>hepatitis a (inactivated)-hepatitis b (recombinant) vaccines</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------|---|--------|-----------------------|
| BACTERIAL VACCINES | | | |
| ACTHIB | ACTHIB RECON SOLN <i>haemophilus b polysac conj vac</i> | TIER 2 | |
| BCG VACCINE | BCG VACCINE 50 MG RECON SOLN <i>bcg vaccine</i> | SP-M | S |
| BEXSERO | BEXSERO SUSP PRSYR <i>meningococcal vac group b (recombant omv adjuvanted)</i> | TIER 2 | |
| CAPVAXIVE | CAPVAXIVE 0.5 ML SOLN PRSYR <i>pneumococcal 21-valent conjugate vaccine</i> | TIER 2 | |
| HIBERIX | HIBERIX 10 MCG RECON SOLN <i>haemophilus b polysac conj vac</i> | TIER 2 | PV |
| MENACTRA | MENACTRA SOLUTION <i>meningococcal (a,c,y&w-135) polysacch diphth conj vaccine</i> | TIER 2 | PV |
| MENQUADFI | MENQUADFI SOLUTION <i>meningococcal (a,c,y&w-135) polysacch tetanus conj vaccine</i> | TIER 2 | PV |
| MENVEO | MENVEO (RECONSOLN, SOLUTION) <i>meningococcal (a,c,y&w-135) oligosaccharide conjugate vac</i> | TIER 2 | |
| PEDVAX HIB | PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION <i>haemophilus b polysac conj vac</i> | TIER 2 | |
| PENBRAYA | PENBRAYA RECON SUSP <i>mening (a,c,y&w) polysacch tetanus conj-mening b (rcmb) vacc</i> | TIER 2 | |
| PNEUMOVAX 23 | PNEUMOVAX 23 (23 25 SOLN PRSYR, 23 25 SOLUTION) <i>pneumococcal vac polyvalent</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|--------|-----------------------|
| PREVNAR 13 | PREVNAR 13 SUSPENSION <i>pneumococcal 13-valent conjugate vaccine</i> | TIER 2 | |
| PREVNAR 20 | PREVNAR 20 0.5 ML SUSP PRSYR <i>pneumococcal 20-valent conjugate vaccine</i> | TIER 2 | |
| TRUMENBA | TRUMENBA SUSP PRSYR <i>meningococcal group b vaccine (recombinant)</i> | TIER 2 | |
| VAXNEUVANCE | VAXNEUVANCE 0.5 ML SUSP PRSYR <i>pneumococcal 15-valent conjugate vaccine</i> | TIER 2 | |
| TOXOIDS | | | |
| TOXOID COMBINATIONS | | | |
| ADACEL | ADACEL 5-2-15.5 LF- MCG/0.5 SUSPENSION <i>tetanus toxoid-diphtheria- acellular pertussis adsorb (tdap)</i> | TIER 2 | |
| BOOSTRIX | BOOSTRIX (SUSP PRSYR, SUSPENSION) <i>tetanus toxoid-diphtheria- acellular pertussis adsorb (tdap)</i> | TIER 2 | PV |
| DAPTACEL | DAPTACEL 23-15-5 SUSPENSION <i>diphtheria, acellular pertussis & tetanus toxoids</i> | TIER 2 | |
| DIPHTHERIA- TETANUS TOXOIDS DT | DIPHTHERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION <i>diphtheria-tetanus toxoids (dt)</i> | TIER 2 | |
| INFANRIX | INFANRIX 25-58-10 SUSPENSION <i>diphtheria, acellular pertussis & tetanus toxoids</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| KINRIX | KINRIX (0.5MLSUSPPRSYR, SUSPENSION) <i>diph-tetanus tox ad-acell pertussis & polio virus, ipv vac</i> | TIER 2 | PV |
| PEDIARIX | PEDIARIX SUSP PRSYR <i>diph-tetanus tox-acell pert- hepatitis b recomb-polio ipv vac</i> | TIER 2 | PV |
| PENTACEL | PENTACEL RECON SUSP <i>diph-ac pert-tet tox ad-polio ipv-haemophil b poly vac</i> | TIER 2 | |
| QUADRACEL | QUADRACEL (0.5MLSUSPPRSYR, SUSPENSION) <i>diph-tetanus tox ad-acell pertussis & polio virus, ipv vac</i> | TIER 2 | |
| TDVAX | TDVAX 2-2 LF/0.5ML SUSPENSION <i>tetanus-diphtheria toxoids (td)</i> | TIER 2 | |
| TENIVAC | TENIVAC 5-2 LFU INJECTABLE <i>tetanus-diphtheria toxoids (td)</i> | TIER 2 | PV |
| TETANUS- DIPHTHERIA TOXOIDS TD | TETANUS-DIPHTHERIA TOXOIDS TD 2-2 LF/0.5ML SUSPENSION <i>tetanus-diphtheria toxoids (td)</i> | TIER 2 | |
| VAXELIS | VAXELIS (SUSPENSION, SUSPPRSYR) <i>diph-tet tox-acell pert ad- polio ipv-hib-hepatitis b recomb</i> | TIER 2 | |
| PASSIVE IMMUNIZING AND TREATMENT AGENTS | | | |
| IMMUNE SERUMS | | | |
| ALYGLO | ALYGLO (5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION) <i>immune globulin (human)- stwk</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------|---|------|-----------------------|
| ASCENIV | ASCENIV 5 GM/50ML SOLUTION <i>immune globulin (human)-slra</i> | SP-M | PA, S |
| BIVIGAM | BIVIGAM (5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| CARIMUNE NF | CARIMUNE NF (6 GM RECON SOLN, 12 GM RECON SOLN) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| CUTAQUIG | CUTAQUIG (1 GM/6ML SOLUTION, 1.65 GM/10ML SOLUTION, 2 GM/12ML SOLUTION, 3.3 GM/20ML SOLUTION, 4 GM/24ML SOLUTION, 8 GM/48ML SOLUTION) <i>immune globulin (human)-hipp</i> | SP-M | PA, S |
| CUVITRU | CUVITRU (1 GM/5ML SOLUTION, 2 GM/10ML SOLUTION, 4 GM/20ML SOLUTION, 8 GM/40ML SOLUTION, 10 GM/50ML SOLUTION) <i>immune globulin (human) subcutaneous</i> | SP-M | PA, S |
| CYTOGAM | CYTOGAM 50 MG/ML SOLUTION <i>cytomegalovirus immune globulin (human)</i> | SP-M | S |
| FLEBOGAMMA DIF | FLEBOGAMMA DIF (0.5 GM/10ML SOLUTION, 2.5 GM/50ML SOLUTION, 5 GM/100ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 10 GM/200ML SOLUTION, 20 GM/200ML SOLUTION, 20 GM/400ML SOLUTION) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| GAMASTAN | GAMASTAN INJECTABLE <i>immune globulin (human) im</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------|---|------|-----------------------|
| GAMMAGARD | GAMMAGARD (1 GM/10ML SOLUTION, 2.5 GM/25ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION, 30 GM/300ML SOLUTION) <i>immune globulin (human) iv or subcutaneous</i> | SP-M | PA, S |
| GAMMAGARD S/D LESS IGA | GAMMAGARD S/D LESS IGA (5 GM RECON SOLN, 10 GM RECON SOLN) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| GAMMAKED | GAMMAKED (1 GM/10ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION) <i>immune globulin (human) iv or subcutaneous</i> | SP-M | PA, S |
| GAMMAPLEX | GAMMAPLEX (5 GM/100ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 10 GM/200ML SOLUTION, 20 GM/200ML SOLUTION, 20 GM/400ML SOLUTION) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| GAMUNEX-C | GAMUNEX-C (1 GM/10ML SOLUTION, 2.5 GM/25ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION, 40 GM/400ML SOLUTION) <i>immune globulin (human) iv or subcutaneous</i> | SP-M | PA, S |
| HEPAGAM B | HEPAGAM B 312 UNIT/ML SOLUTION <i>hepatitis b immune globulin (human)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|--|------|-----------------------|
| HIZENTRA | HIZENTRA (1 GM/5ML SOLN PRSYR, 1 GM/5ML SOLUTION, 2 GM/10ML SOLN PRSYR, 2 GM/10ML SOLUTION, 4 GM/20ML SOLN PRSYR, 4 GM/20ML SOLUTION, 10 GM/50ML SOLN PRSYR, 10 GM/50ML SOLUTION) <i>immune globulin (human) subcutaneous</i> | SP-M | PA, S |
| HYPERHEP B | HYPERHEP B (110 UNIT/0.5ML SOLN PRSYR, 220 UNIT/ML SOLN PRSYR, 220 UNIT/ML SOLUTION) <i>hepatitis b immune globulin (human)</i> | SP-M | S |
| HYPERRHO S/D | HYPERRHO S/D (250 SOLN PRSYR, 1500 SOLN PRSYR) <i>rho d immune globulin (human)</i> | SP-M | S |
| MICRHOGAM ULTRA-FILTERED PLUS | MICRHOGAM ULTRA-FILTERED PLUS 250 UNIT SOLN PRSYR <i>rho d immune globulin (human)</i> | SP-M | S |
| NABI-HB | NABI-HB 312 UNIT/ML SOLUTION <i>hepatitis b immune globulin (human)</i> | SP-M | S |
| OCTAGAM | OCTAGAM (1 GM/20ML SOLUTION, 2 GM/20ML SOLUTION, 2.5 GM/50ML SOLUTION, 5 GM/100ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 10 GM/200ML SOLUTION, 20 GM/200ML SOLUTION, 25 GM/500ML SOLUTION, 30 GM/300ML SOLUTION) <i>immune globulin (human) iv</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------|---|------|-----------------------|
| PANZYGA | PANZYGA (1 GM/10ML SOLUTION, 2.5 GM/25ML SOLUTION, 5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION, 30 GM/300ML SOLUTION) <i>immune globulin (human)-ifas</i> | SP-M | PA, S |
| PRIVIGEN | PRIVIGEN (5 GM/50ML SOLUTION, 10 GM/100ML SOLUTION, 20 GM/200ML SOLUTION, 40 GM/400ML SOLUTION) <i>immune globulin (human) iv</i> | SP-M | PA, S |
| RHOGAM ULTRA-FILTERED PLUS | RHOGAM ULTRA-FILTERED PLUS 1500 UNIT SOLN PRSYR <i>rho d immune globulin (human)</i> | SP-M | S |
| RHOPHYLAC | RHOPHYLAC 1500 UNIT/2ML SOLN PRSYR <i>rho d immune globulin (human)</i> | SP-M | S |
| VARIZIG | VARIZIG 125 UNIT/1.2ML SOLUTION <i>varicella-zoster immune globulin (human)</i> | SP-M | S |
| WINRHO SDF | WINRHO SDF (1500 UNIT/1.3ML SOLUTION, 2500 UNIT/2.2ML SOLUTION, 5000 UNIT/4.4ML SOLUTION, 15000 UNIT/13ML SOLUTION) <i>rho d immune globulin (human)</i> | SP-M | S |
| XEMBIFY | XEMBIFY (1 GM/5ML SOLUTION, 2 GM/10ML SOLUTION, 4 GM/20ML SOLUTION, 10 GM/50ML SOLUTION) <i>immune globulin (human)-klhw</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|------------------------------|
| ANTIVIRAL MONOCLONAL ANTIBODIES | | | |
| BEYFORTUS | BEYFORTUS (50 MG/0.5ML SOLN PRSYR, 100 MG/ML SOLN PRSYR) <i>nirsevimab-alip</i> | TIER 2 | AL (Up to 2 yrs old) |
| SYNAGIS | SYNAGIS (50 MG/0.5ML SOLUTION, 100 MG/ML SOLUTION) <i>palivizumab</i> | SP-M | PA, QL (5 PER 6 MONTH(S)), S |
| PASSIVE IMMUNIZING AGENTS - COMBINATIONS | | | |
| HYQVIA | HYQVIA (2.5 GM/25ML KIT, 5 GM/50ML KIT, 10 GM/100ML KIT, 20 GM/200ML KIT, 30 GM/300ML KIT) <i>immune globulin (human)-hyaluronidase (human recombinant)</i> | SP-M | PA, S |
| ALLERGENIC EXTRACTS/BIOLOGICALS MISC | | | |
| ALLERGENIC EXTRACTS | | | |
| PALFORZIA (12 MG DAILY DOSE) | PALFORZIA (12 MG DAILY DOSE) 2 X 1 MG & 10 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (120 MG DAILY DOSE) | PALFORZIA (120 MG DAILY DOSE) 20 MG & 100 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (160 MG DAILY DOSE) | PALFORZIA (160 MG DAILY DOSE) 3 X 20 MG & 100 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (20 MG DAILY DOSE) | PALFORZIA (20 MG DAILY DOSE) 20 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|-------|------------------------------|
| PALFORZIA (200 MG DAILY DOSE) | PALFORZIA (200 MG DAILY DOSE) 2 X 100 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (240 MG DAILY DOSE) | PALFORZIA (240 MG DAILY DOSE) 2 X 20 MG & 2 X 100 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (3 MG DAILY DOSE) | PALFORZIA (3 MG DAILY DOSE) 3 X 1 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (300 MG MAINTENANCE) | PALFORZIA (300 MG MAINTENANCE) 300 MG PACKET <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (30 PER 30 DAY(S)), S |
| PALFORZIA (300 MG TITRATION) | PALFORZIA (300 MG TITRATION) 300 MG PACKET <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (30 PER 30 DAY(S)), S |
| PALFORZIA (40 MG DAILY DOSE) | PALFORZIA (40 MG DAILY DOSE) 2 X 20 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (6 MG DAILY DOSE) | PALFORZIA (6 MG DAILY DOSE) 6 X 1 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA (80 MG DAILY DOSE) | PALFORZIA (80 MG DAILY DOSE) 4 X 20 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| PALFORZIA INITIAL ESCALATION | PALFORZIA INITIAL ESCALATION 0.5 & 1 & 1.5 & 3 & 6 MG CSPK <i>peanut (arachis hypogaea) allergen powder-dnfp</i> | SP-NP | PA, QL (1 PER FILL(S)), S |
| ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES | | | |
| ALKYLATING AGENTS | | | |
| BELRAPZO | BELRAPZO 100 MG/4ML SOLUTION <i>bendamustine hcl</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|--|--------|-----------------------|
| <i>bendamustine hcl</i> | <i>bendamustine hcl (25 mg recon soln, 100 mg recon soln, 100 mg/4ml solution)</i> | SP-M | S |
| BENDEKA | BENDEKA 100 MG/4ML SOLUTION <i>bendamustine hcl</i> | SP-M | S |
| <i>busulfan</i> | <i>busulfan 6 mg/ml solution</i> | SP-M | S |
| BUSULFEX | BUSULFEX 6 MG/ML SOLUTION <i>busulfan</i> | SP-M | S, GA |
| <i>carboplatin</i> | <i>carboplatin (50 mg/5ml solution, 150 mg/15ml solution, 450 mg/45ml solution, 600 mg/60ml solution)</i> | SP-M | S |
| <i>cisplatin</i> | <i>cisplatin (50 mg recon soln, 50 mg/50ml solution, 100 mg/100ml solution, 200 mg/200ml solution)</i> | SP-M | S |
| KEMOPLAT | KEMOPLAT 50 MG/50ML SOLUTION <i>cisplatin</i> | SP-M | S, GA |
| MYLERAN | MYLERAN 2 MG TAB <i>busulfan</i> | TIER 2 | |
| <i>oxaliplatin</i> | <i>oxaliplatin (50 mg recon soln, 50 mg/10ml solution, 100 mg recon soln, 100 mg/20ml solution, 200 mg/40ml solution)</i> | SP-M | S |
| <i>paraplatin</i> | <i>paraplatin (50 mg/5ml solution, 150 mg/15ml solution, 450 mg/45ml solution, 600 mg/60ml solution, 1000 mg/100ml solution)</i> | SP-M | S |
| TEPADINA | TEPADINA (15 MG RECON SOLN, 100 MG RECON SOLN) <i>thiotepa</i> | SP-M | S, GA |
| <i>thiotepa</i> | <i>thiotepa (15 mg recon soln, 100 mg recon soln)</i> | SP-M | S |
| TREANDA | TREANDA (25 MG RECON SOLN, 100 MG RECON SOLN) <i>bendamustine hcl</i> | SP-M | S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| VIVIMUSTA | VIVIMUSTA 100 MG/4ML SOLUTION <i>bendamustine hcl</i> | SP-M | S |
| ZEPZELCA | ZEPZELCA 4 MG RECON SOLN <i>lurbinectedin</i> | SP-M | S |
| NITROGEN MUSTARDS AND RELATED ANALOGUES | | | |
| CYCLOPHOSPHAMIDE | CYCLOPHOSPHAMIDE (1 GM/2ML SOLUTION, 1 GM/5ML SOLUTION, 2 GM RECON SOLN, 2 GM/10ML SOLUTION, 2 GM/4ML SOLUTION, 500 MG RECON SOLN, 500 MG/2.5ML SOLUTION, 500 MG/5ML SOLUTION, 500 MG/ML SOLUTION, 1000 MG/10ML SOLUTION, 2000 MG/20ML SOLUTION) <i>cyclophosphamide</i> | SP-M | S |
| CYCLOPHOSPHAMIDE | CYCLOPHOSPHAMIDE (25 MG CAP, 25 MG TAB, 50 MG CAP, 50 MG TAB) <i>cyclophosphamide</i> | TIER 1 | |
| <i>cyclophosphamide</i> | <i>cyclophosphamide 1 gm recon soln</i> | SP-M | S |
| EVOMELA | EVOMELA 50 MG RECON SOLN <i>melfhalan hcl</i> | SP-M | S |
| HEPZATO W/50MM CATHETER | HEPZATO W/50MM CATHETER 50 MG RECON SOLN <i>melfhalan hcl</i> | SP-M | PA, S |
| HEPZATO W/62MM CATHETER | HEPZATO W/62MM CATHETER 50 MG RECON SOLN <i>melfhalan hcl</i> | SP-M | PA, S |
| IFEX | IFEX (1 GM RECON SOLN, 3 GM RECON SOLN) <i>ifosfamide</i> | SP-M | S |
| <i>ifosfamide</i> | <i>ifosfamide (1 gm recon soln, 1 gm/20ml solution, 3 gm recon soln, 3 gm/60ml solution)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|---|--------|--|
| LEUKERAN | LEUKERAN 2 MG TAB <i>chlorambucil</i> | TIER 2 | |
| MELPHALAN | MELPHALAN 2 MG TAB <i>melphalan</i> | TIER 1 | |
| PEPAXTO | PEPAXTO 20 MG RECON SOLN <i>melphalan flufenamide hcl</i> | SP-M | S |
| NITROSOUREAS | | | |
| BICNU | BICNU 100 MG RECON SOLN <i>carmustine</i> | SP-M | S, GA |
| CARMUSTINE | CARMUSTINE (100 MG RECON SOLN, 300 MG RECON SOLN) <i>carmustine</i> | SP-M | S |
| GLEOSTINE | GLEOSTINE (10 MG CAP, 40 MG CAP, 100 MG CAP) <i>lomustine</i> | SP-P | S |
| GLIADEL WAFER | GLIADEL WAFER 7.7 MG WAFER <i>carmustine in polifeprosan</i> | SP-M | S |
| ZANOSAR | ZANOSAR 1 GM RECON SOLN <i>streptozocin</i> | SP-M | S |
| IMIDAZOTETRAZINES | | | |
| TEMODAR | TEMODAR (5 MG CAP, 20 MG CAP, 100 MG CAP, 140 MG CAP, 180 MG CAP, 250 MG CAP) <i>temozolomide</i> | SP-NP | S, GA |
| TEMODAR | TEMODAR 100 MG RECON SOLN <i>temozolomide</i> | SP-M | S |
| <i>temozolomide</i> | <i>temozolomide (5 mg cap, 20 mg cap, 100 mg cap, 140 mg cap, 180 mg cap, 250 mg cap)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| TETRAHYDROISOQUINOLINES | | | |
| YONDELIS | YONDELIS 1 MG RECON SOLN <i>trabectedin</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|---|------|--|
| ANTINEOPLASTIC - ANTI-HER2 AGENTS | | | |
| HERCEPTIN | HERCEPTIN 150 MG RECON SOLN <i>trastuzumab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| HERZUMA | HERZUMA (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-pkrb</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| KANJINTI | KANJINTI (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-anns</i> | SP-M | S |
| MARGENZA | MARGENZA 250 MG/10ML SOLUTION <i>margetuximab-cmkb</i> | SP-M | S |
| OGIVRI | OGIVRI (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-dkst</i> | SP-M | S |
| ONTRUZANT | ONTRUZANT (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-dttb</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| PERJETA | PERJETA 420 MG/14ML SOLUTION <i>pertuzumab</i> | SP-M | S |
| TRAZIMERA | TRAZIMERA (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-qyyp</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| TUKYSA | TUKYSA (50 MG TAB, 150 MG TAB) <i>tucatinib</i> | SP-P | QL (4 PER 1 DAY), S |
| ANTINEOPLASTIC ANTIBIOTICS | | | |
| <i>adriamycin</i> | <i>adriamycin (2 mg/ml solution, 10 mg recon soln, 50 mg recon soln)</i> | SP-M | S |
| <i>bleomycin sulfate</i> | <i>bleomycin sulfate (15 recon soln, 30 recon soln)</i> | SP-M | S |
| COSMEGEN | COSMEGEN 0.5 MG RECON SOLN <i>dactinomycin</i> | SP-M | S, GA |
| <i>dactinomycin</i> | <i>dactinomycin 0.5 mg recon soln</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|------|-----------------------|
| <i>daunorubicin hcl</i> | <i>daunorubicin hcl (20 mg/4ml solution, 50 mg/10ml solution)</i> | SP-M | S |
| DOXIL | DOXIL 2 MG/ML SUSPENSION <i>doxorubicin hcl liposomal</i> | SP-M | S, GA |
| <i>doxorubicin hcl</i> | <i>doxorubicin hcl (2 mg/ml solution, 10 mg recon soln, 50 mg recon soln)</i> | SP-M | S |
| <i>doxorubicin hcl liposomal</i> | <i>doxorubicin hcl liposomal 2 mg/ml suspension</i> | SP-M | S |
| ELLENCE | ELLENCE (50 MG/25ML SOLUTION, 200 MG/100ML SOLUTION) <i>epirubicin hcl</i> | SP-M | S, GA |
| <i>epirubicin hcl</i> | <i>epirubicin hcl (50 mg/25ml solution, 200 mg/100ml solution)</i> | SP-M | S |
| IDAMYCIN PFS | IDAMYCIN PFS (5 MG/5ML SOLUTION, 10 MG/10ML SOLUTION, 20 MG/20ML SOLUTION) <i>idarubicin hcl</i> | SP-M | S, GA |
| <i>idarubicin hcl</i> | <i>idarubicin hcl (5 mg/5ml solution, 10 mg/10ml solution, 20 mg/20ml solution)</i> | SP-M | S |
| JELMYTO | JELMYTO 80 (2 X 40) MG RECON SOLN <i>mitomycin</i> | SP-M | S |
| <i>mitomycin</i> | <i>mitomycin (5 mg recon soln, 20 mg recon soln, 40 mg recon soln)</i> | SP-M | S |
| <i>mitoxantrone hcl</i> | <i>mitoxantrone hcl (20 mg/10ml conc, 25 mg/12.5ml conc, 30 mg/15ml conc)</i> | SP-M | S |
| <i>mutamycin</i> | <i>mutamycin (5 mg recon soln, 20 mg recon soln, 40 mg recon soln)</i> | SP-M | S |
| <i>valubicin</i> | <i>valubicin 40 mg/ml solution</i> | SP-M | S |
| VALSTAR | VALSTAR 40 MG/ML SOLUTION <i>valubicin</i> | SP-M | S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------|---|------|---|
| ANTINEOPLASTIC ENZYMES | | | |
| ASPARLAS | ASPARLAS 3750 UNIT/5ML SOLUTION <i>calaspargase pegol-mknl</i> | SP-M | S |
| ERWINASE | ERWINASE 10000 UNIT RECON SOLN <i>asparaginase erwinia chrysanthemi</i> | SP-M | S |
| ERWINAZE | ERWINAZE 10000 UNIT RECON SOLN <i>asparaginase erwinia chrysanthemi</i> | SP-M | S |
| ONCASPAR | ONCASPAR 750 UNIT/ML SOLUTION <i>pegaspargase</i> | SP-M | S |
| RYLAZE | RYLAZE 10 MG/0.5ML SOLUTION <i>asparaginase erwinia chrysanthemi (recombinant)-rywn</i> | SP-M | S |
| ANTIMETABOLITES | | | |
| <i>adrucil</i> | <i>adrucil 2.5 gm/50ml solution</i> | SP-M | S |
| ALIMTA | ALIMTA (100 MG RECON SOLN, 500 MG RECON SOLN) <i>pemetrexed disodium</i> | SP-M | S, GA |
| ARRANON | ARRANON 5 MG/ML SOLUTION <i>nelarabine</i> | SP-M | S, GA |
| <i>azacitidine</i> | <i>azacitidine 100 mg recon susp</i> | SP-M | S |
| <i>capecitabine</i> | <i>capecitabine 150 mg tab</i> | SP-P | QL (4 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>capecitabine</i> | <i>capecitabine 500 mg tab</i> | SP-P | QL (10 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>cladribine</i> | <i>cladribine 10 mg/10ml solution</i> | SP-M | S |
| <i>clofarabine</i> | <i>clofarabine 1 mg/ml solution</i> | SP-M | S |
| CLOLAR | CLOLAR 1 MG/ML SOLUTION <i>clofarabine</i> | SP-M | S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|---|------|-----------------------|
| <i>cytarabine (pf)</i> | <i>cytarabine (pf) (20 mg/ml solution, 100 mg/ml solution)</i> | SP-M | S |
| CYTARABINE | CYTARABINE 20 MG/ML SOLUTION <i>cytarabine</i> | SP-M | S |
| DACOGEN | DACOGEN 50 MG RECON SOLN <i>decitabine</i> | SP-M | S, GA |
| <i>decitabine</i> | <i>decitabine 50 mg recon soln</i> | SP-M | S |
| FLOXURIDINE | FLOXURIDINE 0.5 GM RECON SOLN <i>floxuridine</i> | SP-M | S |
| <i>fludarabine phosphate</i> | <i>fludarabine phosphate (25 mg/ml solution, 50 mg recon soln, 50 mg/2ml solution)</i> | SP-M | S |
| <i>fluorouracil</i> | <i>fluorouracil (1 gm/20ml solution, 2.5 gm/50ml solution, 5 gm/100ml solution, 500 mg/10ml solution)</i> | SP-M | S |
| FOLOTYN | FOLOTYN (20 MG/ML SOLUTION, 40 MG/2ML SOLUTION) <i>pralatrexate</i> | SP-M | S |
| <i>gemcitabine hcl</i> | <i>gemcitabine hcl (1 gm recon soln, 1 gm/10ml solution, 1 gm/26.3ml solution, 1.5 gm/15ml solution, 2 gm recon soln, 2 gm/20ml solution, 2 gm/52.6ml solution, 200 mg recon soln, 200 mg/2ml solution, 200 mg/5.26ml solution)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|--------|--------------------------|
| INFUGEM | INFUGEM (1200-0.9 MG/120ML-% SOLUTION, 1300-0.9 MG/130ML-% SOLUTION, 1400-0.9 MG/140ML-% SOLUTION, 1500-0.9 MG/150ML-% SOLUTION, 1600-0.9 MG/160ML-% SOLUTION, 1700-0.9 MG/170ML-% SOLUTION, 1800-0.9 MG/180ML-% SOLUTION, 1900-0.9 MG/190ML-% SOLUTION, 2000-0.9 MG/200ML-% SOLUTION, 2200-0.9 MG/220ML-% SOLUTION) <i>gemcitabine hcl-sodium chloride</i> | SP-M | S |
| <i>mercaptopurine</i> | <i>mercaptopurine 50 mg tab</i> | TIER 1 | |
| <i>methotrexate sodium</i> | <i>methotrexate sodium (2.5 mg tab, 50 mg/2ml solution, 250 mg/10ml solution, 1000 mg/40ml solution)</i> | TIER 1 | |
| <i>methotrexate sodium (pf)</i> | <i>methotrexate sodium (pf) (1 gm/40ml solution, 50 mg/2ml solution, 250 mg/10ml solution)</i> | TIER 1 | |
| <i>methotrexate sodium</i> | <i>methotrexate sodium 1 gm recon soln</i> | SP-M | S |
| <i>nelarabine</i> | <i>nelarabine 5 mg/ml solution</i> | SP-M | S |
| ONUREG | ONUREG (200 MG TAB, 300 MG TAB) <i>azacitidine</i> | SP-P | QL (14 PER 28 DAY(S)), S |
| PEMETREXED | PEMETREXED (1 GM/40ML SOLUTION, 100 MG/4ML SOLUTION, 500 MG/20ML SOLUTION) <i>pemetrexed</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|--|
| PEMETREXED DISODIUM | PEMETREXED DISODIUM (1 GM/40ML SOLUTION, 100 MG RECON SOLN, 100 MG/4ML SOLUTION, 500 MG RECON SOLN, 500 MG/20ML SOLUTION, 750 MG RECON SOLN, 850 MG/34ML SOLUTION, 1000 MG RECON SOLN) <i>pemetrexed disodium</i> | SP-M | S |
| PEMETREXED DITROMETHAMINE | PEMETREXED DITROMETHAMINE (100 MG RECON SOLN, 500 MG RECON SOLN) <i>pemetrexed ditromethamine</i> | SP-M | S |
| PEMFEXY | PEMFEXY 500 MG/20ML SOLUTION <i>pemetrexed</i> | SP-M | S |
| PEMRYDI RTU | PEMRYDI RTU (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>pemetrexed disodium</i> | SP-M | S |
| PRALATREXATE | PRALATREXATE (20 MG/ML SOLUTION, 40 MG/2ML SOLUTION) <i>pralatrexate</i> | SP-M | S |
| PURIXAN | PURIXAN 2000 MG/100ML SUSPENSION <i>mercaptopurine</i> | SP-NP | PA, S |
| TABLOID | TABLOID 40 MG TAB <i>thioguanine</i> | TIER 2 | |
| VIDAZA | VIDAZA 100 MG RECON SUSP <i>azacitidine</i> | SP-M | S, GA |
| VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS | | | |
| ALYMSYS | ALYMSYS (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab-maly</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| AVASTIN | AVASTIN (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------|--|------|----------------------------|
| CYRAMZA | CYRAMZA (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>ramucirumab</i> | SP-M | S |
| FRUZAQLA | FRUZAQLA 1 MG CAP <i>fruquintinib</i> | SP-P | PA, QL (4 PER 1 DAY(S)), S |
| FRUZAQLA | FRUZAQLA 5 MG CAP <i>fruquintinib</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| INLYTA | INLYTA 1 MG TAB <i>axitinib</i> | SP-P | QL (8 PER 1 DAY), S |
| INLYTA | INLYTA 5 MG TAB <i>axitinib</i> | SP-P | QL (4 PER 1 DAY), S |
| LENVIMA (10 MG DAILY DOSE) | LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (1 PER 1 DAY), S |
| LENVIMA (12 MG DAILY DOSE) | LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (3 PER 1 DAY), S |
| LENVIMA (14 MG DAILY DOSE) | LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (2 PER 1 DAY), S |
| LENVIMA (18 MG DAILY DOSE) | LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (3 PER 1 DAY), S |
| LENVIMA (20 MG DAILY DOSE) | LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (2 PER 1 DAY), S |
| LENVIMA (24 MG DAILY DOSE) | LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (3 PER 1 DAY), S |
| LENVIMA (4 MG DAILY DOSE) | LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (1 PER 1 DAY), S |
| LENVIMA (8 MG DAILY DOSE) | LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK <i>lenvatinib mesylate</i> | SP-P | QL (2 PER 1 DAY), S |
| MVASI | MVASI (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab-awwb</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|------|--|
| VEGZELMA | VEGZELMA (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab-adcd</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| ZALTRAP | ZALTRAP (100 MG/4ML SOLUTION, 200 MG/8ML SOLUTION) <i>ziv-aflibercept</i> | SP-M | S |
| ZIRABEV | ZIRABEV (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab-bvzr</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-BCMA ANTIBODY-DRUG COMPLEX | | | |
| BLENREP | BLENREP 100 MG RECON SOLN <i>belantamab mafodotin-blmf</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CCR4 ANTIBODIES | | | |
| POTELIGEO | POTELIGEO 20 MG/5ML SOLUTION <i>mogamulizumab-kpkc</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD19 ANTIBODIES | | | |
| MONJUVI | MONJUVI 200 MG RECON SOLN <i>tafasitamab-cxix</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD19 ANTIBODY-DRUG COMPLEX | | | |
| ZYNLONTA | ZYNLONTA 10 MG RECON SOLN <i>loncastuximab tesirine-lpyl</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD20 ANTIBODIES | | | |
| ARZERRA | ARZERRA (100 MG/5ML CONC, 1000 MG/50ML CONC) <i>ofatumumab</i> | SP-M | S |
| GAZYVA | GAZYVA 1000 MG/40ML SOLUTION <i>obinutuzumab</i> | SP-M | S |
| RIABNI | RIABNI (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab-arrx</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|--|
| RITUXAN | RITUXAN (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab</i> | SP-M | QL (200 PER 30 DAYS), S, MN-PA (Medically Necessary Prior Authorization) |
| RUXIENCE | RUXIENCE (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab-pvvr</i> | SP-M | PA, S |
| TRUXIMA | TRUXIMA (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab-abbs</i> | SP-M | PA, S |
| ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS | | | |
| BLINCYTO | BLINCYTO 35 MCG RECON SOLN <i>blinatumomab</i> | SP-M | S |
| COLUMVI | COLUMVI (2.5 MG/2.5ML SOLUTION, 10 MG/10ML SOLUTION) <i>glofitamab-gxbm</i> | SP-M | S |
| ELREXFIO | ELREXFIO (44 MG/1.1ML SOLUTION, 76 MG/1.9ML SOLUTION) <i>elranatamab-bcmm</i> | SP-M | PA, S |
| EPKINLY | EPKINLY (4 SOLUTION, 48 SOLUTION) <i>epcoritamab-bysp</i> | SP-M | S |
| IMDELLTRA | IMDELLTRA (1 MG RECON SOLN, 10 MG RECON SOLN) <i>tarlatamab-dlle</i> | SP-M | S |
| KIMMTRAK | KIMMTRAK 100 MCG/0.5ML SOLUTION <i>tebentafusp-tebn</i> | SP-M | S |
| LUNSUMIO | LUNSUMIO (1 MG/ML SOLUTION, 30 MG/30ML SOLUTION) <i>mosunetuzumab-axgb</i> | SP-M | S |
| TALVEY | TALVEY (3 MG/1.5ML SOLUTION, 40 MG/ML SOLUTION) <i>talquetamab-tgvs</i> | SP-M | PA, S |
| TECVAYLI | TECVAYLI (30 MG/3ML SOLUTION, 153 MG/1.7ML SOLUTION) <i>teclistamab-cqyv</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|-----------------------|
| ANTINEOPLASTIC - ANTI-CD22 ANTIBODIES | | | |
| LUMOXITI | LUMOXITI 1 MG RECON SOLN <i>moxetumomab pasudotox-tdfk</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD22 ANTIBODY-DRUG COMPLEX | | | |
| BESPONSA | BESPONSA 0.9 MG RECON SOLN <i>inotuzumab ozogamicin</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD30 ANTIBODY-DRUG COMPLEX | | | |
| ADCETRIS | ADCETRIS 50 MG RECON SOLN <i>brentuximab vedotin</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD33 ANTIBODY-DRUG COMPLEX | | | |
| MYLOTARG | MYLOTARG 4.5 MG RECON SOLN <i>gemtuzumab ozogamicin</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD38 ANTIBODIES | | | |
| DARZALEX | DARZALEX (100 MG/5ML SOLUTION, 400 MG/20ML SOLUTION) <i>daratumumab</i> | SP-M | S |
| SARCLISA | SARCLISA (100 MG/5ML SOLUTION, 500 MG/25ML SOLUTION) <i>isatuximab-irfc</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CD79B ANTIBODY-DRUG COMPLEX | | | |
| POLIVY | POLIVY (30 MG RECON SOLN, 140 MG RECON SOLN) <i>polatuzumab vedotin-piiq</i> | SP-M | S |
| ANTINEOPLASTIC ANTIBODY-DRUG COMPLEXES | | | |
| ELAHERE | ELAHERE 100 MG/20ML SOLUTION <i>mirvetuximab soravtansine-gynx</i> | SP-M | S |
| ENHERTU | ENHERTU 100 MG RECON SOLN <i>fam-trastuzumab deruxtecan-nxki</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|------|-----------------------|
| KADCYLA | KADCYLA (100 MG RECON SOLN, 160 MG RECON SOLN) <i>ado-trastuzumab emtansine</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CLDN18.2 ANTIBODIES | | | |
| VYLOY | VYLOY 100 MG RECON SOLN <i>zolbetuximab-clzb</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-CTLA-4 ANTIBODIES | | | |
| IMJUDO | IMJUDO (25 MG/1.25ML SOLUTION, 300 MG/15ML SOLUTION) <i>tremelimumab-actl</i> | SP-M | S |
| YERVOY | YERVOY (50 MG/10ML SOLUTION, 200 MG/40ML SOLUTION) <i>ipilimumab</i> | SP-M | PA, S |
| ANTINEOPLASTIC - ANTI-GD2 ANTIBODIES | | | |
| DANYELZA | DANYELZA 40 MG/10ML SOLUTION <i>naxitamab-gqgk</i> | SP-M | S |
| UNITUXIN | UNITUXIN 17.5 MG/5ML SOLUTION <i>dinutuximab</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-NECTIN-4 ANTIBODY-DRUG COMPLEX | | | |
| PADCEV | PADCEV (20 MG RECON SOLN, 30 MG RECON SOLN) <i>enfortumab vedotin-ejfv</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-PD-1 ANTIBODIES | | | |
| JEMPERLI | JEMPERLI 500 MG/10ML SOLUTION <i>dostarlimab-gxly</i> | SP-M | S |
| KEYTRUDA | KEYTRUDA 100 MG/4ML SOLUTION <i>pembrolizumab</i> | SP-M | PA, S |
| LIBTAYO | LIBTAYO 350 MG/7ML SOLUTION <i>cemiplimab-rwlc</i> | SP-M | S |
| LOQTORZI | LOQTORZI 240 MG/6ML SOLUTION <i>toripalimab-tpzi</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|------|-----------------------|
| OPDIVO | OPDIVO (40 MG/4ML SOLUTION, 100 MG/10ML SOLUTION, 120 MG/12ML SOLUTION, 240 MG/24ML SOLUTION) <i>nivolumab</i> | SP-M | PA, S |
| TEVIMBRA | TEVIMBRA 100 MG/10ML SOLUTION <i>tislelizumab-jsgr</i> | P&T | S |
| ZYNYZ | ZYNYZ 500 MG/20ML SOLUTION <i>retifanlimab-dlwr</i> | SP-M | PA, S |
| ANTINEOPLASTIC -ANTIBODY FOR RADIOPHARMACEUTICAL THERAPY | | | |
| ZEVALIN Y-90 | ZEVALIN Y-90 3.2 MG/2ML KIT <i>ibritumomab tiuxetan for yttrium-90 (y-90)</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-PD-L1 ANTIBODIES | | | |
| BAVENCIO | BAVENCIO 200 MG/10ML SOLUTION <i>avelumab</i> | SP-M | PA, S |
| IMFINZI | IMFINZI (120 MG/2.4ML SOLUTION, 500 MG/10ML SOLUTION) <i>durvalumab</i> | SP-M | S |
| TECENTRIQ | TECENTRIQ (840 MG/14ML SOLUTION, 1200 MG/20ML SOLUTION) <i>atezolizumab</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-SLAMF7 ANTIBODIES | | | |
| EMPLICITI | EMPLICITI (300 MG RECON SOLN, 400 MG RECON SOLN) <i>elotuzumab</i> | SP-M | S |
| ANTINEOPLASTIC - ANTI-TF ANTIBODY-DRUG COMPLEX | | | |
| TIVDAK | TIVDAK 40 MG RECON SOLN <i>tisotumab vedotin-tftv</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|---|
| ANTINEOPLASTIC - MULTIPLE RECEPTOR ANTIBODIES | | | |
| RYBREVANT | RYBREVANT 350 MG/7ML SOLUTION <i>amivantamab-vmjw</i> | SP-M | S |
| ANTINEOPLASTIC - EGFR INHIBITORS | | | |
| ERBITUX | ERBITUX (100 MG/50ML SOLUTION, 200 MG/100ML SOLUTION) <i>cetuximab</i> | SP-M | S |
| <i>erlotinib hcl</i> | <i>erlotinib hcl (100 mg tab, 150 mg tab)</i> | SP-P | QL (1 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>erlotinib hcl</i> | <i>erlotinib hcl 25 mg tab</i> | SP-P | QL (2 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| EXKIVITY | EXKIVITY 40 MG CAP <i>mobocertinib succinate</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| <i>gefitinib</i> | <i>gefitinib 250 mg tab</i> | SP-P | QL (1 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| GILOTRIF | GILOTRIF (20 MG TAB, 30 MG TAB, 40 MG TAB) <i>afatinib dimaleate</i> | SP-P | QL (1 PER 1 DAY), S |
| IRESSA | IRESSA 250 MG TAB <i>gefitinib</i> | SP-NP | QL (1 PER 1 DAY), S, GA |
| LAZCLUZE | LAZCLUZE 240 MG TAB <i>lazertinib mesylate</i> | P&T | QL (30 TABLETS PER 30 DAY(S)), S |
| LAZCLUZE | LAZCLUZE 80 MG TAB <i>lazertinib mesylate</i> | P&T | QL (60 TABLETS PER 30 DAY(S)), S |
| PORTRAZZA | PORTRAZZA 800 MG/50ML SOLUTION <i>necitumumab</i> | SP-M | S |
| TAGRISSO | TAGRISSO (40 MG TAB, 80 MG TAB) <i>osimertinib mesylate</i> | SP-P | QL (1 PER 1 DAY), S |
| TARCEVA | TARCEVA (100 MG TAB, 150 MG TAB) <i>erlotinib hcl</i> | SP-NP | QL (1 PER 1 DAY), S, GA |
| TARCEVA | TARCEVA 25 MG TAB <i>erlotinib hcl</i> | SP-NP | QL (2 PER 1 DAY), S, GA |
| VECTIBIX | VECTIBIX (100 MG/5ML SOLUTION, 400 MG/20ML SOLUTION) <i>panitumumab</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|------------------------|
| VIZIMPRO | VIZIMPRO (15 MG TAB, 30 MG TAB, 45 MG TAB) <i>dacomitinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS | | | |
| DAURISMO | DAURISMO 100 MG TAB <i>glasdegib maleate</i> | SP-P | QL (1 PER 1 DAY), S |
| DAURISMO | DAURISMO 25 MG TAB <i>glasdegib maleate</i> | SP-P | QL (2 PER 1 DAY), S |
| ERIVEDGE | ERIVEDGE 150 MG CAP <i>vismodegib</i> | SP-P | QL (1 PER 1 DAY), S |
| ODOMZO | ODOMZO 200 MG CAP <i>sonidegib phosphate</i> | SP-P | QL (1 PER 1 DAY), S |
| ANTIADRENALS | | | |
| LYSODREN | LYSODREN 500 MG TAB <i>mitotane</i> | SP-P | S |
| ANTIANDROGENS | | | |
| <i>bicalutamide</i> | <i>bicalutamide 50 mg tab</i> | TIER 1 | |
| ERLEADA | ERLEADA 240 MG TAB <i>apalutamide</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| ERLEADA | ERLEADA 60 MG TAB <i>apalutamide</i> | SP-P | QL (4 PER 1 DAY), S |
| <i>flutamide</i> | <i>flutamide 125 mg cap</i> | TIER 1 | |
| <i>nilutamide</i> | <i>nilutamide 150 mg tab</i> | TIER 1 | |
| NUBEQA | NUBEQA 300 MG TAB <i>darolutamide</i> | SP-P | QL (4 PER 1 DAY), S |
| XTANDI | XTANDI (40 MG CAP, 40 MG TAB) <i>enzalutamide</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| XTANDI | XTANDI 80 MG TAB <i>enzalutamide</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| ANTIESTROGENS | | | |
| SOLTAMOX | SOLTAMOX 10 MG/5ML SOLUTION <i>tamoxifen citrate</i> | TIER 2 | PA |
| <i>tamoxifen citrate</i> | <i>tamoxifen citrate (10 mg tab, 20 mg tab)</i> | TIER 1 | PA, PV |
| <i>toremifene citrate</i> | <i>toremifene citrate 60 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| AROMATASE INHIBITORS | | | |
| <i>anastrozole</i> | <i>anastrozole 1 mg tab</i> | TIER 1 | PA |
| <i>exemestane</i> | <i>exemestane 25 mg tab</i> | TIER 1 | PA |
| <i>letrozole</i> | <i>letrozole 2.5 mg tab</i> | TIER 1 | |
| ESTROGENS-ANTINEOPLASTIC | | | |
| EMCYT | EMCYT 140 MG CAP <i>estramustine phosphate sodium</i> | SP-P | S |
| ESTROGEN RECEPTOR ANTAGONIST | | | |
| FASLODEX | FASLODEX 250 MG/5ML SOLN PRSYR <i>fulvestrant</i> | SP-M | S, GA |
| <i>fulvestrant</i> | <i>fulvestrant 250 mg/5ml soln prsy</i> | SP-M | S |
| SELECTIVE ESTROGEN RECEPTOR DEGRADERS | | | |
| ORSERDU | ORSERDU 345 MG TAB <i>elacestrant hydrochloride</i> | SP-P | QL (1 PER DAY(S)), S |
| ORSERDU | ORSERDU 86 MG TAB <i>elacestrant hydrochloride</i> | SP-P | QL (3 PER DAY(S)), S |
| PROGESTINS-ANTINEOPLASTIC | | | |
| <i>megestrol acetate</i> | <i>megestrol acetate (20 mg tab, 40 mg tab, 40 mg/ml suspension, 400 mg/10ml suspension, 800 mg/20ml suspension)</i> | TIER 1 | |
| LHRH ANALOGS | | | |
| CAMCEVI | CAMCEVI 42 MG PRSYR <i>leuprolide mesylate (6 month)</i> | SP-M | S |
| ELIGARD | ELIGARD (7.5 MG KIT, 22.5 MG KIT, 30 MG KIT, 45 MG KIT) <i>leuprolide acetate</i> | SP-M | S |
| LEUPROLIDE ACETATE (3 MONTH) | LEUPROLIDE ACETATE (3 MONTH) 22.5 MG INJECTABLE <i>leuprolide acetate (3 month)</i> | SP-M | S |
| <i>leuprolide acetate</i> | <i>leuprolide acetate 1 mg/0.2ml kit</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|--|
| LUPRON DEPOT (1-MONTH) | LUPRON DEPOT (1-MONTH) (3.75 MG KIT, 7.5 MG KIT) <i>leuprolide acetate</i> | SP-M | S |
| LUPRON DEPOT (3-MONTH) | LUPRON DEPOT (3-MONTH) (11.25 MG KIT, 22.5 MG KIT) <i>leuprolide acetate (3 month)</i> | SP-M | S |
| LUPRON DEPOT (4-MONTH) | LUPRON DEPOT (4-MONTH) 30 MG KIT <i>leuprolide acetate (4 month)</i> | SP-M | S |
| LUPRON DEPOT (6-MONTH) | LUPRON DEPOT (6-MONTH) 45 MG KIT <i>leuprolide acetate (6 month)</i> | SP-M | S |
| TRELSTAR MIXJECT | TRELSTAR MIXJECT (3.75 MG RECON SUSP, 11.25 MG RECON SUSP, 22.5 MG RECON SUSP) <i>triptorelin pamoate</i> | SP-M | S |
| VANTAS | VANTAS 50 MG KIT <i>histrelin acetate</i> | SP-M | S |
| ZOLADEX | ZOLADEX (3.6 MG IMPLANT, 10.8 MG IMPLANT) <i>goserelin acetate</i> | SP-M | S |
| GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS | | | |
| FIRMAGON (240 MG DOSE) | FIRMAGON (240 MG DOSE) 120 MG/VIAL RECON SOLN <i>degarelix acetate</i> | SP-M | S |
| FIRMAGON | FIRMAGON 80 MG RECON SOLN <i>degarelix acetate</i> | SP-M | S |
| ORGOVYX | ORGOVYX 120 MG TAB <i>relugolix</i> | SP-P | QL (1 PER 1 DAY), S |
| ANDROGEN BIOSYNTHESIS INHIBITORS | | | |
| <i>abiraterone acetate</i> | <i>abiraterone acetate 250 mg tab</i> | SP-P | QL (4 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>abiraterone acetate</i> | <i>abiraterone acetate 500 mg tab</i> | SP-P | QL (2 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|------|--------------------------|
| YONSA | YONSA 125 MG TAB <i>abiraterone acetate</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS | | | |
| AKEEGA | AKEEGA (50-500 MG TAB, 100-500 MG TAB) <i>niraparib tosylate- abiraterone acetate</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS | | | |
| WELIREG | WELIREG 40 MG TAB <i>belzutifan</i> | SP-P | QL (3 PER DAY(S)), S |
| ANTINEOPLASTIC - IMMUNOMODULATORS | | | |
| POMALYST | POMALYST (1 MG CAP, 2 MG CAP, 3 MG CAP, 4 MG CAP) <i>pomalidomide</i> | SP-P | QL (21 PER 28 DAY(S)), S |
| ANTINEOPLASTIC - BCL-2 INHIBITORS | | | |
| VENCLEXTA | VENCLEXTA (10 MG TAB, 50 MG TAB) <i>venetoclax</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| VENCLEXTA | VENCLEXTA 100 MG TAB <i>venetoclax</i> | SP-P | QL (6 PER 1 DAY(S)), S |
| VENCLEXTA STARTING PACK | VENCLEXTA STARTING PACK 10 & 50 & 100 MG TAB THPK <i>venetoclax</i> | SP-P | QL (1 PER 28 DAY(S)), S |
| ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS | | | |
| AYVAKIT | AYVAKIT (25 MG TAB, 50 MG TAB, 100 MG TAB, 200 MG TAB, 300 MG TAB) <i>avapritinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| LARTRUVO | LARTRUVO (190 MG/19ML SOLUTION, 500 MG/50ML SOLUTION) <i>olaratumab</i> | SP-M | S |
| MITOTIC INHIBITORS | | | |
| ABRAXANE | ABRAXANE 100 MG RECON SUSP <i>paclitaxel protein-bound particles</i> | SP-M | S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|---|------|---|
| <i>docetaxel</i> | <i>docetaxel (20 mg/2ml solution, 20 mg/ml conc, 80 mg/4ml conc, 80 mg/8ml solution, 160 mg/16ml solution, 160 mg/8ml conc)</i> | SP-M | S |
| <i>eribulin mesylate</i> | <i>eribulin mesylate 1 mg/2ml solution</i> | SP-M | S |
| ETOPOPHOS | ETOPOPHOS 100 MG RECON SOLN <i>etoposide phosphate</i> | SP-M | S |
| <i>etoposide</i> | <i>etoposide (1 gm/50ml solution, 100 mg/5ml solution, 500 mg/25ml solution)</i> | SP-M | S |
| ETOPOSIDE | ETOPOSIDE 50 MG CAP <i>etoposide</i> | SP-P | S, GA |
| <i>etoposide</i> | <i>etoposide 50 mg cap</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| HALAVEN | HALAVEN 1 MG/2ML SOLUTION <i>eribulin mesylate</i> | SP-M | S, GA |
| IXEMPRA KIT | IXEMPRA KIT (KIT 15 MG RECON SOLN, KIT 45 MG RECON SOLN) <i>ixabepilone</i> | SP-M | S |
| JEVTANA | JEVTANA 60 MG/1.5ML SOLUTION <i>cabazitaxel</i> | SP-M | S |
| MARQIBO | MARQIBO 5 MG/31ML SUSPENSION <i>vincristine sulfate liposome</i> | SP-M | S |
| NAVELBINE | NAVELBINE (10 MG/ML SOLUTION, 50 MG/5ML SOLUTION) <i>vinorelbine tartrate</i> | SP-M | S, GA |
| <i>paclitaxel</i> | <i>paclitaxel (30 mg/5ml conc, 100 mg/16.7ml conc, 150 mg/25ml conc, 300 mg/50ml conc)</i> | SP-M | S |
| <i>paclitaxel protein-bound part</i> | <i>paclitaxel protein-bound part 100 mg recon susp</i> | SP-M | S |
| TAXOTERE | TAXOTERE 20 MG/ML CONC <i>docetaxel</i> | SP-M | S, GA |
| TENIPOSIDE | TENIPOSIDE 10 MG/ML SOLUTION <i>teniposide</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|---|------|----------------------------------|
| <i>toposar</i> | <i>toposar (1 gm/50ml solution, 100 mg/5ml solution, 500 mg/25ml solution)</i> | SP-M | S |
| VINBLASTINE SULFATE | VINBLASTINE SULFATE 1 MG/ML SOLUTION <i>vinblastine sulfate</i> | SP-M | S |
| <i>vincasar pfs</i> | <i>vincasar pfs 1 mg/ml solution</i> | SP-M | S |
| VINCRISTINE SULFATE | VINCRISTINE SULFATE (1 MG/ML SOLUTION, 2 MG/2ML SOLUTION) <i>vincristine sulfate</i> | SP-M | S, GA |
| <i>vinorelbine tartrate</i> | <i>vinorelbine tartrate (10 mg/ml solution, 50 mg/5ml solution)</i> | SP-M | S |
| ANTINEOPLASTIC - AKT INHIBITORS | | | |
| TRUQAP | TRUQAP (160 MG TAB THPK, 200 MG TAB THPK) <i>capivasertib</i> | SP-P | PA, QL (1 PACK PER 28 DAY(S)), S |
| TRUQAP | TRUQAP (160 MG TAB, 200 MG TAB) <i>capivasertib</i> | SP-P | PA, QL (4 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - ALK INHIBITORS | | | |
| ALECENSA | ALECENSA 150 MG CAP <i>alectinib hcl</i> | SP-P | QL (8 PER 1 DAY(S)), S |
| ALUNBRIG | ALUNBRIG (90 MG TAB, 180 MG TAB) <i>brigatinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| ALUNBRIG | ALUNBRIG 30 MG TAB <i>brigatinib</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| ALUNBRIG | ALUNBRIG 90 & 180 MG TAB THPK <i>brigatinib</i> | SP-P | QL (1 PER 30 DAY(S)), S |
| LORBRENA | LORBRENA 100 MG TAB <i>lorlatinib</i> | SP-P | QL (1 PER 1 DAY), S |
| LORBRENA | LORBRENA 25 MG TAB <i>lorlatinib</i> | SP-P | QL (3 PER 1 DAY), S |
| XALKORI | XALKORI (20 MG CAP SPRINK, 50 MG CAP SPRINK, 200 MG CAP, 250 MG CAP) <i>crizotinib</i> | SP-P | QL (4 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|-------|--------------------------|
| XALKORI | XALKORI 150 MG CAP SPRINK <i>crizotinib</i> | SP-P | QL (6 PER 1 DAY(S)), S |
| ZYKADIA | ZYKADIA 150 MG TAB <i>ceritinib</i> | SP-P | QL (3 PER 1 DAY(S)), S |
| CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS | | | |
| IBRANCE | IBRANCE (75 MG CAP, 75 MG TAB, 100 MG CAP, 100 MG TAB, 125 MG CAP, 125 MG TAB) <i>palbociclib</i> | SP-P | QL (21 PER 28 DAY(S)), S |
| KISQALI (200 MG DOSE) | KISQALI (200 MG DOSE) 200 MG TAB THPK <i>ribociclib succinate</i> | SP-P | QL (21 PER 28 DAY(S)), S |
| KISQALI (400 MG DOSE) | KISQALI (400 MG DOSE) 200 MG TAB THPK <i>ribociclib succinate</i> | SP-P | QL (1.5 PER 1 DAY), S |
| KISQALI (600 MG DOSE) | KISQALI (600 MG DOSE) 200 MG TAB THPK <i>ribociclib succinate</i> | SP-P | QL (63 PER 28 DAY(S)), S |
| VERZENIO | VERZENIO (50 MG TAB, 100 MG TAB, 150 MG TAB, 200 MG TAB) <i>abemaciclib</i> | SP-NP | QL (2 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS | | | |
| BELEODAQ | BELEODAQ 500 MG RECON SOLN <i>belinostat</i> | SP-M | S |
| FARYDAK | FARYDAK (10 MG CAP, 15 MG CAP, 20 MG CAP) <i>panobinostat lactate</i> | SP-P | QL (6 PER 21 DAY(S)), S |
| ISTODAX | ISTODAX 10 MG RECON SOLN <i>romidepsin</i> | SP-M | S, GA |
| ROMIDEPSIN | ROMIDEPSIN (10 MG RECON SOLN, 27.5 MG/5.5ML SOLUTION) <i>romidepsin</i> | SP-M | S |
| ZOLINZA | ZOLINZA 100 MG CAP <i>vorinostat</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS | | | |
| BOSULIF | BOSULIF (100 MG CAP, 100 MG TAB) <i>bosutinib</i> | SP-P | QL (3 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|--|
| BOSULIF | BOSULIF (400 MG TAB, 500 MG TAB) <i>bosutinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| BOSULIF | BOSULIF 50 MG CAP <i>bosutinib</i> | SP-P | QL (1 PER DAY(S)), S |
| <i>dasatinib</i> | <i>dasatinib</i> (70 mg tab, 80 mg tab, 100 mg tab, 140 mg tab) | SP-P | QL (30 TABLETS PER 30 DAY(S)), S |
| <i>dasatinib</i> | <i>dasatinib</i> 20 mg tab | SP-P | QL (90 TABLETS PER 30 DAY(S)) |
| <i>dasatinib</i> | <i>dasatinib</i> 50 mg tab | SP-P | QL (30 TABLETS PER 30 DAY(S)) |
| ICLUSIG | ICLUSIG (10 MG TAB, 15 MG TAB, 30 MG TAB, 45 MG TAB) <i>ponatinib hcl</i> | SP-P | QL (1 PER 1 DAY), S |
| <i>imatinib mesylate</i> | <i>imatinib mesylate</i> 100 mg tab | SP-P | QL (4 TABLETS PER DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>imatinib mesylate</i> | <i>imatinib mesylate</i> 400 mg tab | SP-P | QL (60 TABLETS PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| SCEMBLIX | SCEMBLIX (20 MG TAB, 40 MG TAB) <i>asciminib hcl</i> | SP-P | PA, QL (2 PER DAY(S)), S |
| SCEMBLIX | SCEMBLIX 100 MG TAB <i>asciminib hcl</i> | SP-P | PA, QL (4 TABS PER DAY(S)), S |
| SPRYCEL | SPRYCEL (70 MG TAB, 80 MG TAB, 100 MG TAB, 140 MG TAB) <i>dasatinib</i> | SP-P | QL (1 PER 1 DAY), S, GA |
| SPRYCEL | SPRYCEL 20 MG TAB <i>dasatinib</i> | SP-P | QL (90 TABLETS PER 30 DAY(S)), S, GA |
| SPRYCEL | SPRYCEL 50 MG TAB <i>dasatinib</i> | SP-P | QL (30 TABLETS PER 30 DAY(S)), S, GA |
| TASIGNA | TASIGNA (50 MG CAP, 150 MG CAP, 200 MG CAP) <i>nilotinib hcl</i> | SP-P | QL (4 PER 1 DAY), S |
| ANTINEOPLASTIC - BRAF KINASE INHIBITORS | | | |
| BRAFTOVI | BRAFTOVI 75 MG CAP <i>encorafenib</i> | SP-P | QL (6 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|-------------------------------|
| OJEMDA | OJEMDA 100 MG TAB <i>tovorafenib</i> | SP-P | QL (24 TABS PER 28 DAY(S)), S |
| OJEMDA | OJEMDA 25 MG/ML RECON SUSP <i>tovorafenib</i> | SP-P | QL (96 ML PER 28 DAY(S)), S |
| TAFINLAR | TAFINLAR (50 MG CAP, 75 MG CAP) <i>dabrafenib mesylate</i> | SP-P | QL (4 PER 1 DAY), S |
| TAFINLAR | TAFINLAR 10 MG TAB SOL <i>dabrafenib mesylate</i> | SP-P | QL (30 PER 1 DAY(S)), S |
| ZELBORAF | ZELBORAF 240 MG TAB <i>vemurafenib</i> | SP-P | QL (8 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - BTK INHIBITORS | | | |
| BRUKINSA | BRUKINSA 80 MG CAP <i>zanubrutinib</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| CALQUENCE | CALQUENCE (100 MG CAP, 100 MG TAB) <i>acalabrutinib maleate</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| IMBRUVICA | IMBRUVICA (70 MG CAP, 420 MG TAB) <i>ibrutinib</i> | SP-P | QL (1 PER 1 DAY), S |
| IMBRUVICA | IMBRUVICA 140 MG CAP <i>ibrutinib</i> | SP-P | QL (3 PER DAY(S)), S |
| IMBRUVICA | IMBRUVICA 140 MG TAB <i>ibrutinib</i> | SP-P | QL (1 PER DAY(S)), S |
| IMBRUVICA | IMBRUVICA 280 MG TAB <i>ibrutinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| IMBRUVICA | IMBRUVICA 70 MG/ML SUSPENSION <i>ibrutinib</i> | SP-P | QL (180 MLS PER 30 DAY(S)), S |
| JAYPIRCA | JAYPIRCA 100 MG TAB <i>pirtobrutinib</i> | SP-P | QL (3 PER DAY(S)), S |
| JAYPIRCA | JAYPIRCA 50 MG TAB <i>pirtobrutinib</i> | SP-P | QL (1 PER DAY(S)), S |
| ANTINEOPLASTIC - FGFR KINASE INHIBITORS | | | |
| BALVERSA | BALVERSA 3 MG TAB <i>erdafitinib</i> | SP-P | QL (3 PER 1 DAY(S)), S |
| BALVERSA | BALVERSA 4 MG TAB <i>erdafitinib</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| BALVERSA | BALVERSA 5 MG TAB <i>erdafitinib</i> | SP-P | QL (1 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|---------------------------------------|
| LYTGOBI (12 MG DAILY DOSE) | LYTGOBI (12 MG DAILY DOSE) 4 MG TAB THPK <i>futibatinib</i> | P&T | S |
| LYTGOBI (16 MG DAILY DOSE) | LYTGOBI (16 MG DAILY DOSE) 4 MG TAB THPK <i>futibatinib</i> | P&T | S |
| LYTGOBI (20 MG DAILY DOSE) | LYTGOBI (20 MG DAILY DOSE) 4 MG TAB THPK <i>futibatinib</i> | P&T | S |
| PEMAZYRE | PEMAZYRE (4.5 MG TAB, 9 MG TAB, 13.5 MG TAB) <i>pemigatinib</i> | SP-P | QL (1 PER 1 DAY), S |
| TRUSELTIQ (100MG DAILY DOSE) | TRUSELTIQ (100MG DAILY DOSE) 100 MG CAP THPK <i>infigratinib phosphate</i> | SP-P | QL (21 PER 28 DAY(S)), S |
| TRUSELTIQ (125MG DAILY DOSE) | TRUSELTIQ (125MG DAILY DOSE) 100 & 25 MG CAP THPK <i>infigratinib phosphate</i> | SP-P | QL (42 PER 28 DAY(S)), S |
| TRUSELTIQ (50MG DAILY DOSE) | TRUSELTIQ (50MG DAILY DOSE) 25 MG CAP THPK <i>infigratinib phosphate</i> | SP-P | QL (42 PER 28 DAY(S)), S |
| TRUSELTIQ (75MG DAILY DOSE) | TRUSELTIQ (75MG DAILY DOSE) 25 MG CAP THPK <i>infigratinib phosphate</i> | SP-P | QL (63 PER 28 DAY(S)), S |
| ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS | | | |
| OGSIVEO | OGSIVEO 100 MG TAB <i>nirogacestat hydrobromide</i> | SP-P | PA, QL (60 TAB PER 30 DAY(S)), S |
| OGSIVEO | OGSIVEO 150 MG TAB <i>nirogacestat hydrobromide</i> | SP-P | PA, QL (60 TABLETS PER 30 DAY(S)), S |
| OGSIVEO | OGSIVEO 50 MG TAB <i>nirogacestat hydrobromide</i> | SP-P | PA, QL (180 TABLETS PER 30 DAY(S)), S |
| ANTINEOPLASTIC - KRAS INHIBITORS | | | |
| KRAZATI | KRAZATI 200 MG TAB <i>adagrasib</i> | SP-P | QL (6 PER 1 DAY), S |
| LUMAKRAS | LUMAKRAS 120 MG TAB <i>sotorasib</i> | SP-P | QL (8 PER DAY(S)), S |
| LUMAKRAS | LUMAKRAS 320 MG TAB <i>sotorasib</i> | SP-P | QL (3 PER DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|--|
| ANTINEOPLASTIC - MTOR KINASE INHIBITORS | | | |
| AFINITOR | AFINITOR (5 MG TAB, 7.5 MG TAB, 10 MG TAB) <i>everolimus</i> | SP-NP | QL (30 TABLETS PER 30 DAY(S)), S, GA |
| AFINITOR | AFINITOR 2.5 MG TAB <i>everolimus</i> | SP-NP | QL (60 PER 30 DAYS), S, GA |
| AFINITOR DISPERZ | AFINITOR DISPERZ (2 MG TAB SOL, 5 MG TAB SOL) <i>everolimus</i> | SP-NP | QL (2 PER 1 DAY(S)), S, GA |
| AFINITOR DISPERZ | AFINITOR DISPERZ 3 MG TAB SOL <i>everolimus</i> | SP-NP | QL (3 PER 1 DAY(S)), S, GA |
| <i>everolimus</i> | <i>everolimus (2 mg tab sol, 5 mg tab sol)</i> | SP-P | QL (2 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>everolimus</i> | <i>everolimus (5 mg tab, 7.5 mg tab, 10 mg tab)</i> | SP-P | QL (30 TABLETS PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>everolimus</i> | <i>everolimus 2.5 mg tab</i> | SP-P | QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>everolimus</i> | <i>everolimus 3 mg tab sol</i> | SP-P | QL (3 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| FYARRO | FYARRO 100 MG RECON SUSP <i>sirolimus protein-bound particles</i> | SP-M | S |
| <i>temsirolimus</i> | <i>temsirolimus 25 mg/ml solution</i> | SP-M | S |
| TORISEL | TORISEL 25 MG/ML SOLUTION <i>temsirolimus</i> | SP-M | S, GA |
| <i>torpenz</i> | <i>torpenz (5 mg tab, 7.5 mg tab, 10 mg tab)</i> | SP-NP | QL (30 TABLETS PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>torpenz</i> | <i>torpenz 2.5 mg tab</i> | SP-NP | QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|---|
| ANTINEOPLASTIC - MULTIKINASE INHIBITORS | | | |
| CABOMETYX | CABOMETYX 20 MG TAB <i>cabozantinib s-malate</i> | SP-P | QL (30 TABLETS PER 30 DAY(S)), S |
| CABOMETYX | CABOMETYX 40 MG TAB <i>cabozantinib s-malate</i> | SP-P | QL (30 TABLETS PER 30 DAY(S)), S |
| CABOMETYX | CABOMETYX 60 MG TAB <i>cabozantinib s-malate</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| CAPRELSA | CAPRELSA 100 MG TAB <i>vandetanib</i> | SP-P | QL (2 PER 1 DAY), S |
| CAPRELSA | CAPRELSA 300 MG TAB <i>vandetanib</i> | SP-P | QL (1 PER 1 DAY), S |
| COMETRIQ (100 MG DAILY DOSE) | COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT <i>cabozantinib s-malate</i> | SP-P | QL (2 PER 1 DAY), S |
| COMETRIQ (140 MG DAILY DOSE) | COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT <i>cabozantinib s-malate</i> | SP-P | QL (4 PER 1 DAY), S |
| COMETRIQ (60 MG DAILY DOSE) | COMETRIQ (60 MG DAILY DOSE) 20 MG KIT <i>cabozantinib s-malate</i> | SP-P | QL (3 PER 1 DAY), S |
| FOTIVDA | FOTIVDA (0.89 MG CAP, 1.34 MG CAP) <i>tivozanib hcl</i> | SP-P | QL (21 PER 28 DAY(S)), S |
| <i>lapatinib ditosylate</i> | <i>lapatinib ditosylate 250 mg tab</i> | SP-P | QL (180 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| NERLYNX | NERLYNX 40 MG TAB <i>neratinib maleate</i> | SP-P | QL (6 PER 1 DAY), S |
| NEXAVAR | NEXAVAR 200 MG TAB <i>sorafenib tosylate</i> | SP-NP | QL (4 PER 1 DAY), S, GA |
| <i>pazopanib hcl</i> | <i>pazopanib hcl 200 mg tab</i> | SP-P | QL (4 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| QINLOCK | QINLOCK 50 MG TAB <i>ripretinib</i> | SP-P | QL (3 PER 1 DAY), S |
| RYDAPT | RYDAPT 25 MG CAP <i>midostaurin</i> | SP-P | QL (8 PER 1 DAY), S |
| <i>sorafenib tosylate</i> | <i>sorafenib tosylate 200 mg tab</i> | SP-P | QL (4 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| STIVARGA | STIVARGA 40 MG TAB <i>regorafenib</i> | SP-P | QL (3 PER 1 DAY), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|-------|---|
| <i>sunitinib malate</i> | <i>sunitinib malate (12.5 mg cap, 25 mg cap, 37.5 mg cap, 50 mg cap)</i> | SP-P | QL (1 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| TURALIO | TURALIO 125 MG CAP <i>pexidartinib hcl</i> | SP-P | PA, QL (4 PER 1 DAY(S)), S |
| TURALIO | TURALIO 200 MG CAP <i>pexidartinib hcl</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| UKONIQ | UKONIQ 200 MG TAB <i>umbralisib tosylate</i> | SP-P | S |
| VANFLYTA | VANFLYTA (17.7 MG TAB, 26.5 MG TAB) <i>quizartinib dihydrochloride</i> | SP-P | QL (2 PER DAY(S)), S |
| VOTRIENT | VOTRIENT 200 MG TAB <i>pazopanib hcl</i> | SP-NP | QL (4 PER 1 DAY(S)), S, GA |
| XOSPATA | XOSPATA 40 MG TAB <i>gilteritinib fumarate</i> | SP-P | QL (3 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - MEK INHIBITORS | | | |
| COTELLIC | COTELLIC 20 MG TAB <i>cobimetinib fumarate</i> | SP-P | QL (63 PER 28 DAY(S)), S |
| KOSELUGO | KOSELUGO 10 MG CAP <i>selumetinib sulfate</i> | SP-P | PA, QL (8 PER DAY(S)), S |
| KOSELUGO | KOSELUGO 25 MG CAP <i>selumetinib sulfate</i> | SP-P | PA, QL (4 PER DAY(S)), S |
| MEKINIST | MEKINIST 0.05 MG/ML RECON SOLN <i>trametinib dimethyl sulfoxide</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| MEKINIST | MEKINIST 0.5 MG TAB <i>trametinib dimethyl sulfoxide</i> | SP-P | QL (3 PER 1 DAY), S |
| MEKINIST | MEKINIST 2 MG TAB <i>trametinib dimethyl sulfoxide</i> | SP-P | QL (1 PER 1 DAY), S |
| MEKTOVI | MEKTOVI 15 MG TAB <i>binimetinib</i> | SP-P | QL (6 PER 1 DAY), S |
| ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS | | | |
| TAZVERIK | TAZVERIK 200 MG TAB <i>tazemetostat hbr</i> | SP-P | QL (8 PER 1 DAY), S |
| ANTINEOPLASTIC - MET INHIBITORS | | | |
| TABRECTA | TABRECTA (150 MG TAB, 200 MG TAB) <i>capmatinib hcl</i> | SP-P | QL (4 PER 1 DAY), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|-------------------------------------|
| TEPMETKO | TEPMETKO 225 MG TAB <i>tepotinib hcl</i> | SP-P | QL (2 PER 1 DAY), S |
| ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS | | | |
| AUGTYRO | AUGTYRO 40 MG CAP <i>repotrectinib</i> | SP-P | PA, QL (8 PER 1 DAY(S)), S |
| ROZLYTREK | ROZLYTREK 100 MG CAP <i>entrectinib</i> | SP-P | QL (30 PER 30 DAY(S)), S |
| ROZLYTREK | ROZLYTREK 200 MG CAP <i>entrectinib</i> | SP-P | QL (90 PER 30 DAY(S)), S |
| ROZLYTREK | ROZLYTREK 50 MG PACKET <i>entrectinib</i> | SP-P | QL (2 PER DAY(S)), S |
| VITRAKVI | VITRAKVI 100 MG CAP <i>larotrectinib sulfate</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| VITRAKVI | VITRAKVI 20 MG/ML SOLUTION <i>larotrectinib sulfate</i> | SP-P | QL (300 PER 30 DAY(S)), S |
| VITRAKVI | VITRAKVI 25 MG CAP <i>larotrectinib sulfate</i> | SP-P | QL (6 PER 1 DAY(S)), S |
| ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS | | | |
| REZLIDHIA | REZLIDHIA 150 MG CAP <i>olutasidenib</i> | SP-NP | QL (2 PER 1 DAY(S)), S |
| TIBSOVO | TIBSOVO 250 MG TAB <i>ivosidenib</i> | SP-P | QL (2 PER 1 DAY), S |
| ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS | | | |
| IDHIFA | IDHIFA (50 MG TAB, 100 MG TAB) <i>enasidenib mesylate</i> | SP-P | QL (1 PER 1 DAY), S |
| ISOCITRATE DEHYDROGENASE 1 & 2 (IDH1 & IDH2) INHIBITORS | | | |
| VORANIGO | VORANIGO 10 MG TAB <i>vorasidenib</i> | P&T | QL (60 TABLETS PER 30 DAY(S)), S |
| VORANIGO | VORANIGO 40 MG TAB <i>vorasidenib</i> | P&T | QL (30 TABLETS PER 30 DAY(S)), S |
| OLIGONUCLEOTIDE TELOMERASE INHIBITORS | | | |
| RYTELO | RYTELO (47 MG RECON SOLN, 188 MG RECON SOLN) <i>imetelstat sodium</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|------|----------------------------------|
| POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS | | | |
| LYNPARZA | LYNPARZA (100 MG TAB, 150 MG TAB) <i>olaparib</i> | SP-P | QL (4 PER 1 DAY), S |
| RUBRACA | RUBRACA (200 MG TAB, 250 MG TAB, 300 MG TAB) <i>rucaparib camsylate</i> | SP-P | QL (4 PER 1 DAY), S |
| TALZENNA | TALZENNA (0.1 MG CAP, 0.35 MG CAP) <i>talazoparib tosylate</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| TALZENNA | TALZENNA (0.5 MG CAP, 0.75 MG CAP, 1 MG CAP) <i>talazoparib tosylate</i> | SP-P | QL (1 PER 1 DAY), S |
| TALZENNA | TALZENNA 0.25 MG CAP <i>talazoparib tosylate</i> | SP-P | QL (3 PER 1 DAY), S |
| ZEJULA | ZEJULA (200 MG TAB, 300 MG TAB) <i>niraparib tosylate</i> | SP-P | QL (1 PER 1 DAY(S)), S |
| ZEJULA | ZEJULA 100 MG CAP <i>niraparib tosylate</i> | SP-P | QL (3 PER 1 DAY(S)), S |
| ZEJULA | ZEJULA 100 MG TAB <i>niraparib tosylate</i> | SP-P | QL (1 PER DAY(S)), S |
| ANTINEOPLASTIC - RET INHIBITORS | | | |
| GAVRETO | GAVRETO 100 MG CAP <i>pralsetinib</i> | SP-P | QL (4 PER 1 DAY), S |
| RETEVMO | RETEVMO (80 MG TAB, 120 MG TAB, 160 MG TAB) <i>selpercatinib</i> | SP-P | QL (60 TABLETS PER 30 DAY(S)), S |
| RETEVMO | RETEVMO 40 MG CAP <i>selpercatinib</i> | SP-P | QL (2 PER 1 DAY), S |
| RETEVMO | RETEVMO 40 MG TAB <i>selpercatinib</i> | SP-P | QL (90 TABLETS PER 30 DAY(S)), S |
| RETEVMO | RETEVMO 80 MG CAP <i>selpercatinib</i> | SP-P | QL (4 PER 1 DAY), S |
| ANTINEOPLASTIC - PROTEASOME INHIBITORS | | | |
| BORTEZOMIB | BORTEZOMIB (1 MG RECON SOLN, 2.5 MG RECON SOLN, 3.5 MG RECON SOLN, 3.5 MG/1.4ML SOLUTION) <i>bortezomib</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|--------------------------------------|
| KYPROLIS | KYPROLIS (10 MG RECON SOLN, 30 MG RECON SOLN, 60 MG RECON SOLN) <i>carfilzomib</i> | SP-M | S |
| NINLARO | NINLARO (2.3 MG CAP, 3 MG CAP, 4 MG CAP) <i>ixazomib citrate</i> | SP-P | QL (3 PER 28 DAY(S)), S |
| VELCADE | VELCADE 3.5 MG RECON SOLN <i>bortezomib</i> | SP-M | S, GA |
| JANUS ASSOCIATED KINASE (JAK) INHIBITORS | | | |
| INREBIC | INREBIC 100 MG CAP <i>fedratinib hcl</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| JAKAFI | JAKAFI (5 MG TAB, 10 MG TAB, 15 MG TAB, 20 MG TAB, 25 MG TAB) <i>ruxolitinib phosphate</i> | SP-P | QL (2 PER 1 DAY), S |
| OJJAARA | OJJAARA (100 MG TAB, 150 MG TAB, 200 MG TAB) <i>momelotinib dihydrochloride</i> | SP-P | PA, QL (30 TABLETS PER 30 DAY(S)), S |
| VONJO | VONJO 100 MG CAP <i>pacritinib citrate</i> | SP-P | PA, QL (4 PER 1 DAY(S)), S |
| PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS | | | |
| ALIQOPA | ALIQOPA 60 MG RECON SOLN <i>copanlisib hcl</i> | SP-M | S |
| COPIKTRA | COPIKTRA (15 MG CAP, 25 MG CAP) <i>duvelisib</i> | SP-P | QL (2 PER 1 DAY), S |
| ITOVEBI | ITOVEBI 3 MG TAB <i>inavolisib</i> | P&T | QL (60 TABLETS PER 30 DAY(S)), S |
| ITOVEBI | ITOVEBI 9 MG TAB <i>inavolisib</i> | P&T | QL (30 TABLETS PER 30 DAY(S)), S |
| PIQRAY (200 MG DAILY DOSE) | PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK <i>alpelisib</i> | SP-P | QL (1 PER 1 DAY), S |
| PIQRAY (250 MG DAILY DOSE) | PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK <i>alpelisib</i> | SP-P | QL (2 PER 1 DAY), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|------|------------------------|
| PIQRAY (300 MG DAILY DOSE) | PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK <i>alpelisib</i> | SP-P | QL (2 PER 1 DAY), S |
| ZYDELIG | ZYDELIG (100 MG TAB, 150 MG TAB) <i>idelalisib</i> | SP-P | QL (2 PER 1 DAY(S)), S |
| ANTINEOPLASTIC - GENE THERAPY AGENTS | | | |
| ADSTILADRIN | ADSTILADRIN 300000000000 VP/ML SUSPENSION <i>nadofaragene firadenovec-vncg</i> | SP-M | PA, S |
| TOPOISOMERASE I INHIBITORS | | | |
| CAMPTOSAR | CAMPTOSAR (40 MG/2ML SOLUTION, 100 MG/5ML SOLUTION, 300 MG/15ML SOLUTION) <i>irinotecan hcl</i> | SP-M | S, GA |
| HYCAMTIN | HYCAMTIN (0.25 MG CAP, 1 MG CAP) <i>topotecan hcl</i> | SP-P | S |
| HYCAMTIN | HYCAMTIN 4 MG RECON SOLN <i>topotecan hcl</i> | SP-M | S, GA |
| IRINOTECAN HCL | IRINOTECAN HCL (40 MG/2ML SOLUTION, 100 MG/5ML SOLUTION, 300 MG/15ML SOLUTION, 500 MG/25ML SOLUTION) <i>irinotecan hcl</i> | SP-M | S |
| ONIVYDE | ONIVYDE 43 MG/10ML INJECTABLE <i>irinotecan hcl liposome</i> | SP-M | S |
| <i>topotecan hcl</i> | <i>topotecan hcl (4 mg recon soln, 4 mg/4ml solution)</i> | SP-M | S |
| TOPOISOMERASE I INHIBITORS - ANTIBODY-DRUG COMPLEX | | | |
| TRODELVY | TRODELVY 180 MG RECON SOLN <i>sacituzumab govitecan-hziy</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|--|------|--------------------------|
| ANTINEOPLASTIC - XPO1 INHIBITORS | | | |
| XPOVIO (100 MG ONCE WEEKLY) | XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (20 PER 28 DAY(S)), S |
| XPOVIO (100 MG ONCE WEEKLY) | XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK <i>selinexor</i> | SP-P | QL (8 PER 28 DAY(S)), S |
| XPOVIO (40 MG ONCE WEEKLY) | XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (8 PER 28 DAY(S)), S |
| XPOVIO (40 MG ONCE WEEKLY) | XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK <i>selinexor</i> | SP-P | QL (4 PER 28 DAY(S)), S |
| XPOVIO (40 MG TWICE WEEKLY) | XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (16 PER 30 DAY(S)), S |
| XPOVIO (40 MG TWICE WEEKLY) | XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK <i>selinexor</i> | SP-P | QL (8 PER 28 DAY(S)), S |
| XPOVIO (60 MG ONCE WEEKLY) | XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (12 PER 30 DAY(S)), S |
| XPOVIO (60 MG ONCE WEEKLY) | XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK <i>selinexor</i> | SP-P | QL (4 PER 28 DAY(S)), S |
| XPOVIO (60 MG TWICE WEEKLY) | XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (24 PER 30 DAY(S)), S |
| XPOVIO (80 MG ONCE WEEKLY) | XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (16 PER 28 DAY(S)), S |
| XPOVIO (80 MG ONCE WEEKLY) | XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK <i>selinexor</i> | SP-P | QL (8 PER 28 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|------|----------------------------|
| XPOVIO (80 MG TWICE WEEKLY) | XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK <i>selinexor</i> | SP-P | QL (32 PER 30 DAY(S)), S |
| ONCOLYTIC VIRAL AGENTS - HSV1 | | | |
| IMLYGIC | IMLYGIC (1000000 SUSPENSION, 100000000 SUSPENSION) <i>talimogene laherparepvec</i> | SP-M | S |
| ANTINEOPLASTIC RADIOPHARMACEUTICALS | | | |
| AZEDRA DOSIMETRIC | AZEDRA DOSIMETRIC 15 MCI/ML SOLUTION <i>iobenguane i 131</i> | SP-M | S |
| AZEDRA THERAPEUTIC | AZEDRA THERAPEUTIC 15 MCI/ML SOLUTION <i>iobenguane i 131</i> | SP-M | S |
| LUTATHERA | LUTATHERA 370 MBQ/ML SOLUTION <i>lutetium lu 177 dotatate</i> | SP-M | PA, S |
| PLUVICTO | PLUVICTO 1000 MBQ/ML SOLUTION <i>lutetium lu 177 vipivotide tetraxetan</i> | SP-M | PA, S |
| QUADRAMET | QUADRAMET 1850 MBQ/ML SOLUTION <i>samarium sm 153 lexidronam</i> | SP-M | S |
| STRONTIUM CHLORIDE SR-89 | STRONTIUM CHLORIDE SR-89 1 MCI/ML SOLUTION <i>strontium-89 chloride</i> | SP-M | S |
| XOFIGO | XOFIGO 30 MCCI/ML SOLUTION <i>radium ra 223 dichloride</i> | SP-M | PA, S |
| ANTINEOPLASTIC - ALLOGENEIC CELLULAR IMMUNOTHERAPY | | | |
| OMISIRGE | OMISIRGE SUSPENSION <i>omidubicel-onlv</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ANTINEOPLASTIC - AUTOLOGOUS CELLULAR IMMUNOTHERAPY | | | |
| ABECMA | ABECMA SUSPENSION <i>idecabtagene vicleucl</i> | SP-M | PA, S |
| AMTAGVI | AMTAGVI 72000000000 CELLS SUSPENSION <i>lifileucl</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|---|--------|--------------------------------|
| BREYANZI | BREYANZI 70000000 CELLS/ML SUSPENSION <i>lisocabtagene maraleucel</i> | SP-M | PA, S |
| CARVYKTI | CARVYKTI 100000000 CELLS SUSPENSION <i>ciltacabtagene autoleucel</i> | SP-M | PA, S |
| KYMRIAH | KYMRIAH (250000000 SUSPENSION, 600000000 SUSPENSION) <i>tisagenlecleucel</i> | SP-M | PA, S |
| PROVENGE | PROVENGE 50000000 CELLS SUSPENSION <i>sipuleucel-t</i> | SP-M | PA, S |
| TECARTUS | TECARTUS (1000000000CELLSSUSPE NSION, SUSPENSION) <i>brexucabtagene autoleucel</i> | SP-M | PA, S |
| TECELRA | TECELRA 10000000000 CELLS SUSPENSION <i>afamitresgene autoleucel</i> | P&T | PA, S |
| YESCARTA | YESCARTA 200000000 CELLS SUSPENSION <i>axicabtagene ciloleucel</i> | SP-M | PA, S |
| ANTINEOPLASTICS MISC. | | | |
| ACTIMMUNE | ACTIMMUNE 2000000 UNIT/0.5ML SOLUTION <i>interferon gamma-1b</i> | SP-P | S |
| ALFERON N | ALFERON N 5000000 UNIT/ML SOLUTION <i>interferon alfa-n3</i> | SP-M | S |
| <i>arsenic trioxide</i> | <i>arsenic trioxide (10 mg/10ml solution, 12 mg/6ml solution)</i> | SP-M | S |
| BESREMI | BESREMI 500 MCG/ML SOLN PRSYR <i>ropeginterferon alfa-2b-njft</i> | SP-NP | PA, QL (2 PER 28 DAY(S)), S |
| <i>dacarbazine</i> | <i>dacarbazine (100 mg recon soln, 200 mg recon soln)</i> | SP-M | S |
| <i>hydroxyurea</i> | <i>hydroxyurea 500 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|-----------------------|
| INTRON A | INTRON A (6000000 UNIT/ML SOLUTION, 10000000 UNIT RECON SOLN, 10000000 UNIT/ML SOLUTION, 18000000 UNIT RECON SOLN, 50000000 UNIT RECON SOLN) <i>interferon alfa-2b</i> | SP-M | S |
| MATULANE | MATULANE 50 MG CAP <i>procarbazine hcl</i> | SP-P | S |
| NIPENT | NIPENT 10 MG RECON SOLN <i>pentostatin</i> | SP-M | S |
| SYNRIBO | SYNRIBO 3.5 MG RECON SOLN <i>omacetaxine mepesuccinate</i> | SP-M | S |
| TICE BCG | TICE BCG 50 MG RECON SUSP <i>bcg live intravesical</i> | SP-M | S |
| TRISENOX | TRISENOX 12 MG/6ML SOLUTION <i>arsenic trioxide</i> | SP-M | S, GA |
| ANTINEOPLASTICS - INTERLEUKINS & AGONISTS | | | |
| ANKTIVA | ANKTIVA 400 MCG/0.4ML SOLUTION <i>nogapendekin alfa inbakicept-pmln</i> | SP-M | PA, S |
| ELZONRIS | ELZONRIS 1000 MCG/ML SOLUTION <i>tagraxofusp-erzs</i> | SP-M | S |
| PROLEUKIN | PROLEUKIN 22000000 UNIT RECON SOLN <i>aldesleukin</i> | SP-M | S |
| ANTINEOPLASTICS - PHOTOACTIVATED AGENTS | | | |
| PHOTOFRIN | PHOTOFRIN 75 MG RECON SOLN <i>porfimer sodium</i> | SP-M | S |
| UVADEX | UVADEX 20 MCG/ML SOLUTION <i>methoxsalen (photopheresis)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|---|
| RETINOIDS | | | |
| <i>tretinoin</i> | <i>tretinoin 10 mg cap</i> | TIER 1 | |
| SELECTIVE RETINOID X RECEPTOR AGONISTS | | | |
| <i>bexarotene</i> | <i>bexarotene 75 mg cap</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| TARGRETIN | TARGRETIN 75 MG CAP <i>bexarotene</i> | SP-NP | S, GA |
| CARDIAC PROTECTIVE AGENTS | | | |
| <i>dexrazoxane</i> | <i>dexrazoxane 250 mg recon soln</i> | SP-M | S |
| <i>dexrazoxane hcl</i> | <i>dexrazoxane hcl (250 mg recon soln, 500 mg recon soln)</i> | SP-M | S |
| TOTECT | TOTECT 500 MG RECON SOLN <i>dexrazoxane hcl</i> | SP-M | S, GA |
| FOLIC ACID ANTAGONISTS RESCUE AGENTS | | | |
| KHAPZORY | KHAPZORY (175 MG RECON SOLN, 300 MG RECON SOLN) <i>levoleucovorin</i> | SP-M | S |
| <i>leucovorin calcium</i> | <i>leucovorin calcium (100 mg recon soln, 100 mg/10ml solution, 200 mg recon soln, 350 mg recon soln, 500 mg recon soln, 500 mg/50ml solution)</i> | SP-M | S |
| <i>leucovorin calcium</i> | <i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab, 50 mg recon soln)</i> | TIER 1 | |
| <i>levoleucovorin calcium</i> | <i>levoleucovorin calcium 50 mg recon soln</i> | SP-M | S |
| <i>levoleucovorin calcium pf</i> | <i>levoleucovorin calcium pf (pf 175 mg/17.5ml solution, pf 250 mg/25ml solution)</i> | SP-M | S |
| CARBOXYPEPTIDASE ENZYME AGENTS | | | |
| VORAXAZE | VORAXAZE 1000 UNIT RECON SOLN <i>glucarpidase</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| MYELOPROTECTIVE AGENTS | | | |
| COSELA | COSELA 300 MG RECON SOLN <i>trilaciclib dihydrochloride</i> | SP-M | S |
| ORNITHINE DECARBOXYLASE (ODC) INHIBITORS | | | |
| IWILFIN | IWILFIN 192 MG TAB <i>eflornithine hydrochloride</i> | SP-P | QL (8 PER DAY(S)), S |
| OTOPROTECTIVE AGENTS | | | |
| PEDMARK | PEDMARK 12.5 % SOLUTION <i>sodium thiosulfate (otoprotective)</i> | SP-M | S |
| URINARY TRACT PROTECTIVE AGENTS | | | |
| ETHYOL | ETHYOL 500 MG RECON SOLN <i>amifostine</i> | SP-M | S |
| <i>mesna</i> | <i>mesna 100 mg/ml solution</i> | SP-M | S |
| MESNEX | MESNEX 100 MG/ML SOLUTION <i>mesna</i> | SP-M | S, GA |
| MESNEX | MESNEX 400 MG TAB <i>mesna</i> | TIER 2 | |
| CHEMOTHERAPY ADJUNCTS - HYPERURICEMIA AGENTS | | | |
| ELITEK | ELITEK (1.5 MG RECON SOLN, 7.5 MG RECON SOLN) <i>rasburicase</i> | SP-M | S |
| CHEMOTHERAPY ADJUNCTS - KERATINOCYTE GROWTH FACTORS | | | |
| KEPIVANCE | KEPIVANCE (5.16 MG RECON SOLN, 6.25 MG RECON SOLN) <i>palifermin</i> | SP-M | S |
| ANTINEOPLASTIC COMBINATIONS | | | |
| DARZALEX FASPRO | DARZALEX FASPRO 1800-30000 MG-UT/15ML SOLUTION <i>daratumumab-hyaluronidase-fihj</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|-------|--|
| HERCEPTIN HYLECTA | HERCEPTIN HYLECTA 600-10000 MG-UNT/5ML SOLUTION <i>trastuzumab-hyaluronidase- oysk</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| INQOVI | INQOVI 35-100 MG TAB <i>decitabine-cedazuridine</i> | SP-NP | QL (5 PER 28 DAY(S)), S |
| KISQALI FEMARA (200 MG DOSE) | KISQALI FEMARA (200 MG DOSE) 200 & 2.5 MG TAB THPK <i>ribociclib succinate- letrozole</i> | SP-P | QL (49 PER 28 DAY(S)), S |
| KISQALI FEMARA (400 MG DOSE) | KISQALI FEMARA (400 MG DOSE) 200 & 2.5 MG TAB THPK <i>ribociclib succinate- letrozole</i> | SP-P | QL (70 PER 28 DAY(S)), S |
| KISQALI FEMARA (600 MG DOSE) | KISQALI FEMARA (600 MG DOSE) 200 & 2.5 MG TAB THPK <i>ribociclib succinate- letrozole</i> | SP-P | QL (91 PER 28 DAY(S)), S |
| LONSURF | LONSURF 15-6.14 MG TAB <i>trifluridine-tipiracil</i> | SP-P | QL (100 PER 28 DAY(S)), S |
| LONSURF | LONSURF 20-8.19 MG TAB <i>trifluridine-tipiracil</i> | SP-P | QL (80 PER 28 DAY(S)), S |
| PHESGO | PHESGO (60-60-2000 SOLUTION, 80-40-2000 SOLUTION) <i>pertuzumab-trastuzumab- hyaluronidase-zzxf</i> | SP-M | S |
| RITUXAN HYCELA | RITUXAN HYCELA (1400- 23400 MG -UT/11.7ML SOLUTION, 1600-26800 MG -UT/13.4ML SOLUTION) <i>rituximab-hyaluronidase human</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| TECENTRIQ HYBREZA | TECENTRIQ HYBREZA 1875-30000 MG-UT/15ML SOLUTION <i>atezolizumab- hyaluronidase-tqjs</i> | P&T | S |
| VYXEOS | VYXEOS 44-100 MG RECON SUSP <i>daunorubicin-cytarabine liposome</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| ANTINEOPLASTIC - ANTIBODY COMBINATIONS | | | |
| OPDUALAG | OPDUALAG 240-80 MG/20ML SOLUTION <i>nivolumab-relatlimab-rmbw</i> | SP-M | PA, S |
| CORTICOSTEROIDS | | | |
| GLUCOCORTICOSTEROIDS | | | |
| <i>budesonide</i> | <i>budesonide 3 mg cp dr part</i> | TIER 1 | |
| <i>budesonide er</i> | <i>budesonide er 9 mg tab er 24h</i> | TIER 1 | |
| <i>decadron</i> | <i>decadron (0.5 mg tab, 0.75 mg tab, 4 mg tab, 6 mg tab)</i> | TIER 1 | |
| <i>deflazacort</i> | <i>deflazacort (6 mg tab, 18 mg tab, 30 mg tab, 36 mg tab)</i> | SP-P | PA, S |
| <i>deflazacort</i> | <i>deflazacort 22.75 mg/ml suspension</i> | SP-P | PA, QL (54 ML PER 30 DAY(S)), S |
| DEPO-MEDROL | DEPO-MEDROL 20 MG/ML SUSPENSION <i>methylprednisolone acetate</i> | TIER 1 | |
| <i>dexamethasone</i> | <i>dexamethasone (0.5 mg tab, 1 mg tab, 2 mg tab, 6 mg tab)</i> | TIER 1 | |
| <i>dexamethasone</i> | <i>dexamethasone (0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1.5 mg tab, 4 mg tab)</i> | TIER 1 | |
| DEXAMETHASONE INTENSOL | DEXAMETHASONE INTENSOL 1 MG/ML CONC <i>dexamethasone</i> | TIER 1 | |
| <i>dexamethasone sod phosphate pf</i> | <i>dexamethasone sod phosphate pf 10 mg/ml solution</i> | TIER 1 | |
| <i>dexamethasone sodium phosphate</i> | <i>dexamethasone sodium phosphate 20 mg/5ml solution</i> | TIER 1 | |
| EMFLAZA | EMFLAZA (18 MG TAB, 30 MG TAB, 36 MG TAB) <i>deflazacort</i> | SP-NP | PA, QL (1 PER 1 DAY), S, GA |
| EMFLAZA | EMFLAZA 22.75 MG/ML SUSPENSION <i>deflazacort</i> | SP-P | PA, QL (54 ML PER 30 DAY(S)), S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|--------------------------------|
| EMFLAZA | EMFLAZA 6 MG TAB <i>deflazacort</i> | SP-NP | PA, QL (2 PER 1 DAY), S, GA |
| <i>hydrocortisone</i> | <i>hydrocortisone (5 mg tab, 10 mg tab, 20 mg tab)</i> | TIER 1 | |
| <i>hydrocortisone sod suc (pf)</i> | <i>hydrocortisone sod suc (pf) 100 mg recon soln</i> | TIER 1 | |
| <i>methylprednisolone</i> | <i>methylprednisolone (4 mg tab, 4 mg tab thpk, 16 mg tab)</i> | TIER 1 | |
| <i>methylprednisolone</i> | <i>methylprednisolone (8 mg tab, 32 mg tab)</i> | TIER 1 | |
| <i>methylprednisolone sodium succ</i> | <i>methylprednisolone sodium succ 500 mg recon soln</i> | TIER 1 | |
| <i>prednisolone</i> | <i>prednisolone 15 mg/5ml solution</i> | TIER 1 | |
| <i>prednisolone sodium phosphate</i> | <i>prednisolone sodium phosphate (10 mg tab disp, 15 mg/5ml solution, 25 mg/5ml solution)</i> | TIER 1 | |
| <i>prednisolone sodium phosphate</i> | <i>prednisolone sodium phosphate (6.7 (5 base) mg/5ml solution, 10 mg tab disp, 10 mg/5ml solution, 15 mg tab disp, 20 mg/5ml solution, 25 mg/5ml solution, 30 mg tab disp)</i> | TIER 1 | |
| <i>prednisone</i> | <i>prednisone (1 mg tab, 5 mg (21) tab thpk, 5 mg (48) tab thpk, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 10 mg tab, 20 mg tab, 50 mg tab)</i> | TIER 1 | |
| PREDNISONE | PREDNISONE (2.5 MG TAB, 5 MG TAB, 5 MG/5ML SOLUTION) <i>prednisone</i> | TIER 1 | |
| PREDNISONE INTENSOL | PREDNISONE INTENSOL 5 MG/ML CONC <i>prednisone</i> | TIER 1 | |
| SOLU-CORTEF | SOLU-CORTEF (100 MG RECON SOLN, 250 MG RECON SOLN, 500 MG RECON SOLN) <i>hydrocortisone sod succinate</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|--------------------------|
| SOLU-MEDROL (PF) | SOLU-MEDROL (PF) 500 MG RECON SOLN <i>methylprednisolone sod succ</i> | TIER 1 | |
| SOLU-MEDROL | SOLU-MEDROL 500 MG RECON SOLN <i>methylprednisolone sod succ</i> | TIER 1 | GA |
| <i>triamcinolone acetone</i> | <i>triamcinolone acetone 40 mg/ml suspension</i> | TIER 1 | |
| MINERALOCORTICOIDS | | | |
| <i>fludrocortisone acetate</i> | <i>fludrocortisone acetate 0.1 mg tab</i> | TIER 1 | |
| ANDROGENS-ANABOLIC | | | |
| ANDROGENS | | | |
| AVEED | AVEED 750 MG/3ML SOLUTION <i>testosterone undecanoate</i> | SP-M | S |
| <i>danazol</i> | <i>danazol (50 mg cap, 100 mg cap, 200 mg cap)</i> | TIER 1 | |
| DEPO-TESTOSTERONE | DEPO-TESTOSTERONE (100 MG/ML SOLUTION, 200 MG/ML SOLUTION) <i>testosterone cypionate</i> | TIER 1 | GA |
| <i>methyltestosterone</i> | <i>methyltestosterone 10 mg cap</i> | TIER 1 | PA |
| <i>testosterone</i> | <i>testosterone (1.62 % gel, 20.25 mg/act (1.62%) gel, 30 mg/act solution)</i> | TIER 2 | PA, QL (2 PER 30 DAY(S)) |
| <i>testosterone</i> | <i>testosterone (25 mg/2.5gm (1%) gel, 40.5 mg/2.5gm (1.62%) gel, 50 mg/5gm (1%) gel)</i> | TIER 2 | PA, QL (2 PER 1 DAY(S)) |
| <i>testosterone</i> | <i>testosterone 12.5 mg/act (1%) gel</i> | TIER 2 | PA, QL (4 PER 30 DAY(S)) |
| <i>testosterone</i> | <i>testosterone 20.25 mg/1.25gm (1.62%) gel</i> | TIER 2 | PA, QL (1 PER 1 DAY(S)) |
| <i>testosterone cypionate</i> | <i>testosterone cypionate (100 mg/ml solution, 200 mg/ml solution)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------|---|--------|-----------------------|
| TESTOSTERONE ENANTHATE | TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION <i>testosterone enanthate</i> | TIER 1 | |
| ANABOLIC STEROIDS | | | |
| ANADROL-50 | ANADROL-50 50 MG TAB <i>oxymetholone</i> | TIER 2 | |
| <i>oxandrolone</i> | <i>oxandrolone (2.5 mg tab, 10 mg tab)</i> | TIER 1 | |
| ESTROGENS | | | |
| DELESTROGEN | DELESTROGEN (20 MG/ML OIL, 40 MG/ML OIL) <i>estradiol valerate</i> | TIER 1 | GA |
| DEPO-ESTRADIOL | DEPO-ESTRADIOL 5 MG/ML OIL <i>estradiol cypionate</i> | TIER 1 | |
| <i>dotti</i> | <i>dotti (0.025 mg/24hr patch tw, 0.0375 mg/24hr patch tw, 0.05 mg/24hr patch tw, 0.075 mg/24hr patch tw, 0.1 mg/24hr patch tw)</i> | TIER 1 | QL (8 PER 28 DAYS) |
| <i>estradiol</i> | <i>estradiol (0.025 mg/24hr patch tw, 0.0375 mg/24hr patch tw, 0.05 mg/24hr patch tw, 0.075 mg/24hr patch tw, 0.1 mg/24hr patch tw)</i> | TIER 1 | QL (8 PER 28 DAYS) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| estradiol | estradiol (0.025 mg/24hr patch wk, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch wk, 0.25 mg/0.25gm gel, 0.5 mg tab, 0.5 mg/0.5gm gel, 0.75 mg/0.75gm gel, 0.75 mg/1.25 gm (0.06%) gel, 1 mg tab, 1 mg/gm gel, 1.25 mg/1.25gm gel, 2 mg tab) | TIER 1 | |
| estradiol valerate | estradiol valerate (10 mg/ml oil, 20 mg/ml oil, 40 mg/ml oil) | TIER 1 | |
| lyllana | lyllana (0.025 mg/24hr patch tw, 0.0375 mg/24hr patch tw, 0.05 mg/24hr patch tw, 0.075 mg/24hr patch tw, 0.1 mg/24hr patch tw) | TIER 1 | QL (8 PER 28 DAYS) |
| PREMARIN | PREMARIN (0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB) estrogens, conjugated | TIER 2 | |
| ESTROGEN & ANDROGEN | | | |
| covaryx | covaryx 1.25-2.5 mg tab | TIER 1 | |
| covaryx hs | covaryx hs 0.625-1.25 mg tab | TIER 1 | |
| eemt | eemt 1.25-2.5 mg tab | TIER 1 | |
| eemt hs | eemt hs 0.625-1.25 mg tab | TIER 1 | |
| est estrogens-methyltest | est estrogens-methyltest (rogens-methylt0.625-1.25 mg tab, rogens-methylt1.25-2.5 mg tab) | TIER 1 | |
| est estrogens-methyltest ds | est estrogens-methyltest ds 1.25-2.5 mg tab | TIER 1 | |
| est estrogens-methyltest hs | est estrogens-methyltest hs 0.625-1.25 mg tab | TIER 1 | |
| estratest f.s. | estratest f.s. 1.25-2.5 mg tab | TIER 1 | |
| estratest h.s. | estratest h.s. 0.625-1.25 mg tab | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| ESTROGEN & PROGESTIN | | | |
| <i>amabelz</i> | <i>amabelz (0.5-0.1 mg tab, 1-0.5 mg tab)</i> | TIER 1 | |
| CLIMARA PRO | CLIMARA PRO 0.045-0.015 MG/DAY PATCH WK <i>estradiol-levonorgestrel</i> | TIER 3 | |
| COMBIPATCH | COMBIPATCH (0.05-0.14 PATCH TW, 0.05-0.25 PATCH TW) <i>estradiol & norethindrone acetate</i> | TIER 3 | |
| <i>estradiol-norethindrone acet</i> | <i>estradiol-norethindrone acet (0.5-0.1 mg tab, 1-0.5 mg tab)</i> | TIER 1 | |
| <i>fyavolv</i> | <i>fyavolv (0.5-2.5 tab, 1-5 tab)</i> | TIER 1 | |
| <i>jinteli</i> | <i>jinteli 1-5 mg-mcg tab</i> | TIER 1 | |
| <i>lopreeza</i> | <i>lopreeza 1-0.5 mg tab</i> | TIER 1 | |
| <i>mimvey</i> | <i>mimvey 1-0.5 mg tab</i> | TIER 1 | |
| <i>norethindrone-eth estradiol</i> | <i>norethindrone-eth estradiol (0.5-2.5 tab, 1-5 tab)</i> | TIER 1 | |
| PREMPHASE | PREMPHASE 0.625-5 MG TAB <i>conjugated estrogens-medroxyprogesterone acetate</i> | TIER 2 | |
| PREMPRO | PREMPRO (0.3-1.5 MG TAB, 0.45-1.5 MG TAB, 0.625-2.5 MG TAB, 0.625-5 MG TAB) <i>conjugated estrogens-medroxyprogesterone acetate</i> | TIER 2 | |
| CONTRACEPTIVES | | | |
| PROGESTIN CONTRACEPTIVES - ORAL | | | |
| <i>camila</i> | <i>camila 0.35 mg tab</i> | TIER 1 | |
| <i>deblitane</i> | <i>deblitane 0.35 mg tab</i> | TIER 1 | |
| <i>emzahh</i> | <i>emzahh 0.35 mg tab</i> | TIER 1 | |
| <i>errin</i> | <i>errin 0.35 mg tab</i> | TIER 1 | |
| <i>heather</i> | <i>heather 0.35 mg tab</i> | TIER 1 | |
| <i>incassia</i> | <i>incassia 0.35 mg tab</i> | TIER 1 | |
| <i>jencycla</i> | <i>jencycla 0.35 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| <i>lyleq</i> | <i>lyleq 0.35 mg tab</i> | TIER 1 | |
| <i>lyza</i> | <i>lyza 0.35 mg tab</i> | TIER 1 | |
| <i>nora-be</i> | <i>nora-be 0.35 mg tab</i> | TIER 1 | |
| <i>norethindrone</i> | <i>norethindrone 0.35 mg tab</i> | TIER 1 | |
| <i>norlyda</i> | <i>norlyda 0.35 mg tab</i> | TIER 1 | |
| <i>norlyroc</i> | <i>norlyroc 0.35 mg tab</i> | TIER 1 | |
| <i>sharobel</i> | <i>sharobel 0.35 mg tab</i> | TIER 1 | |
| <i>tulana</i> | <i>tulana 0.35 mg tab</i> | TIER 1 | |
| PROGESTIN CONTRACEPTIVES - INJECTABLE | | | |
| <i>medroxyprogesterone acetate</i> | <i>medroxyprogesterone acetate (150 mg/ml susp prsyr, 150 mg/ml suspension)</i> | TIER 1 | |
| COMBINATION CONTRACEPTIVES - TRANSDERMAL | | | |
| <i>norelgestromin-eth estradiol</i> | <i>norelgestromin-eth estradiol 150-35 mcg/24hr patch wk</i> | TIER 1 | |
| <i>xulane</i> | <i>xulane 150-35 mcg/24hr patch wk</i> | TIER 1 | |
| <i>zafemy</i> | <i>zafemy 150-35 mcg/24hr patch wk</i> | TIER 1 | |
| COMBINATION CONTRACEPTIVES - VAGINAL | | | |
| <i>eluryng</i> | <i>eluryng 0.12-0.015 mg/24hr ring</i> | TIER 1 | |
| <i>enilloring</i> | <i>enilloring 0.12-0.015 mg/24hr ring</i> | TIER 1 | |
| <i>etonogestrel-ethinyl estradiol</i> | <i>etonogestrel-ethinyl estradiol 0.12-0.015 mg/24hr ring</i> | TIER 1 | |
| <i>haloette</i> | <i>haloette 0.12-0.015 mg/24hr ring</i> | TIER 1 | |
| COMBINATION CONTRACEPTIVES - ORAL | | | |
| <i>afirmelle</i> | <i>afirmelle 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>altavera</i> | <i>altavera 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>alyacen 1/35</i> | <i>alyacen 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>apri</i> | <i>apri 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>aubra</i> | <i>aubra 0.1-20 mg-mcg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>aubra eq</i> | <i>aubra eq 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>aurovela 1.5/30</i> | <i>aurovela 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>aurovela 1/20</i> | <i>aurovela 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>aurovela 24 fe</i> | <i>aurovela 24 fe 1-20 mg-mcg(24) tab</i> | TIER 1 | |
| <i>aurovela fe 1.5/30</i> | <i>aurovela fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>aurovela fe 1/20</i> | <i>aurovela fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>aviane</i> | <i>aviane 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>ayuna</i> | <i>ayuna 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>balziva</i> | <i>balziva 0.4-35 mg-mcg tab</i> | TIER 1 | |
| <i>blisovi 24 fe</i> | <i>blisovi 24 fe 1-20 mg-mcg(24) tab</i> | TIER 1 | |
| <i>blisovi fe 1.5/30</i> | <i>blisovi fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>blisovi fe 1/20</i> | <i>blisovi fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>briellyn</i> | <i>briellyn 0.4-35 mg-mcg tab</i> | TIER 1 | |
| <i>charlotte 24 fe</i> | <i>charlotte 24 fe 1-20 mg-mcg(24) chew tab</i> | TIER 1 | |
| <i>chateal</i> | <i>chateal 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>chateal eq</i> | <i>chateal eq 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>cryselle-28</i> | <i>cryselle-28 0.3-30 mg-mcg tab</i> | TIER 1 | |
| <i>cyclafem 1/35</i> | <i>cyclafem 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>cyred</i> | <i>cyred 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>cyred eq</i> | <i>cyred eq 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>dasetta 1/35</i> | <i>dasetta 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>delyla</i> | <i>delyla 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>desogestrel-ethinyl estradiol</i> | <i>desogestrel-ethinyl estradiol 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>drospiren-eth estrad-levomefol</i> | <i>drospiren-eth estrad-levomefol (3-0.02-0.451 mg tab, 3-0.03-0.451 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>drospirenone-ethinyl estradiol</i> | <i>drospirenone-ethinyl estradiol (3-0.02 mg tab, 3-0.03 mg tab)</i> | TIER 1 | |
| <i>elinest</i> | <i>elinest 0.3-30 mg-mcg tab</i> | TIER 1 | |
| <i>emoquette</i> | <i>emoquette 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>enskyce</i> | <i>enskyce 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>estarylla</i> | <i>estarylla 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>ethynodiol diac-eth estradiol</i> | <i>ethynodiol diac-eth estradiol (1-35 tab, 1-50 tab)</i> | TIER 1 | |
| <i>falmina</i> | <i>falmina 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>femynor</i> | <i>femynor 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>finzala</i> | <i>finzala 1-20 mg-mcg(24) chew tab</i> | TIER 1 | |
| <i>gemmily</i> | <i>gemmily 1-20 mg-mcg(24) cap</i> | TIER 1 | |
| <i>gianvi</i> | <i>gianvi 3-0.02 mg tab</i> | TIER 1 | |
| <i>hailey 1.5/30</i> | <i>hailey 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>hailey 24 fe</i> | <i>hailey 24 fe 1-20 mg-mcg(24) tab</i> | TIER 1 | |
| <i>hailey fe 1.5/30</i> | <i>hailey fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>hailey fe 1/20</i> | <i>hailey fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>isibloom</i> | <i>isibloom 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>jasmiel</i> | <i>jasmiel 3-0.02 mg tab</i> | TIER 1 | |
| <i>joyeaux</i> | <i>joyeaux 0.1-20 mg-mcg(21) tab</i> | TIER 1 | |
| <i>juleber</i> | <i>juleber 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>junel 1.5/30</i> | <i>junel 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>junel 1/20</i> | <i>junel 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>junel fe 1.5/30</i> | <i>junel fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>junel fe 1/20</i> | <i>junel fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>junel fe 24</i> | <i>junel fe 24 1-20 mg-mcg(24) tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| <i>kaitlib fe</i> | <i>kaitlib fe 0.8-25 mg-mcg chew tab</i> | TIER 1 | |
| <i>kalliga</i> | <i>kalliga 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>kelnor 1/35</i> | <i>kelnor 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>kelnor 1/50</i> | <i>kelnor 1/50 1-50 mg-mcg tab</i> | TIER 1 | |
| <i>kurvelo</i> | <i>kurvelo 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>larin 1.5/30</i> | <i>larin 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>larin 1/20</i> | <i>larin 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>larin 24 fe</i> | <i>larin 24 fe 1-20 mg-mcg(24) tab</i> | TIER 1 | |
| <i>larin fe 1.5/30</i> | <i>larin fe 1.5/30 1.5-30 mg- mcg tab</i> | TIER 1 | |
| <i>larin fe 1/20</i> | <i>larin fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>larissia</i> | <i>larissia 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>layolis fe</i> | <i>layolis fe 0.8-25 mg-mcg chew tab</i> | TIER 1 | |
| <i>lessina</i> | <i>lessina 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>levonorgest-eth estradiol-iron</i> | <i>levonorgest-eth estradiol- iron 0.1-20 mg-mcg(21) tab</i> | TIER 1 | |
| <i>levonorgestrel-ethinyl estradiol</i> | <i>levonorgestrel-ethinyl estradiol (0.1-20 tab, 0.15-30 tab)</i> | TIER 1 | |
| <i>levora 0.15/30 (28)</i> | <i>levora 0.15/30 (28) 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>lillow</i> | <i>lillow 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>lo-zumandimine</i> | <i>lo-zumandimine 3-0.02 mg tab</i> | TIER 1 | |
| <i>loestrin 1.5/30 (21)</i> | <i>loestrin 1.5/30 (21) 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>loestrin 1/20 (21)</i> | <i>loestrin 1/20 (21) 1-20 mg- mcg tab</i> | TIER 1 | |
| <i>loestrin fe 1.5/30</i> | <i>loestrin fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>loestrin fe 1/20</i> | <i>loestrin fe 1/20 1-20 mg- mcg tab</i> | TIER 1 | |
| <i>loryna</i> | <i>loryna 3-0.02 mg tab</i> | TIER 1 | |
| <i>low-ogestrel</i> | <i>low-ogestrel 0.3-30 mg-mcg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>lutera</i> | <i>lutera 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>marlissa</i> | <i>marlissa 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>melodetta 24 fe</i> | <i>melodetta 24 fe 1-20 mg-mcg(24) chew tab</i> | TIER 1 | |
| <i>merzee</i> | <i>merzee 1-20 mg-mcg(24) cap</i> | TIER 1 | |
| <i>mibelas 24 fe</i> | <i>mibelas 24 fe 1-20 mg-mcg(24) chew tab</i> | TIER 1 | |
| <i>microgestin 1.5/30</i> | <i>microgestin 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>microgestin 1/20</i> | <i>microgestin 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>microgestin 24 fe</i> | <i>microgestin 24 fe 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>microgestin fe 1.5/30</i> | <i>microgestin fe 1.5/30 1.5-30 mg-mcg tab</i> | TIER 1 | |
| <i>microgestin fe 1/20</i> | <i>microgestin fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>mili</i> | <i>mili 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>mono-linyah</i> | <i>mono-linyah 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>necon 0.5/35 (28)</i> | <i>necon 0.5/35 (28) 0.5-35 mg-mcg tab</i> | TIER 1 | |
| <i>nikki</i> | <i>nikki 3-0.02 mg tab</i> | TIER 1 | |
| <i>norethin ace-eth estrad-fe</i> | <i>norethin ace-eth estrad-fe (1-20 mg-mcg tab, 1-20 mg-mcg(24) cap, 1-20 mg-mcg(24) chew tab, 1-20 mg-mcg(24) tab, 1.5-30 mg-mcg tab)</i> | TIER 1 | |
| <i>norethin-eth estradiol-fe</i> | <i>norethin-eth estradiol-fe (0.4-35 chew tab, 0.8-25 chew tab)</i> | TIER 1 | |
| <i>norethindrone acet-ethinyl est</i> | <i>norethindrone acet-ethinyl est (1-20 tab, 1.5-30 tab)</i> | TIER 1 | |
| <i>norgestimate-eth estradiol</i> | <i>norgestimate-eth estradiol 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>nortrel 0.5/35 (28)</i> | <i>nortrel 0.5/35 (28) 0.5-35 mg-mcg tab</i> | TIER 1 | |
| <i>nortrel 1/35 (21)</i> | <i>nortrel 1/35 (21) 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>nortrel 1/35 (28)</i> | <i>nortrel 1/35 (28) 1-35 mg-mcg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------|--|--------|-----------------------|
| <i>nylia 1/35</i> | <i>nylia 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>nymyo</i> | <i>nymyo 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>ocella</i> | <i>ocella 3-0.03 mg tab</i> | TIER 1 | |
| <i>orsythia</i> | <i>orsythia 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>philith</i> | <i>philith 0.4-35 mg-mcg tab</i> | TIER 1 | |
| <i>pirmella 1/35</i> | <i>pirmella 1/35 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>portia-28</i> | <i>portia-28 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>previfem</i> | <i>previfem 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>reclipsen</i> | <i>reclipsen 0.15-30 mg-mcg tab</i> | TIER 1 | |
| <i>sprintec 28</i> | <i>sprintec 28 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>sronyx</i> | <i>sronyx 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>syeda</i> | <i>syeda 3-0.03 mg tab</i> | TIER 1 | |
| <i>tarina 24 fe</i> | <i>tarina 24 fe 1-20 mg-mcg(24) tab</i> | TIER 1 | |
| <i>tarina fe 1/20</i> | <i>tarina fe 1/20 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>tarina fe 1/20 eq</i> | <i>tarina fe 1/20 eq 1-20 mg-mcg tab</i> | TIER 1 | |
| <i>taysofy</i> | <i>taysofy 1-20 mg-mcg(24) cap</i> | TIER 1 | |
| <i>turqoz</i> | <i>turqoz 0.3-30 mg-mcg tab</i> | TIER 1 | |
| <i>tydemy</i> | <i>tydemy 3-0.03-0.451 mg tab</i> | TIER 1 | |
| <i>vestura</i> | <i>vestura 3-0.02 mg tab</i> | TIER 1 | |
| <i>vienva</i> | <i>vienva 0.1-20 mg-mcg tab</i> | TIER 1 | |
| <i>vyfemla</i> | <i>vyfemla 0.4-35 mg-mcg tab</i> | TIER 1 | |
| <i>vylibra</i> | <i>vylibra 0.25-35 mg-mcg tab</i> | TIER 1 | |
| <i>wera</i> | <i>wera 0.5-35 mg-mcg tab</i> | TIER 1 | |
| <i>wymzya fe</i> | <i>wymzya fe 0.4-35 mg-mcg chew tab</i> | TIER 1 | |
| <i>zarah</i> | <i>zarah 3-0.03 mg tab</i> | TIER 1 | |
| <i>zovia 1/35 (28)</i> | <i>zovia 1/35 (28) 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>zovia 1/35e (28)</i> | <i>zovia 1/35e (28) 1-35 mg-mcg tab</i> | TIER 1 | |
| <i>zumandimine</i> | <i>zumandimine 3-0.03 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| BIPHASIC CONTRACEPTIVES - ORAL | | | |
| <i>azurette</i> | <i>azurette 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>bekyree</i> | <i>bekyree 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>desogestrel-ethinyl estradiol</i> | <i>desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>kariva</i> | <i>kariva 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| LO LOESTRIN FE | LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB <i>norethindrone acetate-ethinyl estradiol-fe fum (biphasic)</i> | TIER 2 | |
| <i>pimtrea</i> | <i>pimtrea 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>simliya</i> | <i>simliya 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>violele</i> | <i>violele 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| <i>volnea</i> | <i>volnea 0.15-0.02/0.01 mg (21/5) tab</i> | TIER 1 | |
| TRIPHASIC CONTRACEPTIVES - ORAL | | | |
| <i>alyacen 7/7/7</i> | <i>alyacen 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>aranelle</i> | <i>aranelle 0.5/1/0.5-35 mg-mcg tab</i> | TIER 1 | |
| <i>caziant</i> | <i>caziant 0.1/0.125/0.15 - 0.025 mg tab</i> | TIER 1 | |
| <i>cyclafem 7/7/7</i> | <i>cyclafem 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>dasetta 7/7/7</i> | <i>dasetta 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>enpresse-28</i> | <i>enpresse-28 50-30/75-40/125-30 mcg tab</i> | TIER 1 | |
| <i>leena</i> | <i>leena 0.5/1/0.5-35 mg-mcg tab</i> | TIER 1 | |
| <i>levonest</i> | <i>levonest 50-30/75-40/ 125-30 mcg tab</i> | TIER 1 | |
| <i>levonorg-eth estrad triphasic</i> | <i>levonorg-eth estrad triphasic 50-30/75-40/ 125-30 mcg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>norethindron-ethinyl estrad-fe</i> | <i>norethindron-ethinyl estrad-fe 1-20/1-30/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>norgestim-eth estrad triphasic</i> | <i>norgestim-eth estrad triphasic (mg-25 mcg tab, mg-35 mcg tab)</i> | TIER 1 | |
| <i>nortrel 7/7/7</i> | <i>nortrel 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>nylia 7/7/7</i> | <i>nylia 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>pirmella 7/7/7</i> | <i>pirmella 7/7/7 0.5/0.75/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>tilia fe</i> | <i>tilia fe 1-20/1-30/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>tri femynor</i> | <i>tri femynor 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-estarylla</i> | <i>tri-estarylla 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-legest fe</i> | <i>tri-legest fe 1-20/1-30/1-35 mg-mcg tab</i> | TIER 1 | |
| <i>tri-linyah</i> | <i>tri-linyah 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-lo-estarylla</i> | <i>tri-lo-estarylla 0.18/0.215/0.25 mg-25 mcg tab</i> | TIER 1 | |
| <i>tri-lo-marzia</i> | <i>tri-lo-marzia 0.18/0.215/0.25 mg-25 mcg tab</i> | TIER 1 | |
| <i>tri-lo-mili</i> | <i>tri-lo-mili 0.18/0.215/0.25 mg-25 mcg tab</i> | TIER 1 | |
| <i>tri-lo-sprintec</i> | <i>tri-lo-sprintec 0.18/0.215/0.25 mg-25 mcg tab</i> | TIER 1 | |
| <i>tri-mili</i> | <i>tri-mili 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-nymyo</i> | <i>tri-nymyo 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-previfem</i> | <i>tri-previfem 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-sprintec</i> | <i>tri-sprintec 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-vylibra</i> | <i>tri-vylibra 0.18/0.215/0.25 mg-35 mcg tab</i> | TIER 1 | |
| <i>tri-vylibra lo</i> | <i>tri-vylibra lo 0.18/0.215/0.25 mg-25 mcg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| <i>trivora (28)</i> | <i>trivora (28) 50-30/75-40/125-30 mcg tab</i> | TIER 1 | |
| VELIVET | VELIVET 0.1/0.125/0.15 - 0.025 MG TAB <i>desogestrel-ethinyl estradiol (triphasic)</i> | TIER 1 | GA |
| FOUR PHASE CONTRACEPTIVES - ORAL | | | |
| NATAZIA | NATAZIA 3/2-2/2-3/1 MG TAB <i>estradiol valerate-dienogest</i> | TIER 2 | |
| EXTENDED-CYCLE CONTRACEPTIVES - ORAL | | | |
| <i>amethia</i> | <i>amethia 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |
| <i>amethia lo</i> | <i>amethia lo 0.1-0.02 & 0.01 mg tab</i> | TIER 1 | |
| <i>ashlyna</i> | <i>ashlyna 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |
| <i>camrese</i> | <i>camrese 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |
| <i>camrese lo</i> | <i>camrese lo 0.1-0.02 & 0.01 mg tab</i> | TIER 1 | |
| <i>daysee</i> | <i>daysee 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |
| <i>fayosim</i> | <i>fayosim 42-21-21-7 days tab</i> | TIER 1 | |
| <i>iclevia</i> | <i>iclevia 0.15-0.03 mg tab</i> | TIER 1 | |
| <i>introvale</i> | <i>introvale 0.15-0.03 mg tab</i> | TIER 1 | |
| <i>jaimiess</i> | <i>jaimiess 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |
| <i>jolessa</i> | <i>jolessa 0.15-0.03 mg tab</i> | TIER 1 | |
| <i>levonorgest-eth est & eth est</i> | <i>levonorgest-eth est & eth est 42-21-21-7 days tab</i> | TIER 1 | |
| <i>levonorgest-eth estrad 91-day</i> | <i>levonorgest-eth estrad 91-day (0.1-0.02 & 0.01 mg tab, 0.15-0.03 & 0.01 mg tab, 0.15-0.03 mg tab)</i> | TIER 1 | |
| <i>lojaimiess</i> | <i>lojaimiess 0.1-0.02 & 0.01 mg tab</i> | TIER 1 | |
| <i>rivelsa</i> | <i>rivelsa 42-21-21-7 days tab</i> | TIER 1 | |
| <i>setlakin</i> | <i>setlakin 0.15-0.03 mg tab</i> | TIER 1 | |
| <i>simpesse</i> | <i>simpesse 0.15-0.03 & 0.01 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|--------|------------------------------|
| CONTINUOUS CONTRACEPTIVES - ORAL | | | |
| <i>amethyst</i> | <i>amethyst 90-20 mcg tab</i> | TIER 1 | |
| <i>dolishale</i> | <i>dolishale 90-20 mcg tab</i> | TIER 1 | |
| <i>levonorgestrel-ethinyl estrad</i> | <i>levonorgestrel-ethinyl estrad 90-20 mcg tab</i> | TIER 1 | |
| PROGESTINS | | | |
| <i>gallifrey</i> | <i>gallifrey 5 mg tab</i> | TIER 1 | |
| <i>hydroxyprogesterone caproate</i> | <i>hydroxyprogesterone caproate 250 mg/ml oil</i> | SP-M | QL (250 PER 7 DAY(S)), S |
| MAKENA | MAKENA 250 MG/ML OIL <i>hydroxyprogesterone caproate</i> | SP-M | QL (250 PER 7 DAY(S)), S, GA |
| MAKENA | MAKENA 275 MG/1.1ML SOLN A-INJ <i>hydroxyprogesterone caproate</i> | SP-M | QL (4 PER 28 DAY(S)), S |
| <i>medroxyprogesterone acetate</i> | <i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab)</i> | TIER 1 | |
| <i>medroxyprogesterone acetate</i> | <i>medroxyprogesterone acetate 10 mg tab</i> | TIER 1 | |
| <i>megestrol acetate</i> | <i>megestrol acetate 625 mg/5ml suspension</i> | TIER 1 | |
| <i>norethindrone acetate</i> | <i>norethindrone acetate 5 mg tab</i> | TIER 1 | |
| <i>progesterone</i> | <i>progesterone (50 mg/ml oil, 100 mg cap, 200 mg cap)</i> | TIER 1 | |
| ANTIDIABETICS | | | |
| HUMAN INSULIN | | | |
| BASAGLAR KWIKPEN | BASAGLAR KWIKPEN 100 UNIT/ML SOLN PEN <i>insulin glargine</i> | TIER 2 | PV |
| BASAGLAR TEMPO PEN | BASAGLAR TEMPO PEN 100 UNIT/ML SOLN PEN <i>insulin glargine</i> | TIER 2 | |
| FIASP | FIASP 100 UNIT/ML SOLUTION <i>insulin aspart (with niacinamide)</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|---|--------|-----------------------|
| FIASP FLEXTOUCH | FIASP FLEXTOUCH 100 UNIT/ML SOLN PEN <i>insulin aspart (with niacinamide)</i> | TIER 2 | PV |
| FIASP PENFILL | FIASP PENFILL 100 UNIT/ML SOLN CART <i>insulin aspart (with niacinamide)</i> | TIER 2 | PV |
| FIASP PUMPCART | FIASP PUMPCART 100 UNIT/ML SOLN CART <i>insulin aspart (with niacinamide)</i> | TIER 2 | PV |
| HUMULIN R U-500 (CONCENTRATED) | HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION <i>insulin regular (human)</i> | TIER 2 | PV |
| HUMULIN R U-500 KWIKPEN | HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN <i>insulin regular (human)</i> | TIER 2 | PV |
| INSULIN ASPART FLEXPEN | INSULIN ASPART FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin aspart</i> | TIER 2 | |
| LEVEMIR | LEVEMIR 100 UNIT/ML SOLUTION <i>insulin detemir</i> | TIER 2 | PV |
| LEVEMIR FLEXPEN | LEVEMIR FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin detemir</i> | TIER 2 | PV |
| LEVEMIR FLEXTOUCH | LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN <i>insulin detemir</i> | TIER 2 | PV |
| NOVOLIN 70/30 | NOVOLIN 70/30 (70-30) 100 UNIT/ML SUSPENSION <i>insulin nph isophane & reg (human)</i> | TIER 2 | PV |
| NOVOLIN 70/30 FLEXPEN | NOVOLIN 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN <i>insulin nph isophane & reg (human)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|--------|-----------------------|
| NOVOLIN 70/30 FLEXPEN RELION | NOVOLIN 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN <i>insulin nph isophane & reg (human)</i> | TIER 2 | |
| NOVOLIN 70/30 RELION | NOVOLIN 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION <i>insulin nph isophane & reg (human)</i> | TIER 2 | PV |
| NOVOLIN N | NOVOLIN N 100 UNIT/ML SUSPENSION <i>insulin nph (human) (isophane)</i> | TIER 2 | PV |
| NOVOLIN N FLEXPEN | NOVOLIN N FLEXPEN 100 UNIT/ML SUSP PEN <i>insulin nph (human) (isophane)</i> | TIER 2 | PV |
| NOVOLIN N FLEXPEN RELION | NOVOLIN N FLEXPEN RELION 100 UNIT/ML SUSP PEN <i>insulin nph (human) (isophane)</i> | TIER 2 | PV |
| NOVOLIN N RELION | NOVOLIN N RELION 100 UNIT/ML SUSPENSION <i>insulin nph (human) (isophane)</i> | TIER 2 | PV |
| NOVOLIN R | NOVOLIN R 100 UNIT/ML SOLUTION <i>insulin regular (human)</i> | TIER 2 | PV |
| NOVOLIN R FLEXPEN | NOVOLIN R FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin regular (human)</i> | TIER 2 | PV |
| NOVOLIN R FLEXPEN RELION | NOVOLIN R FLEXPEN RELION 100 UNIT/ML SOLN PEN <i>insulin regular (human)</i> | TIER 2 | PV |
| NOVOLIN R RELION | NOVOLIN R RELION 100 UNIT/ML SOLUTION <i>insulin regular (human)</i> | TIER 2 | PV |
| NOVOLOG | NOVOLOG 100 UNIT/ML SOLUTION <i>insulin aspart</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|---|--------|-----------------------|
| NOVOLOG 70/30 FLEXPEN RELION | NOVOLOG 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN <i>insulin aspart protamine & aspart (human)</i> | TIER 2 | PV |
| NOVOLOG FLEXPEN | NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin aspart</i> | TIER 2 | PV |
| NOVOLOG FLEXPEN RELION | NOVOLOG FLEXPEN RELION 100 UNIT/ML SOLN PEN <i>insulin aspart</i> | TIER 2 | PV |
| NOVOLOG MIX 70/30 | NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION <i>insulin aspart protamine & aspart (human)</i> | TIER 2 | PV |
| NOVOLOG MIX 70/30 FLEXPEN | NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN <i>insulin aspart protamine & aspart (human)</i> | TIER 2 | PV |
| NOVOLOG MIX 70/30 RELION | NOVOLOG MIX 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION <i>insulin aspart protamine & aspart (human)</i> | TIER 2 | PV |
| NOVOLOG PENFILL | NOVOLOG PENFILL 100 UNIT/ML SOLN CART <i>insulin aspart</i> | TIER 2 | PV |
| NOVOLOG RELION | NOVOLOG RELION 100 UNIT/ML SOLUTION <i>insulin aspart</i> | TIER 2 | PV |
| TOUJEO MAX SOLOSTAR | TOUJEO MAX SOLOSTAR 300 UNIT/ML SOLN PEN <i>insulin glargine</i> | TIER 2 | |
| TOUJEO SOLOSTAR | TOUJEO SOLOSTAR 300 UNIT/ML SOLN PEN <i>insulin glargine</i> | TIER 2 | |
| TRESIBA | TRESIBA 100 UNIT/ML SOLUTION <i>insulin degludec</i> | TIER 2 | PV |
| TRESIBA FLEXTOUCH | TRESIBA FLEXTOUCH (100 SOLN PEN, 200 SOLN PEN) <i>insulin degludec</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-------------------------------|
| ANTIDIABETIC - AMYLIN ANALOGS | | | |
| SYMLINPEN 120 | SYMLINPEN 120 2700 MCG/2.7ML SOLN PEN <i>pramlintide acetate</i> | TIER 2 | PV |
| SYMLINPEN 60 | SYMLINPEN 60 1500 MCG/1.5ML SOLN PEN <i>pramlintide acetate</i> | TIER 2 | PV |
| INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS) | | | |
| LIRAGLUTIDE | LIRAGLUTIDE 18 MG/3ML SOLN PEN <i>liraglutide</i> | P&T | QL (3 PENS PER 30 DAY(S)) |
| OZEMPIC (0.25 OR 0.5 MG/DOSE) | OZEMPIC (0.25 OR 0.5 MG/DOSE) (0.5 2 MG/1.5ML SOLN PEN, 0.5 2 MG/3ML SOLN PEN) <i>semaglutide</i> | TIER 2 | QL (1 PER 28 DAY(S)), PV |
| OZEMPIC (1 MG/DOSE) | OZEMPIC (1 MG/DOSE) (2 MG/1.5ML SOLN PEN, 4 MG/3ML SOLN PEN) <i>semaglutide</i> | TIER 2 | QL (1 PER 28 DAY(S)), PV |
| OZEMPIC (2 MG/DOSE) | OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN <i>semaglutide</i> | TIER 2 | QL (1 PER 28 DAY(S)), PV |
| RYBELSUS | RYBELSUS (3 MG TAB, 7 MG TAB, 14 MG TAB) <i>semaglutide</i> | TIER 2 | QL (1 PER DAY(S)), PV |
| TRULICITY | TRULICITY (0.75 SOLN A-INJ, 1.5 SOLN A-INJ) <i>dulaglutide</i> | TIER 2 | QL (4 PER 28 DAYS) |
| TRULICITY | TRULICITY (3 SOLN A-INJ, 4.5 SOLN A-INJ) <i>dulaglutide</i> | TIER 2 | QL (4 PER 28 DAY(S)) |
| VICTOZA | VICTOZA 18 MG/3ML SOLN PEN <i>liraglutide</i> | TIER 2 | QL (3 PENS PER 30 DAY(S)), PV |
| INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS) | | | |
| MOUNJARO | MOUNJARO (2.5 SOLN A-INJ, 5 SOLN A-INJ, 7.5 SOLN A-INJ, 10 SOLN A-INJ, 12.5 SOLN A-INJ, 15 SOLN A-INJ) <i>tirzepatide</i> | TIER 2 | QL (4 PER 28 DAY(S)), PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|--------|--------------------------------|
| SULFONYLUREAS | | | |
| <i>glimepiride</i> | <i>glimepiride (1 mg tab, 2 mg tab, 4 mg tab)</i> | TIER 1 | PV |
| <i>glipizide</i> | <i>glipizide 10 mg tab</i> | TIER 1 | PV |
| <i>glipizide</i> | <i>glipizide 5 mg tab</i> | TIER 1 | PV |
| <i>glipizide er</i> | <i>glipizide er (er 2.5 mg tab er 24h, er 5 mg tab er 24h, er 10 mg tab er 24h)</i> | TIER 1 | PV |
| <i>glipizide xl</i> | <i>glipizide xl (2.5 mg tab er 24h, 5 mg tab er 24h, 10 mg tab er 24h)</i> | TIER 1 | PV |
| <i>glyburide</i> | <i>glyburide (1.25 mg tab, 5 mg tab)</i> | TIER 1 | PV |
| <i>glyburide</i> | <i>glyburide 2.5 mg tab</i> | TIER 1 | PV |
| GLYBURIDE MICRONIZED | GLYBURIDE MICRONIZED (1.5 MG TAB, 3 MG TAB, 6 MG TAB) <i>glyburide micronized</i> | TIER 1 | PV |
| TOLBUTAMIDE | TOLBUTAMIDE 500 MG TAB <i>tolbutamide</i> | TIER 1 | |
| BIGUANIDES | | | |
| <i>metformin hcl</i> | <i>metformin hcl (500 mg tab, 850 mg tab)</i> | TIER 1 | PV |
| <i>metformin hcl</i> | <i>metformin hcl 1000 mg tab</i> | TIER 1 | PV |
| <i>metformin hcl</i> | <i>metformin hcl 500 mg/5ml solution</i> | TIER 1 | PA, QL (765 PER 30 DAY(S)), PV |
| <i>metformin hcl er</i> | <i>metformin hcl er (er 500 mg tab er 24h, er 750 mg tab er 24h)</i> | TIER 1 | PV |
| RIOMET ER | RIOMET ER 500 MG/5ML SRER <i>metformin hcl</i> | TIER 2 | PA, QL (765 PER 30 DAY(S)), PV |
| MEGLITINIDE ANALOGUES | | | |
| <i>nateglinide</i> | <i>nateglinide (60 mg tab, 120 mg tab)</i> | TIER 1 | PV |
| <i>repaglinide</i> | <i>repaglinide (0.5 mg tab, 1 mg tab, 2 mg tab)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|--|--------|--------------------------------------|
| DIABETIC OTHER | | | |
| BAQSIMI ONE PACK | BAQSIMI ONE PACK 3 MG/DOSE POWDER <i>glucagon</i> | TIER 2 | QL (2 PER RX) |
| BAQSIMI TWO PACK | BAQSIMI TWO PACK 3 MG/DOSE POWDER <i>glucagon</i> | TIER 2 | QL (2 PER RX) |
| <i>diazoxide</i> | <i>diazoxide 50 mg/ml suspension</i> | TIER 1 | |
| GLUCAGEN HYPOKIT | GLUCAGEN HYPOKIT 1 MG RECON SOLN <i>glucagon hcl (rdna)</i> | TIER 2 | QL (2 PER RX) |
| GLUCAGON EMERGENCY | GLUCAGON EMERGENCY 1 MG KIT <i>glucagon (rdna)</i> | TIER 1 | QL (2 PER RX) |
| GLUCAGON EMERGENCY | GLUCAGON EMERGENCY 1 MG/ML RECON SOLN <i>glucagon hcl</i> | TIER 2 | QL (2 PER RX) |
| GVOKE HYPOPEN 1-PACK | GVOKE HYPOPEN 1- PACK (0.5 MG/0.1ML SOLN A-INJ, 1 MG/0.2ML SOLN A-INJ) <i>glucagon</i> | TIER 2 | QL (2 PER FILL(S)) |
| GVOKE HYPOPEN 2-PACK | GVOKE HYPOPEN 2- PACK (0.5 MG/0.1ML SOLN A-INJ, 1 MG/0.2ML SOLN A-INJ) <i>glucagon</i> | TIER 2 | QL (2 PER FILL(S)) |
| GVOKE KIT | GVOKE KIT 1 MG/0.2ML SOLUTION <i>glucagon</i> | TIER 2 | QL (2 PER FILL(S)) |
| GVOKE PFS | GVOKE PFS (0.5 MG/0.1ML SOLN PRSYR, 1 MG/0.2ML SOLN PRSYR) <i>glucagon</i> | TIER 2 | QL (2 PER RX) |
| ZEGALOGUE | ZEGALOGUE (0.6 SOLN A-INJ, 0.6 SOLN PRSYR) <i>dasiglucagon hcl</i> | TIER 3 | |
| PROGESTERONE RECEPTOR ANTAGONISTS | | | |
| KORLYM | KORLYM 300 MG TAB <i>mifepristone (hyperglycemia)</i> | SP-NP | PA, QL (120 PER 30 DAY(S)), S, GA |
| <i>mifepristone</i> | <i>mifepristone 300 mg tab</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------------|
| ALPHA-GLUCOSIDASE INHIBITORS | | | |
| <i>acarbose</i> | <i>acarbose (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| <i>miglitol</i> | <i>miglitol (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| ANTIDIABETIC-ANTI-CD3 ANTIBODIES | | | |
| TZIELD | TZIELD 2 MG/2ML SOLUTION <i>teplizumab-mzww</i> | SP-M | PA, QL (14 PER LIFETIME), S |
| DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS | | | |
| <i>alogliptin benzoate</i> | <i>alogliptin benzoate (6.25 mg tab, 12.5 mg tab, 25 mg tab)</i> | TIER 1 | |
| JANUVIA | JANUVIA (25 MG TAB, 50 MG TAB, 100 MG TAB) <i>sitagliptin phosphate</i> | TIER 2 | PV |
| THIAZOLIDINEDIONES | | | |
| <i>pioglitazone hcl</i> | <i>pioglitazone hcl (15 mg tab, 30 mg tab, 45 mg tab)</i> | TIER 1 | PV |
| SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS | | | |
| FARXIGA | FARXIGA (5 MG TAB, 10 MG TAB) <i>dapagliflozin propanediol</i> | TIER 2 | PV |
| JARDIANCE | JARDIANCE (10 MG TAB, 25 MG TAB) <i>empagliflozin</i> | TIER 2 | PV |
| DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS | | | |
| <i>alogliptin-metformin hcl</i> | <i>alogliptin-metformin hcl (12.5-1000 mg tab, 12.5-500 mg tab)</i> | TIER 1 | |
| JANUMET | JANUMET (50-1000 MG TAB, 50-500 MG TAB) <i>sitagliptin-metformin hcl</i> | TIER 2 | PV |
| JANUMET XR | JANUMET XR (50-1000 MG TAB ER 24H, 50-500 MG TAB ER 24H, 100-1000 MG TAB ER 24H) <i>sitagliptin-metformin hcl</i> | TIER 2 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS | | | |
| <i>alogliptin-pioglitazone</i> | <i>alogliptin-pioglitazone</i> (12.5-15 mg tab, 12.5-30 mg tab, 12.5-45 mg tab, 25-15 mg tab, 25-30 mg tab, 25-45 mg tab) | TIER 1 | |
| SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB | | | |
| SYNJARDY | SYNJARDY (5-1000 MG TAB, 5-500 MG TAB, 12.5-1000 MG TAB, 12.5-500 MG TAB) <i>empagliflozin-metformin hcl</i> | TIER 2 | PV |
| SYNJARDY XR | SYNJARDY XR (5-1000 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 12.5-1000 MG TAB ER 24H, 25-1000 MG TAB ER 24H) <i>empagliflozin-metformin hcl</i> | TIER 2 | PV |
| XIGDUO XR | XIGDUO XR (2.5-1000 MG TAB ER 24H, 5-1000 MG TAB ER 24H, 5-500 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 10-500 MG TAB ER 24H) <i>dapagliflozin-metformin hcl</i> | TIER 2 | PV |
| SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS | | | |
| GLYXAMBI | GLYXAMBI (10-5 MG TAB, 25-5 MG TAB) <i>empagliflozin-linagliptin</i> | TIER 2 | PV |
| SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB | | | |
| TRIJARDY XR | TRIJARDY XR (5-2.5-1000 MG TAB ER 24H, 10-5-1000 MG TAB ER 24H, 12.5-2.5-1000 MG TAB ER 24H, 25-5-1000 MG TAB ER 24H) <i>empagliflozin-linagliptin-metformin</i> | TIER 2 | PV |
| SULFONYLUREA-BIGUANIDE COMBINATIONS | | | |
| <i>glipizide-metformin hcl</i> | <i>glipizide-metformin hcl</i> (2.5-250 mg tab, 2.5-500 mg tab, 5-500 mg tab) | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| <i>glyburide-metformin</i> | <i>glyburide-metformin (1.25-250 mg tab, 2.5-500 mg tab, 5-500 mg tab)</i> | TIER 1 | PV |
| SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS | | | |
| <i>pioglitazone hcl-glimepiride</i> | <i>pioglitazone hcl-glimepiride (30-2 mg tab, 30-4 mg tab)</i> | TIER 1 | PV |
| THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS | | | |
| <i>pioglitazone hcl-metformin hcl</i> | <i>pioglitazone hcl-metformin hcl (-metformin 15-500 mg tab, -metformin 15-850 mg tab)</i> | TIER 1 | PV |
| THYROID AGENTS | | | |
| THYROID HORMONES | | | |
| <i>euthyrox</i> | <i>euthyrox (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab)</i> | TIER 1 | |
| <i>levo-t</i> | <i>levo-t (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab)</i> | TIER 1 | |
| <i>levothyroxine sodium</i> | <i>levothyroxine sodium (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab)</i> | TIER 1 | |
| <i>levoxyl</i> | <i>levoxyl (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab)</i> | TIER 1 | |
| <i>liothyronine sodium</i> | <i>liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|------------------------|
| SYNTHROID | SYNTHROID (25 MCG TAB, 50 MCG TAB, 75 MCG TAB, 88 MCG TAB, 100 MCG TAB, 112 MCG TAB, 125 MCG TAB, 137 MCG TAB, 150 MCG TAB, 175 MCG TAB, 200 MCG TAB, 300 MCG TAB) <i>levothyroxine sodium</i> | TIER 2 | GA |
| <i>unithroid</i> | <i>unithroid (25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab)</i> | TIER 1 | |
| ANTITHYROID AGENTS | | | |
| <i>methimazole</i> | <i>methimazole (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>propylthiouracil</i> | <i>propylthiouracil 50 mg tab</i> | TIER 1 | |
| OXYTOCICS | | | |
| <i>methergine</i> | <i>methergine 0.2 mg tab</i> | TIER 1 | QL (56 PER 365 DAY(S)) |
| <i>methylergonovine maleate</i> | <i>methylergonovine maleate 0.2 mg tab</i> | TIER 1 | QL (56 PER 365 DAY(S)) |
| ENDOCRINE AND METABOLIC AGENTS - MISC. | | | |
| BISPHOSPHONATES | | | |
| <i>alendronate sodium</i> | <i>alendronate sodium (5 mg tab, 10 mg tab, 35 mg tab, 70 mg tab)</i> | TIER 1 | PV |
| <i>ibandronate sodium</i> | <i>ibandronate sodium 150 mg tab</i> | TIER 1 | PV |
| <i>pamidronate disodium</i> | <i>pamidronate disodium (6 mg/ml solution, 30 mg recon soln, 30 mg/10ml solution, 90 mg recon soln, 90 mg/10ml solution)</i> | SP-M | S |
| RECLAST | RECLAST 5 MG/100ML SOLUTION <i>zoledronic acid</i> | SP-M | S, GA |
| <i>risedronate sodium</i> | <i>risedronate sodium (5 mg tab, 30 mg tab, 35 mg tab, 35 mg tab dr, 150 mg tab)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------------|
| <i>zoledronic acid</i> | <i>zoledronic acid (4 mg/100ml solution, 4 mg/5ml conc, 5 mg/100ml solution)</i> | SP-M | S |
| CALCITONINS | | | |
| <i>calcitonin (salmon)</i> | <i>calcitonin (salmon) 200 unit/act solution</i> | TIER 1 | |
| PARATHYROID HORMONE AND DERIVATIVES | | | |
| NATPARA | NATPARA (25 MCG CARTRIDGE, 50 MCG CARTRIDGE, 75 MCG CARTRIDGE, 100 MCG CARTRIDGE) <i>parathyroid hormone (recombinant)</i> | SP-M | S |
| TERIPARATIDE (RECOMBINANT) | TERIPARATIDE (RECOMBINANT) 620 MCG/2.48ML SOLN PEN <i>teriparatide (recombinant)</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| RANK LIGAND (RANKL) INHIBITORS | | | |
| PROLIA | PROLIA 60 MG/ML SOLN PRSYR <i>denosumab</i> | SP-M | S |
| XGEVA | XGEVA 120 MG/1.7ML SOLUTION <i>denosumab</i> | SP-M | S |
| SCLEROSTIN INHIBITORS | | | |
| EVENITY | EVENITY 105 MG/1.17ML SOLN PRSYR <i>romosozumab-aqqg</i> | SP-M | PA, QL (2 PER 28 DAY(S)), S |
| SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS) | | | |
| <i>raloxifene hcl</i> | <i>raloxifene hcl 60 mg tab</i> | TIER 1 | PA, PV |
| OVULATION STIMULANTS-GONADOTROPINS | | | |
| CHORIONIC GONADOTROPIN | CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN <i>chorionic gonadotropin</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|-----------------------|
| FOLLISTIM AQ | FOLLISTIM AQ (300 UNT/0.36ML SOLUTION, 600 UNT/0.72ML SOLUTION, 900 UNT/1.08ML SOLUTION) <i>follitropin beta</i> | SP-M | S |
| GONAL-F | GONAL-F (450 RECON SOLN, 1050 RECON SOLN) <i>follitropin alfa</i> | SP-M | S |
| GONAL-F RFF | GONAL-F RFF 75 UNIT RECON SOLN <i>follitropin alfa</i> | SP-M | S |
| GONAL-F RFF REDIJECT | GONAL-F RFF REDIJECT (300 UNIT/0.5ML SOLN PEN, 450 UNT/0.75ML SOLN PEN, 900 UNIT/1.5ML SOLN PEN) <i>follitropin alfa</i> | SP-M | S |
| MENOPUR | MENOPUR 75 UNIT RECON SOLN <i>menotropins</i> | SP-M | S |
| NOVAREL | NOVAREL (5000 RECON SOLN, 10000 RECON SOLN) <i>chorionic gonadotropin</i> | SP-M | S |
| OVIDREL | OVIDREL 250 MCG/0.5ML SOLN PRSYR <i>choriogonadotropin alfa</i> | SP-M | S |
| PREGNYL | PREGNYL 10000 UNIT RECON SOLN <i>chorionic gonadotropin</i> | SP-M | S |
| LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS | | | |
| FENSOLVI (6 MONTH) | FENSOLVI (6 MONTH) 45 MG KIT <i>leuprolide acetate (cpp) (6 month)</i> | SP-M | S |
| LUPRON DEPOT-PED (1-MONTH) | LUPRON DEPOT-PED (1-MONTH) (7.5 MG KIT, 11.25 MG KIT, 15 MG KIT) <i>leuprolide acetate (cpp)</i> | SP-M | S |
| LUPRON DEPOT-PED (3-MONTH) | LUPRON DEPOT-PED (3-MONTH) (11.25 MG (PED) KIT, 30 MG KIT) <i>leuprolide acetate (cpp) (3 month)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|-------|--|
| LUPRON DEPOT-PED (6-MONTH) | LUPRON DEPOT-PED (6-MONTH) 45 MG KIT <i>leuprolide acetate (cpp) (6 month)</i> | SP-M | S |
| SUPPRELIN LA | SUPPRELIN LA 50 MG KIT <i>histrelin acetate (cpp)</i> | SP-M | S |
| TRIPTODUR | TRIPTODUR 22.5 MG SRER <i>triptorelin pamoate (cpp)</i> | SP-M | S |
| LHRH/GNRH AGONIST ANALOG COMBINATIONS | | | |
| LUPANETA PACK | LUPANETA PACK (PACK3.755MGKIT, PACK11.255MGKIT) <i>leuprolide acetate & norethindrone acetate</i> | SP-M | S |
| GNRH/LHRH ANTAGONISTS | | | |
| <i>cetorelix acetate</i> | <i>cetorelix acetate 0.25 mg kit</i> | SP-M | S |
| CETROTIDE | CETROTIDE 0.25 MG KIT <i>cetorelix acetate</i> | SP-M | S, GA |
| <i>fyremadel</i> | <i>fyremadel 250 mcg/0.5ml soln prsyr</i> | SP-M | S |
| <i>ganirelix acetate</i> | <i>ganirelix acetate 250 mcg/0.5ml soln prsyr</i> | SP-M | S |
| GROWTH HORMONES | | | |
| HUMATROPE | HUMATROPE (5 MG RECON SOLN, 6 MG CARTRIDGE, 12 MG CARTRIDGE, 24 MG CARTRIDGE) <i>somatropin</i> | SP-P | PA, S |
| NORDITROPIN FLEXPRO | NORDITROPIN FLEXPRO (5 MG/1.5ML SOLN PEN, 10 MG/1.5ML SOLN PEN, 15 MG/1.5ML SOLN PEN, 30 MG/3ML SOLN PEN) <i>somatropin</i> | SP-P | PA, S |
| OMNITROPE | OMNITROPE (5 MG/1.5ML SOLN CART, 5.8 MG RECON SOLN, 10 MG/1.5ML SOLN CART) <i>somatropin</i> | SP-NP | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|--|
| SEROSTIM | SEROSTIM (4 MG RECON SOLN, 5 MG RECON SOLN, 6 MG RECON SOLN) <i>somatropin (non-refrigerated)</i> | SP-NP | PA, S |
| ZORBTIVE | ZORBTIVE 8.8 MG RECON SOLN <i>somatropin (non-refrigerated)</i> | SP-NP | PA, S |
| INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS) | | | |
| INCRELEX | INCRELEX 40 MG/4ML SOLUTION <i>mecasermin</i> | SP-P | PA, S |
| SOMATOSTATIC AGENTS | | | |
| BYNFEZIA PEN | BYNFEZIA PEN 2500 MCG/ML (2.8 ML) SOLN PEN <i>octreotide acetate</i> | SP-P | S |
| <i>lanreotide acetate</i> | <i>lanreotide acetate 120 mg/0.5ml solution</i> | SP-M | PA, S |
| OCTREOTIDE ACETATE | OCTREOTIDE ACETATE (50 MCG/ML SOLN PRSYR, 100 MCG/ML SOLN PRSYR, 500 MCG/ML SOLN PRSYR) <i>octreotide acetate</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| <i>octreotide acetate</i> | <i>octreotide acetate (50 mcg/ml solution, 100 mcg/ml solution, 500 mcg/ml solution)</i> | SP-P | QL (3 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>octreotide acetate</i> | <i>octreotide acetate 1000 mcg/ml solution</i> | SP-P | QL (9 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>octreotide acetate</i> | <i>octreotide acetate 20 mg kit</i> | SP-M | PA, QL (2 PER 28 DAY(S)), S |
| <i>octreotide acetate</i> | <i>octreotide acetate 200 mcg/ml solution</i> | SP-P | QL (45 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>octreotide acetate</i> | <i>octreotide acetate 30 mg kit</i> | SP-M | PA, QL (1 PER 28 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|---------------------------------|
| SANDOSTATIN | SANDOSTATIN (50 MCG/ML SOLUTION, 100 MCG/ML SOLUTION, 500 MCG/ML SOLUTION) <i>octreotide acetate</i> | SP-NP | QL (3 PER 1 DAY), S, GA |
| SANDOSTATIN LAR DEPOT | SANDOSTATIN LAR DEPOT (10 MG KIT, 30 MG KIT) <i>octreotide acetate</i> | SP-M | PA, QL (1 PER 28 DAY(S)), S, GA |
| SANDOSTATIN LAR DEPOT | SANDOSTATIN LAR DEPOT 20 MG KIT <i>octreotide acetate</i> | SP-M | PA, QL (2 PER 28 DAY(S)), S, GA |
| SIGNIFOR | SIGNIFOR (0.3 MG/ML SOLUTION, 0.6 MG/ML SOLUTION, 0.9 MG/ML SOLUTION) <i>pasireotide diaspertate</i> | SP-P | QL (2 PER 1 DAY), S |
| SIGNIFOR LAR | SIGNIFOR LAR (10 MG, 20 MG, 30 MG, 40 MG, 60 MG) <i>pasireotide pamoate</i> | SP-M | PA, S |
| SOMATULINE DEPOT | SOMATULINE DEPOT (60 MG/0.2ML SOLUTION, 90 MG/0.3ML SOLUTION, 120 MG/0.5ML SOLUTION) <i>lanreotide acetate</i> | SP-M | PA, S |
| GROWTH HORMONE RECEPTOR ANTAGONISTS | | | |
| SOMAVERT | SOMAVERT (10 MG RECON SOLN, 15 MG RECON SOLN, 20 MG RECON SOLN, 25 MG RECON SOLN, 30 MG RECON SOLN) <i>pegvisomant</i> | SP-P | PA, QL (1 PER 1 DAY), S |
| INSULIN-LIKE GROWTH FACTOR-1 RECEPTOR INHIBITORS(IGF-1R) | | | |
| TEPEZZA | TEPEZZA 500 MG RECON SOLN <i>teprotumumab-trbw</i> | SP-M | PA, S |
| VASOPRESSIN | | | |
| <i>desmopressin ace spray refrig</i> | <i>desmopressin ace spray refrig 0.01 % solution</i> | TIER 1 | |
| <i>desmopressin acetate</i> | <i>desmopressin acetate (0.1 mg tab, 0.2 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|--|
| DESMOPRESSIN ACETATE | DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION <i>desmopressin acetate</i> | SP-NP | S |
| <i>desmopressin acetate spray</i> | <i>desmopressin acetate spray 0.01 % solution</i> | TIER 1 | |
| STIMATE | STIMATE 1.5 MG/ML SOLUTION <i>desmopressin acetate</i> | SP-NP | S |
| CORTICOTROPIN | | | |
| ACTHAR | ACTHAR 80 UNIT/ML GEL <i>corticotropin</i> | SP-M | PA, S |
| ACTHAR GEL | ACTHAR GEL (GEL 40 UNIT/0.5ML A-INJ, GEL 80 UNIT/ML A-INJ) <i>corticotropin</i> | SP-NP | PA, QL (21 PENS PER 21 DAY(S)), S |
| CORTROPHIN | CORTROPHIN 80 UNIT/ML GEL <i>corticotropin</i> | SP-M | PA, S |
| DOPAMINE RECEPTOR AGONISTS | | | |
| <i>cabergoline</i> | <i>cabergoline 0.5 mg tab</i> | TIER 1 | |
| SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS | | | |
| JYNARQUE | JYNARQUE (15 MG TAB THPK, 30 & 15 MG TAB THPK, 45 & 15 MG TAB THPK, 60 & 30 MG TAB THPK, 90 & 30 MG TAB THPK) <i>tolvaptan</i> | SP-P | PA, QL (56 PER 28 DAY(S)), S |
| JYNARQUE | JYNARQUE 15 MG TAB <i>tolvaptan</i> | SP-NP | PA, QL (60 PER 30 DAYS), S, GA |
| JYNARQUE | JYNARQUE 30 MG TAB <i>tolvaptan</i> | SP-P | PA, QL (60 PER 30 DAYS), S, GA |
| SAMSCA | SAMSCA (15 MG TAB, 30 MG TAB) <i>tolvaptan</i> | SP-NP | PA, QL (60 PER 30 DAYS), S, GA |
| <i>tolvaptan</i> | <i>tolvaptan (15 mg tab, 30 mg tab)</i> | SP-P | PA, QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|---|
| ACID SPHINGOMYELINASE DEFICIENCY (ASMD) - AGENTS | | | |
| XENPOZYME | XENPOZYME (4 MG RECON SOLN, 20 MG RECON SOLN) <i>olipudase alfa-rpcp</i> | SP-M | PA, S |
| ADENOSINE DEAMINASE SCID TREATMENT - AGENTS | | | |
| REVCOVI | REVCOVI 2.4 MG/1.5ML SOLUTION <i>elapegademase-lvlr</i> | SP-M | PA, S |
| ALPHA-MANNOSIDOSIS TREATMENT - AGENTS | | | |
| LAMZEDE | LAMZEDE 10 MG RECON SOLN <i>velmanase alfa-tycv</i> | SP-M | PA, S |
| CARNITINE REPLENISHER - AGENTS | | | |
| <i>levocarnitine</i> | <i>levocarnitine (1 gm/10ml solution, 330 mg tab)</i> | TIER 1 | |
| <i>levocarnitine sf</i> | <i>levocarnitine sf 1 gm/10ml solution</i> | TIER 1 | |
| FABRY DISEASE - AGENTS | | | |
| ELFABRIO | ELFABRIO (5 MG/2.5ML SOLUTION, 20 MG/10ML SOLUTION) <i>pegunigalsidase alfa-iwxj</i> | SP-M | PA, S |
| FABRAZYME | FABRAZYME (5 MG RECON SOLN, 35 MG RECON SOLN) <i>agalsidase beta</i> | SP-M | PA, S |
| GALAFOLD | GALAFOLD 123 MG CAP <i>migalastat hcl</i> | SP-P | PA, QL (14 PER 28 DAY(S)), S |
| HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS | | | |
| <i>nitisinone</i> | <i>nitisinone (2 mg cap, 5 mg cap, 10 mg cap, 20 mg cap)</i> | SP-P | PA, SBG (Specialty Biosimilars and Specialty generics), S |
| HOMOCYSTINURIA TREATMENT - AGENTS | | | |
| <i>betaine</i> | <i>betaine powder</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| CYSTADANE | CYSTADANE POWDER <i>betaine</i> | SP-NP | S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|---|
| HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS | | | |
| <i>calcitriol</i> | <i>calcitriol (0.25 mcg cap, 0.5 mcg cap, 1 mcg/ml solution)</i> | TIER 1 | |
| <i>doxercalciferol</i> | <i>doxercalciferol (0.5 mcg cap, 1 mcg cap, 2.5 mcg cap)</i> | TIER 1 | |
| <i>paricalcitol</i> | <i>paricalcitol (1 mcg cap, 2 mcg cap, 4 mcg cap)</i> | TIER 1 | |
| HYPOPARATHYROID TREATMENT - PARATHYROID HORMONE ANALOGS | | | |
| YORVIPATH | YORVIPATH (168 MCG/0.56ML SOLN PEN, 294 MCG/0.98ML SOLN PEN, 420 MCG/1.4ML SOLN PEN) <i>palopegteriparatide</i> | P&T | QL (2 PENS PER 28 DAY(S)), S |
| CALCIMIMETIC AGENTS | | | |
| <i>cinacalcet hcl</i> | <i>cinacalcet hcl (30 mg tab, 60 mg tab)</i> | SP-P | QL (2 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>cinacalcet hcl</i> | <i>cinacalcet hcl 90 mg tab</i> | SP-P | QL (4 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| PARSABIV | PARSABIV (2.5 MG/0.5ML SOLUTION, 5 MG/ML SOLUTION, 10 MG/2ML SOLUTION) <i>etelcalcetide hcl</i> | SP-M | S |
| HYPOPHOSPHATASIA (HPP) AGENTS | | | |
| STRENSIQ | STRENSIQ (18 MG/0.45ML SOLUTION, 28 MG/0.7ML SOLUTION, 40 MG/ML SOLUTION, 80 MG/0.8ML SOLUTION) <i>asfotase alfa</i> | SP-P | PA, S |
| LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS | | | |
| KANUMA | KANUMA 20 MG/10ML SOLUTION <i>sebelipase alfa</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|------|--------------------------------------|
| MOLYBDENUM COFACTOR DEFICIENCY (MOCD) - AGENTS | | | |
| NULIBRY | NULIBRY 9.5 MG RECON SOLN <i>fosdenopterin hydrobromide</i> | SP-M | PA, QL (5 PER 1 DAY), S |
| MUCOPOLYSACCHARIDOSIS I (MPS I) - AGENTS | | | |
| ALDURAZYME | ALDURAZYME 2.9 MG/5ML SOLUTION <i>laronidase</i> | SP-M | PA, S |
| MUCOPOLYSACCHARIDOSIS II (MPS II) - AGENTS | | | |
| ELAPRASE | ELAPRASE 6 MG/3ML SOLUTION <i>idursulfase</i> | SP-M | PA, S |
| MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS | | | |
| VIMIZIM | VIMIZIM 5 MG/5ML SOLUTION <i>elosulfase alfa</i> | SP-M | PA, S |
| MUCOPOLYSACCHARIDOSIS VI (MPS VI) - AGENTS | | | |
| NAGLAZYME | NAGLAZYME 1 MG/ML SOLUTION <i>galsulfase</i> | SP-M | PA, S |
| MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS | | | |
| MEPSEVII | MEPSEVII 10 MG/5ML SOLUTION <i>vestronidase alfa-vjbk</i> | SP-M | PA, S |
| GAA DEFICIENCY TREATMENT - AGENTS | | | |
| LUMIZYME | LUMIZYME 50 MG RECON SOLN <i>alglucosidase alfa</i> | SP-M | PA, S |
| NEXVIAZYME | NEXVIAZYME 100 MG RECON SOLN <i>avalglucosidase alfa-ngpt</i> | SP-M | PA, S |
| OPFOLDA | OPFOLDA 65 MG CAP <i>miglustat (gaa deficiency)</i> | SP-M | PA, QL (8 CAPSULES PER 28 DAY(S)), S |
| POMBILITI | POMBILITI 105 MG RECON SOLN <i>cipaglucosidase alfa-atga</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|--|-------|---|
| UREA CYCLE DISORDER - AGENTS | | | |
| BUPHENYL | BUPHENYL 3 GM/TSP POWDER <i>sodium phenylbutyrate</i> | SP-NP | QL (25 PER 1 DAY(S)), S, GA |
| BUPHENYL | BUPHENYL 500 MG TAB <i>sodium phenylbutyrate</i> | SP-NP | QL (40 PER 1 DAY(S)), S, GA |
| OLPRUVA (2 GM DOSE) | OLPRUVA (2 GM DOSE) 2 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| OLPRUVA (3 GM DOSE) | OLPRUVA (3 GM DOSE) 3 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| OLPRUVA (4 GM DOSE) | OLPRUVA (4 GM DOSE) 2 & 2 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| OLPRUVA (5 GM DOSE) | OLPRUVA (5 GM DOSE) 2 & 3 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| OLPRUVA (6 GM DOSE) | OLPRUVA (6 GM DOSE) 3 & 3 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| OLPRUVA (6.67 GM DOSE) | OLPRUVA (6.67 GM DOSE) 3 & 3.67 GM THER PACK <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S |
| PHEBURANE | PHEBURANE 483 MG/GM PELLETT <i>sodium phenylbutyrate</i> | SP-NP | PA, QL (46.4 PER 1 DAY), S |
| <i>sodium phenylbutyrate</i> | <i>sodium phenylbutyrate 3 gm/tsp powder</i> | SP-P | QL (25 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>sodium phenylbutyrate</i> | <i>sodium phenylbutyrate 500 mg tab</i> | SP-P | QL (40 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| HYPERAMMONEMIA TREATMENT - AGENTS | | | |
| CARBAGLU | CARBAGLU 200 MG TAB SOL <i>carglumic acid</i> | SP-NP | S, GA |
| <i>carglumic acid</i> | <i>carglumic acid 200 mg tab sol</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| PHENYLKETONURIA TREATMENT - AGENTS | | | |
| <i>javygtor</i> | <i>javygtor (100 mg packet, 100 mg tab, 500 mg packet)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|--|
| PALYNZIQ | PALYNZIQ 10 MG/0.5ML SOLN PRSYR <i>pegvaliase-pqpz</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| PALYNZIQ | PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR <i>pegvaliase-pqpz</i> | SP-P | PA, QL (8 PER 30 DAY(S)), S |
| PALYNZIQ | PALYNZIQ 20 MG/ML SOLN PRSYR <i>pegvaliase-pqpz</i> | SP-P | PA, QL (3 PER 1 DAY), S |
| <i>sapropterin dihydrochloride</i> | <i>sapropterin dihydrochloride</i> (100 mg packet, 100 mg tab, 500 mg packet) | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| TRIPLEPTIDYL PEPTIDASE 1 DEFICIENCY TREATMENT - AGENTS | | | |
| BRINEURA | BRINEURA 2 X 150 MG/5ML KIT <i>cerliponase alfa</i> | SP-M | PA, S |
| X-LINKED HYPOPHOSPHATEMIA (XLH) TREATMENT - AGENTS | | | |
| CRYSVITA | CRYSVITA (10 MG/ML SOLUTION, 20 MG/ML SOLUTION, 30 MG/ML SOLUTION) <i>burosumab-twza</i> | SP-M | PA, S |
| NATRIURETIC PEPTIDES | | | |
| VOXZOGO | VOXZOGO (0.4 MG RECON SOLN, 0.56 MG RECON SOLN, 1.2 MG RECON SOLN) <i>vosoritide</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| CARDIOTONICS | | | |
| CARDIAC GLYCOSIDES | | | |
| <i>digitek</i> | <i>digitek</i> (125 mcg tab, 250 mcg tab) | TIER 1 | |
| <i>digox</i> | <i>digox</i> (125 mcg tab, 250 mcg tab) | TIER 1 | |
| <i>digoxin</i> | <i>digoxin</i> (0.05 mg/ml solution, 62.5 mcg tab, 125 mcg tab, 250 mcg tab) | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|--------|-----------------------|
| ANTIANGINAL AGENTS | | | |
| NITRATES | | | |
| <i>isosorbide dinitrate</i> | <i>isosorbide dinitrate (5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab)</i> | TIER 1 | |
| <i>isosorbide mononitrate</i> | <i>isosorbide mononitrate (10 mg tab, 20 mg tab)</i> | TIER 1 | |
| <i>isosorbide mononitrate er</i> | <i>isosorbide mononitrate er (er 30 mg tab er 24h, er 60 mg tab er 24h, er 120 mg tab er 24h)</i> | TIER 1 | |
| <i>minitran</i> | <i>minitran (0.1 patch 24hr, 0.2 patch 24hr, 0.4 patch 24hr, 0.6 patch 24hr)</i> | TIER 1 | |
| NITRO-BID | NITRO-BID 2 % OINTMENT <i>nitroglycerin</i> | TIER 3 | |
| <i>nitroglycerin</i> | <i>nitroglycerin (0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.4 mg/spray solution, 0.6 mg sl tab, 0.6 mg/hr patch 24hr)</i> | TIER 1 | |
| ANTIANGINALS-OTHER | | | |
| <i>ranolazine er</i> | <i>ranolazine er (er 500 mg tab er 12h, er 1000 mg tab er 12h)</i> | TIER 1 | |
| BETA BLOCKERS | | | |
| BETA BLOCKERS NON-SELECTIVE | | | |
| HEMANGEOL | HEMANGEOL 4.28 MG/ML SOLUTION <i>propranolol hcl</i> | SP-P | S |
| <i>nadolol</i> | <i>nadolol (20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | PV |
| <i>pindolol</i> | <i>pindolol (5 mg tab, 10 mg tab)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>propranolol hcl</i> | <i>propranolol hcl (10 mg tab, 20 mg tab, 20 mg/5ml solution, 40 mg tab, 40 mg/5ml solution, 60 mg tab, 80 mg tab)</i> | TIER 1 | PV |
| <i>propranolol hcl er</i> | <i>propranolol hcl er (er 60 mg cap er 24h, er 80 mg cap er 24h, er 120 mg cap er 24h, er 160 mg cap er 24h)</i> | TIER 1 | PV |
| <i>sorine</i> | <i>sorine (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i> | TIER 1 | PV |
| <i>sotalol hcl</i> | <i>sotalol hcl (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i> | TIER 1 | PV |
| <i>sotalol hcl (af)</i> | <i>sotalol hcl (af) (80 mg tab, 120 mg tab, 160 mg tab)</i> | TIER 1 | PV |
| <i>timolol maleate</i> | <i>timolol maleate (5 mg tab, 10 mg tab)</i> | TIER 1 | PV |
| <i>timolol maleate</i> | <i>timolol maleate 20 mg tab</i> | TIER 3 | PV |
| BETA BLOCKERS CARDIO-SELECTIVE | | | |
| <i>acebutolol hcl</i> | <i>acebutolol hcl (200 mg cap, 400 mg cap)</i> | TIER 1 | PV |
| <i>atenolol</i> | <i>atenolol (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| <i>betaxolol hcl</i> | <i>betaxolol hcl (10 mg tab, 20 mg tab)</i> | TIER 1 | PV |
| <i>bisoprolol fumarate</i> | <i>bisoprolol fumarate (5 mg tab, 10 mg tab)</i> | TIER 1 | PV |
| <i>metoprolol succinate er</i> | <i>metoprolol succinate er (er 25 mg tab er 24h, er 50 mg tab er 24h, er 100 mg tab er 24h, er 200 mg tab er 24h)</i> | TIER 1 | PV |
| <i>metoprolol tartrate</i> | <i>metoprolol tartrate (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| <i>nebivolol hcl</i> | <i>nebivolol hcl (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i> | TIER 1 | PV |
| ALPHA-BETA BLOCKERS | | | |
| <i>carvedilol</i> | <i>carvedilol (3.125 mg tab, 6.25 mg tab, 12.5 mg tab, 25 mg tab)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|---|--------|-----------------------|
| <i>carvedilol phosphate er</i> | <i>carvedilol phosphate er (er 10 mg cap er 24h, er 20 mg cap er 24h, er 40 mg cap er 24h, er 80 mg cap er 24h)</i> | TIER 1 | |
| <i>labetalol hcl</i> | <i>labetalol hcl (100 mg tab, 200 mg tab, 300 mg tab)</i> | TIER 1 | PV |
| CALCIUM CHANNEL BLOCKERS | | | |
| <i>amlodipine besylate</i> | <i>amlodipine besylate (2.5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>amlodipine besylate</i> | <i>amlodipine besylate 5 mg tab</i> | TIER 1 | |
| <i>cartia xt</i> | <i>cartia xt (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h)</i> | TIER 1 | |
| <i>dilt-xr</i> | <i>dilt-xr (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h)</i> | TIER 1 | |
| <i>diltiazem hcl</i> | <i>diltiazem hcl (25 mg/5ml solution, 60 mg tab, 120 mg tab)</i> | TIER 1 | |
| <i>diltiazem hcl</i> | <i>diltiazem hcl (30 mg tab, 90 mg tab)</i> | TIER 1 | |
| <i>diltiazem hcl er</i> | <i>diltiazem hcl er (er 90 mg cap er 12h, er 120 mg cap er 12h, er 120 mg cap er 24h, er 120 mg tab er 24h, er 180 mg cap er 24h, er 180 mg tab er 24h, er 240 mg cap er 24h, er 240 mg tab er 24h, er 300 mg tab er 24h, er 360 mg tab er 24h, er 420 mg tab er 24h)</i> | TIER 1 | |
| <i>diltiazem hcl er</i> | <i>diltiazem hcl er 60 mg cap er 12h</i> | TIER 1 | |
| <i>diltiazem hcl er beads</i> | <i>diltiazem hcl er beads (er beads 120 mg cap er 24h, er beads 180 mg cap er 24h, er beads 240 mg cap er 24h, er beads 300 mg cap er 24h, er beads 360 mg cap er 24h, er beads 420 mg cap er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|--------|-----------------------|
| <i>diltiazem hcl er coated beads</i> | <i>diltiazem hcl er coated beads (er beads 120 mg cap er 24h, er beads 180 mg cap er 24h, er beads 240 mg cap er 24h, er beads 300 mg cap er 24h)</i> | TIER 1 | |
| <i>diltiazem hcl er coated beads</i> | <i>diltiazem hcl er coated beads 360 mg cap er 24h</i> | TIER 1 | |
| <i>felodipine er</i> | <i>felodipine er (er 2.5 mg tab er 24h, er 5 mg tab er 24h, er 10 mg tab er 24h)</i> | TIER 1 | |
| <i>isradipine</i> | <i>isradipine (2.5 mg cap, 5 mg cap)</i> | TIER 1 | |
| <i>matzim la</i> | <i>matzim la (180 mg tab er 24h, 240 mg tab er 24h, 300 mg tab er 24h, 360 mg tab er 24h, 420 mg tab er 24h)</i> | TIER 1 | |
| <i>nicardipine hcl</i> | <i>nicardipine hcl 20 mg cap</i> | TIER 1 | |
| <i>nicardipine hcl</i> | <i>nicardipine hcl 30 mg cap</i> | TIER 1 | |
| <i>nifedipine</i> | <i>nifedipine (10 mg cap, 20 mg cap)</i> | TIER 1 | |
| <i>nifedipine er</i> | <i>nifedipine er (er 30 mg tab er 24h, er 60 mg tab er 24h, er 90 mg tab er 24h)</i> | TIER 1 | |
| <i>nifedipine er osmotic release</i> | <i>nifedipine er osmotic release (er 30 mg tab er 24h, er 60 mg tab er 24h, er 90 mg tab er 24h)</i> | TIER 1 | |
| <i>nimodipine</i> | <i>nimodipine 30 mg cap</i> | TIER 1 | |
| <i>nisoldipine er</i> | <i>nisoldipine er (er 8.5 mg tab er 24h, er 17 mg tab er 24h, er 20 mg tab er 24h, er 25.5 mg tab er 24h, er 30 mg tab er 24h, er 34 mg tab er 24h, er 40 mg tab er 24h)</i> | TIER 1 | |
| <i>taztia xt</i> | <i>taztia xt (120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 360 mg cap er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|---|--------|-----------------------|
| <i>tiadylt er</i> | <i>tiadylt er (er 120 mg cap er 24h, er 180 mg cap er 24h, er 240 mg cap er 24h, er 300 mg cap er 24h, er 360 mg cap er 24h, er 420 mg cap er 24h)</i> | TIER 1 | |
| <i>verapamil hcl</i> | <i>verapamil hcl (40 mg tab, 80 mg tab, 120 mg tab)</i> | TIER 1 | |
| VERAPAMIL HCL ER | VERAPAMIL HCL ER (ER 100 MG CAP ER 24H, ER 120 MG CAP ER 24H, ER 120 MG TAB ER, ER 180 MG CAP ER 24H, ER 180 MG TAB ER, ER 200 MG CAP ER 24H, ER 240 MG CAP ER 24H, ER 240 MG TAB ER, ER 300 MG CAP ER 24H, ER 360 MG CAP ER 24H) <i>verapamil hcl</i> | TIER 1 | |
| ANTIARRHYTHMICS | | | |
| ANTIARRHYTHMICS TYPE I-A | | | |
| <i>disopyramide phosphate</i> | <i>disopyramide phosphate (100 mg cap, 150 mg cap)</i> | TIER 1 | |
| NORPACE CR | NORPACE CR (100 MG CAP ER 12H, 150 MG CAP ER 12H) <i>disopyramide phosphate</i> | TIER 3 | |
| <i>quinidine gluconate er</i> | <i>quinidine gluconate er 324 mg tab er</i> | TIER 1 | |
| QUINIDINE SULFATE | QUINIDINE SULFATE (200 MG TAB, 300 MG TAB) <i>quinidine sulfate</i> | TIER 1 | GA |
| <i>quinidine sulfate</i> | <i>quinidine sulfate (200 mg tab, 300 mg tab)</i> | TIER 1 | |
| ANTIARRHYTHMICS TYPE I-B | | | |
| <i>mexiletine hcl</i> | <i>mexiletine hcl (150 mg cap, 200 mg cap, 250 mg cap)</i> | TIER 1 | |
| ANTIARRHYTHMICS TYPE I-C | | | |
| <i>flecainide acetate</i> | <i>flecainide acetate (50 mg tab, 100 mg tab, 150 mg tab)</i> | TIER 1 | |
| <i>propafenone hcl</i> | <i>propafenone hcl (150 mg tab, 225 mg tab, 300 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|--------|-----------------------------|
| <i>propafenone hcl er</i> | <i>propafenone hcl er (er 225 mg cap er 12h, er 325 mg cap er 12h, er 425 mg cap er 12h)</i> | TIER 1 | |
| ANTIARRHYTHMICS TYPE III | | | |
| <i>amiodarone hcl</i> | <i>amiodarone hcl (100 mg tab, 200 mg tab, 400 mg tab)</i> | TIER 1 | |
| <i>dofetilide</i> | <i>dofetilide (125 mcg cap, 250 mcg cap, 500 mcg cap)</i> | TIER 1 | |
| MULTAQ | MULTAQ 400 MG TAB <i>dronedarone hcl</i> | TIER 3 | |
| <i>pacерone</i> | <i>pacерone (100 mg tab, 200 mg tab, 400 mg tab)</i> | TIER 1 | |
| ANTIHYPERTENSIVES | | | |
| ACE INHIBITORS | | | |
| <i>benazepril hcl</i> | <i>benazepril hcl (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>captopril</i> | <i>captopril (12.5 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| <i>enalapril maleate</i> | <i>enalapril maleate (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i> | TIER 1 | PV |
| <i>enalapril maleate</i> | <i>enalapril maleate 1 mg/ml solution</i> | TIER 1 | PA, QL (1200 PER 30 DAY(S)) |
| <i>fosinopril sodium</i> | <i>fosinopril sodium (10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>lisinopril</i> | <i>lisinopril (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>moexipril hcl</i> | <i>moexipril hcl (7.5 mg tab, 15 mg tab)</i> | TIER 1 | PV |
| <i>perindopril erbumine</i> | <i>perindopril erbumine (2 mg tab, 4 mg tab, 8 mg tab)</i> | TIER 1 | PV |
| <i>quinapril hcl</i> | <i>quinapril hcl (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>ramipril</i> | <i>ramipril (1.25 mg cap, 2.5 mg cap, 5 mg cap, 10 mg cap)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| <i>trandolapril</i> | <i>trandolapril (1 mg tab, 2 mg tab, 4 mg tab)</i> | TIER 1 | PV |
| ANGIOTENSIN II RECEPTOR ANTAGONISTS | | | |
| <i>candesartan cilexetil</i> | <i>candesartan cilexetil (4 mg tab, 8 mg tab, 16 mg tab, 32 mg tab)</i> | TIER 1 | |
| EPROSARTAN MESYLATE | EPROSARTAN MESYLATE 600 MG TAB <i>eprosartan mesylate</i> | TIER 1 | PV |
| <i>irbesartan</i> | <i>irbesartan (75 mg tab, 150 mg tab, 300 mg tab)</i> | TIER 1 | |
| <i>losartan potassium</i> | <i>losartan potassium (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>olmesartan medoxomil</i> | <i>olmesartan medoxomil (5 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | |
| <i>telmisartan</i> | <i>telmisartan (20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | |
| <i>valsartan</i> | <i>valsartan (40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab)</i> | TIER 1 | |
| DIRECT RENIN INHIBITORS | | | |
| <i>aliskiren fumarate</i> | <i>aliskiren fumarate (150 mg tab, 300 mg tab)</i> | TIER 1 | |
| ANTIADRENERGICS - CENTRALLY ACTING | | | |
| <i>clonidine</i> | <i>clonidine (0.1 mg/24hr patch wk, 0.2 mg/24hr patch wk)</i> | TIER 1 | |
| <i>clonidine</i> | <i>clonidine 0.3 mg/24hr patch wk</i> | TIER 1 | |
| <i>clonidine hcl</i> | <i>clonidine hcl (0.1 mg tab, 0.2 mg tab, 0.3 mg tab)</i> | TIER 1 | |
| <i>guanfacine hcl</i> | <i>guanfacine hcl (1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>methyl dopa</i> | <i>methyl dopa (250 mg tab, 500 mg tab)</i> | TIER 2 | |
| ANTIADRENERGICS - PERIPHERALLY ACTING | | | |
| <i>doxazosin mesylate</i> | <i>doxazosin mesylate (1 mg tab, 2 mg tab, 4 mg tab, 8 mg tab)</i> | TIER 1 | |
| <i>prazosin hcl</i> | <i>prazosin hcl (1 mg cap, 2 mg cap, 5 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| <i>terazosin hcl</i> | <i>terazosin hcl (1 mg cap, 2 mg cap, 5 mg cap, 10 mg cap)</i> | TIER 1 | |
| SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS) | | | |
| <i>eplerenone</i> | <i>eplerenone (25 mg tab, 50 mg tab)</i> | TIER 1 | |
| AGENTS FOR PHEOCHROMOCYTOMA | | | |
| <i>metyrosine</i> | <i>metyrosine 250 mg cap</i> | TIER 1 | |
| <i>phenoxybenzamine hcl</i> | <i>phenoxybenzamine hcl 10 mg cap</i> | TIER 1 | |
| VASODILATORS | | | |
| <i>hydralazine hcl</i> | <i>hydralazine hcl (10 mg tab, 25 mg tab)</i> | TIER 1 | |
| <i>hydralazine hcl</i> | <i>hydralazine hcl (50 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>minoxidil</i> | <i>minoxidil (2.5 mg tab, 10 mg tab)</i> | TIER 1 | |
| ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS | | | |
| <i>amlodipine besy-benazepril hcl</i> | <i>amlodipine besy-benazepril hcl (2.5-10 mg cap, 5-10 mg cap, 5-20 mg cap, 5-40 mg cap, 10-20 mg cap, 10-40 mg cap)</i> | TIER 1 | PV |
| ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE | | | |
| <i>benazepril-hydrochlorothiazide</i> | <i>benazepril-hydrochlorothiazide (10-12.5 mg tab, 20-25 mg tab)</i> | TIER 1 | PV |
| <i>benazepril-hydrochlorothiazide</i> | <i>benazepril-hydrochlorothiazide (5-6.25 mg tab, 20-12.5 mg tab)</i> | TIER 1 | PV |
| <i>captopril-hydrochlorothiazide</i> | <i>captopril-hydrochlorothiazide 25-15 mg tab</i> | TIER 1 | PV |
| <i>enalapril-hydrochlorothiazide</i> | <i>enalapril-hydrochlorothiazide (5-12.5 mg tab, 10-25 mg tab)</i> | TIER 1 | PV |
| <i>fosinopril sodium-hctz</i> | <i>fosinopril sodium-hctz (10-12.5 mg tab, 20-12.5 mg tab)</i> | TIER 1 | PV |
| <i>lisinopril-hydrochlorothiazide</i> | <i>lisinopril-hydrochlorothiazide (10-12.5 mg tab, 20-25 mg tab)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| <i>lisinopril-hydrochlorothiazide</i> | <i>lisinopril-hydrochlorothiazide 20-12.5 mg tab</i> | TIER 1 | PV |
| <i>quinapril-hydrochlorothiazide</i> | <i>quinapril-hydrochlorothiazide (10-12.5 mg tab, 20-25 mg tab)</i> | TIER 1 | |
| QUINAPRIL-HYDROCHLOROTHIAZIDE | QUINAPRIL-HYDROCHLOROTHIAZIDE (20-12.5 MG TAB, 20-25 MG TAB) <i>quinapril-hydrochlorothiazide</i> | TIER 1 | GA |
| BETA BLOCKER & DIURETIC COMBINATIONS | | | |
| <i>atenolol-chlorthalidone</i> | <i>atenolol-chlorthalidone (50-25 mg tab, 100-25 mg tab)</i> | TIER 1 | PV |
| <i>bisoprolol-hydrochlorothiazide</i> | <i>bisoprolol-hydrochlorothiazide (2.5-6.25 mg tab, 10-6.25 mg tab)</i> | TIER 1 | PV |
| <i>bisoprolol-hydrochlorothiazide</i> | <i>bisoprolol-hydrochlorothiazide 5-6.25 mg tab</i> | TIER 1 | PV |
| <i>metoprolol-hydrochlorothiazide</i> | <i>metoprolol-hydrochlorothiazide (50-25 mg tab, 100-25 mg tab, 100-50 mg tab)</i> | TIER 1 | PV |
| PROPRANOLOL-HCTZ | PROPRANOLOL-HCTZ (40-25 MG TAB, 80-25 MG TAB) <i>propranolol & hydrochlorothiazide</i> | TIER 1 | PV |
| ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB | | | |
| <i>amlodipine besylate-valsartan</i> | <i>amlodipine besylate-valsartan (5-160 mg tab, 10-320 mg tab)</i> | TIER 1 | |
| <i>amlodipine besylate-valsartan</i> | <i>amlodipine besylate-valsartan (5-320 mg tab, 10-160 mg tab)</i> | TIER 1 | |
| <i>amlodipine-olmesartan</i> | <i>amlodipine-olmesartan (5-20 mg tab, 5-40 mg tab, 10-20 mg tab, 10-40 mg tab)</i> | TIER 1 | |
| <i>telmisartan-amlodipine</i> | <i>telmisartan-amlodipine (40-10 mg tab, 40-5 mg tab, 80-10 mg tab, 80-5 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE | | | |
| <i>candesartan cilexetil-hctz</i> | <i>candesartan cilexetil-hctz (16-12.5 mg tab, 32-12.5 mg tab, 32-25 mg tab)</i> | TIER 1 | |
| <i>irbesartan-hydrochlorothiazide</i> | <i>irbesartan-hydrochlorothiazide (150-12.5 mg tab, 300-12.5 mg tab)</i> | TIER 1 | |
| <i>losartan potassium-hctz</i> | <i>losartan potassium-hctz (50-12.5 mg tab, 100-12.5 mg tab, 100-25 mg tab)</i> | TIER 1 | |
| <i>olmesartan medoxomil-hctz</i> | <i>olmesartan medoxomil-hctz (20-12.5 mg tab, 40-12.5 mg tab, 40-25 mg tab)</i> | TIER 1 | |
| <i>telmisartan-hctz</i> | <i>telmisartan-hctz (40-12.5 mg tab, 80-12.5 mg tab, 80-25 mg tab)</i> | TIER 1 | |
| <i>valsartan-hydrochlorothiazide</i> | <i>valsartan-hydrochlorothiazide (80-12.5 mg tab, 160-12.5 mg tab, 160-25 mg tab, 320-12.5 mg tab, 320-25 mg tab)</i> | TIER 1 | |
| ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES | | | |
| <i>olmesartan-amlodipine-hctz</i> | <i>olmesartan-amlodipine-hctz (20-5-12.5 mg tab, 40-10-12.5 mg tab, 40-10-25 mg tab, 40-5-12.5 mg tab, 40-5-25 mg tab)</i> | TIER 1 | |
| ADRENOLYTICS-CENTRAL & THIAZIDE/THIAZIDE-LIKE COMB | | | |
| METHYLDOPA-HYDROCHLOROTHIAZIDE | METHYLDOPA-HYDROCHLOROTHIAZIDE (250-15 MG TAB, 250-25 MG TAB) <i>methyldopa & hydrochlorothiazide</i> | TIER 1 | PV |
| DIURETICS | | | |
| CARBONIC ANHYDRASE INHIBITORS | | | |
| <i>acetazolamide</i> | <i>acetazolamide 125 mg tab</i> | TIER 1 | |
| <i>acetazolamide</i> | <i>acetazolamide 250 mg tab</i> | TIER 1 | |
| <i>acetazolamide er</i> | <i>acetazolamide er 500 mg cap er 12h</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|----------------------------|
| <i>methazolamide</i> | <i>methazolamide 25 mg tab</i> | TIER 1 | |
| <i>methazolamide</i> | <i>methazolamide 50 mg tab</i> | TIER 1 | |
| LOOP DIURETICS | | | |
| <i>bumetanide</i> | <i>bumetanide (0.5 mg tab, 1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>ethacrynic acid</i> | <i>ethacrynic acid 25 mg tab</i> | TIER 1 | |
| <i>furosemide</i> | <i>furosemide (8 mg/ml solution, 10 mg/ml solution, 20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | |
| <i>torseamide</i> | <i>torseamide (5 mg tab, 10 mg tab, 20 mg tab, 100 mg tab)</i> | TIER 1 | |
| POTASSIUM SPARING DIURETICS | | | |
| <i>amiloride hcl</i> | <i>amiloride hcl 5 mg tab</i> | TIER 1 | |
| <i>spironolactone</i> | <i>spironolactone (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>spironolactone</i> | <i>spironolactone 25 mg/5ml suspension</i> | TIER 2 | PA, QL (600 PER 30 DAY(S)) |
| <i>triamterene</i> | <i>triamterene (50 mg cap, 100 mg cap)</i> | TIER 1 | |
| THIAZIDES AND THIAZIDE-LIKE DIURETICS | | | |
| <i>chlorthalidone</i> | <i>chlorthalidone (25 mg tab, 50 mg tab)</i> | TIER 1 | |
| DIURIL | DIURIL 250 MG/5ML SUSPENSION <i>chlorothiazide</i> | TIER 3 | |
| <i>hydrochlorothiazide</i> | <i>hydrochlorothiazide (12.5 mg cap, 12.5 mg tab, 25 mg tab, 50 mg tab)</i> | TIER 1 | |
| <i>indapamide</i> | <i>indapamide (1.25 mg tab, 2.5 mg tab)</i> | TIER 1 | |
| <i>metolazone</i> | <i>metolazone (2.5 mg tab, 5 mg tab)</i> | TIER 1 | |
| <i>metolazone</i> | <i>metolazone 10 mg tab</i> | TIER 1 | |
| DIURETIC COMBINATIONS | | | |
| <i>amiloride-hydrochlorothiazide</i> | <i>amiloride-hydrochlorothiazide 5-50 mg tab</i> | TIER 1 | |
| <i>spironolactone-hctz</i> | <i>spironolactone-hctz 25-25 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|--------|-----------------------|
| <i>triamterene-hctz</i> | <i>triamterene-hctz (37.5-25 mg cap, 37.5-25 mg tab, 75-50 mg tab)</i> | TIER 1 | |
| VASOPRESSORS | | | |
| <i>midodrine hcl</i> | <i>midodrine hcl (2.5 mg tab, 5 mg tab, 10 mg tab)</i> | TIER 1 | |
| ANAPHYLAXIS THERAPY AGENTS | | | |
| ADRENALIN | ADRENALIN 1 MG/ML SOLUTION <i>epinephrine (anaphylaxis)</i> | TIER 1 | GA |
| <i>epinephrine</i> | <i>epinephrine (0.15 mg/0.15ml soln a-inj, 0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj)</i> | TIER 1 | QL (2 PER RX) |
| <i>epinephrine (anaphylaxis)</i> | <i>epinephrine (anaphylaxis) 1 mg/ml solution</i> | TIER 1 | |
| ANTIHYPERTENSIVES | | | |
| BILE ACID SEQUESTRANTS | | | |
| <i>cholestyramine</i> | <i>cholestyramine (4 gm packet, 4 gm/dose powder)</i> | TIER 1 | |
| <i>cholestyramine light</i> | <i>cholestyramine light (4 gm packet, 4 gm/dose powder)</i> | TIER 1 | |
| <i>colesevelam hcl</i> | <i>colesevelam hcl (3.75 gm packet, 625 mg tab)</i> | TIER 1 | |
| <i>colestipol hcl</i> | <i>colestipol hcl (1 gm tab, 5 gm granules, 5 gm packet)</i> | TIER 1 | |
| <i>prevalite</i> | <i>prevalite (4 gm packet, 4 gm/dose powder)</i> | TIER 1 | |
| FIBRIC ACID DERIVATIVES | | | |
| <i>fenofibrate</i> | <i>fenofibrate (48 mg tab, 50 mg cap, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 150 mg cap, 160 mg tab, 200 mg cap)</i> | TIER 1 | |
| <i>fenofibrate micronized</i> | <i>fenofibrate micronized (43 mg cap, 67 mg cap, 130 mg cap, 134 mg cap, 200 mg cap)</i> | TIER 1 | |
| <i>fenofibric acid</i> | <i>fenofibric acid (45 mg cap dr, 135 mg cap dr)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|---|
| <i>gemfibrozil</i> | <i>gemfibrozil 600 mg tab</i> | TIER 1 | |
| INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS | | | |
| <i>ezetimibe</i> | <i>ezetimibe 10 mg tab</i> | TIER 1 | |
| PCSK9 INHIBITORS | | | |
| PRALUENT | PRALUENT (75 MG/ML SOLN A-INJ, 150 MG/ML SOLN A-INJ) <i>alirocumab</i> | TIER 3 | QL (2 PER 28 DAY(S)), MN-PA (Medically Necessary Prior Authorization) |
| REPATHA | REPATHA 140 MG/ML SOLN PRSYR <i>evolocumab</i> | TIER 3 | PA, QL (3 PREFILLED SYRINGES PER 30 DAY(S)) |
| REPATHA PUSHTRONEX SYSTEM | REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART <i>evolocumab</i> | TIER 3 | PA, QL (1 PER 30 DAYS) |
| REPATHA SURECLICK | REPATHA SURECLICK 140 MG/ML SOLN A-INJ <i>evolocumab</i> | TIER 3 | PA, QL (3 AUTOINJECTORS PER 30 DAY(S)) |
| SMALL INTERFERING RNA (SIRNA) PCSK9 INHIBITORS | | | |
| LEQVIO | LEQVIO 284 MG/1.5ML SOLN PRSYR <i>inclisiran sodium</i> | SP-M | PA, QL (1 PER 180 DAY(S)), S |
| ANGIOPOIETIN-LIKE PROTEIN 3 (ANGPTL3) INHIBITORS | | | |
| EVKEEZA | EVKEEZA (345 MG/2.3ML SOLUTION, 1200 MG/8ML SOLUTION) <i>evinacumab-dgnb</i> | SP-M | PA, S |
| HMG COA REDUCTASE INHIBITORS | | | |
| <i>atorvastatin calcium</i> | <i>atorvastatin calcium (10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | PV |
| <i>fluvastatin sodium</i> | <i>fluvastatin sodium (20 mg cap, 40 mg cap)</i> | TIER 1 | PV |
| <i>fluvastatin sodium er</i> | <i>fluvastatin sodium er 80 mg tab er 24h</i> | TIER 1 | PV |
| <i>lovastatin</i> | <i>lovastatin (10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>pitavastatin calcium</i> | <i>pitavastatin calcium (1 mg tab, 2 mg tab, 4 mg tab)</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|---------------------------------|
| <i>pravastatin sodium</i> | <i>pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | PV |
| <i>rosuvastatin calcium</i> | <i>rosuvastatin calcium (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>simvastatin</i> | <i>simvastatin (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab)</i> | TIER 1 | PV |
| ZYPITAMAG | ZYPITAMAG (1 MG TAB, 2 MG TAB, 4 MG TAB) <i>pitavastatin magnesium</i> | TIER 2 | PV |
| NICOTINIC ACID DERIVATIVES | | | |
| <i>niacin er (antihyperlipidemic)</i> | <i>niacin er (antihyperlipidemic) (er 500 mg tab er, er 750 mg tab er, er 1000 mg tab er)</i> | TIER 1 | |
| MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS | | | |
| JUXTAPID | JUXTAPID (5 MG CAP, 10 MG CAP, 20 MG CAP, 30 MG CAP, 40 MG CAP, 60 MG CAP) <i>lomitapide mesylate</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB | | | |
| <i>ezetimibe-simvastatin</i> | <i>ezetimibe-simvastatin (10-10 mg tab, 10-20 mg tab, 10-40 mg tab, 10-80 mg tab)</i> | TIER 1 | |
| CARDIOVASCULAR AGENTS - MISC. | | | |
| PERIPHERAL VASODILATORS | | | |
| ISOXSUPRINE HCL | ISOXSUPRINE HCL 10 MG TAB <i>isoxsuprine hcl</i> | TIER 1 | GA |
| PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR | | | |
| WINREVAIR | WINREVAIR (2 X 45 MG KIT, 2 X 60 MG KIT, 45 MG KIT, 60 MG KIT) <i>sotatercept-csrk</i> | SP-P | PA, QL (1 KIT PER 21 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|---|
| PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST | | | |
| UPTRAVI | UPTRAVI (200 MCG TAB, 400 MCG TAB, 600 MCG TAB, 800 MCG TAB, 1000 MCG TAB, 1200 MCG TAB, 1400 MCG TAB, 1600 MCG TAB) <i>selexipag</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| UPTRAVI | UPTRAVI 1800 MCG RECON SOLN <i>selexipag</i> | SP-M | S |
| UPTRAVI | UPTRAVI 200 & 800 MCG TAB THPK <i>selexipag</i> | SP-P | PA, QL (1 PER LIFETIME), S |
| PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC) | | | |
| ADEMPAS | ADEMPAS (0.5 MG TAB, 1 MG TAB, 1.5 MG TAB, 2 MG TAB, 2.5 MG TAB) <i>riociguat</i> | SP-P | PA, QL (90 PER 30 DAYS), S |
| PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS | | | |
| <i>alyq</i> | <i>alyq 20 mg tab</i> | SP-P | PA, QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| REVATIO | REVATIO 10 MG/12.5ML SOLUTION <i>sildenafil citrate (pulmonary hypertension)</i> | SP-M | PA, S, GA |
| <i>sildenafil citrate</i> | <i>sildenafil citrate 10 mg/12.5ml solution</i> | SP-M | PA, S |
| <i>sildenafil citrate</i> | <i>sildenafil citrate 10 mg/ml recon susp</i> | SP-P | PA, QL (720 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>sildenafil citrate</i> | <i>sildenafil citrate 20 mg tab</i> | SP-P | PA, QL (360 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>tadalafil (pah)</i> | <i>tadalafil (pah) 20 mg tab</i> | SP-P | PA, QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| TADLIQ | TADLIQ 20 MG/5ML SUSPENSION <i>tadalafil (pulmonary hypertension)</i> | SP-NP | PA, QL (10 PER DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|-------|--|
| PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS | | | |
| <i>ambrisentan</i> | <i>ambrisentan (5 mg tab, 10 mg tab)</i> | SP-P | PA, QL (30 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>bosentan</i> | <i>bosentan (62.5 mg tab, 125 mg tab)</i> | SP-P | PA, QL (60 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| OPSUMIT | OPSUMIT 10 MG TAB <i>macitentan</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| TRACLEER | TRACLEER (62.5 MG TAB, 125 MG TAB) <i>bosentan</i> | SP-NP | PA, QL (60 PER 30 DAY(S)), S, GA |
| TRACLEER | TRACLEER 32 MG TAB SOL <i>bosentan</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| PROSTAGLANDIN VASODILATORS | | | |
| <i>epoprostenol sodium</i> | <i>epoprostenol sodium (0.5 mg recon soln, 1.5 mg recon soln)</i> | SP-M | PA, S |
| FLOLAN | FLOLAN (0.5 MG RECON SOLN, 1.5 MG RECON SOLN) <i>epoprostenol sodium</i> | SP-M | PA, S, GA |
| ORENITRAM | ORENITRAM (0.125 MG TAB ER, 0.25 MG TAB ER, 1 MG TAB ER, 2.5 MG TAB ER, 5 MG TAB ER) <i>treprostinil diolamine</i> | SP-P | PA, S |
| ORENITRAM MONTH 1 | ORENITRAM MONTH 1 0.125 & 0.25 MG TBER THPK <i>treprostinil diolamine</i> | SP-P | PA, QL (6 PER DAY(S)), S |
| ORENITRAM MONTH 2 | ORENITRAM MONTH 2 0.125 & 0.25 MG TBER THPK <i>treprostinil diolamine</i> | SP-P | PA, QL (12 PER DAY(S)), S |
| ORENITRAM MONTH 3 | ORENITRAM MONTH 3 0.125 & 0.25 & 1 MG TBER THPK <i>treprostinil diolamine</i> | SP-P | PA, QL (9 PER DAY(S)), S |
| REMODULIN | REMODULIN (20 SOLUTION, 50 SOLUTION, 100 SOLUTION, 200 SOLUTION) <i>treprostinil</i> | SP-M | PA, S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|-------|----------------------------|
| <i>treprostinil</i> | <i>treprostinil (20 solution, 50 solution, 100 solution, 200 solution)</i> | SP-M | PA, S |
| TYVASO | TYVASO 0.6 MG/ML SOLUTION <i>treprostinil</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| TYVASO DPI INSTITUTIONAL KIT | TYVASO DPI INSTITUTIONAL KIT (KIT 16 MCG POWDER, KIT 32 MCG POWDER, KIT 48 MCG POWDER, KIT 64 MCG POWDER) <i>treprostinil</i> | SP-NP | PA, QL (4 PER 1 DAY(S)), S |
| TYVASO DPI MAINTENANCE KIT | TYVASO DPI MAINTENANCE KIT (KIT 16 MCG POWDER, KIT 32 MCG POWDER, KIT 48 MCG POWDER, KIT 64 MCG POWDER) <i>treprostinil</i> | SP-NP | PA, QL (4 PER 1 DAY(S)), S |
| TYVASO DPI MAINTENANCE KIT | TYVASO DPI MAINTENANCE KIT 112 X 32MCG & 112 X 48MCG POWDER <i>treprostinil</i> | SP-NP | PA, QL (8 PER 1 DAY(S)), S |
| TYVASO DPI TITRATION KIT | TYVASO DPI TITRATION KIT 112 X 16MCG & 84 X 32MCG POWDER <i>treprostinil</i> | SP-NP | PA, QL (7 PER 1 DAY(S)), S |
| TYVASO DPI TITRATION KIT | TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER <i>treprostinil</i> | SP-NP | PA, QL (9 PER 1 DAY(S)), S |
| TYVASO REFILL | TYVASO REFILL 0.6 MG/ML SOLUTION <i>treprostinil</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| TYVASO STARTER | TYVASO STARTER 0.6 MG/ML SOLUTION <i>treprostinil</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| VELETRI | VELETRI (0.5 MG RECON SOLN, 1.5 MG RECON SOLN) <i>epoprostenol sodium</i> | SP-M | PA, S, GA |
| VENTAVIS | VENTAVIS (10 MCG/ML SOLUTION, 20 MCG/ML SOLUTION) <i>iloprost</i> | SP-P | PA, QL (9 PER DAY), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------------------|
| CARDIAC MYOSIN INHIBITORS | | | |
| CAMZYOS | CAMZYOS (2.5 MG CAP, 5 MG CAP, 10 MG CAP, 15 MG CAP) <i>mavacamten</i> | SP-NP | PA, QL (1 PER DAY(S)), S |
| SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS | | | |
| <i>sildenafil citrate</i> | <i>sildenafil citrate (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | QL (6 PER 30 DAYS) |
| <i>tadalafil</i> | <i>tadalafil (10 mg tab, 20 mg tab)</i> | TIER 1 | QL (6 PER 30 DAYS) |
| <i>tadalafil</i> | <i>tadalafil (2.5 mg tab, 5 mg tab)</i> | TIER 1 | QL (30 PER 30 DAYS) |
| <i>vardeafil hcl</i> | <i>vardeafil hcl (2.5 mg tab, 5 mg tab, 10 mg tab, 10 mg tab disp, 20 mg tab)</i> | TIER 1 | QL (6 PER 30 DAYS) |
| TRANSTHYRETIN STABILIZERS | | | |
| VYNDAMAX | VYNDAMAX 61 MG CAP <i>tafamidis</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| VYND AQEL | VYND AQEL 20 MG CAP <i>tafamidis meglumine (cardiac)</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| SINUS NODE INHIBITORS | | | |
| <i>ivabradine hcl</i> | <i>ivabradine hcl (5 mg tab, 7.5 mg tab)</i> | TIER 1 | PA, QL (60 TABLETS PER 30 DAY(S)) |
| NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB | | | |
| ENTRESTO | ENTRESTO (24-26 MG TAB, 49-51 MG TAB, 97-103 MG TAB) <i>sacubitril-valsartan</i> | TIER 2 | PA, QL (60 PER 30 DAYS) |
| ENTRESTO | ENTRESTO (6-6 MG CAP SPRINK, 15-16 MG CAP SPRINK) <i>sacubitril-valsartan</i> | TIER 2 | PA, QL (8 CAPS PER DAY(S)) |
| CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB | | | |
| <i>amlodipine-atorvastatin</i> | <i>amlodipine-atorvastatin (2.5-10 mg tab, 10-10 mg tab, 10-80 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|---|--------|-----------------------|
| <i>amlodipine-atorvastatin</i> | <i>amlodipine-atorvastatin (2.5-20 mg tab, 2.5-40 mg tab, 5-10 mg tab, 5-20 mg tab, 5-40 mg tab, 5-80 mg tab, 10-20 mg tab, 10-40 mg tab)</i> | TIER 1 | |
| NITRATE & VASODILATOR COMBINATIONS | | | |
| <i>isosorb dinitrate-hydralazine</i> | <i>isosorb dinitrate-hydralazine 20-37.5 mg tab</i> | TIER 1 | |
| ANTIHISTAMINES | | | |
| ANTIHISTAMINES - ETHANOLAMINES | | | |
| <i>carbinoxamine maleate</i> | <i>carbinoxamine maleate (4 mg tab, 4 mg/5ml solution)</i> | TIER 1 | |
| CLEMASTINE FUMARATE | CLEMASTINE FUMARATE 2.68 MG TAB <i>clemastine fumarate</i> | TIER 1 | |
| <i>diphenhydramine hcl</i> | <i>diphenhydramine hcl 50 mg/ml solution</i> | TIER 1 | |
| ANTIHISTAMINES - PHENOTHIAZINES | | | |
| <i>promethazine hcl</i> | <i>promethazine hcl (6.25 mg/5ml solution, 12.5 mg suppos, 12.5 mg tab, 25 mg suppos, 25 mg tab, 50 mg tab)</i> | TIER 1 | |
| PROMETHEGAN | PROMETHEGAN (12.5 MG SUPPOS, 25 MG SUPPOS, 50 MG SUPPOS) <i>promethazine hcl</i> | TIER 1 | |
| ANTIHISTAMINES - PIPERIDINES | | | |
| <i>cyproheptadine hcl</i> | <i>cyproheptadine hcl (2 mg/5ml syrup, 4 mg tab)</i> | TIER 1 | |
| ANTIHISTAMINES - NON-SEDATING | | | |
| DESLORATADINE | DESLORATADINE (2.5 MG TAB DISP, 5 MG TAB, 5 MG TAB DISP) <i>desloratadine</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|--|--------|-----------------------|
| NASAL AGENTS - SYSTEMIC AND TOPICAL | | | |
| NASAL STEROIDS | | | |
| <i>flunisolide</i> | <i>flunisolide 25 mcg/act (0.025%) solution</i> | TIER 1 | |
| NASAL ANTICHOLINERGICS | | | |
| <i>ipratropium bromide</i> | <i>ipratropium bromide (0.03 % solution, 0.06 % solution)</i> | TIER 1 | |
| NASAL ANTIHISTAMINES | | | |
| <i>azelastine hcl</i> | <i>azelastine hcl (0.1 % solution, 137 mcg/spray solution)</i> | TIER 1 | |
| <i>olopatadine hcl</i> | <i>olopatadine hcl 0.6 % solution</i> | TIER 1 | |
| ANTIHISTAMINE-STEROID | | | |
| <i>azelastine-fluticasone</i> | <i>azelastine-fluticasone 137-50 mcg/act suspension</i> | TIER 1 | PA |
| COUGH/COLD/ALLERGY | | | |
| ANTITUSSIVE - OPIOID | | | |
| <i>hydrocodone bit-homatrop mbr</i> | <i>hydrocodone bit-homatrop mbr (mg tab, mg/5ml solution)</i> | TIER 1 | |
| <i>hydromet</i> | <i>hydromet 5-1.5 mg/5ml solution</i> | TIER 1 | |
| ANTITUSSIVE - NONNARCOTIC | | | |
| <i>benzonatate</i> | <i>benzonatate (100 mg cap, 200 mg cap)</i> | TIER 1 | |
| MUCOLYTICS | | | |
| <i>acetylcysteine</i> | <i>acetylcysteine (10 % solution, 20 % solution)</i> | TIER 1 | |
| MISC. RESPIRATORY INHALANTS | | | |
| <i>nebusal</i> | <i>nebusal 3 % nebu soln</i> | TIER 1 | |
| <i>pulmosal</i> | <i>pulmosal 7 % nebu soln</i> | TIER 1 | |
| <i>sodium chloride</i> | <i>sodium chloride (0.9 % nebu soln, 3 % nebu soln, 7 % nebu soln, 10 % nebu soln)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| DECONGESTANT & ANTIHISTAMINE | | | |
| <i>promethazine vc</i> | <i>promethazine vc 6.25-5 mg/5ml syrup</i> | TIER 1 | |
| <i>promethazine-phenylephrine</i> | <i>promethazine-phenylephrine 6.25-5 mg/5ml syrup</i> | TIER 1 | |
| OPIOID ANTITUSSIVE-ANTI-HISTAMINE | | | |
| <i>hydrocod poli-chlorphe poli er</i> | <i>hydrocod poli-chlorphe poli er 10-8 mg/5ml susp</i> | TIER 1 | |
| <i>promethazine-codeine</i> | <i>promethazine-codeine (solution, syrup)</i> | TIER 1 | |
| OPIOID ANTITUSSIVE-DECONGESTANT-ANTI-HISTAMINE | | | |
| PROMETHAZINE VC/CODEINE | PROMETHAZINE VC/CODEINE 6.25-5-10 MG/5ML SYRUP <i>promethazine-phenylephrine-codeine</i> | TIER 1 | GA |
| <i>promethazine-phenyleph-codeine</i> | <i>promethazine-phenyleph-codeine 6.25-5-10 mg/5ml syrup</i> | TIER 1 | |
| NON-NARC ANTITUSSIVE-DECONGESTANT-ANTI-HISTAMINE | | | |
| <i>bromfed dm</i> | <i>bromfed dm 2-30-10 mg/5ml syrup</i> | TIER 1 | |
| <i>pseudoeph-bromphen-dm</i> | <i>pseudoeph-bromphen-dm 30-2-10 mg/5ml syrup</i> | TIER 1 | |
| ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS | | | |
| BRONCHODILATORS - ANTICHOLINERGICS | | | |
| ATROVENT HFA | ATROVENT HFA 17 MCG/ACT AERO SOLN <i>ipratropium bromide hfa</i> | TIER 2 | |
| <i>ipratropium bromide</i> | <i>ipratropium bromide 0.02 % solution</i> | TIER 1 | |
| SPIRIVA HANDIHALER | SPIRIVA HANDIHALER 18 MCG CAP <i>tiotropium bromide monohydrate</i> | TIER 2 | |
| SPIRIVA RESPIMAT | SPIRIVA RESPIMAT (1.25 AERO SOLN, 2.5 AERO SOLN) <i>tiotropium bromide monohydrate</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|--------|-----------------------|
| ANTI-INFLAMMATORY AGENTS | | | |
| <i>cromolyn sodium</i> | <i>cromolyn sodium 20 mg/2ml nebu soln</i> | TIER 1 | |
| BETA ADRENERGICS | | | |
| <i>albuterol sulfate</i> | <i>albuterol sulfate (0.63 mg/3ml nebu soln, 1.25 mg/3ml nebu soln, 2 mg tab, 2 mg/5ml syrup, (2.5 mg/3ml) 0.083% nebu soln, 2.5 mg/0.5ml nebu soln, 4 mg tab, (5 mg/ml) 0.5% nebu soln)</i> | TIER 1 | |
| ALBUTEROL SULFATE ER | ALBUTEROL SULFATE ER (ER 4 MG TAB ER 12H, ER 8 MG TAB ER 12H) <i>albuterol sulfate</i> | TIER 1 | |
| <i>albuterol sulfate hfa</i> | <i>albuterol sulfate hfa 108 (90 base) mcg/act aero soln</i> | TIER 1 | |
| <i>arformoterol tartrate</i> | <i>arformoterol tartrate 15 mcg/2ml nebu soln</i> | TIER 1 | |
| <i>formoterol fumarate</i> | <i>formoterol fumarate 20 mcg/2ml nebu soln</i> | TIER 1 | |
| <i>levalbuterol hcl</i> | <i>levalbuterol hcl (0.31 mg/3ml nebu soln, 0.63 mg/3ml nebu soln, 1.25 mg/0.5ml nebu soln, 1.25 mg/3ml nebu soln)</i> | TIER 1 | |
| <i>levalbuterol tartrate</i> | <i>levalbuterol tartrate 45 mcg/act aerosol</i> | TIER 1 | |
| SEREVENT DISKUS | SEREVENT DISKUS 50 MCG/ACT AER POW BA <i>salmeterol xinafoate</i> | TIER 2 | |
| STRIVERDI RESPIMAT | STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN <i>olodaterol hcl</i> | TIER 3 | |
| <i>terbutaline sulfate</i> | <i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i> | TIER 1 | |
| ADRENERGIC COMBINATIONS | | | |
| ANORO ELLIPTA | ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA <i>umeclidinium-vilanterol</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| BREO ELLIPTA | BREO ELLIPTA (50-25 MCG/INH AER POW BA, 100-25 MCG/ACT AER POW BA, 200-25 MCG/ACT AER POW BA) <i>fluticasone furoate-vilanterol</i> | TIER 2 | |
| <i>breynd</i> | <i>breynd (80-4.5 aerosol, 160-4.5 aerosol)</i> | TIER 1 | PV |
| BREZTRI AEROSPHERE | BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL <i>budesonide-glycopyrrolate-formoterol fumarate</i> | TIER 2 | |
| <i>budesonide-formoterol fumarate</i> | <i>budesonide-formoterol fumarate (80-4.5 aerosol, 160-4.5 aerosol)</i> | TIER 1 | PV |
| COMBIVENT RESPIMAT | COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN <i>ipratropium-albuterol</i> | TIER 2 | |
| <i>fluticasone-salmeterol</i> | <i>fluticasone-salmeterol (45-21 aerosol, 115-21 aerosol, 230-21 aerosol)</i> | TIER 2 | |
| <i>fluticasone-salmeterol</i> | <i>fluticasone-salmeterol (55-14 aer pow ba, 100-50 aer pow ba, 113-14 aer pow ba, 232-14 aer pow ba, 250-50 aer pow ba, 500-50 aer pow ba)</i> | TIER 1 | PV |
| <i>ipratropium-albuterol</i> | <i>ipratropium-albuterol 0.5-2.5 (3) mg/3ml solution</i> | TIER 1 | |
| STIOLTO RESPIMAT | STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN <i>tiotropium bromide-olodaterol hcl</i> | TIER 2 | |
| TRELEGY ELLIPTA | TRELEGY ELLIPTA (100-62.5-25 AER POW BA, 200-62.5-25 AER POW BA) <i>fluticasone-umeclidinium-vilanterol</i> | TIER 2 | PV |
| <i>wixela inhub</i> | <i>wixela inhub (100-50 aer pow ba, 250-50 aer pow ba, 500-50 aer pow ba)</i> | TIER 1 | |
| XANTHINES | | | |
| <i>elixophyllin</i> | <i>elixophyllin 80 mg/15ml elixir</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------|---|--------|--------------------------|
| <i>theophylline</i> | <i>theophylline (80 elixir, 80 solution)</i> | TIER 1 | |
| THEOPHYLLINE ER | THEOPHYLLINE ER (ER 100 MG TAB ER 12H, ER 200 MG TAB ER 12H) <i>theophylline</i> | TIER 1 | QL (2 PER DAY(S)) |
| <i>theophylline er</i> | <i>theophylline er (er 300 mg tab er 12h, er 400 mg tab er 24h, er 450 mg tab er 12h, er 600 mg tab er 24h)</i> | TIER 1 | |
| STEROID INHALANTS | | | |
| ASMANEX (120 METERED DOSES) | ASMANEX (120 METERED DOSES) 220 MCG/ACT AER POW BA <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| ASMANEX (14 METERED DOSES) | ASMANEX (14 METERED DOSES) 220 MCG/ACT AER POW BA <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| ASMANEX (30 METERED DOSES) | ASMANEX (30 METERED DOSES) (110 AER POW BA, 220 AER POW BA) <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| ASMANEX (60 METERED DOSES) | ASMANEX (60 METERED DOSES) 220 MCG/ACT AER POW BA <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| ASMANEX (7 METERED DOSES) | ASMANEX (7 METERED DOSES) 110 MCG/ACT AER POW BA <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| ASMANEX HFA | ASMANEX HFA (50 AEROSOL, 100 AEROSOL, 200 AEROSOL) <i>mometasone furoate (inhalation)</i> | TIER 1 | QL (1 PER 30 DAY(S)), PV |
| <i>budesonide</i> | <i>budesonide (0.25 suspension, 0.5 suspension, 1 suspension)</i> | TIER 1 | PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|----------------------------------|
| QVAR REDIHALER | QVAR REDIHALER (40 AERO BA, 80 AERO BA) <i>beclomethasone dipropionate hfa</i> | TIER 1 | QL (2 PER 30 DAY(S)), PV |
| SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS | | | |
| <i>roflumilast</i> | <i>roflumilast (250 mcg tab, 500 mcg tab)</i> | TIER 1 | |
| 5-LIPOXYGENASE INHIBITORS | | | |
| <i>zileuton er</i> | <i>zileuton er 600 mg tab er 12h</i> | TIER 1 | |
| LEUKOTRIENE RECEPTOR ANTAGONISTS | | | |
| <i>montelukast sodium</i> | <i>montelukast sodium (4 mg chew tab, 4 mg packet, 5 mg chew tab, 10 mg tab)</i> | TIER 1 | |
| <i>zafirlukast</i> | <i>zafirlukast (10 mg tab, 20 mg tab)</i> | TIER 1 | |
| ANTI-IGE MONOCLONAL ANTIBODIES | | | |
| XOLAIR | XOLAIR (150 MG/ML SOLN A-INJ, 300 MG/2ML SOLN A-INJ) <i>omalizumab</i> | SP-P | PA, QL (4 PENS PER 28 DAY(S)), S |
| XOLAIR | XOLAIR (75 MG/0.5ML SOLN PRSYR, 150 MG/ML SOLN PRSYR) <i>omalizumab</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| XOLAIR | XOLAIR 150 MG RECON SOLN <i>omalizumab</i> | SP-M | PA, QL (8 PER 28 DAY(S)), S |
| XOLAIR | XOLAIR 300 MG/2ML SOLN PRSYR <i>omalizumab</i> | SP-P | PA, QL (4 SYR PER 28 DAY(S)), S |
| XOLAIR | XOLAIR 75 MG/0.5ML SOLN A-INJ <i>omalizumab</i> | SP-P | PA, QL (2 PENS PER 28 DAY(S)), S |
| INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA) | | | |
| FASENRA | FASENRA (10 MG/0.5ML SOLN PRSYR, 30 MG/ML SOLN PRSYR) <i>benralizumab</i> | SP-M | PA, S |
| FASENRA PEN | FASENRA PEN 30 MG/ML SOLN A-INJ <i>benralizumab</i> | SP-P | PA, QL (1 PER 56 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|--|
| NUCALA | NUCALA (100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR) <i>mepolizumab</i> | SP-P | PA, S, QLV (Quantity Limit Varies) |
| NUCALA | NUCALA 100 MG RECON SOLN <i>mepolizumab</i> | SP-M | PA, QL (3 PER 28 DAY(S)), S |
| NUCALA | NUCALA 40 MG/0.4ML SOLN PRSYR <i>mepolizumab</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| INTERLEUKIN-5 ANTAGONISTS (IGG4 KAPPA) | | | |
| CINQAIR | CINQAIR 100 MG/10ML SOLUTION <i>reslizumab</i> | SP-M | PA, S |
| THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS | | | |
| TEZSPIRE | TEZSPIRE 210 MG/1.91ML SOLN A-INJ <i>tezepelumab-ekko</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| TEZSPIRE | TEZSPIRE 210 MG/1.91ML SOLN PRSYR <i>tezepelumab-ekko</i> | SP-M | PA, QL (1 PER 28 DAY(S)), S |
| XANTHINE-EXPECTORANTS | | | |
| DIFIL-G FORTE | DIFIL-G FORTE 100-100 MG/5ML LIQUID <i>dyphylline-guaifenesin</i> | TIER 1 | |
| RESPIRATORY AGENTS - MISC. | | | |
| ALPHA-PROTEINASE INHIBITOR (HUMAN) | | | |
| ARALAST NP | ARALAST NP (500 MG RECON SOLN, 1000 MG RECON SOLN) <i>alpha1-proteinase inhibitor (human)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| GLASSIA | GLASSIA 1000 MG/50ML SOLUTION <i>alpha1-proteinase inhibitor (human)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| PROLASTIN-C | PROLASTIN-C (1000 MG RECON SOLN, 1000 MG/20ML SOLUTION) <i>alpha1-proteinase inhibitor (human)</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|------|------------------------------|
| ZEMAIRA | ZEMAIRA (1000 MG RECON SOLN, 4000 MG RECON SOLN, 5000 MG RECON SOLN) <i>alpha1-proteinase inhibitor (human)</i> | SP-M | PA, S |
| CFTR POTENTIATORS | | | |
| KALYDECO | KALYDECO (5.8 MG PACKET, 13.4 MG PACKET) <i>ivacaftor</i> | SP-P | PA, QL (2 PER 1 DAY(S)), S |
| KALYDECO | KALYDECO (50 MG PACKET, 75 MG PACKET, 150 MG TAB) <i>ivacaftor</i> | SP-P | PA, QL (56 PER 28 DAYS), S |
| KALYDECO | KALYDECO 25 MG PACKET <i>ivacaftor</i> | SP-P | PA, QL (56 PER 28 DAY(S)), S |
| HYDROLYTIC ENZYMES | | | |
| PULMOZYME | PULMOZYME 2.5 MG/2.5ML SOLUTION <i>dornase alfa</i> | SP-P | QL (150 PER 30 DAY(S)), S |
| CYSTIC FIBROSIS AGENT - COMBINATIONS | | | |
| ORKAMBI | ORKAMBI (100-125 MG PACKET, 150-188 MG PACKET) <i>lumacaftor-ivacaftor</i> | SP-P | PA, QL (56 PER 28 DAY(S)), S |
| ORKAMBI | ORKAMBI (100-125 MG TAB, 200-125 MG TAB) <i>lumacaftor-ivacaftor</i> | SP-P | PA, QL (112 PER 28 DAYS), S |
| ORKAMBI | ORKAMBI 75-94 MG PACKET <i>lumacaftor-ivacaftor</i> | SP-P | PA, QL (2 PER 1 DAY(S)), S |
| SYMDEKO | SYMDEKO (50-75 75 MG TAB THPK, 100-150 150 MG TAB THPK) <i>tezacaftor-ivacaftor</i> | SP-P | PA, QL (56 PER 28 DAY(S)), S |
| TRIKAFTA | TRIKAFTA (80-40-60 59.5 MG THER PACK, 100-50-75 75 MG THER PACK) <i>elexacaftor-tezacaftor-ivacaftor</i> | SP-P | PA, QL (2 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|--|
| TRIKAFTA | TRIKAFTA 100-50-75 & 150 MG TAB THPK <i>elexacaftor-tezacaftor-ivacaftor</i> | SP-P | PA, QL (84 PER 28 DAY(S)), S |
| TRIKAFTA | TRIKAFTA 50-25-37.5 & 75 MG TAB THPK <i>elexacaftor-tezacaftor-ivacaftor</i> | SP-P | PA, QL (3 PER DAY(S)), S |
| PULMONARY FIBROSIS AGENTS | | | |
| ESBRIET | ESBRIET 267 MG CAP <i>pirfenidone</i> | SP-NP | PA, QL (270 PER 30 DAYS), S, GA |
| ESBRIET | ESBRIET 267 MG TAB <i>pirfenidone</i> | SP-NP | PA, QL (270 PER 30 DAY(S)), S, GA |
| ESBRIET | ESBRIET 801 MG TAB <i>pirfenidone</i> | SP-NP | PA, QL (90 PER 30 DAY(S)), S, GA |
| <i>pirfenidone</i> | <i>pirfenidone 267 mg cap</i> | SP-P | PA, QL (270 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>pirfenidone</i> | <i>pirfenidone 267 mg tab</i> | SP-P | PA, QL (270 PER 30 DAY(S)), S |
| PIRFENIDONE | PIRFENIDONE 534 MG TAB <i>pirfenidone</i> | SP-P | PA, QL (3 PER 1 DAY(S)), S |
| <i>pirfenidone</i> | <i>pirfenidone 801 mg tab</i> | SP-P | PA, QL (90 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS | | | |
| OFEV | OFEV (100 MG CAP, 150 MG CAP) <i>nintedanib esylate</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| LAXATIVES | | | |
| SALINE LAXATIVE MIXTURES | | | |
| OSMOPREP | OSMOPREP 1.102-0.398 GM TAB <i>sodium phosphate monobasic-sodium phosphate dibasic</i> | TIER 2 | |
| LAXATIVES - MISCELLANEOUS | | | |
| <i>constulose</i> | <i>constulose 10 gm/15ml solution</i> | TIER 1 | |
| <i>lactulose</i> | <i>lactulose (10 gm/15ml solution, 20 gm/30ml solution)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| BOWEL EVACUANT COMBINATIONS | | | |
| GAVILYTE-C | GAVILYTE-C 240 GM RECON SOLN <i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i> | TIER 1 | |
| <i>gavilyte-g</i> | <i>gavilyte-g 236 gm recon soln</i> | TIER 1 | |
| <i>gavilyte-n with flavor pack</i> | <i>gavilyte-n with flavor pack 420 gm recon soln</i> | TIER 1 | |
| <i>na sulfate-k sulfate-mg sulf</i> | <i>na sulfate-k sulfate-mg sulf 17.5-3.13-1.6 gm/177ml solution</i> | TIER 1 | |
| <i>peg 3350-kcl-na bicarb-nacl</i> | <i>peg 3350-kcl-na bicarb-nacl 420 gm recon soln</i> | TIER 1 | |
| <i>peg-3350/electrolytes</i> | <i>peg-3350/electrolytes 236 gm recon soln</i> | TIER 1 | |
| <i>peg-3350/electrolytes/asc orbat</i> | <i>peg-3350/electrolytes/ascorbat 100 gm recon soln</i> | TIER 1 | |
| <i>peg-kcl-nacl-nasulf-na asc-c</i> | <i>peg-kcl-nacl-nasulf-na asc-c 100 gm recon soln</i> | TIER 1 | |
| <i>trilyte</i> | <i>trilyte 420 gm recon soln</i> | TIER 1 | |
| ANTIDIARRHEAL/PROBIOTIC AGENTS | | | |
| ANTIPERISTALTIC AGENTS | | | |
| DIPHENOXYLATE-ATROPINE | DIPHENOXYLATE-ATROPINE (MG TAB, MG/5ML LIQUID) <i>diphenoxylate w/ atropine</i> | TIER 1 | |
| <i>opium</i> | <i>opium 10 mg/ml (1%) tincture</i> | TIER 1 | |
| ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS | | | |
| BELLADONNA ALKALOIDS | | | |
| <i>ed-spaz</i> | <i>ed-spaz 0.125 mg tab disp</i> | TIER 1 | |
| <i>hyoscyamine sulfate</i> | <i>hyoscyamine sulfate (0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp, 0.125 mg/5ml elixir, 0.125 mg/ml solution)</i> | TIER 1 | |
| <i>hyoscyamine sulfate er</i> | <i>hyoscyamine sulfate er 0.375 mg tab er 12h</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|---|--------|-----------------------------|
| <i>hyosyne</i> | <i>hyosyne (0.125 mg/5ml elixir, 0.125 mg/ml solution)</i> | TIER 1 | |
| <i>nulev</i> | <i>nulev 0.125 mg tab disp</i> | TIER 1 | |
| <i>oscimin</i> | <i>oscimin (0.125 mg sl tab, 0.125 mg tab)</i> | TIER 1 | |
| <i>oscimin sr</i> | <i>oscimin sr 0.375 mg tab er 12h</i> | TIER 1 | |
| <i>symax-sl</i> | <i>symax-sl 0.125 mg sl tab</i> | TIER 1 | |
| <i>symax-sr</i> | <i>symax-sr 0.375 mg tab er 12h</i> | TIER 1 | |
| QUATERNARY ANTICHOLINERGICS | | | |
| <i>glycopyrrolate</i> | <i>glycopyrrolate (1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>glycopyrrolate</i> | <i>glycopyrrolate 1 mg/5ml solution</i> | TIER 1 | PA, QL (1350 PER 30 DAY(S)) |
| <i>methscopolamine bromide</i> | <i>methscopolamine bromide (2.5 mg tab, 5 mg tab)</i> | TIER 1 | |
| PROPANTHELINE BROMIDE | PROPANTHELINE BROMIDE 15 MG TAB <i>propantheline bromide</i> | TIER 1 | |
| ANTISPASMODICS | | | |
| <i>dicyclomine hcl</i> | <i>dicyclomine hcl (10 mg cap, 10 mg/5ml solution, 20 mg tab)</i> | TIER 1 | |
| ANTICHOLINERGIC COMBINATIONS | | | |
| <i>chlordiazepoxide-clidinium</i> | <i>chlordiazepoxide-clidinium 5-2.5 mg cap</i> | TIER 1 | |
| H-2 ANTAGONISTS | | | |
| <i>cimetidine</i> | <i>cimetidine (300 mg tab, 400 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>cimetidine hcl</i> | <i>cimetidine hcl (300 mg/5ml solution, 400 mg/6.67ml solution)</i> | TIER 1 | |
| <i>famotidine</i> | <i>famotidine (40 mg tab, 40 mg/5ml recon susp)</i> | TIER 1 | |
| NIZATIDINE | NIZATIDINE (15 MG/ML SOLUTION, 150 MG CAP, 300 MG CAP) <i>nizatidine</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|---|
| ULCER DRUGS - PROSTAGLANDINS | | | |
| <i>misoprostol</i> | <i>misoprostol (100 mcg tab, 200 mcg tab)</i> | TIER 1 | |
| PROTON PUMP INHIBITORS | | | |
| <i>dexlansoprazole</i> | <i>dexlansoprazole (30 mg cap dr, 60 mg cap dr)</i> | TIER 1 | PA, QL (30 PER 30 DAYS), PA-QL (60 / 30 days) |
| <i>esomeprazole magnesium</i> | <i>esomeprazole magnesium (10 mg packet, 20 mg packet, 40 mg cap dr, 40 mg packet)</i> | TIER 1 | PA, QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>lansoprazole</i> | <i>lansoprazole 30 mg cap dr</i> | TIER 1 | QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>lansoprazole</i> | <i>lansoprazole 30 mg tab dr disp</i> | TIER 1 | PA, QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>omeprazole</i> | <i>omeprazole (10 mg cap dr, 40 mg cap dr)</i> | TIER 1 | QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>pantoprazole sodium</i> | <i>pantoprazole sodium (20 mg tab dr, 40 mg tab dr)</i> | TIER 1 | QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>pantoprazole sodium</i> | <i>pantoprazole sodium 40 mg packet</i> | TIER 1 | PA, QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| <i>rabeprazole sodium</i> | <i>rabeprazole sodium 20 mg tab dr</i> | TIER 1 | PA, QL (60 PER 30 DAYS), PA-QL (90 / 30 days) |
| MISC. ANTI-ULCER | | | |
| <i>sucralfate</i> | <i>sucralfate (1 gm tab, 1 gm/10ml suspension)</i> | TIER 1 | |
| ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS | | | |
| <i>amoxicill-clarithro-lansopraz</i> | <i>amoxicill-clarithro-lansopraz 500 & 500 & 30 mg ther pack</i> | TIER 1 | |
| ANTIEMETICS | | | |
| ANTIEMETICS - ANTICHOLINERGIC | | | |
| <i>scopolamine</i> | <i>scopolamine 1 mg/3days patch 72hr</i> | TIER 1 | |
| <i>trimethobenzamide hcl</i> | <i>trimethobenzamide hcl 300 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| 5-HT3 RECEPTOR ANTAGONISTS | | | |
| ANZEMET | ANZEMET (50 MG TAB, 100 MG TAB) <i>dolasetron mesylate</i> | TIER 2 | |
| <i>granisetron hcl</i> | <i>granisetron hcl 1 mg tab</i> | TIER 1 | |
| <i>ondansetron</i> | <i>ondansetron (4 mg tab disp, 8 mg tab disp)</i> | TIER 1 | |
| <i>ondansetron hcl</i> | <i>ondansetron hcl (4 mg tab, 4 mg/2ml soln prsyr, 8 mg tab, 24 mg tab)</i> | TIER 1 | |
| <i>ondansetron hcl</i> | <i>ondansetron hcl 4 mg/5ml solution</i> | TIER 1 | QL (300 PER 30 DAYS) |
| SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS | | | |
| <i>aprepitant</i> | <i>aprepitant (40 mg cap, 80 & 125 mg cap, 80 & 125 mg misc, 80 mg cap, 125 mg cap)</i> | TIER 1 | |
| EMEND | EMEND 125 MG/5ML RECON SUSP <i>aprepitant</i> | TIER 2 | |
| VARUBI (180 MG DOSE) | VARUBI (180 MG DOSE) 2 X 90 MG TAB THPK <i>rolapitant hcl</i> | SP-P | QL (4 PER 28 DAYS), S |
| ANTIEMETICS - MISCELLANEOUS | | | |
| <i>dronabinol</i> | <i>dronabinol (2.5 mg cap, 5 mg cap, 10 mg cap)</i> | TIER 1 | |
| ANTIEMETIC COMBINATIONS | | | |
| AKYNZEO | AKYNZEO (MG RECON SOLN, MG/20ML SOLUTION) <i>fosnetupitant choride-palonosetron hcl</i> | SP-M | S |
| AKYNZEO (READY-TO-USE) | AKYNZEO (READY-TO-USE) 235-0.25 MG/20ML SOLUTION <i>fosnetupitant choride-palonosetron hcl</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|--|--------|-----------------------|
| DIGESTIVE AIDS | | | |
| DIGESTIVE ENZYMES | | | |
| CREON | CREON (3000-9500 CP DR PART, 6000-19000 CP DR PART, 12000-38000 CP DR PART, 24000-76000 CP DR PART, 36000-114000 CP DR PART) <i>pancrelipase (lipase-protease-amylase)</i> | TIER 2 | |
| SUCRAID | SUCRAID 8500 UNIT/ML SOLUTION <i>sacrosidase</i> | SP-P | S |
| VIOKACE | VIOKACE (10440-39150 TAB, 20880 TAB, 20880-78300 TAB) <i>pancrelipase (lipase-protease-amylase)</i> | TIER 2 | |
| ZENPEP | ZENPEP (3000-10000 CP DR PART, 5000-24000 CP DR PART, 10000-32000 CP DR PART, 15000-47000 CP DR PART, 20000-63000 CP DR PART, 25000-79000 CP DR PART, 40000-126000 CP DR PART, 60000-189600 CP DR PART) <i>pancrelipase (lipase-protease-amylase)</i> | TIER 2 | |
| GASTROINTESTINAL AGENTS - MISC. | | | |
| GALLSTONE SOLUBILIZING AGENTS | | | |
| CHENODAL | CHENODAL 250 MG TAB <i>chenodiol</i> | SP-P | S |
| <i>ursodiol</i> | <i>ursodiol (250 mg tab, 300 mg cap, 500 mg tab)</i> | TIER 1 | |
| GASTROINTESTINAL ANTIALLERGY AGENTS | | | |
| <i>cromolyn sodium</i> | <i>cromolyn sodium 100 mg/5ml conc</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------------------|
| GASTROINTESTINAL STIMULANTS | | | |
| <i>metoclopramide hcl</i> | <i>metoclopramide hcl (5 mg tab, 5 mg/5ml solution, 10 mg tab, 10 mg/10ml solution)</i> | TIER 1 | |
| ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS | | | |
| BYLVAY (PELLETS) | BYLVAY (PELLETS) 200 MCG CAP SPRINK <i>odevixibat</i> | SP-NP | PA, QL (12 PER 1 DAY(S)), S |
| BYLVAY (PELLETS) | BYLVAY (PELLETS) 600 MCG CAP SPRINK <i>odevixibat</i> | SP-NP | PA, QL (4 PER 1 DAY(S)), S |
| BYLVAY | BYLVAY 1200 MCG CAP <i>odevixibat</i> | SP-NP | PA, QL (6 PER 1 DAY(S)), S |
| BYLVAY | BYLVAY 400 MCG CAP <i>odevixibat</i> | SP-NP | PA, QL (18 PER 1 DAY(S)), S |
| LIVMARLI | LIVMARLI 19 MG/ML SOLUTION <i>maralixibat chloride</i> | SP-NP | PA, QL (60 MLS PER 30 DAY(S)), S |
| LIVMARLI | LIVMARLI 9.5 MG/ML SOLUTION <i>maralixibat chloride</i> | SP-NP | PA, QL (120 MLS PER 30 DAY(S)), S |
| INTESTINAL ACIDIFIERS | | | |
| <i>enulose</i> | <i>enulose 10 gm/15ml solution</i> | TIER 1 | |
| <i>generlac</i> | <i>generlac 10 gm/15ml solution</i> | TIER 1 | |
| <i>lactulose encephalopathy</i> | <i>lactulose encephalopathy 10 gm/15ml solution</i> | TIER 1 | |
| GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS | | | |
| <i>lubiprostone</i> | <i>lubiprostone (8 mcg cap, 24 mcg cap)</i> | TIER 1 | |
| INFLAMMATORY BOWEL AGENTS | | | |
| <i>balsalazide disodium</i> | <i>balsalazide disodium 750 mg cap</i> | TIER 1 | |
| DIPENTUM | DIPENTUM 250 MG CAP <i>olsalazine sodium</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|--|--------|--|
| mesalamine | mesalamine (1.2 gm tab dr, 4 gm enema, 400 mg cap dr, 800 mg tab dr, 1000 mg suppos) | TIER 1 | |
| mesalamine er | mesalamine er 0.375 gm cap er 24h | TIER 1 | |
| mesalamine er | mesalamine er 500 mg cap er | TIER 3 | |
| PENTASA | PENTASA (250 MG CAP ER, 500 MG CAP ER) mesalamine | TIER 3 | GA |
| sulfasalazine | sulfasalazine (500 mg tab, 500 mg tab dr) | TIER 1 | |
| INTEGRIN RECEPTOR ANTAGONISTS | | | |
| ENTYVIO | ENTYVIO 108 MG/0.68ML SOLN A-INJ vedolizumab | SP-P | PA, QL (2 PENS PER 28 DAY(S)), S |
| ENTYVIO | ENTYVIO 300 MG RECON SOLN vedolizumab | SP-M | PA, S |
| INTERLEUKIN ANTAGONISTS | | | |
| OMVOH | OMVOH 300 MG/15ML SOLUTION mirikizumab-mrkz | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| SKYRIZI | SKYRIZI 180 MG/1.2ML SOLN CART risankizumab-rzaa (crohn's) | SP-P | PA, QL (1 PER 56 DAY(S)), S |
| SKYRIZI | SKYRIZI 360 MG/2.4ML SOLN CART risankizumab-rzaa (crohn's) | SP-P | PA, QL (1 PER 56 DAY(S)), S |
| SKYRIZI | SKYRIZI 600 MG/10ML SOLUTION risankizumab-rzaa (crohn's) | SP-M | PA, QL (3 PER 56 DAY(S)), S |
| STELARA | STELARA 130 MG/26ML SOLUTION ustekinumab (iv) | SP-M | PA, QL (4 PER FILL), S |
| TUMOR NECROSIS FACTOR ALPHA BLOCKERS | | | |
| AVSOLA | AVSOLA 100 MG RECON SOLN infliximab-axxq | SP-M | PA, S |
| INFLECTRA | INFLECTRA 100 MG RECON SOLN infliximab-dyyb | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| INFLIXIMAB | INFLIXIMAB 100 MG RECON SOLN <i>infliximab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| REMICADE | REMICADE 100 MG RECON SOLN <i>infliximab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| RENFLEXIS | RENFLEXIS 100 MG RECON SOLN <i>infliximab-abda</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| LIVE FECAL MICROBIOTA (HUMAN) | | | |
| REBYOTA | REBYOTA 150 ML SUSPENSION <i>fecal microbiota, live-jslm</i> | SP-M | S |
| CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS | | | |
| TRULANCE | TRULANCE 3 MG TAB <i>plecanatide</i> | TIER 3 | |
| IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS | | | |
| <i>alosetron hcl</i> | <i>alosetron hcl (0.5 mg tab, 1 mg tab)</i> | TIER 1 | |
| IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS | | | |
| LINZESS | LINZESS (72 MCG CAP, 145 MCG CAP, 290 MCG CAP) <i>linaclotide</i> | TIER 2 | |
| PERIPHERAL OPIOID RECEPTOR ANTAGONISTS | | | |
| <i>alvimopan</i> | <i>alvimopan 12 mg cap</i> | TIER 1 | |
| MOVANTIK | MOVANTIK (12.5 MG TAB, 25 MG TAB) <i>naloxegol oxalate</i> | TIER 2 | PA |
| FARNESOID X RECEPTOR (FXR) AGONISTS | | | |
| OCALIVA | OCALIVA 10 MG TAB <i>obeticholic acid</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| OCALIVA | OCALIVA 5 MG TAB <i>obeticholic acid</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR AGONISTS | | | |
| IQIRVO | IQIRVO 80 MG TAB <i>elafibranor</i> | SP-P | PA, QL (30 TABLETS PER 30 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|--------------------------|
| LIVDELZI | LIVDELZI 10 MG CAP <i>seladelpar lysine</i> | P&T | QL (1 CAP PER DAY(S)), S |
| PHOSPHATE BINDER AGENTS | | | |
| <i>calcium acetate (phos binder)</i> | <i>calcium acetate (phos binder) (667 mg cap, 667 mg tab)</i> | TIER 1 | |
| <i>calcium acetate</i> | <i>calcium acetate 667 mg tab</i> | TIER 1 | |
| <i>lanthanum carbonate</i> | <i>lanthanum carbonate (500 mg chew tab, 750 mg chew tab, 1000 mg chew tab)</i> | TIER 1 | |
| <i>sevelamer carbonate</i> | <i>sevelamer carbonate (0.8 gm packet, 2.4 gm packet, 800 mg tab)</i> | TIER 1 | |
| <i>sevelamer hcl</i> | <i>sevelamer hcl (400 mg tab, 800 mg tab)</i> | TIER 1 | |
| URINARY ANTISPASMODICS | | | |
| URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC) | | | |
| <i>darifenacin hydrobromide er</i> | <i>darifenacin hydrobromide er (er 7.5 mg tab er 24h, er 15 mg tab er 24h)</i> | TIER 1 | |
| <i>fesoterodine fumarate er</i> | <i>fesoterodine fumarate er (er 4 mg tab er 24h, er 8 mg tab er 24h)</i> | TIER 1 | QL (30 PER 30 DAYS) |
| <i>oxybutynin chloride</i> | <i>oxybutynin chloride (5 mg tab, 5 mg/5ml solution)</i> | TIER 1 | |
| <i>oxybutynin chloride er</i> | <i>oxybutynin chloride er (er 5 mg tab er 24h, er 10 mg tab er 24h, er 15 mg tab er 24h)</i> | TIER 1 | |
| <i>solifenacin succinate</i> | <i>solifenacin succinate (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>tolterodine tartrate</i> | <i>tolterodine tartrate (1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>tolterodine tartrate er</i> | <i>tolterodine tartrate er (er 2 mg cap er 24h, er 4 mg cap er 24h)</i> | TIER 1 | |
| <i>trospium chloride</i> | <i>trospium chloride 20 mg tab</i> | TIER 1 | |
| <i>trospium chloride er</i> | <i>trospium chloride er 60 mg cap er 24h</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS | | | |
| <i>bethanechol chloride</i> | <i>bethanechol chloride (5 mg tab, 10 mg tab, 25 mg tab, 50 mg tab)</i> | TIER 1 | |
| URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS | | | |
| <i>flavoxate hcl</i> | <i>flavoxate hcl 100 mg tab</i> | TIER 1 | |
| VAGINAL AND RELATED PRODUCTS | | | |
| VAGINAL ANTI-INFECTIVES | | | |
| CLEOCIN | CLEOCIN 100 MG SUPPOS <i>clindamycin phosphate vaginal</i> | TIER 3 | |
| <i>clindamycin phosphate</i> | <i>clindamycin phosphate 2 % cream</i> | TIER 1 | |
| <i>metronidazole</i> | <i>metronidazole 0.75 % gel</i> | TIER 1 | |
| IMIDAZOLE-RELATED ANTIFUNGALS | | | |
| <i>terconazole</i> | <i>terconazole (0.4 % cream, 0.8 % cream, 80 mg suppos)</i> | TIER 1 | |
| VAGINAL ESTROGENS | | | |
| <i>estradiol</i> | <i>estradiol (0.1 mg/gm cream, 10 mcg tab)</i> | TIER 1 | |
| ESTRING | ESTRING (2 MG RING, 7.5 MCG/24HR RING) <i>estradiol vaginal</i> | TIER 3 | |
| PREMARIN | PREMARIN 0.625 MG/GM CREAM <i>estrogens, conjugated vaginal</i> | TIER 2 | |
| <i>yuvafem</i> | <i>yuvafem 10 mcg tab</i> | TIER 1 | |
| VAGINAL PROGESTINS | | | |
| CRINONE | CRINONE 4 % GEL <i>progesterone (vaginal)</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|----------------------------|
| GENITOURINARY AGENTS - MISCELLANEOUS | | | |
| CITRATES | | | |
| CYTRA K CRYSTALS | CYTRA K CRYSTALS 3300-1002 MG PACKET <i>potassium citrate-citric acid</i> | TIER 1 | GA |
| <i>pot & sod cit-cit ac</i> | <i>pot & sod cit-cit ac 550-500-334 mg/5ml solution</i> | TIER 1 | |
| <i>potassium citrate er</i> | <i>potassium citrate er (er 5 (540 tab er, er 10 (1080 tab er, er 15 (1620 tab er)</i> | TIER 1 | |
| <i>potassium citrate-citric acid</i> | <i>potassium citrate-citric acid 1100-334 mg/5ml solution</i> | TIER 1 | |
| <i>sod citrate-citric acid</i> | <i>sod citrate-citric acid (1.5-1 gm/15ml solution, 3-2 gm/30ml solution, 500-334 mg/5ml solution)</i> | TIER 1 | |
| <i>taron-crystals</i> | <i>taron-crystals 3300-1002 mg packet</i> | TIER 1 | |
| <i>tricitrates</i> | <i>tricitrates 550-500-334 mg/5ml solution</i> | TIER 1 | |
| URINARY ANALGESICS | | | |
| <i>phenazo</i> | <i>phenazo 200 mg tab</i> | TIER 1 | |
| <i>phenazopyridine hcl</i> | <i>phenazopyridine hcl 200 mg tab</i> | TIER 1 | |
| CYSTINOSIS AGENTS | | | |
| CYSTAGON | CYSTAGON (50 MG CAP, 150 MG CAP) <i>cysteamine bitartrate</i> | SP-P | S |
| IGAN AGENTS - ENDOTHELIN & ANGIOTENSIN II RECEPTOR ANTAG | | | |
| FILSPARI | FILSPARI (200 MG TAB, 400 MG TAB) <i>sparsentan</i> | SP-NP | PA, QL (1 PER 1 DAY(S)), S |
| INTERSTITIAL CYSTITIS AGENTS | | | |
| ELMIRON | ELMIRON 100 MG CAP <i>pentosan polysulfate sodium</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| URINARY STONE AGENTS | | | |
| LITHOSTAT | LITHOSTAT 250 MG TAB <i>acetohydroxamic acid</i> | TIER 3 | |
| THIOLA | THIOLA 100 MG TAB <i>tiopronin</i> | SP-NP | S, GA |
| THIOLA EC | THIOLA EC (EC 100 MG TAB DR, EC 300 MG TAB DR) <i>tiopronin</i> | SP-P | S |
| <i>tiopronin</i> | <i>tiopronin 100 mg tab</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| SMALL INTERFERING RIBONUCLEIC ACID AGENTS (SIRNA) | | | |
| OXLUMO | OXLUMO 94.5 MG/0.5ML SOLUTION <i>lumasiran sodium</i> | SP-M | PA, S |
| 5-ALPHA REDUCTASE INHIBITORS | | | |
| <i>dutasteride</i> | <i>dutasteride 0.5 mg cap</i> | TIER 1 | |
| <i>finasteride</i> | <i>finasteride 5 mg tab</i> | TIER 1 | |
| ALPHA 1-ADRENOCEPTOR ANTAGONISTS | | | |
| <i>alfuzosin hcl er</i> | <i>alfuzosin hcl er 10 mg tab er 24h</i> | TIER 1 | |
| <i>silodosin</i> | <i>silodosin (4 mg cap, 8 mg cap)</i> | TIER 1 | QL (30 PER 30 DAYS) |
| <i>tamsulosin hcl</i> | <i>tamsulosin hcl 0.4 mg cap</i> | TIER 1 | |
| PROSTATIC HYPERTROPHY AGENT COMBINATIONS | | | |
| <i>dutasteride- tamsulosin hcl</i> | <i>dutasteride-tamsulosin hcl 0.5-0.4 mg cap</i> | TIER 1 | |
| ANTI-ANXIETY AGENTS | | | |
| BENZODIAZEPINES | | | |
| <i>alprazolam</i> | <i>alprazolam (0.25 mg tab, 0.25 mg tab disp, 0.5 mg tab, 0.5 mg tab disp, 1 mg tab, 1 mg tab disp, 2 mg tab, 2 mg tab disp)</i> | TIER 1 | |
| <i>alprazolam er</i> | <i>alprazolam er (er 0.5 mg tab er 24h, er 1 mg tab er 24h, er 2 mg tab er 24h, er 3 mg tab er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| ALPRAZOLAM INTENSOL | ALPRAZOLAM INTENSOL 1 MG/ML CONC <i>alprazolam</i> | TIER 1 | |
| <i>alprazolam xr</i> | <i>alprazolam xr (0.5 mg tab er 24h, 1 mg tab er 24h, 2 mg tab er 24h, 3 mg tab er 24h)</i> | TIER 1 | |
| <i>chlordiazepoxide hcl</i> | <i>chlordiazepoxide hcl (10 mg cap, 25 mg cap)</i> | TIER 1 | |
| <i>chlordiazepoxide hcl</i> | <i>chlordiazepoxide hcl 5 mg cap</i> | TIER 1 | |
| <i>clorazepate dipotassium</i> | <i>clorazepate dipotassium (3.75 mg tab, 7.5 mg tab, 15 mg tab)</i> | TIER 1 | |
| <i>diazepam</i> | <i>diazepam (2 mg tab, 5 mg/5ml solution, 5 mg/ml conc, 10 mg tab)</i> | TIER 1 | |
| <i>diazepam</i> | <i>diazepam 5 mg tab</i> | TIER 1 | |
| <i>diazepam intensol</i> | <i>diazepam intensol 5 mg/ml conc</i> | TIER 1 | |
| <i>lorazepam</i> | <i>lorazepam (0.5 mg tab, 1 mg tab, 2 mg tab, 2 mg/ml conc)</i> | TIER 1 | |
| <i>lorazepam intensol</i> | <i>lorazepam intensol 2 mg/ml conc</i> | TIER 1 | |
| <i>oxazepam</i> | <i>oxazepam (10 mg cap, 15 mg cap, 30 mg cap)</i> | TIER 1 | |
| ANTIANXIETY AGENTS - MISC. | | | |
| <i>buspirone hcl</i> | <i>buspirone hcl (5 mg tab, 15 mg tab)</i> | TIER 1 | |
| <i>buspirone hcl</i> | <i>buspirone hcl (7.5 mg tab, 10 mg tab, 30 mg tab)</i> | TIER 1 | |
| <i>hydroxyzine hcl</i> | <i>hydroxyzine hcl (10 mg tab, 50 mg tab)</i> | TIER 1 | |
| <i>hydroxyzine hcl</i> | <i>hydroxyzine hcl (10 mg/5ml syrup, 25 mg tab)</i> | TIER 1 | |
| <i>hydroxyzine pamoate</i> | <i>hydroxyzine pamoate (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |
| <i>meprobamate</i> | <i>meprobamate (200 mg tab, 400 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--------------------------------|
| ANTIDEPRESSANTS | | | |
| ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS) | | | |
| <i>mirtazapine</i> | <i>mirtazapine (7.5 mg tab, 15 mg tab, 15 mg tab disp, 30 mg tab, 30 mg tab disp, 45 mg tab, 45 mg tab disp)</i> | TIER 1 | |
| GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID | | | |
| ZULRESSO | ZULRESSO 100 MG/20ML SOLUTION <i>brexanolone</i> | SP-M | PA, S |
| ZURZUVAE | ZURZUVAE (20 MG CAP, 25 MG CAP) <i>zuranolone</i> | SP-NP | PA, QL (28 PER 365 DAY(S)), S |
| ZURZUVAE | ZURZUVAE 30 MG CAP <i>zuranolone</i> | SP-NP | PA, QL (14 PER 365 DAY(S)), S |
| MONOAMINE OXIDASE INHIBITORS (MAOIS) | | | |
| MARPLAN | MARPLAN 10 MG TAB <i>isocarboxazid</i> | TIER 2 | |
| <i>phenelzine sulfate</i> | <i>phenelzine sulfate 15 mg tab</i> | TIER 1 | |
| <i>tranylcypromine sulfate</i> | <i>tranylcypromine sulfate 10 mg tab</i> | TIER 1 | |
| SEROTONIN MODULATORS | | | |
| NEFAZODONE HCL | NEFAZODONE HCL (50 MG TAB, 100 MG TAB, 150 MG TAB, 200 MG TAB, 250 MG TAB) <i>nefazodone hcl</i> | TIER 1 | |
| <i>trazodone hcl</i> | <i>trazodone hcl (50 mg tab, 100 mg tab, 150 mg tab)</i> | TIER 1 | |
| <i>vilazodone hcl</i> | <i>vilazodone hcl (10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PA, QL (1 PER 1 DAY(S)) |
| SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS) | | | |
| <i>citalopram hydrobromide</i> | <i>citalopram hydrobromide (10 mg tab, 20 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>citalopram hydrobromide</i> | <i>citalopram hydrobromide 10 mg/5ml solution</i> | TIER 1 | PA, QL (600 PER 30 DAY(S)), PV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|--------------------------|
| <i>escitalopram oxalate</i> | <i>escitalopram oxalate (5 mg tab, 5 mg/5ml solution, 10 mg tab, 20 mg tab)</i> | TIER 1 | PV |
| FLUOXETINE HCL | FLUOXETINE HCL (10 MG CAP, 20 MG CAP, 20 MG/5ML SOLUTION, 40 MG CAP, 90 MG CAP DR) <i>fluoxetine hcl</i> | TIER 1 | PV |
| <i>fluvoxamine maleate</i> | <i>fluvoxamine maleate (50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| <i>fluvoxamine maleate</i> | <i>fluvoxamine maleate 25 mg tab</i> | TIER 1 | PV |
| <i>fluvoxamine maleate er</i> | <i>fluvoxamine maleate er 100 mg cap er 24h</i> | TIER 1 | PA |
| <i>fluvoxamine maleate er</i> | <i>fluvoxamine maleate er 150 mg cap er 24h</i> | TIER 1 | PA |
| <i>paroxetine hcl</i> | <i>paroxetine hcl (10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab)</i> | TIER 1 | PV |
| <i>paroxetine hcl</i> | <i>paroxetine hcl 10 mg/5ml suspension</i> | TIER 1 | PA, QL (30 PER 1 DAY(S)) |
| <i>paroxetine hcl er</i> | <i>paroxetine hcl er (er 12.5 mg tab er 24h, er 25 mg tab er 24h, er 37.5 mg tab er 24h)</i> | TIER 1 | PV |
| <i>sertraline hcl</i> | <i>sertraline hcl (20 mg/ml conc, 25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | PV |
| SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS) | | | |
| <i>desvenlafaxine succinate er</i> | <i>desvenlafaxine succinate er (er 25 mg tab er 24h, er 50 mg tab er 24h, er 100 mg tab er 24h)</i> | TIER 1 | QL (30 PER 30 DAYS) |
| <i>duloxetine hcl</i> | <i>duloxetine hcl (20 mg cp dr part, 30 mg cp dr part, 40 mg cp dr part, 60 mg cp dr part)</i> | TIER 1 | |
| <i>venlafaxine hcl</i> | <i>venlafaxine hcl (25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>venlafaxine hcl er</i> | <i>venlafaxine hcl er (er 37.5 mg cap er 24h, er 75 mg cap er 24h, er 150 mg cap er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|-----------------------------|
| TRICYCLIC AGENTS | | | |
| <i>amitriptyline hcl</i> | <i>amitriptyline hcl (10 mg tab, 25 mg tab, 50 mg tab, 75 mg tab, 100 mg tab, 150 mg tab)</i> | TIER 1 | |
| <i>amoxapine</i> | <i>amoxapine (25 mg tab, 50 mg tab, 100 mg tab, 150 mg tab)</i> | TIER 1 | |
| <i>clomipramine hcl</i> | <i>clomipramine hcl (25 mg cap, 75 mg cap)</i> | TIER 1 | |
| <i>clomipramine hcl</i> | <i>clomipramine hcl 50 mg cap</i> | TIER 1 | |
| <i>desipramine hcl</i> | <i>desipramine hcl (10 mg tab, 25 mg tab, 50 mg tab, 75 mg tab, 100 mg tab, 150 mg tab)</i> | TIER 1 | |
| <i>doxepin hcl</i> | <i>doxepin hcl (10 mg cap, 10 mg/ml conc, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap)</i> | TIER 1 | |
| <i>imipramine hcl</i> | <i>imipramine hcl (10 mg tab, 25 mg tab, 50 mg tab)</i> | TIER 1 | |
| <i>nortriptyline hcl</i> | <i>nortriptyline hcl (10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap)</i> | TIER 1 | |
| <i>nortriptyline hcl</i> | <i>nortriptyline hcl 10 mg/5ml solution</i> | TIER 1 | PA, QL (2400 PER 30 DAY(S)) |
| <i>protriptyline hcl</i> | <i>protriptyline hcl (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>trimipramine maleate</i> | <i>trimipramine maleate (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |
| ANTIDEPRESSANTS - MISC. | | | |
| <i>bupropion hcl</i> | <i>bupropion hcl 100 mg tab</i> | TIER 1 | |
| <i>bupropion hcl</i> | <i>bupropion hcl 75 mg tab</i> | TIER 1 | |
| <i>bupropion hcl er (sr)</i> | <i>bupropion hcl er (sr) (er 100 mg tab er 12h, er 150 mg tab er 12h, er 200 mg tab er 12h)</i> | TIER 1 | |
| <i>bupropion hcl er (xl)</i> | <i>bupropion hcl er (xl) 150 mg tab er 24h</i> | TIER 1 | |
| <i>bupropion hcl er (xl)</i> | <i>bupropion hcl er (xl) 300 mg tab er 24h</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|---|--------|-----------------------|
| MAPROTILINE HCL | MAPROTILINE HCL (25 MG TAB, 50 MG TAB, 75 MG TAB) <i>maprotiline hcl</i> | TIER 1 | PV |
| ANTIPSYCHOTICS/ANTIMANIC AGENTS | | | |
| BENZISOXAZOLES | | | |
| INVEGA HAFYERA | INVEGA HAFYERA (1092 MG/3.5ML SUSP PRSYR, 1560 MG/5ML SUSP PRSYR) <i>paliperidone palmitate</i> | TIER 3 | |
| INVEGA SUSTENNA | INVEGA SUSTENNA (39 MG/0.25ML SUSP PRSYR, 78 MG/0.5ML SUSP PRSYR, 117 MG/0.75ML SUSP PRSYR, 156 MG/ML SUSP PRSYR, 234 MG/1.5ML SUSP PRSYR) <i>paliperidone palmitate</i> | TIER 3 | |
| INVEGA TRINZA | INVEGA TRINZA (273 MG/0.88ML SUSP PRSYR, 410 MG/1.32ML SUSP PRSYR, 546 MG/1.75ML SUSP PRSYR, 819 MG/2.63ML SUSP PRSYR) <i>paliperidone palmitate</i> | TIER 3 | |
| <i>paliperidone er</i> | <i>paliperidone er (er 1.5 mg tab er 24h, er 3 mg tab er 24h, er 6 mg tab er 24h, er 9 mg tab er 24h)</i> | TIER 1 | |
| PERSERIS | PERSERIS (90 MG PRSYR, 120 MG PRSYR) <i>risperidone</i> | TIER 3 | |
| RISPERDAL CONSTA | RISPERDAL CONSTA (12.5 MG, 25 MG, 37.5 MG, 50 MG) <i>risperidone microspheres</i> | TIER 3 | GA |
| <i>risperidone</i> | <i>risperidone (0.25 mg tab disp, 0.5 mg tab disp, 1 mg tab disp, 2 mg tab disp, 3 mg tab disp, 4 mg tab disp)</i> | TIER 1 | PA |
| <i>risperidone</i> | <i>risperidone (0.25 mg tab, 1 mg tab, 3 mg tab)</i> | TIER 1 | |
| <i>risperidone</i> | <i>risperidone (0.5 mg tab, 2 mg tab, 4 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|---|--------|----------------------------|
| <i>risperidone</i> | <i>risperidone 1 mg/ml solution</i> | TIER 1 | PA, QL (480 PER 30 DAY(S)) |
| <i>risperidone microspheres er</i> | <i>risperidone microspheres er (er 12.5 mg, er 25 mg, er 37.5 mg, er 50 mg)</i> | TIER 3 | |
| RYKINDO | RYKINDO (25 MG, 37.5 MG, 50 MG) <i>risperidone</i> | TIER 3 | |
| UZEDY | UZEDY (50 MG/0.14ML SUSP PRSYR, 75 MG/0.21ML SUSP PRSYR, 100 MG/0.28ML SUSP PRSYR, 125 MG/0.35ML SUSP PRSYR, 150 MG/0.42ML SUSP PRSYR, 200 MG/0.56ML SUSP PRSYR, 250 MG/0.7ML SUSP PRSYR) <i>risperidone</i> | TIER 3 | |
| BUTYROPHENONES | | | |
| <i>haloperidol</i> | <i>haloperidol (0.5 mg tab, 1 mg tab, 2 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i> | TIER 1 | |
| <i>haloperidol lactate</i> | <i>haloperidol lactate 2 mg/ml conc</i> | TIER 1 | |
| DIBENZODIAZEPINES | | | |
| <i>clozapine</i> | <i>clozapine (12.5 mg tab disp, 25 mg tab disp, 50 mg tab, 100 mg tab, 100 mg tab disp, 200 mg tab)</i> | TIER 1 | |
| <i>clozapine</i> | <i>clozapine 25 mg tab</i> | TIER 1 | |
| DIBENZOTHIAZEPINES | | | |
| <i>quetiapine fumarate</i> | <i>quetiapine fumarate (25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab, 300 mg tab, 400 mg tab)</i> | TIER 1 | |
| <i>quetiapine fumarate er</i> | <i>quetiapine fumarate er (er 50 mg tab er 24h, er 150 mg tab er 24h, er 200 mg tab er 24h, er 300 mg tab er 24h, er 400 mg tab er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|----------------------------|
| DIBENZOAZEPINES | | | |
| <i>loxapine succinate</i> | <i>loxapine succinate (5 mg cap, 10 mg cap, 25 mg cap, 50 mg cap)</i> | TIER 1 | |
| DIBENZO-OXEPINO PYRROLES | | | |
| <i>asenapine maleate</i> | <i>asenapine maleate (2.5 mg sl tab, 5 mg sl tab, 10 mg sl tab)</i> | TIER 1 | |
| THIENBENZODIAZEPINES | | | |
| <i>olanzapine</i> | <i>olanzapine (2.5 mg tab, 5 mg tab, 5 mg tab disp, 7.5 mg tab, 10 mg tab, 10 mg tab disp, 15 mg tab, 15 mg tab disp, 20 mg tab, 20 mg tab disp)</i> | TIER 1 | |
| ZYPREXA | ZYPREXA 20 MG TAB <i>olanzapine</i> | TIER 1 | GA |
| ZYPREXA RELPREVV | ZYPREXA RELPREVV (210 MG RECON SUSP, 300 MG RECON SUSP, 405 MG RECON SUSP) <i>olanzapine pamoate</i> | TIER 3 | |
| MUSCARINIC AGENT - COMBINATIONS | | | |
| COBENFY | COBENFY (50-20 MG CAP, 100-20 MG CAP, 125-30 MG CAP) <i>xanomeline tartrate-trospium chloride</i> | P&T | QL (60 CAPS PER 30 DAY(S)) |
| COBENFY STARTER PACK | COBENFY STARTER PACK 50-20 & 100-20 MG CAP THPK <i>xanomeline tartrate-trospium chloride</i> | P&T | QL (1 PACK PER LIFETIME) |
| PHENOTHIAZINES | | | |
| <i>chlorpromazine hcl</i> | <i>chlorpromazine hcl (10 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>chlorpromazine hcl</i> | <i>chlorpromazine hcl (25 mg tab, 50 mg tab, 200 mg tab)</i> | TIER 1 | |
| <i>compro</i> | <i>compro 25 mg suppos</i> | TIER 1 | |
| <i>fluphenazine hcl</i> | <i>fluphenazine hcl (1 mg tab, 5 mg tab, 10 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|--------|----------------------------|
| FLUPHENAZINE HCL | FLUPHENAZINE HCL (2.5 MG TAB, 2.5 MG/5ML ELIXIR, 5 MG/ML CONC) <i>fluphenazine hcl</i> | TIER 1 | |
| <i>perphenazine</i> | <i>perphenazine (2 mg tab, 4 mg tab, 8 mg tab, 16 mg tab)</i> | TIER 1 | |
| <i>prochlorperazine</i> | <i>prochlorperazine 25 mg suppos</i> | TIER 1 | |
| <i>prochlorperazine maleate</i> | <i>prochlorperazine maleate (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>thioridazine hcl</i> | <i>thioridazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>trifluoperazine hcl</i> | <i>trifluoperazine hcl (1 mg tab, 2 mg tab, 5 mg tab, 10 mg tab)</i> | TIER 1 | |
| QUINOLINONE DERIVATIVES | | | |
| ABILIFY ASIMTUFII | ABILIFY ASIMTUFII (720 MG/2.4ML PRSYR, 960 MG/3.2ML PRSYR) <i>aripiprazole</i> | TIER 3 | |
| ABILIFY MAINTENA | ABILIFY MAINTENA (300 MG, 400 MG) <i>aripiprazole</i> | TIER 3 | |
| <i>aripiprazole</i> | <i>aripiprazole (2 mg tab, 5 mg tab, 10 mg tab, 10 mg tab disp, 15 mg tab, 15 mg tab disp, 20 mg tab, 30 mg tab)</i> | TIER 1 | |
| <i>aripiprazole</i> | <i>aripiprazole 1 mg/ml solution</i> | TIER 1 | PA, QL (900 PER 30 DAY(S)) |
| ARISTADA | ARISTADA (441 MG/1.6ML PRSYR, 662 MG/2.4ML PRSYR, 882 MG/3.2ML PRSYR, 1064 MG/3.9ML PRSYR) <i>aripiprazole lauroxil</i> | TIER 3 | |
| ARISTADA INITIO | ARISTADA INITIO 675 MG/2.4ML PRSYR <i>aripiprazole lauroxil</i> | TIER 3 | |
| THIOXANTHENES | | | |
| <i>thiothixene</i> | <i>thiothixene (1 mg cap, 2 mg cap, 5 mg cap, 10 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------|
| ANTIPSYCHOTICS - MISC. | | | |
| <i>lurasidone hcl</i> | <i>lurasidone hcl (20 mg tab, 40 mg tab, 60 mg tab, 80 mg tab, 120 mg tab)</i> | TIER 1 | |
| NUPLAZID | NUPLAZID (10 MG TAB, 34 MG CAP) <i>pimavanserin tartrate</i> | SP-NP | QL (1 PER 1 DAY), S |
| <i>ziprasidone hcl</i> | <i>ziprasidone hcl (20 mg cap, 40 mg cap, 60 mg cap, 80 mg cap)</i> | TIER 1 | |
| ANTIMANIC AGENTS | | | |
| <i>lithium</i> | <i>lithium 8 meq/5ml solution</i> | TIER 1 | |
| <i>lithium carbonate</i> | <i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i> | TIER 1 | |
| <i>lithium carbonate er</i> | <i>lithium carbonate er (er 300 mg tab er, er 450 mg tab er)</i> | TIER 1 | |
| HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS | | | |
| BARBITURATE HYPNOTICS | | | |
| <i>phenobarbital</i> | <i>phenobarbital (15 mg tab, 16.2 mg tab, 20 mg/5ml elixir, 20 mg/5ml solution, 30 mg tab, 32.4 mg tab, 60 mg tab, 64.8 mg tab, 97.2 mg tab, 100 mg tab)</i> | TIER 1 | |
| SECONAL | SECONAL 100 MG CAP <i>secobarbital sodium</i> | TIER 3 | |
| BENZODIAZEPINE HYPNOTICS | | | |
| <i>estazolam</i> | <i>estazolam (1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>temazepam</i> | <i>temazepam (7.5 mg cap, 15 mg cap, 22.5 mg cap, 30 mg cap)</i> | TIER 1 | |
| <i>triazolam</i> | <i>triazolam (0.125 mg tab, 0.25 mg tab)</i> | TIER 1 | |
| NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS | | | |
| <i>eszopiclone</i> | <i>eszopiclone (1 mg tab, 2 mg tab, 3 mg tab)</i> | TIER 1 | |
| <i>zaleplon</i> | <i>zaleplon (5 mg cap, 10 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| <i>zolpidem tartrate</i> | <i>zolpidem tartrate (1.75 mg sl tab, 3.5 mg sl tab)</i> | TIER 1 | PA |
| <i>zolpidem tartrate</i> | <i>zolpidem tartrate (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>zolpidem tartrate er</i> | <i>zolpidem tartrate er (er 6.25 mg tab er, er 12.5 mg tab er)</i> | TIER 1 | |
| SELECTIVE MELATONIN RECEPTOR AGONISTS | | | |
| HETLIOZ | HETLIOZ 20 MG CAP <i>tasimelteon</i> | SP-NP | PA, QL (30 PER 30 DAYS), S, GA |
| HETLIOZ LQ | HETLIOZ LQ 4 MG/ML SUSPENSION <i>tasimelteon</i> | SP-P | PA, QL (5 PER 1 DAY(S)), S |
| <i>ramelteon</i> | <i>ramelteon 8 mg tab</i> | TIER 1 | |
| <i>tasimelteon</i> | <i>tasimelteon 20 mg cap</i> | SP-P | PA, QL (30 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| HYPNOTICS - TRICYCLIC AGENTS | | | |
| <i>doxepin hcl</i> | <i>doxepin hcl (3 mg tab, 6 mg tab)</i> | TIER 1 | PA |
| ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS | | | |
| AMPHETAMINES | | | |
| <i>dextroamphetamine sulfate</i> | <i>dextroamphetamine sulfate (5 mg tab, 5 mg/5ml solution, 10 mg tab)</i> | TIER 1 | |
| <i>dextroamphetamine sulfate er</i> | <i>dextroamphetamine sulfate er (er 5 mg cap er 24h, er 10 mg cap er 24h, er 15 mg cap er 24h)</i> | TIER 1 | PA |
| <i>lisdexamfetamine dimesylate</i> | <i>lisdexamfetamine dimesylate (10 mg cap, 10 mg chew tab, 20 mg cap, 20 mg chew tab, 30 mg cap, 30 mg chew tab, 40 mg cap, 40 mg chew tab, 50 mg cap, 50 mg chew tab, 60 mg cap, 60 mg chew tab, 70 mg cap)</i> | TIER 1 | |
| <i>methamphetamine hcl</i> | <i>methamphetamine hcl 5 mg tab</i> | TIER 1 | |
| <i>procentra</i> | <i>procentra 5 mg/5ml solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------------|
| VYVANSE | VYVANSE (10 MG CAP, 10 MG CHEW TAB, 20 MG CAP, 20 MG CHEW TAB, 30 MG CAP, 30 MG CHEW TAB, 40 MG CAP, 40 MG CHEW TAB, 50 MG CAP, 50 MG CHEW TAB, 60 MG CAP, 60 MG CHEW TAB, 70 MG CAP) <i>lisdexamfetamine dimesylate</i> | TIER 2 | GA |
| zenzedi | zenzedi (5 mg tab, 10 mg tab) | TIER 1 | |
| AMPHETAMINE MIXTURES | | | |
| amphetamine-dextroamphetamine | amphetamine-dextroamphetamine (er 5 mg cap er 24h, er 10 mg cap er 24h, er 15 mg cap er 24h, er 20 mg cap er 24h, er 25 mg cap er 24h, er 30 mg cap er 24h) | TIER 1 | PA |
| amphetamine-dextroamphetamine | amphetamine-dextroamphetamine (5 mg tab, 7.5 mg tab, 10 mg tab, 12.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab) | TIER 1 | |
| MELANOCORTIN 4 (MC4) RECEPTOR AGONISTS | | | |
| IMCIVREE | IMCIVREE 10 MG/ML SOLUTION <i>setmelanotide acetate</i> | SP-NP | PA, QL (9 PER 30 DAY(S)), S |
| ANALEPTICS | | | |
| caffeine citrate | caffeine citrate (20 mg/ml solution, 60 mg/3ml solution) | TIER 1 | |
| ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS | | | |
| clonidine hcl er | clonidine hcl er 0.1 mg tab er 12h | TIER 1 | |
| guanfacine hcl er | guanfacine hcl er (er 2 mg tab er 24h, er 3 mg tab er 24h, er 4 mg tab er 24h) | TIER 1 | |
| guanfacine hcl er | guanfacine hcl er 1 mg tab er 24h | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-------------------------|
| ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR | | | |
| <i>atomoxetine hcl</i> | <i>atomoxetine hcl (10 mg cap, 18 mg cap, 25 mg cap, 40 mg cap, 60 mg cap)</i> | TIER 1 | QL (60 PER 30 DAYS) |
| <i>atomoxetine hcl</i> | <i>atomoxetine hcl (80 mg cap, 100 mg cap)</i> | TIER 1 | QL (30 PER 30 DAYS) |
| STIMULANTS - MISC. | | | |
| <i>armodafinil</i> | <i>armodafinil (50 mg tab, 150 mg tab, 200 mg tab, 250 mg tab)</i> | TIER 1 | PA, QL (30 PER 30 DAYS) |
| <i>dexmethylphenidate hcl</i> | <i>dexmethylphenidate hcl (2.5 mg tab, 5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>dexmethylphenidate hcl er</i> | <i>dexmethylphenidate hcl er (er 5 mg cap er 24h, er 10 mg cap er 24h, er 15 mg cap er 24h, er 20 mg cap er 24h, er 25 mg cap er 24h, er 30 mg cap er 24h, er 35 mg cap er 24h, er 40 mg cap er 24h)</i> | TIER 1 | PA |
| <i>methylphenidate</i> | <i>methylphenidate (10 patch, 15 patch, 20 patch, 30 patch)</i> | TIER 1 | PA, QL (1 PER DAY(S)) |
| <i>methylphenidate hcl</i> | <i>methylphenidate hcl (2.5 mg chew tab, 5 mg chew tab, 5 mg tab, 5 mg/5ml solution, 10 mg chew tab, 10 mg tab, 10 mg/5ml solution, 20 mg tab)</i> | TIER 1 | |
| <i>methylphenidate hcl er (cd)</i> | <i>methylphenidate hcl er (cd) (er 10 mg cap er, er 20 mg cap er, er 30 mg cap er, er 40 mg cap er, er 50 mg cap er, er 60 mg cap er)</i> | TIER 1 | PA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------------------|
| METHYLPHENIDATE HCL ER | METHYLPHENIDATE HCL ER (ER 10 MG TAB ER, ER 18 MG TAB ER, ER 18 MG TAB ER 24H, ER 20 MG TAB ER, ER 27 MG TAB ER, ER 27 MG TAB ER 24H, ER 36 MG TAB ER, ER 36 MG TAB ER 24H, ER 54 MG TAB ER, ER 54 MG TAB ER 24H) <i>methylphenidate hcl</i> | TIER 1 | PA |
| <i>methylphenidate hcl er (la)</i> | <i>methylphenidate hcl er (la) (er 10 mg cap er 24h, er 20 mg cap er 24h, er 30 mg cap er 24h, er 40 mg cap er 24h, er 60 mg cap er 24h)</i> | TIER 1 | PA |
| <i>methylphenidate hcl er (osm)</i> | <i>methylphenidate hcl er (osm) (er 18 mg tab er, er 27 mg tab er, er 36 mg tab er, er 54 mg tab er)</i> | TIER 1 | PA |
| <i>modafinil</i> | <i>modafinil (100 mg tab, 200 mg tab)</i> | TIER 1 | PA, QL (60 PER 30 DAYS) |
| PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. | | | |
| AQNEURSA | AQNEURSA 1 GM PACKET <i>levacetylleucine</i> | P&T | QL (120 PACKETS PER 30 DAY(S)), S |
| ERGOLOID MESYLATES | ERGOLOID MESYLATES 1 MG TAB <i>ergoloid mesylates</i> | TIER 1 | |
| MIPLYFFA | MIPLYFFA (47 MG CAP, 62 MG CAP) <i>arimoclomol citrate</i> | P&T | QL (90 CAPSULES PER 30 DAY(S)), S |
| MIPLYFFA | MIPLYFFA (93 MG CAP, 124 MG CAP) <i>arimoclomol citrate</i> | P&T | QL (90 CAPSULES PER 30 DAY(S)), S |
| PIMOZIDE | PIMOZIDE (1 MG TAB, 2 MG TAB) <i>pimozide</i> | TIER 1 | |
| ALZHEIMER'S TREATMENT - ANTI-AMYLOID ANTIBODIES | | | |
| KISUNLA | KISUNLA 350 MG/20ML SOLUTION <i>donanemab-azbt</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|----------------------------|
| CHOLINOMIMETICS - ACHE INHIBITORS | | | |
| <i>donepezil hcl</i> | <i>donepezil hcl (5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp, 23 mg tab)</i> | TIER 1 | |
| <i>galantamine hydrobromide</i> | <i>galantamine hydrobromide (4 mg tab, 8 mg tab, 12 mg tab)</i> | TIER 1 | |
| <i>galantamine hydrobromide er</i> | <i>galantamine hydrobromide er (er 8 mg cap er 24h, er 16 mg cap er 24h, er 24 mg cap er 24h)</i> | TIER 1 | |
| <i>rivastigmine</i> | <i>rivastigmine (4.6 mg/24hr patch 24hr, 9.5 mg/24hr patch 24hr, 13.3 mg/24hr patch 24hr)</i> | TIER 1 | |
| <i>rivastigmine tartrate</i> | <i>rivastigmine tartrate (1.5 mg cap, 3 mg cap, 4.5 mg cap, 6 mg cap)</i> | TIER 1 | |
| N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS | | | |
| <i>memantine hcl</i> | <i>memantine hcl (2 mg/ml solution, 10 mg/5ml solution)</i> | TIER 1 | PA, QL (300 PER 30 DAY(S)) |
| <i>memantine hcl</i> | <i>memantine hcl (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>memantine hcl er</i> | <i>memantine hcl er (er 7 mg cap er 24h, er 14 mg cap er 24h, er 21 mg cap er 24h, er 28 mg cap er 24h)</i> | TIER 1 | |
| CALD - AUTOLOGOUS CELLULAR GENE THERAPY AGENTS | | | |
| SKYSONA | SKYSONA SUSPENSION <i>elivaldogene autotemcel</i> | SP-M | PA, S |
| SMOKING DETERRENENTS | | | |
| <i>bupropion hcl er (smoking det)</i> | <i>bupropion hcl er (smoking det) 150 mg tab er 12h</i> | TIER 1 | |
| CHANTIX | CHANTIX (0.5 MG TAB, 1 MG TAB) <i>varenicline tartrate</i> | TIER 1 | GA |
| CHANTIX CONTINUING MONTH PAK | CHANTIX CONTINUING MONTH PAK 1 MG TAB <i>varenicline tartrate</i> | TIER 1 | GA |
| NICOTROL | NICOTROL 10 MG INHALER <i>nicotine</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--------------------------------------|
| NICOTROL NS | NICOTROL NS 10 MG/ML SOLUTION <i>nicotine</i> | TIER 3 | |
| <i>varenicline tartrate</i> | <i>varenicline tartrate (0.5 mg tab, 1 mg tab)</i> | TIER 1 | |
| <i>varenicline tartrate (starter)</i> | <i>varenicline tartrate (starter) 0.5 mg x 11 & 1 mg x 42 tab thpk</i> | TIER 1 | |
| <i>varenicline tartrate(continue)</i> | <i>varenicline tartrate(continue) 1 mg tab</i> | TIER 1 | |
| MLD - AUTOLOGOUS CELLULAR GENE THERAPY AGENTS | | | |
| LENMELDY | LENMELDY SUSPENSION <i>atidarsagene autotemcel</i> | SP-M | PA, QL (1 DOSE PER LIFETIME), S |
| MOVEMENT DISORDER DRUG THERAPY | | | |
| AUSTEDO | AUSTEDO (9 MG TAB, 12 MG TAB) <i>deutetrabenazine</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| AUSTEDO | AUSTEDO 6 MG TAB <i>deutetrabenazine</i> | SP-P | PA, QL (60 PER 30 DAY(S)), S |
| AUSTEDO PATIENT TITRATION KIT | AUSTEDO PATIENT TITRATION KIT 6 & 9 & 12 MG TAB THPK <i>deutetrabenazine</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| AUSTEDO XR | AUSTEDO XR (30 MG TAB ER 24H, 42 MG TAB ER 24H, 48 MG TAB ER 24H) <i>deutetrabenazine</i> | SP-P | PA, QL (1 TAB PER DAY(S)), S |
| AUSTEDO XR | AUSTEDO XR 12 MG TAB ER 24H <i>deutetrabenazine</i> | SP-P | PA, QL (4 PER 1 DAY(S)), S |
| AUSTEDO XR | AUSTEDO XR 18 MG TAB ER 24H <i>deutetrabenazine</i> | SP-P | PA, QL (30 TABLETS PER 30 DAY(S)), S |
| AUSTEDO XR | AUSTEDO XR 24 MG TAB ER 24H <i>deutetrabenazine</i> | SP-P | PA, QL (2 PER 1 DAY(S)), S |
| AUSTEDO XR | AUSTEDO XR 36 MG TAB ER 24H <i>deutetrabenazine</i> | SP-P | PA, QL (1 TAB PER DAY(S)) |
| AUSTEDO XR | AUSTEDO XR 6 MG TAB ER 24H <i>deutetrabenazine</i> | SP-P | PA, QL (3 PER 1 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|-------|--|
| AUSTEDO XR PATIENT TITRATION | AUSTEDO XR PATIENT TITRATION 12 & 18 & 24 & 30 MG TBER THPK <i>deutetrabenazine</i> | SP-P | PA, QL (1 KIT PER 28 DAY(S)), S |
| AUSTEDO XR PATIENT TITRATION | AUSTEDO XR PATIENT TITRATION 6 & 12 & 24 MG TBER THPK <i>deutetrabenazine</i> | SP-P | PA, QL (42 PER 28 DAY(S)), S |
| INGREZZA | INGREZZA (40 MG CAP, 80 MG CAP) <i>valbenazine tosylate</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| INGREZZA | INGREZZA (60 MG CAP SPRINK, 80 MG CAP SPRINK) <i>valbenazine tosylate</i> | SP-P | PA, QL (30 CAPS PER 30 DAY(S)), S |
| INGREZZA | INGREZZA 40 & 80 MG CAP THPK <i>valbenazine tosylate</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| INGREZZA | INGREZZA 40 MG CAP SPRINK <i>valbenazine tosylate</i> | SP-P | PA, QL (30 CAPS PER 30 DAY(S)), S |
| INGREZZA | INGREZZA 60 MG CAP <i>valbenazine tosylate</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| <i>tetrabenazine</i> | <i>tetrabenazine 12.5 mg tab</i> | SP-P | QL (240 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>tetrabenazine</i> | <i>tetrabenazine 25 mg tab</i> | SP-P | QL (120 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| XENAZINE | XENAZINE 12.5 MG TAB <i>tetrabenazine</i> | SP-NP | QL (240 PER 30 DAYS), S, GA |
| XENAZINE | XENAZINE 25 MG TAB <i>tetrabenazine</i> | SP-NP | QL (120 PER 30 DAYS), S, GA |
| MULTIPLE SCLEROSIS AGENTS | | | |
| <i>glatiramer acetate</i> | <i>glatiramer acetate 20 mg/ml soln prsy</i> | SP-P | QL (30 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>glatiramer acetate</i> | <i>glatiramer acetate 40 mg/ml soln prsy</i> | SP-P | QL (12 PER 28 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>glatopa</i> | <i>glatopa 20 mg/ml soln prsy</i> | SP-P | QL (30 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>glatopa</i> | <i>glatopa 40 mg/ml soln prsy</i> | SP-P | QL (12 PER 28 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|---|
| MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES | | | |
| MAVENCLAD (10 TABS) | MAVENCLAD (10 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (4 TABS) | MAVENCLAD (4 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (5 TABS) | MAVENCLAD (5 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (6 TABS) | MAVENCLAD (6 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (7 TABS) | MAVENCLAD (7 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (8 TABS) | MAVENCLAD (8 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MAVENCLAD (9 TABS) | MAVENCLAD (9 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i> | SP-NP | QL (20 PER 9 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| MULTIPLE SCLEROSIS AGENTS - INTERFERONS | | | |
| AVONEX PEN | AVONEX PEN 30 MCG/0.5ML AUT-IJ KIT <i>interferon beta-1a</i> | SP-P | PA, QL (4 PER 28 DAYS), S |
| AVONEX PREFILLED | AVONEX PREFILLED 30 MCG/0.5ML PREF SY KT <i>interferon beta-1a</i> | SP-P | PA, QL (4 PER 28 DAYS), S |
| BETASERON | BETASERON 0.3 MG KIT <i>interferon beta-1b</i> | SP-P | PA, QL (15 PER 30 DAYS), S |
| PLEGRIDY | PLEGRIDY (125 SOLN A- INJ, 125 SOLN PRSYR) <i>peginterferon beta-1a</i> | SP-P | PA, QL (2 PER 28 DAYS), S |
| PLEGRIDY | PLEGRIDY 125 MCG/0.5ML SOLN PRSYR <i>peginterferon beta-1a</i> | SP-P | PA, QL (2 PER 28 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|--|
| PLEGRIDY STARTER PACK | PLEGRIDY STARTER PACK (PACK 63 94 SOLN A-INJ, PACK 63 94 SOLN PRSYR) <i>peginterferon beta-1a</i> | SP-P | PA, QL (1 PER 28 DAYS), S |
| REBIF | REBIF (22 SOLN PRSYR, 44 SOLN PRSYR) <i>interferon beta-1a</i> | SP-P | PA, QL (12 PER 28 DAYS), S |
| REBIF REBIDOSE | REBIF REBIDOSE (22 SOLN A-INJ, 44 SOLN A-INJ) <i>interferon beta-1a</i> | SP-P | PA, QL (12 PER 28 DAYS), S |
| REBIF REBIDOSE TITRATION PACK | REBIF REBIDOSE TITRATION PACK 6X8.8 & 6X22 MCG SOLN A-INJ <i>interferon beta-1a</i> | SP-P | PA, QL (12 PER 28 DAYS), S |
| REBIF TITRATION PACK | REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR <i>interferon beta-1a</i> | SP-P | PA, QL (12 PER 28 DAYS), S |
| MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS | | | |
| <i>teriflunomide</i> | <i>teriflunomide (7 mg tab, 14 mg tab)</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES | | | |
| BRIUMVI | BRIUMVI 150 MG/6ML SOLUTION <i>ublituximab-xiiy</i> | SP-M | S |
| KESIMPTA | KESIMPTA 20 MG/0.4ML SOLN A-INJ <i>ofatumumab (ms)</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| LEMTRADA | LEMTRADA 12 MG/1.2ML SOLUTION <i>alemtuzumab (ms)</i> | SP-M | QL (5 PER 12 MONTH(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| OCREVUS | OCREVUS 300 MG/10ML SOLUTION <i>ocrelizumab</i> | SP-M | PA, S |
| TYSABRI | TYSABRI 300 MG/15ML CONC <i>natalizumab</i> | SP-M | QL (1 PER 28 DAYS), S, MN-PA (Medically Necessary Prior Authorization) |
| MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS | | | |
| <i>dimethyl fumarate</i> | <i>dimethyl fumarate 120 mg cap dr</i> | SP-P | QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|--|
| <i>dimethyl fumarate</i> | <i>dimethyl fumarate 240 mg cap dr</i> | SP-P | PA, QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>dimethyl fumarate starter pack</i> | <i>dimethyl fumarate starter pack 120 & 240 mg cpdr thpk</i> | SP-P | PA, QL (1 PER FILL), SBG (Specialty Biosimilars and Specialty generics), S |
| VUMERITY | VUMERITY 231 MG CAP DR <i>diroximel fumarate</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S |
| MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS | | | |
| <i>dalfampridine er</i> | <i>dalfampridine er 10 mg tab er 12h</i> | SP-P | QL (60 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS | | | |
| <i>fingolimod hcl</i> | <i>fingolimod hcl 0.5 mg cap</i> | SP-P | PA, QL (30 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| GILENYA | GILENYA 0.25 MG CAP <i>fingolimod hcl</i> | SP-NP | PA, QL (30 PER 30 DAY(S)), S |
| MAYZENT | MAYZENT 0.25 MG TAB <i>siponimod fumarate</i> | SP-P | PA, QL (112 PER 28 DAY(S)), S |
| MAYZENT | MAYZENT 1 MG TAB <i>siponimod fumarate</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| MAYZENT | MAYZENT 2 MG TAB <i>siponimod fumarate</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| MAYZENT STARTER PACK | MAYZENT STARTER PACK 0.25 MG TAB THPK <i>siponimod fumarate</i> | SP-P | PA, QL (7 PER 4 DAY(S)), S |
| MAYZENT STARTER PACK | MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK <i>siponimod fumarate</i> | SP-P | PA, QL (12 PER 5 DAY(S)), S |
| PONVORY | PONVORY 20 MG TAB <i>ponesimod</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| PONVORY STARTER PACK | PONVORY STARTER PACK 2,3,4,5,6,7,8,9 & 10 MG TAB THPK <i>ponesimod</i> | SP-P | PA, QL (1 PER 14 DAY(S)), S |
| ZEPOSIA | ZEPOSIA 0.92 MG CAP <i>ozanimod hcl</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| ZEPOSIA 7-DAY STARTER PACK | ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK <i>ozanimod hcl</i> | SP-P | PA, QL (1 PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|----------------------------------|
| ZEPOSIA STARTER KIT | ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK <i>ozanimod hcl</i> | SP-P | PA, QL (1 PER LIFETIME), S |
| ZEPOSIA STARTER KIT | ZEPOSIA STARTER KIT 0.23MG & 0.46MG 0.92MG(21) CAP THPK <i>ozanimod hcl</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| MULTIPLE SCLEROSIS AGENTS - COMBINATIONS | | | |
| OCREVUS ZUNOVO | OCREVUS ZUNOVO 920- 23000 MG-UT/23ML SOLUTION <i>ocrelizumab-hyaluronidase- ocsq</i> | P&T | QL (1 VIAL PER 6 MONTH(S)), S |
| ANTI-CATAPLECTIC AGENTS | | | |
| SODIUM OXYBATE | SODIUM OXYBATE 500 MG/ML SOLUTION <i>sodium oxybate</i> | SP-P | PA, QL (540 PER 30 DAYS), S |
| XYREM | XYREM 500 MG/ML SOLUTION <i>sodium oxybate</i> | SP-P | PA, QL (540 PER 30 DAYS), S |
| POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS | | | |
| <i>pregabalin er</i> | <i>pregabalin er (er 82.5 mg tab er 24h, er 165 mg tab er 24h, er 330 mg tab er 24h)</i> | TIER 1 | |
| ANTISENSE OLIGONUCLEOTIDE (ASO) INHIBITOR AGENTS | | | |
| TEGSEDI | TEGSEDI 284 MG/1.5ML SOLN PRSYR <i>inotersen sodium</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS | | | |
| AMVUTTRA | AMVUTTRA 25 MG/0.5ML SOLN PRSYR <i>vutrisiran sodium</i> | SP-M | PA, S |
| ONPATTRO | ONPATTRO 10 MG/5ML SOLUTION <i>patisiran sodium</i> | SP-M | PA, S |
| ALCOHOL DETERRENTS | | | |
| <i>acamprosate calcium</i> | <i>acamprosate calcium 333 mg tab dr</i> | TIER 1 | |
| <i>disulfiram</i> | <i>disulfiram (250 mg tab, 500 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| BENZODIAZEPINES & TRICYCLIC AGENTS | | | |
| CHLORDIAZEPOXID E-AMITRIPTYLINE | CHLORDIAZEPOXIDE- AMITRIPTYLINE (5-12.5 MG TAB, 10-25 MG TAB) <i>chlordiazepoxide- amitriptyline</i> | TIER 1 | |
| PHENOTHIAZINES & TRICYCLIC AGENTS | | | |
| PERPHENAZINE- AMITRIPTYLINE | PERPHENAZINE- AMITRIPTYLINE (2-10 MG TAB, 2-25 MG TAB, 4-10 MG TAB, 4-25 MG TAB, 4- 50 MG TAB) <i>perphenazine-amitriptyline</i> | TIER 1 | |
| THIENBENZODIAZEPINES & SSRIS | | | |
| <i>olanzapine-fluoxetine hcl</i> | <i>olanzapine-fluoxetine hcl (3-25 mg cap, 6-25 mg cap, 6-50 mg cap, 12-25 mg cap, 12-50 mg cap)</i> | TIER 1 | |
| ANALGESICS - NONNARCOTIC | | | |
| SALICYLATES | | | |
| <i>diflunisal</i> | <i>diflunisal 500 mg tab</i> | TIER 1 | |
| <i>salsalate</i> | <i>salsalate (500 mg tab, 750 mg tab)</i> | TIER 1 | |
| SELECTIVE N-TYPE NEURONAL CALCIUM CHANNEL BLOCKERS | | | |
| PRIALT | PRIALT (100 MCG/ML SOLUTION, 500 MCG/20ML SOLUTION, 500 MCG/5ML SOLUTION) <i>ziconotide acetate</i> | SP-M | S |
| ANALGESICS-SEDATIVES | | | |
| <i>bac</i> | <i>bac 50-325-40 mg tab</i> | TIER 1 | |
| <i>butalbital- acetaminophen</i> | <i>butalbital-acetaminophen 50-325 mg tab</i> | TIER 1 | |
| <i>butalbital-apap- caffeine</i> | <i>butalbital-apap-caffeine (50-300-40 mg cap, 50- 325-40 mg cap, 50-325-40 mg tab)</i> | TIER 1 | |
| <i>butalbital-aspirin- caffeine</i> | <i>butalbital-aspirin-caffeine 50-325-40 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|--|--------|-----------------------|
| <i>esgic</i> | <i>esgic 50-325-40 mg cap</i> | TIER 1 | |
| TENCON | TENCON 50-325 MG TAB <i>butalbital-acetaminophen</i> | TIER 1 | GA |
| <i>zebutal</i> | <i>zebutal 50-325-40 mg cap</i> | TIER 1 | |
| ANALGESICS - OPIOID | | | |
| OPIOID AGONISTS | | | |
| CODEINE SULFATE | CODEINE SULFATE (15 MG TAB, 30 MG TAB, 60 MG TAB) <i>codeine sulfate</i> | TIER 1 | PA, QL (42 PER 25) |
| <i>fentanyl</i> | <i>fentanyl (12 patch 72hr, 37.5 patch 72hr, 62.5 patch 72hr, 87.5 patch 72hr)</i> | TIER 1 | PA, QL (10 PER 25) |
| <i>fentanyl</i> | <i>fentanyl (25 patch 72hr, 50 patch 72hr, 75 patch 72hr, 100 patch 72hr)</i> | TIER 1 | PA, QL (10 PER 25) |
| <i>fentanyl citrate</i> | <i>fentanyl citrate (100 mcg tab, 200 mcg tab, 400 mcg tab, 600 mcg tab, 800 mcg tab)</i> | TIER 1 | QL (4 PER 1 DAY(S)) |
| <i>fentanyl citrate</i> | <i>fentanyl citrate (200 mcg loz handle, 400 mcg loz handle, 600 mcg loz handle, 800 mcg loz handle, 1200 mcg loz handle, 1600 mcg loz handle)</i> | TIER 1 | QL (4 PER 1 DAY(S)) |
| <i>hydrocodone bitartrate er</i> | <i>hydrocodone bitartrate er (er 20 mg tb24 deter, er 30 mg tb24 deter, er 40 mg tb24 deter, er 60 mg tb24 deter, er 80 mg tb24 deter, er 120 mg tb24 deter)</i> | TIER 1 | PA, QL (30 PER 25) |
| <i>hydrocodone bitartrate er</i> | <i>hydrocodone bitartrate er 100 mg tb24 deter</i> | TIER 1 | PA, QL (60 PER 25) |
| <i>hydromorphone hcl</i> | <i>hydromorphone hcl 1 mg/ml liquid</i> | TIER 1 | PA, QL (600 PER 25) |
| <i>hydromorphone hcl</i> | <i>hydromorphone hcl 2 mg tab</i> | TIER 1 | PA, QL (180 PER 25) |
| <i>hydromorphone hcl</i> | <i>hydromorphone hcl 4 mg tab</i> | TIER 1 | PA, QL (150 PER 25) |
| <i>hydromorphone hcl</i> | <i>hydromorphone hcl 8 mg tab</i> | TIER 1 | PA, QL (60 PER 25) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------------------|
| <i>hydromorphone hcl er</i> | <i>hydromorphone hcl er (er 8 mg tab er 24h, er 12 mg tab er 24h, er 16 mg tab er 24h, er 32 mg tab er 24h)</i> | TIER 1 | PA, QL (30 PER 25 DAY(S)) |
| <i>levorphanol tartrate</i> | <i>levorphanol tartrate 2 mg tab</i> | TIER 1 | PA, QL (120 PER 25) |
| <i>meperidine hcl</i> | <i>meperidine hcl 50 mg tab</i> | TIER 1 | PA, QL (18 PER 25) |
| MEPERIDINE HCL | MEPERIDINE HCL 50 MG/5ML SOLUTION <i>meperidine hcl</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>methadone hcl</i> | <i>methadone hcl (10 mg tab, 10 mg/ml conc)</i> | TIER 1 | PA, QL (60 PER 25) |
| <i>methadone hcl</i> | <i>methadone hcl 10 mg/5ml solution</i> | TIER 1 | PA, QL (300 PER 25) |
| <i>methadone hcl</i> | <i>methadone hcl 40 mg tab sol</i> | TIER 1 | |
| <i>methadone hcl</i> | <i>methadone hcl 5 mg tab</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>methadone hcl</i> | <i>methadone hcl 5 mg/5ml solution</i> | TIER 1 | PA, QL (450 PER 25) |
| <i>methadone hcl intensol</i> | <i>methadone hcl intensol 10 mg/ml conc</i> | TIER 1 | PA, QL (60 PER 25) |
| <i>methadose</i> | <i>methadose 40 mg tab sol</i> | TIER 1 | |
| <i>morphine sulfate (concentrate)</i> | <i>morphine sulfate (concentrate) (20 mg/ml solution, 100 mg/5ml solution)</i> | TIER 1 | PA, QL (135 PER 25) |
| <i>morphine sulfate</i> | <i>morphine sulfate 10 mg/5ml solution</i> | TIER 1 | PA, QL (900 PER 25) |
| <i>morphine sulfate</i> | <i>morphine sulfate 15 mg tab</i> | TIER 1 | PA, QL (180 PER 25) |
| <i>morphine sulfate</i> | <i>morphine sulfate 20 mg/5ml solution</i> | TIER 1 | PA, QL (675 PER 25) |
| MORPHINE SULFATE | MORPHINE SULFATE 20 MG/5ML SOLUTION <i>morphine sulfate</i> | TIER 1 | PA, QL (675 ML PER 25 DAY(S)), GA |
| <i>morphine sulfate</i> | <i>morphine sulfate 30 mg tab</i> | TIER 1 | PA, QL (90 PER 25) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------|---|--------|----------------------------|
| MORPHINE SULFATE ER | MORPHINE SULFATE ER (ER 10 MG CAP ER 24H, ER 20 MG CAP ER 24H, ER 30 MG CAP ER 24H, ER 40 MG CAP ER 24H, ER 100 MG CAP ER 24H, ER 100 MG TAB ER, ER 200 MG TAB ER) <i>morphine sulfate</i> | TIER 1 | PA, QL (60 PER 25) |
| <i>morphine sulfate er</i> | <i>morphine sulfate er (er 15 mg tab er, er 30 mg tab er, er 60 mg tab er)</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>morphine sulfate er</i> | <i>morphine sulfate er (er 50 mg cap er 24h, er 60 mg cap er 24h, er 80 mg cap er 24h)</i> | TIER 1 | PA, QL (30 PER 25) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl (20 mg tab, 100 mg/5ml conc)</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl (5 mg tab, 10 mg tab)</i> | TIER 1 | PA, QL (180 PER 25) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl 15 mg tab</i> | TIER 1 | PA, QL (120 PER 25 DAY(S)) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl 30 mg tab</i> | TIER 1 | PA, QL (60 PER 25) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl 5 mg cap</i> | TIER 1 | PA, QL (180 PER 25) |
| <i>oxycodone hcl</i> | <i>oxycodone hcl 5 mg/5ml solution</i> | TIER 1 | PA, QL (900 PER 25) |
| OXYCODONE HCL ER | OXYCODONE HCL ER (ER 10 MG TB12 DETER, ER 20 MG TB12 DETER) <i>oxycodone hcl</i> | TIER 2 | PA, QL (60 PER 25) |
| <i>oxycodone hcl er</i> | <i>oxycodone hcl er (er 15 mg tb12 deter, er 30 mg tb12 deter, er 60 mg tb12 deter)</i> | TIER 1 | PA, QL (60 PER 25) |
| OXYCODONE HCL ER | OXYCODONE HCL ER 40 MG TB12 DETER <i>oxycodone hcl</i> | TIER 2 | PA, QL (90 PER 25) |
| OXYCODONE HCL ER | OXYCODONE HCL ER 80 MG TB12 DETER <i>oxycodone hcl</i> | TIER 2 | PA, QL (60 PER 25) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| OXYCONTIN | OXYCONTIN (10 MG TB12 DETER, 15 MG TB12 DETER, 20 MG TB12 DETER, 30 MG TB12 DETER, 60 MG TB12 DETER, 80 MG TB12 DETER) <i>oxycodone hcl</i> | TIER 2 | PA, QL (60 PER 25) |
| OXYCONTIN | OXYCONTIN 40 MG TB12 DETER <i>oxycodone hcl</i> | TIER 2 | PA, QL (90 PER 25) |
| <i>oxymorphone hcl</i> | <i>oxymorphone hcl 10 mg tab</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>oxymorphone hcl</i> | <i>oxymorphone hcl 5 mg tab</i> | TIER 1 | PA, QL (180 PER 25) |
| OXYMORPHONE HCL ER | OXYMORPHONE HCL ER (ER 5 MG TAB ER 12H, ER 7.5 MG TAB ER 12H, ER 10 MG TAB ER 12H, ER 15 MG TAB ER 12H, ER 30 MG TAB ER 12H, ER 40 MG TAB ER 12H) <i>oxymorphone hcl</i> | TIER 1 | PA, QL (60 PER 25) |
| OXYMORPHONE HCL ER | OXYMORPHONE HCL ER 20 MG TAB ER 12H <i>oxymorphone hcl</i> | TIER 1 | PA, QL (90 PER 25) |
| <i>tramadol hcl (er biphasic)</i> | <i>tramadol hcl (er biphasic) (100 mg tab er 24h, 200 mg tab er 24h, 300 mg tab er 24h)</i> | TIER 1 | PA, QL (30 PER 25) |
| <i>tramadol hcl</i> | <i>tramadol hcl 50 mg tab</i> | TIER 1 | PA, QL (180 PER 25) |
| <i>tramadol hcl er</i> | <i>tramadol hcl er (er 100 mg tab er 24h, er 200 mg tab er 24h, er 300 mg tab er 24h)</i> | TIER 1 | PA, QL (30 PER 25) |
| OPIOID PARTIAL AGONISTS | | | |
| BRIXADI | BRIXADI (64 MG/0.18ML SOLN PRSYR, 96 MG/0.27ML SOLN PRSYR, 128 MG/0.36ML SOLN PRSYR) <i>buprenorphine</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| BRIXADI (WEEKLY) | BRIXADI (WEEKLY) (8 MG/0.16ML SOLN PRSYR, 16 MG/0.32ML SOLN PRSYR, 24 MG/0.48ML SOLN PRSYR, 32 MG/0.64ML SOLN PRSYR) <i>buprenorphine</i> | SP-M | S |
| <i>buprenorphine</i> | <i>buprenorphine (5 patch wk, 7.5 patch wk, 10 patch wk, 15 patch wk, 20 patch wk)</i> | TIER 1 | PA, QL (4 PER 25) |
| <i>buprenorphine hcl</i> | <i>buprenorphine hcl (2 mg sl tab, 8 mg sl tab)</i> | TIER 1 | |
| <i>buprenorphine hcl-naloxone hcl</i> | <i>buprenorphine hcl-naloxone hcl (-naloxone 2-0.5 mg film, -naloxone 2-0.5 mg sl tab, -naloxone 4-1 mg film, -naloxone 8-2 mg film, -naloxone 8-2 mg sl tab, -naloxone 12-3 mg film)</i> | TIER 1 | |
| <i>butorphanol tartrate</i> | <i>butorphanol tartrate 10 mg/ml solution</i> | TIER 1 | QL (4 PER 30 DAYS) |
| <i>pentazocine-naloxone hcl</i> | <i>pentazocine-naloxone hcl 50-0.5 mg tab</i> | TIER 1 | PA, QL (120 PER 25) |
| OPIOID COMBINATIONS | | | |
| <i>endocet</i> | <i>endocet (2.5-325 mg tab, 5-325 mg tab)</i> | TIER 1 | QL (360 PER 25), PAV |
| <i>endocet</i> | <i>endocet 10-325 mg tab</i> | TIER 1 | QL (180 PER 25), PAV |
| <i>endocet</i> | <i>endocet 7.5-325 mg tab</i> | TIER 1 | QL (240 PER 25), PAV |
| <i>oxycodone-acetaminophen</i> | <i>oxycodone-acetaminophen 10-325 mg tab</i> | TIER 1 | QL (180 PER 25), PAV |
| <i>oxycodone-acetaminophen</i> | <i>oxycodone-acetaminophen 2.5-325 mg tab</i> | TIER 1 | QL (360 PER 25), PAV |
| <i>oxycodone-acetaminophen</i> | <i>oxycodone-acetaminophen 5-325 mg tab</i> | TIER 1 | QL (360 PER 25), PAV |
| <i>oxycodone-acetaminophen</i> | <i>oxycodone-acetaminophen 7.5-325 mg tab</i> | TIER 1 | QL (240 PER 25), PAV |
| OXYCODONE-ASPIRIN | OXYCODONE-ASPIRIN 4.8355-325 MG TAB <i>oxycodone-aspirin</i> | TIER 1 | QL (360 PER 25) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|--|--------|-----------------------------|
| CODEINE COMBINATIONS | | | |
| ACETAMINOPHEN-CODEINE | ACETAMINOPHEN-CODEINE (120-12 MG/5ML SOLUTION, 300-30 MG/12.5ML SOLUTION) <i>acetaminophen w/ codeine</i> | TIER 1 | QL (2700 PER 25), GA |
| <i>acetaminophen-codeine</i> | <i>acetaminophen-codeine 300-15 mg tab</i> | TIER 1 | QL (400 PER 25) |
| <i>acetaminophen-codeine</i> | <i>acetaminophen-codeine 300-30 mg tab</i> | TIER 1 | QL (360 PER 25) |
| <i>acetaminophen-codeine</i> | <i>acetaminophen-codeine 300-60 mg tab</i> | TIER 1 | QL (180 PER 25) |
| <i>ascomp-codeine</i> | <i>ascomp-codeine 50-325-40-30 mg cap</i> | TIER 1 | PAV |
| <i>butalbital-apap-caff-cod</i> | <i>butalbital-apap-caff-cod (50-300-40-30 mg cap, 50-325-40-30 mg cap)</i> | TIER 1 | |
| <i>butalbital-asa-caff-codeine</i> | <i>butalbital-asa-caff-codeine 50-325-40-30 mg cap</i> | TIER 1 | PAV |
| DIHYDROCODEINE COMBINATIONS | | | |
| APAP-CAFF-DIHYDROCODEINE | APAP-CAFF-DIHYDROCODEINE (320.5-30-16 MG CAP, 325-30-16 MG TAB) <i>acetaminophen-caff-dihydrocod</i> | TIER 1 | QL (300 PER 25), GA |
| <i>dvorah</i> | <i>dvorah 325-30-16 mg tab</i> | TIER 1 | QL (300 PER 25) |
| <i>trezix</i> | <i>trezix 320.5-30-16 mg cap</i> | TIER 1 | QL (300 PER 25) |
| HYDROCODONE COMBINATIONS | | | |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen (2.5-108 mg/5ml solution, 7.5-325 mg/15ml solution)</i> | TIER 1 | QL (2700 PER 25), PAV |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen (7.5-300 mg tab, 7.5-325 mg tab)</i> | TIER 1 | QL (180 PER 25), PAV |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen 10-300 mg tab</i> | TIER 1 | QL (180 PER 25 DAY(S)), PAV |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen 10-325 mg tab</i> | TIER 1 | QL (180 PER 25 DAY(S)), PAV |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen 5-217 mg/10ml solution</i> | TIER 1 | QL (2700 PER 25), PAV |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen 5-300 mg tab</i> | TIER 1 | QL (240 PER 25), PAV |
| <i>hydrocodone-acetaminophen</i> | <i>hydrocodone-acetaminophen 5-325 mg tab</i> | TIER 1 | QL (240 PER 25), PAV |
| <i>hydrocodone-ibuprofen</i> | <i>hydrocodone-ibuprofen (5-200 mg tab, 7.5-200 mg tab, 10-200 mg tab)</i> | TIER 1 | QL (50 PER 25), PAV |
| TRAMADOL COMBINATIONS | | | |
| <i>tramadol-acetaminophen</i> | <i>tramadol-acetaminophen 37.5-325 mg tab</i> | TIER 1 | QL (40 PER 25), PAV |
| ANALGESICS - ANTI-INFLAMMATORY | | | |
| NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS) | | | |
| <i>cataflam</i> | <i>cataflam 50 mg tab</i> | TIER 1 | |
| <i>diclofenac potassium</i> | <i>diclofenac potassium 50 mg tab</i> | TIER 1 | |
| <i>diclofenac sodium</i> | <i>diclofenac sodium (25 mg tab dr, 50 mg tab dr, 75 mg tab dr)</i> | TIER 1 | |
| <i>diclofenac sodium er</i> | <i>diclofenac sodium er 100 mg tab er 24h</i> | TIER 1 | |
| <i>ec-naproxen</i> | <i>ec-naproxen (375 mg tab dr, 500 mg tab dr)</i> | TIER 1 | |
| <i>etodolac</i> | <i>etodolac (200 mg cap, 300 mg cap, 400 mg tab, 500 mg tab)</i> | TIER 1 | |
| <i>etodolac er</i> | <i>etodolac er (er 400 mg tab er 24h, er 500 mg tab er 24h, er 600 mg tab er 24h)</i> | TIER 1 | |
| <i>fenoprofen calcium</i> | <i>fenoprofen calcium (400 mg cap, 600 mg tab)</i> | TIER 1 | |
| <i>flurbiprofen</i> | <i>flurbiprofen (50 mg tab, 100 mg tab)</i> | TIER 1 | |
| <i>ibu</i> | <i>ibu (400 mg tab, 600 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>ibuprofen</i> | <i>ibuprofen (400 mg tab, 600 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>indomethacin</i> | <i>indomethacin (25 mg cap, 50 mg cap)</i> | TIER 1 | |
| <i>indomethacin er</i> | <i>indomethacin er 75 mg cap er</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|----------------------------|
| KETOPROFEN ER | KETOPROFEN ER 200 MG CAP ER 24H <i>ketoprofen</i> | TIER 1 | |
| <i>ketorolac tromethamine</i> | <i>ketorolac tromethamine (10 mg tab, 30 mg/ml solution)</i> | TIER 1 | |
| MECLOFENAMATE SODIUM | MECLOFENAMATE SODIUM (50 MG CAP, 100 MG CAP) <i>meclofenamate sodium</i> | TIER 1 | |
| <i>mefenamic acid</i> | <i>mefenamic acid 250 mg cap</i> | TIER 1 | |
| <i>meloxicam</i> | <i>meloxicam (7.5 mg tab, 15 mg tab)</i> | TIER 1 | |
| <i>meloxicam</i> | <i>meloxicam 7.5 mg/5ml suspension</i> | TIER 1 | PA, QL (300 PER 30 DAY(S)) |
| <i>nabumetone</i> | <i>nabumetone (500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>naproxen</i> | <i>naproxen (250 mg tab, 375 mg tab, 375 mg tab dr, 500 mg tab, 500 mg tab dr)</i> | TIER 1 | |
| <i>naproxen dr</i> | <i>naproxen dr 500 mg tab dr</i> | TIER 1 | |
| <i>naproxen sodium</i> | <i>naproxen sodium (275 mg tab, 550 mg tab)</i> | TIER 1 | |
| <i>oxaprozin</i> | <i>oxaprozin 600 mg tab</i> | TIER 1 | |
| <i>piroxicam</i> | <i>piroxicam (10 mg cap, 20 mg cap)</i> | TIER 1 | |
| <i>relafen</i> | <i>relafen (500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>sulindac</i> | <i>sulindac (150 mg tab, 200 mg tab)</i> | TIER 1 | |
| TOLMETIN SODIUM | TOLMETIN SODIUM 400 MG CAP <i>tolmetin sodium</i> | TIER 1 | |
| CYCLOOXYGENASE 2 (COX-2) INHIBITORS | | | |
| <i>celecoxib</i> | <i>celecoxib (50 mg cap, 100 mg cap, 200 mg cap)</i> | TIER 1 | |
| NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS | | | |
| <i>diclofenac-misoprostol</i> | <i>diclofenac-misoprostol (50-0.2 mg tab dr, 75-0.2 mg tab dr)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------------|
| GOLD COMPOUNDS | | | |
| RIDAURA | RIDAURA 3 MG CAP <i>auranofin</i> | TIER 2 | |
| ANTIRHEUMATIC ANTIMETABOLITES | | | |
| OTREXUP | OTREXUP (10 SOLN A-INJ, 12.5 SOLN A-INJ, 15 SOLN A-INJ, 17.5 SOLN A-INJ, 20 SOLN A-INJ, 22.5 SOLN A-INJ, 25 SOLN A-INJ) <i>methotrexate</i> (<i>antirheumatic</i>) | SP-M | S |
| RASUVO | RASUVO (7.5 MG/0.15ML SOLN A-INJ, 10 MG/0.2ML SOLN A-INJ, 12.5 MG/0.25ML SOLN A-INJ, 15 MG/0.3ML SOLN A-INJ, 17.5 MG/0.35ML SOLN A-INJ, 20 MG/0.4ML SOLN A-INJ, 22.5 MG/0.45ML SOLN A-INJ, 25 MG/0.5ML SOLN A-INJ, 30 MG/0.6ML SOLN A-INJ) <i>methotrexate</i> (<i>antirheumatic</i>) | SP-M | S |
| REDITREX | REDITREX (7.5 MG/0.3ML SOLN PRSYR, 10 MG/0.4ML SOLN PRSYR, 12.5 MG/0.5ML SOLN PRSYR, 15 MG/0.6ML SOLN PRSYR, 17.5 MG/0.7ML SOLN PRSYR, 20 MG/0.8ML SOLN PRSYR, 22.5 MG/0.9ML SOLN PRSYR, 25 MG/ML SOLN PRSYR) <i>methotrexate</i> (<i>antirheumatic</i>) | SP-M | S |
| ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES | | | |
| ADALIMUMAB-AACF (2 PEN) | ADALIMUMAB-AACF (2 PEN) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-aacf</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|--|--------|-----------------------------|
| ADALIMUMAB-AACF (2 SYRINGE) | ADALIMUMAB-AACF (2 SYRINGE) 40 MG/0.8ML PEF SY KT <i>adalimumab-aacf</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| ADALIMUMAB-AACF(CD/UC/HS STRT) | ADALIMUMAB-AACF(CD/UC/HS STRT) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-aacf</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| ADALIMUMAB-AACF(PS/UV STARTER) | ADALIMUMAB-AACF(PS/UV STARTER) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-aacf</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| ADALIMUMAB-ADBM (2 SYRINGE) | ADALIMUMAB-ADBM (2 SYRINGE) (10 MG/0.2ML PEF SY KT, 20 MG/0.4ML PEF SY KT) <i>adalimumab-adbm</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| HADLIMA | HADLIMA 40 MG/0.8ML SOLN PRSYR <i>adalimumab-bwwd</i> | SP-NP | PA, QL (4 PER 28 DAY(S)), S |
| HADLIMA PUSHTOUCH | HADLIMA PUSHTOUCH 40 MG/0.8ML SOLN A-INJ <i>adalimumab-bwwd</i> | SP-NP | PA, QL (4 PER 28 DAY(S)), S |
| HUMIRA | HUMIRA (10 MG/0.1ML PEF SY KT, 20 MG/0.2ML PEF SY KT) <i>adalimumab</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| HUMIRA (2 SYRINGE) | HUMIRA (2 SYRINGE) (10 MG/0.1ML PEF SY KT, 20 MG/0.2ML PEF SY KT) <i>adalimumab</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| IDACIO | IDACIO 40 MG/0.8ML PEF SY KT <i>adalimumab-aacf</i> | SP-P | PA, QL (4 PER 28 DAY(S)), S |
| SIMPONI ARIA | SIMPONI ARIA 50 MG/4ML SOLUTION <i>golimumab</i> | SP-M | PA, S |
| PYRIMIDINE SYNTHESIS INHIBITORS | | | |
| <i>leflunomide</i> | <i>leflunomide (10 mg tab, 20 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|--|
| SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS | | | |
| ENBREL | ENBREL (25 MG RECON SOLN, 25 MG/0.5ML SOLN PRSYR, 50 MG/ML SOLN PRSYR) <i>etanercept</i> | SP-P | PA, QL (8 PER 28 DAYS), S |
| ENBREL | ENBREL 25 MG/0.5ML SOLUTION <i>etanercept</i> | SP-P | PA, QL (8 PER 28 DAY(S)), S |
| ENBREL MINI | ENBREL MINI 50 MG/ML SOLN CART <i>etanercept</i> | SP-P | PA, QL (8 PER 28 DAY(S)), S |
| ENBREL SURECLICK | ENBREL SURECLICK 50 MG/ML SOLN A-INJ <i>etanercept</i> | SP-P | PA, QL (8 PER 28 DAYS), S |
| SELECTIVE COSTIMULATION MODULATORS | | | |
| ORENCIA | ORENCIA 250 MG RECON SOLN <i>abatacept</i> | SP-M | QL (4 PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| INTERLEUKIN-1 BLOCKERS | | | |
| ARCALYST | ARCALYST 220 MG RECON SOLN <i>rilonacept</i> | SP-P | QL (8 PER 28 DAY(S)), S |
| INTERLEUKIN-1BETA BLOCKERS | | | |
| ILARIS | ILARIS 150 MG/ML SOLUTION <i>canakinumab</i> | SP-M | S |
| INTERLEUKIN-6 RECEPTOR INHIBITORS | | | |
| ACTEMRA | ACTEMRA (80 MG/4ML SOLUTION, 200 MG/10ML SOLUTION, 400 MG/20ML SOLUTION) <i>tocilizumab</i> | SP-M | QL (40 PER 28 DAYS), S, MN-PA (Medically Necessary Prior Authorization) |
| TOFIDENCE | TOFIDENCE (80 MG/4ML SOLUTION, 200 MG/10ML SOLUTION, 400 MG/20ML SOLUTION) <i>tocilizumab-bavi</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| TYENNE | TYENNE 200 MG/10ML SOLUTION <i>tocilizumab-aazg</i> | SP-M | QL (40 ML PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|------|--|
| TYENNE | TYENNE 400 MG/20ML SOLUTION <i>tocilizumab-aazg</i> | SP-M | QL (40 ML PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| TYENNE | TYENNE 80 MG/4ML SOLUTION <i>tocilizumab-aazg</i> | SP-M | QL (40 ML PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS | | | |
| RINVOQ | RINVOQ (30 MG TAB ER 24H, 45 MG TAB ER 24H) <i>upadacitinib</i> | SP-P | PA, QL (1 PER 1 DAY(S)), S |
| RINVOQ | RINVOQ 15 MG TAB ER 24H <i>upadacitinib</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| RINVOQ LQ | RINVOQ LQ 1 MG/ML SOLUTION <i>upadacitinib</i> | SP-P | PA, QL (12 ML PER 1 DAY(S)), S |
| XELJANZ | XELJANZ 1 MG/ML SOLUTION <i>tofacitinib citrate</i> | SP-P | PA, QL (10 PER 1 DAY(S)), S |
| XELJANZ | XELJANZ 10 MG TAB <i>tofacitinib citrate</i> | SP-P | PA, QL (60 PER 30 DAY(S)), S |
| XELJANZ | XELJANZ 5 MG TAB <i>tofacitinib citrate</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| XELJANZ XR | XELJANZ XR 11 MG TAB ER 24H <i>tofacitinib citrate</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| XELJANZ XR | XELJANZ XR 22 MG TAB ER 24H <i>tofacitinib citrate</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| PHOSPHODIESTERASE 4 (PDE4) INHIBITORS | | | |
| OTEZLA | OTEZLA 10 & 20 & 30 MG TAB THPK <i>apremilast</i> | SP-P | PA, QL (2 PER LIFETIME), S |
| OTEZLA | OTEZLA 20 MG TAB <i>apremilast</i> | SP-P | PA, QL (60 TABLETS PER 30 DAY(S)), S |
| OTEZLA | OTEZLA 30 MG TAB <i>apremilast</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| OTEZLA | OTEZLA 4 X 10 & 51 X20 MG TAB THPK <i>apremilast</i> | SP-P | PA, QL (2 KITS PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|---------------------------|
| MIGRAINE PRODUCTS | | | |
| <i>dihydroergotamine mesylate</i> | <i>dihydroergotamine mesylate 1 mg/ml solution</i> | TIER 1 | |
| SELECTIVE SEROTONIN AGONISTS 5-HT(1) | | | |
| <i>almotriptan malate</i> | <i>almotriptan malate (6.25 mg tab, 12.5 mg tab)</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>eletriptan hydrobromide</i> | <i>eletriptan hydrobromide (20 mg tab, 40 mg tab)</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>frovatriptan succinate</i> | <i>frovatriptan succinate 2.5 mg tab</i> | TIER 1 | PA, QL (27 PER 30 DAY(S)) |
| <i>naratriptan hcl</i> | <i>naratriptan hcl 1 mg tab</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>naratriptan hcl</i> | <i>naratriptan hcl 2.5 mg tab</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>rizatriptan benzoate</i> | <i>rizatriptan benzoate (5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp)</i> | TIER 1 | QL (27 PER 30 DAY(S)) |
| <i>sumatriptan</i> | <i>sumatriptan 20 mg/act solution</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>sumatriptan</i> | <i>sumatriptan 5 mg/act solution</i> | TIER 1 | QL (36 PER 30 DAY(S)) |
| <i>sumatriptan succinate</i> | <i>sumatriptan succinate (25 mg tab, 50 mg tab, 100 mg tab)</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>sumatriptan succinate</i> | <i>sumatriptan succinate (6 soln a-inj, 6 solution)</i> | TIER 1 | PA, QL (18 PER 30 DAY(S)) |
| <i>sumatriptan succinate</i> | <i>sumatriptan succinate 4 mg/0.5ml soln a-inj</i> | TIER 1 | PA, QL (27 PER 30 DAY(S)) |
| SUMATRIPTAN SUCCINATE | SUMATRIPTAN SUCCINATE 6 MG/0.5ML SOLN PRSYR <i>sumatriptan succinate</i> | TIER 1 | PA, QL (12 PER 30 DAYS) |
| <i>sumatriptan succinate refill</i> | <i>sumatriptan succinate refill 4 mg/0.5ml soln cart</i> | TIER 1 | PA, QL (27 PER 30 DAY(S)) |
| <i>sumatriptan succinate refill</i> | <i>sumatriptan succinate refill 6 mg/0.5ml soln cart</i> | TIER 1 | PA, QL (18 PER 30 DAY(S)) |
| <i>zolmitriptan</i> | <i>zolmitriptan (2.5 mg solution, 5 mg solution)</i> | TIER 1 | PA, QL (18 PER 30 DAY(S)) |
| <i>zolmitriptan</i> | <i>zolmitriptan (2.5 mg tab, 2.5 mg tab disp, 5 mg tab, 5 mg tab disp)</i> | TIER 1 | QL (18 PER 30 DAY(S)) |
| <i>zomig</i> | <i>zomig (2.5 mg tab, 5 mg tab)</i> | TIER 1 | QL (18 PER 30 DAY(S)) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|---|
| CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP) | | | |
| NURTEC | NURTEC 75 MG TAB DISP <i>rimegepant sulfate</i> | TIER 3 | PA, QL (8 PER 30 DAY(S)), PA-QL (15/30 days) |
| UBRELVY | UBRELVY (50 MG TAB, 100 MG TAB) <i>ubrogepant</i> | TIER 3 | PA, QL (10 TABLETS PER 30 DAY(S)), PA-QL (16/30 days) |
| CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES | | | |
| AJOVY | AJOVY 225 MG/1.5ML SOLN A-INJ <i>fremanezumab-vfrm</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| AJOVY | AJOVY 225 MG/1.5ML SOLN PRSYR <i>fremanezumab-vfrm</i> | SP-P | PA, QL (3 PER 90 DAY(S)), S |
| EMGALITY | EMGALITY (120 MG/ML SOLN A-INJ, 120 MG/ML SOLN PRSYR) <i>galcanezumab-gnlm</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| EMGALITY (300 MG DOSE) | EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR <i>galcanezumab-gnlm</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| VYEPTI | VYEPTI 100 MG/ML SOLUTION <i>eptinezumab-jjmr</i> | SP-M | PA, S |
| ERGOT COMBINATIONS | | | |
| ERGOTAMINE- CAFFEINE | ERGOTAMINE-CAFFEINE 1-100 MG TAB <i>ergotamine w/ caffeine</i> | TIER 1 | |
| <i>migergot</i> | <i>migergot 2-100 mg suppos</i> | TIER 1 | |
| SELECTIVE SEROTONIN AGONIST-NSAID COMBINATIONS | | | |
| <i>sumatriptan-naproxen sodium</i> | <i>sumatriptan-naproxen sodium 85-500 mg tab</i> | TIER 1 | PA, QL (9 PER 30 DAYS) |
| GOUT AGENTS | | | |
| <i>allopurinol</i> | <i>allopurinol (100 mg tab, 300 mg tab)</i> | TIER 1 | |
| <i>colchicine</i> | <i>colchicine (0.6 mg cap, 0.6 mg tab)</i> | TIER 1 | |
| <i>febuxostat</i> | <i>febuxostat (40 mg tab, 80 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|---|--------|---------------------------|
| KRYSTEXXA | KRYSTEXXA 8 MG/ML SOLUTION <i>pegloticase</i> | SP-M | PA, S |
| URICOSURICS | | | |
| <i>probenecid</i> | <i>probenecid 500 mg tab</i> | TIER 1 | |
| GOUT AGENT COMBINATIONS | | | |
| <i>colchicine-probenecid</i> | <i>colchicine-probenecid 0.5-500 mg tab</i> | TIER 1 | |
| ANTICONVULSANTS | | | |
| ANTICONVULSANTS - BENZODIAZEPINES | | | |
| <i>clobazam</i> | <i>clobazam 10 mg tab</i> | TIER 1 | PA, QL (120 PER 30 DAYS) |
| <i>clobazam</i> | <i>clobazam 2.5 mg/ml suspension</i> | TIER 1 | PA, QL (480 PER 30 DAYS) |
| <i>clobazam</i> | <i>clobazam 20 mg tab</i> | TIER 1 | PA, QL (60 PER 30 DAYS) |
| <i>clonazepam</i> | <i>clonazepam (0.125 mg tab disp, 0.25 mg tab disp, 1 mg tab disp, 2 mg tab disp)</i> | TIER 1 | |
| <i>clonazepam</i> | <i>clonazepam (0.5 mg tab, 0.5 mg tab disp, 1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>diazepam</i> | <i>diazepam (2.5 mg gel, 20 mg gel)</i> | TIER 1 | |
| <i>diazepam</i> | <i>diazepam 10 mg gel</i> | TIER 1 | |
| NAYZILAM | NAYZILAM 5 MG/0.1ML SOLUTION <i>midazolam (anticonvulsant)</i> | TIER 3 | PA, QL (10 PER 30 DAY(S)) |
| VALTOCO 10 MG DOSE | VALTOCO 10 MG DOSE 10 MG/0.1ML LIQUID <i>diazepam (anticonvulsant)</i> | TIER 3 | PA, QL (5 PER 30 DAY(S)) |
| VALTOCO 15 MG DOSE | VALTOCO 15 MG DOSE 7.5 MG/0.1ML LIQD THPK <i>diazepam (anticonvulsant)</i> | TIER 3 | PA, QL (10 PER 30 DAY(S)) |
| VALTOCO 20 MG DOSE | VALTOCO 20 MG DOSE 10 MG/0.1ML LIQD THPK <i>diazepam (anticonvulsant)</i> | TIER 3 | PA, QL (10 PER 30 DAY(S)) |
| VALTOCO 5 MG DOSE | VALTOCO 5 MG DOSE 5 MG/0.1ML LIQUID <i>diazepam (anticonvulsant)</i> | TIER 3 | PA, QL (5 PER 30 DAY(S)) |
| CARBAMATES | | | |
| <i>felbamate</i> | <i>felbamate (400 mg tab, 600 mg tab, 600 mg/5ml suspension)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|--------|---|
| GABA MODULATORS | | | |
| SABRIL | SABRIL (500 MG PACKET, 500 MG TAB) <i>vigabatrin</i> | SP-NP | QL (180 PER 30 DAYS), S, GA |
| <i>tiagabine hcl</i> | <i>tiagabine hcl (12 mg tab, 16 mg tab)</i> | TIER 1 | |
| <i>tiagabine hcl</i> | <i>tiagabine hcl (2 mg tab, 4 mg tab)</i> | TIER 1 | |
| <i>vigabatrin</i> | <i>vigabatrin (500 mg packet, 500 mg tab)</i> | SP-P | QL (180 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>vigadrone</i> | <i>vigadrone (500 mg packet, 500 mg tab)</i> | SP-P | QL (180 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>vigpoder</i> | <i>vigpoder 500 mg packet</i> | SP-P | QL (180 PER 30 DAYS), SBG (Specialty Biosimilars and Specialty generics), S |
| HYDANTOINS | | | |
| PEGANONE | PEGANONE 250 MG TAB <i>ethotoin</i> | TIER 2 | PV |
| <i>phenytek</i> | <i>phenytek (200 mg cap, 300 mg cap)</i> | TIER 1 | |
| <i>phenytoin</i> | <i>phenytoin (50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension)</i> | TIER 1 | |
| <i>phenytoin infatabs</i> | <i>phenytoin infatabs 50 mg chew tab</i> | TIER 1 | |
| <i>phenytoin sodium extended</i> | <i>phenytoin sodium extended (100 mg cap, 200 mg cap, 300 mg cap)</i> | TIER 1 | |
| SUCCINIMIDES | | | |
| <i>ethosuximide</i> | <i>ethosuximide (250 mg cap, 250 mg/5ml solution)</i> | TIER 1 | |
| <i>methsuximide</i> | <i>methsuximide 300 mg cap</i> | TIER 1 | |
| VALPROIC ACID | | | |
| <i>divalproex sodium</i> | <i>divalproex sodium (125 mg cap dr, 125 mg tab dr, 250 mg tab dr, 500 mg tab dr)</i> | TIER 1 | |
| <i>divalproex sodium er</i> | <i>divalproex sodium er (er 250 mg tab er 24h, er 500 mg tab er 24h)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|--|--------|-------------------------------|
| <i>valproic acid</i> | <i>valproic acid (250 mg cap, 250 mg/5ml solution, 500 mg/10ml solution)</i> | TIER 1 | |
| ANTICONVULSANTS - MISC. | | | |
| <i>carbamazepine</i> | <i>carbamazepine (100 mg chew tab, 100 mg/5ml suspension)</i> | TIER 1 | |
| <i>carbamazepine</i> | <i>carbamazepine (200 mg tab, 200 mg/10ml suspension)</i> | TIER 1 | |
| <i>carbamazepine er</i> | <i>carbamazepine er (er 100 mg cap er 12h, er 200 mg cap er 12h, er 300 mg cap er 12h, er 400 mg tab er 12h)</i> | TIER 1 | |
| <i>carbamazepine er</i> | <i>carbamazepine er (er 100 mg tab er 12h, er 200 mg tab er 12h)</i> | TIER 1 | |
| DIACOMIT | DIACOMIT (250 MG CAP, 250 MG PACKET) <i>stiripentol</i> | SP-P | PA, QL (360 PER 30 DAY(S)), S |
| DIACOMIT | DIACOMIT (500 MG CAP, 500 MG PACKET) <i>stiripentol</i> | SP-P | PA, QL (180 PER 30 DAY(S)), S |
| EPIDIOLEX | EPIDIOLEX 100 MG/ML SOLUTION <i>cannabidiol</i> | SP-P | PA, QL (800 PER 30 DAY(S)), S |
| <i>epitol</i> | <i>epitol 200 mg tab</i> | TIER 1 | |
| <i>gabapentin</i> | <i>gabapentin (100 mg cap, 250 mg/5ml solution, 300 mg cap, 300 mg/6ml solution, 400 mg cap, 600 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>lacosamide</i> | <i>lacosamide (10 mg/ml solution, 50 mg tab, 50 mg/5ml solution, 100 mg tab, 100 mg/10ml solution, 150 mg tab, 200 mg tab)</i> | TIER 1 | |
| <i>lamotrigine</i> | <i>lamotrigine (25 mg chew tab, 25 mg tab, 25 mg tab disp, 50 mg tab disp, 100 mg tab disp)</i> | TIER 1 | |
| <i>lamotrigine</i> | <i>lamotrigine (5 mg chew tab, 100 mg tab, 150 mg tab, 200 mg tab, 200 mg tab disp)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------|---|--------|----------------------------|
| <i>lamotrigine er</i> | <i>lamotrigine er (er 100 mg tab er 24h, er 200 mg tab er 24h, er 300 mg tab er 24h)</i> | TIER 1 | |
| <i>lamotrigine er</i> | <i>lamotrigine er (er 25 mg tab er 24h, er 50 mg tab er 24h, er 250 mg tab er 24h)</i> | TIER 1 | |
| <i>levetiracetam</i> | <i>levetiracetam (100 mg/ml solution, 250 mg tab, 500 mg tab, 500 mg/5ml solution, 750 mg tab, 1000 mg tab)</i> | TIER 1 | |
| <i>levetiracetam er</i> | <i>levetiracetam er (er 500 mg tab er 24h, er 750 mg tab er 24h)</i> | TIER 1 | |
| <i>oxcarbazepine</i> | <i>oxcarbazepine (150 mg tab, 300 mg tab, 300 mg/5ml suspension, 600 mg tab)</i> | TIER 1 | |
| <i>pregabalin</i> | <i>pregabalin (25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap, 200 mg cap, 225 mg cap, 300 mg cap)</i> | TIER 1 | |
| <i>pregabalin</i> | <i>pregabalin 20 mg/ml solution</i> | TIER 1 | PA, QL (900 PER 30 DAY(S)) |
| <i>primidone</i> | <i>primidone (50 mg tab, 250 mg tab)</i> | TIER 1 | |
| <i>roweepra</i> | <i>roweepra (500 mg tab, 750 mg tab, 1000 mg tab)</i> | TIER 1 | |
| <i>roweepra xr</i> | <i>roweepra xr (500 mg tab er 24h, 750 mg tab er 24h)</i> | TIER 1 | |
| <i>rufinamide</i> | <i>rufinamide (200 mg tab, 400 mg tab)</i> | TIER 1 | PA, QL (240 PER 30 DAYS) |
| <i>rufinamide</i> | <i>rufinamide 40 mg/ml suspension</i> | TIER 1 | PA, QL (2400 PER 30 DAYS) |
| <i>subvenite</i> | <i>subvenite (25 mg tab, 100 mg tab, 150 mg tab, 200 mg tab)</i> | TIER 1 | |
| <i>topiramate</i> | <i>topiramate (15 mg cap sprink, 25 mg cap sprink, 25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-------------------------------|
| <i>topiramate er</i> | <i>topiramate er (er 25 mg cap er 24h, er 25 mg cp24 sprnk, er 50 mg cap er 24h, er 50 mg cp24 sprnk, er 100 mg cap er 24h, er 100 mg cp24 sprnk, er 150 mg cp24 sprnk, er 200 mg cap er 24h, er 200 mg cp24 sprnk)</i> | TIER 1 | |
| <i>zonisamide</i> | <i>zonisamide (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |
| ZTALMY | ZTALMY 50 MG/ML SUSPENSION <i>ganaxolone</i> | SP-NP | PA, QL (36.7 PER 1 DAY(S)), S |
| ANTIPARKINSON AND RELATED THERAPY AGENTS | | | |
| ANTIPARKINSON ANTICHOLINERGICS | | | |
| <i>benztropine mesylate</i> | <i>benztropine mesylate (0.5 mg tab, 1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>trihexyphenidyl hcl</i> | <i>trihexyphenidyl hcl (0.4 mg/ml solution, 2 mg tab, 5 mg tab)</i> | TIER 1 | |
| CENTRAL/PERIPHERAL COMT INHIBITORS | | | |
| <i>tolcapone</i> | <i>tolcapone 100 mg tab</i> | TIER 1 | PA |
| PERIPHERAL COMT INHIBITORS | | | |
| <i>entacapone</i> | <i>entacapone 200 mg tab</i> | TIER 1 | |
| ONGENTYS | ONGENTYS 25 MG CAP <i>opicapone</i> | TIER 3 | PA, QL (1 PER 1 DAY(S)) |
| ONGENTYS | ONGENTYS 50 MG CAP <i>opicapone</i> | TIER 3 | PA, QL (30 PER 30 DAY(S)) |
| ANTIPARKINSON DOPAMINERGICS | | | |
| <i>amantadine hcl</i> | <i>amantadine hcl (50 mg/5ml solution, 100 mg cap, 100 mg tab)</i> | TIER 1 | |
| <i>bromocriptine mesylate</i> | <i>bromocriptine mesylate (2.5 mg tab, 5 mg cap)</i> | TIER 1 | |
| NONERGOLINE DOPAMINE RECEPTOR AGONISTS | | | |
| APOKYN | APOKYN 30 MG/3ML SOLN CART <i>apomorphine hydrochloride</i> | SP-M | S, GA |
| <i>apomorphine hcl</i> | <i>apomorphine hcl 30 mg/3ml soln cart</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-------------------------|
| <i>pramipexole dihydrochloride</i> | <i>pramipexole dihydrochloride (0.125 mg tab, 0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab, 1.5 mg tab)</i> | TIER 1 | |
| <i>pramipexole dihydrochloride er</i> | <i>pramipexole dihydrochloride er (er 0.375 mg tab er 24h, er 0.75 mg tab er 24h, er 1.5 mg tab er 24h, er 2.25 mg tab er 24h, er 3 mg tab er 24h, er 3.75 mg tab er 24h, er 4.5 mg tab er 24h)</i> | TIER 1 | PA |
| <i>ropinirole hcl</i> | <i>ropinirole hcl (0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 4 mg tab)</i> | TIER 1 | |
| <i>ropinirole hcl</i> | <i>ropinirole hcl (3 mg tab, 5 mg tab)</i> | TIER 1 | |
| <i>ropinirole hcl er</i> | <i>ropinirole hcl er (er 6 mg tab er 24h, er 8 mg tab er 24h)</i> | TIER 1 | PA |
| <i>ropinirole hcl er</i> | <i>ropinirole hcl er 12 mg tab er 24h</i> | TIER 1 | PA, QL (2 PER 1 DAY(S)) |
| <i>ropinirole hcl er</i> | <i>ropinirole hcl er 2 mg tab er 24h</i> | TIER 1 | PA, QL (2 PER 1 DAY(S)) |
| <i>ropinirole hcl er</i> | <i>ropinirole hcl er 4 mg tab er 24h</i> | TIER 1 | PA |
| LEVODOPA COMBINATIONS | | | |
| <i>carbidopa-levodopa</i> | <i>carbidopa-levodopa (10-100 mg tab disp, 25-100 mg tab disp, 25-250 mg tab disp)</i> | TIER 2 | |
| <i>carbidopa-levodopa</i> | <i>carbidopa-levodopa (10-100 mg tab, 25-100 mg tab, 25-250 mg tab)</i> | TIER 1 | |
| <i>carbidopa-levodopa er</i> | <i>carbidopa-levodopa er (er 25-100 mg tab er, er 50-200 mg tab er)</i> | TIER 1 | |
| <i>carbidopa-levodopa-entacapone</i> | <i>carbidopa-levodopa-entacapone (12.5-50-200 mg tab, 18.75-75-200 mg tab, 25-100-200 mg tab, 31.25-125-200 mg tab, 37.5-150-200 mg tab, 50-200-200 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|---|
| CREXONT | CREXONT (52.5-210 MG CAP ER, 70-280 MG CAP ER, 87.5-350 MG CAP ER) <i>carbidopa-levodopa</i> | P&T | PA, QL (180 CAPS PER 30 DAY(S)) |
| CREXONT | CREXONT 35-140 MG CAP ER <i>carbidopa-levodopa</i> | P&T | PA, QL (120 CAPS PER 30 DAY(S)) |
| VYALEV | VYALEV 240-12 MG/ML SOLUTION <i>foslevodopa-foscarbidopa</i> | P&T | QL (60 VIALS PER 30 DAY(S)), S |
| ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS | | | |
| <i>rasagiline mesylate</i> | <i>rasagiline mesylate (0.5 mg tab, 1 mg tab)</i> | TIER 1 | |
| <i>selegiline hcl</i> | <i>selegiline hcl (5 mg cap, 5 mg tab)</i> | TIER 1 | |
| DECARBOXYLASE INHIBITORS | | | |
| <i>carbidopa</i> | <i>carbidopa 25 mg tab</i> | TIER 1 | |
| NEUROMUSCULAR AGENTS | | | |
| FRIEDRICH'S ATAXIA AGENTS - NRF2 PATHWAY ACTIVATORS | | | |
| SKYCLARYS | SKYCLARYS 50 MG CAP <i>omaveloxolone</i> | SP-NP | PA, QL (3 PER DAY(S)), S |
| NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS | | | |
| BOTOX | BOTOX (100 RECON SOLN, 200 RECON SOLN) <i>onabotulinumtoxinA</i> | SP-M | PA, QL (400 PER DAY(S)), S |
| DYSPOURT | DYSPOURT (300 RECON SOLN, 500 RECON SOLN) <i>abobotulinumtoxinA</i> | SP-M | PA, QL (1500 PER DAY(S)), S |
| MYOBLOC | MYOBLOC (2500 UNIT/0.5ML SOLUTION, 5000 UNIT/ML SOLUTION, 10000 UNIT/2ML SOLUTION) <i>rimabotulinumtoxinB</i> | SP-M | QL (10000 PER DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| XEOMIN | XEOMIN (50 RECON SOLN, 100 RECON SOLN, 200 RECON SOLN) <i>incobotulinumtoxinA</i> | SP-M | PA, QL (400 PER DAY(S)), S |
| BENZATHIAZOLES | | | |
| <i>riluzole</i> | <i>riluzole 50 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|------------------------------------|
| ALS AGENTS - ANTISENSE OLIGONUCLEOTIDES | | | |
| QALSODY | QALSODY 100 MG/15ML SOLUTION <i>tofersen</i> | SP-M | PA, S |
| ALS AGENTS - MISCELLANEOUS | | | |
| <i>edaravone</i> | <i>edaravone 30 mg/100ml solution</i> | SP-M | PA, S |
| RADICAVA | RADICAVA 30 MG/100ML SOLUTION <i>edaravone</i> | SP-M | PA, S, GA |
| RADICAVA ORS | RADICAVA ORS 105 MG/5ML SUSPENSION <i>edaravone</i> | SP-NP | PA, S, QLV (Quantity Limit Varies) |
| RADICAVA ORS STARTER KIT | RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION <i>edaravone</i> | SP-NP | PA, S, QLV (Quantity Limit Varies) |
| RETT SYNDROME AGENTS - GLYCINE-PROLINE-GLUTAMATE ANALOGS | | | |
| DAYBUE | DAYBUE 200 MG/ML SOLUTION <i>trofinetide</i> | SP-NP | PA, QL (120 PER 1 DAY(S)), S |
| SPINAL MUSCULAR ATROPHY-ANTISENSE OLIGONUCLEOTIDES | | | |
| SPINRAZA | SPINRAZA 12 MG/5ML SOLUTION <i>nusinersen</i> | SP-M | PA, S |
| SPINAL MUSCULAR ATROPHY-GENE THERAPY AGENTS | | | |
| ZOLGENSMA 20.6-21.0 KG | ZOLGENSMA 20.6-21.0 KG 14X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 10.1-10.5 KG | ZOLGENSMA 10.1-10.5 KG 7X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 10.6-11.0 KG | ZOLGENSMA 10.6-11.0 KG 2X5.5ML & 6X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------|---|------|----------------------------|
| ZOLGENSMA 11.1-11.5 KG | ZOLGENSMA 11.1-11.5 KG 1X5.5ML & 7X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 11.6-12.0 KG | ZOLGENSMA 11.6-12.0 KG 8X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 12.1-12.5 KG | ZOLGENSMA 12.1-12.5 KG 2X5.5ML & 7X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 12.6-13.0 KG | ZOLGENSMA 12.6-13.0 KG 1X5.5ML & 8X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 13.1-13.5 KG | ZOLGENSMA 13.1-13.5 KG 9X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 13.6-14.0 KG | ZOLGENSMA 13.6-14.0 KG 2X5.5ML & 8X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 14.1-14.5 KG | ZOLGENSMA 14.1-14.5 KG 1X5.5ML & 9X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 14.6-15.0 KG | ZOLGENSMA 14.6-15.0 KG 10X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 15.1-15.5 KG | ZOLGENSMA 15.1-15.5 KG 2X5.5ML & 9X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 15.6-16.0 KG | ZOLGENSMA 15.6-16.0 KG 1X5.5ML & 10X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------|---|------|----------------------------|
| ZOLGENSMA 16.1-16.5 KG | ZOLGENSMA 16.1-16.5 KG 11X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 16.6-17.0 KG | ZOLGENSMA 16.6-17.0 KG 2X5.5ML & 10X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 17.1-17.5 KG | ZOLGENSMA 17.1-17.5 KG 1X5.5ML & 11X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 17.6-18.0 KG | ZOLGENSMA 17.6-18.0 KG 12X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 18.1-18.5 KG | ZOLGENSMA 18.1-18.5 KG 2X5.5ML & 11X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 18.6-19.0 KG | ZOLGENSMA 18.6-19.0 KG 1X5.5ML & 12X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 19.1-19.5 KG | ZOLGENSMA 19.1-19.5 KG 13X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 19.6-20.0 KG | ZOLGENSMA 19.6-20.0 KG 2X5.5ML & 12X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 2.6-3.0 KG | ZOLGENSMA 2.6-3.0 KG 2X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 20.1-20.5 KG | ZOLGENSMA 20.1-20.5 KG 1X5.5ML & 13X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------|---|------|----------------------------|
| ZOLGENSMA 3.1-3.5 KG | ZOLGENSMA 3.1-3.5 KG 2X5.5ML & 1X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 3.6-4.0 KG | ZOLGENSMA 3.6-4.0 KG 1X5.5ML & 2X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 4.1-4.5 KG | ZOLGENSMA 4.1-4.5 KG 3X8.3 ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 4.6-5.0 KG | ZOLGENSMA 4.6-5.0 KG 2X5.5ML & 2X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 5.1-5.5 KG | ZOLGENSMA 5.1-5.5 KG 1X5.5ML & 3X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 5.6-6.0 KG | ZOLGENSMA 5.6-6.0 KG 4X8.3 ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 6.1-6.5 KG | ZOLGENSMA 6.1-6.5 KG 2X5.5ML & 3X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 6.6-7.0 KG | ZOLGENSMA 6.6-7.0 KG 1X5.5ML & 4X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 7.1-7.5 KG | ZOLGENSMA 7.1-7.5 KG 5X8.3 ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 7.6-8.0 KG | ZOLGENSMA 7.6-8.0 KG 2X5.5ML & 4X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 8.1-8.5 KG | ZOLGENSMA 8.1-8.5 KG 1X5.5ML & 5X8.3ML KIT <i>onasemnogene</i> <i>abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-------------------------------|
| ZOLGENSMA 8.6-9.0 KG | ZOLGENSMA 8.6-9.0 KG 6X8.3 ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 9.1-9.5 KG | ZOLGENSMA 9.1-9.5 KG 2X5.5ML & 5X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| ZOLGENSMA 9.6-10.0 KG | ZOLGENSMA 9.6-10.0 KG 1X5.5ML & 6X8.3ML KIT <i>onasemnogene abeparvovec-xioi</i> | SP-M | PA, QL (1 PER LIFETIME), S |
| SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS | | | |
| EVRYSDI | EVRYSDI 0.75 MG/ML RECON SOLN <i>risdiplam</i> | SP-P | PA, QL (120 PER 24 DAY(S)), S |
| MUSCULOSKELETAL THERAPY AGENTS | | | |
| CENTRAL MUSCLE RELAXANTS | | | |
| <i>baclofen</i> | <i>baclofen (5 mg tab, 10 mg tab, 20 mg tab)</i> | TIER 1 | |
| <i>carisoprodol</i> | <i>carisoprodol (250 mg tab, 350 mg tab)</i> | TIER 1 | |
| <i>chlorzoxazone</i> | <i>chlorzoxazone (375 mg tab, 500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>cyclobenzaprine hcl</i> | <i>cyclobenzaprine hcl (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| <i>lorzone</i> | <i>lorzone (375 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>metaxalone</i> | <i>metaxalone (400 mg tab, 800 mg tab)</i> | TIER 1 | |
| <i>methocarbamol</i> | <i>methocarbamol (500 mg tab, 750 mg tab)</i> | TIER 1 | |
| <i>orphenadrine citrate er</i> | <i>orphenadrine citrate er 100 mg tab er 12h</i> | TIER 1 | |
| <i>tizanidine hcl</i> | <i>tizanidine hcl 2 mg tab</i> | TIER 1 | |
| <i>tizanidine hcl</i> | <i>tizanidine hcl 4 mg tab</i> | TIER 1 | |
| <i>vanadom</i> | <i>vanadom 350 mg tab</i> | TIER 1 | |
| DIRECT MUSCLE RELAXANTS | | | |
| <i>dantrolene sodium</i> | <i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------|--|------|--|
| VISCOSUPPLEMENTS | | | |
| DUROLANE | DUROLANE 60 MG/3ML PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| EUFLEXXA | EUFLEXXA 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | PA, S |
| GEL-ONE | GEL-ONE 30 MG/3ML PRSYR <i>cross-linked hyaluronate</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| GELSYN-3 | GELSYN-3 16.8 MG/2ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| GENVISC 850 | GENVISC 850 25 MG/2.5ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| HYALGAN | HYALGAN 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | PA, S |
| HYALGAN | HYALGAN 20 MG/2ML SOLUTION <i>sodium hyaluronate (viscosupplement)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| HYMOVIS | HYMOVIS 24 MG/3ML SOLN PRSYR <i>hyaluronan</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| MONOVISC | MONOVISC 88 MG/4ML SOLN PRSYR <i>hyaluronan</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| ORTHOVISC | ORTHOVISC 30 MG/2ML SOLN PRSYR <i>hyaluronan</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| SODIUM HYALURONATE | SODIUM HYALURONATE 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | PA, S |
| SUPARTZ FX | SUPARTZ FX 25 MG/2.5ML SOLN PRSYR <i>sodium hyaluronate (viscosupplement)</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| SYNOJOYNT | SYNOJOYNT 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement) | SP-M | PA, S |
| SYNVISC | SYNVISC 16 MG/2ML SOLN PRSYR <i>hylan</i> | SP-M | PA, S |
| SYNVISC ONE | SYNVISC ONE 48 MG/6ML SOLN PRSYR <i>hylan</i> | SP-M | PA, S |
| TRILURON | TRILURON 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement) | SP-M | PA, S |
| TRIVISC | TRIVISC 25 MG/2.5ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement) | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| VISCO-3 | VISCO-3 25 MG/2.5ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement) | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| RETINOIC ACID RECEPTOR GAMMA SELECTIVE AGONISTS | | | |
| SOHONOS | SOHONOS (1 MG CAP, 5 MG CAP) <i>palovarotene</i> | SP-NP | PA, QL (1 PER DAY(S)), S |
| SOHONOS | SOHONOS (1.5 MG CAP, 10 MG CAP) <i>palovarotene</i> | SP-NP | PA, QL (2 PER DAY(S)), S |
| SOHONOS | SOHONOS 2.5 MG CAP <i>palovarotene</i> | SP-NP | PA, QL (3 PER DAY(S)), S |
| MUSCLE RELAXANT COMBINATIONS | | | |
| CARISOPRODOL- ASPIRIN-CODEINE | CARISOPRODOL- ASPIRIN-CODEINE 200- 325-16 MG TAB <i>carisoprodol w/ aspirin & codeine</i> | TIER 1 | |
| ANTIMYASTHENIC/CHOLINERGIC AGENTS | | | |
| FIRDAPSE | FIRDAPSE 10 MG TAB <i>amifampridine phosphate</i> | SP-NP | PA, QL (8 PER 1 DAY(S)), S |
| GUANIDINE HCL | GUANIDINE HCL 125 MG TAB <i>guanidine hcl</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|---|--------|-------------------------------|
| <i>pyridostigmine bromide</i> | <i>pyridostigmine bromide 60 mg tab</i> | TIER 1 | |
| <i>pyridostigmine bromide</i> | <i>pyridostigmine bromide 60 mg/5ml solution</i> | TIER 1 | |
| <i>pyridostigmine bromide er</i> | <i>pyridostigmine bromide er 180 mg tab er</i> | TIER 1 | |
| RUZURGI | RUZURGI 10 MG TAB <i>amifampridine</i> | SP-P | PA, QL (240 PER 30 DAY(S)), S |
| VITAMINS | | | |
| VITAMIN D | | | |
| <i>ergocalciferol</i> | <i>ergocalciferol 1.25 mg (50000 ut) cap</i> | TIER 1 | |
| <i>vitamin d (ergocalciferol)</i> | <i>vitamin d (ergocalciferol) (1.25 mg (50000 ut) cap, 50000 unit cap)</i> | TIER 1 | |
| VITAMIN K | | | |
| <i>phytonadione</i> | <i>phytonadione 5 mg tab</i> | TIER 1 | |
| MULTIVITAMINS | | | |
| PRENATAL MV & MIN W/FE-FA | | | |
| ATABEX EC | ATABEX EC 29-1 MG TAB DR <i>prenatal vit w/ docusate-iron carbonyl-folic acid</i> | TIER 2 | |
| ATABEX OB | ATABEX OB 29-1 MG TAB <i>prenatal vit w/ fe bisglycinate chelate-folic acid</i> | TIER 2 | |
| CO-NATAL FA | CO-NATAL FA TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| FOLIVANE-OB | FOLIVANE-OB 85-1 MG CAP <i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i> | TIER 2 | |
| INATAL GT | INATAL GT TAB <i>prenatal vit w/ docusate-iron carbonyl-folic acid</i> | TIER 2 | |
| NATALVIT | NATALVIT TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|---|--------|-----------------------|
| OBSTETRIX EC (WITH DOCUSATE) | OBSTETRIX EC (WITH DOCUSATE) 29-1 MG TAB <i>prenatal vit w/ docusate- iron carbonyl-folic acid</i> | TIER 2 | |
| PNV PRENATAL PLUS MULTIVIT+DHA | PNV PRENATAL PLUS MULTIVIT+DHA 27-1 & 312 MG MISC <i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i> | TIER 2 | |
| PRENATABS FA | PRENATABS FA 29-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| PRENATAL 19 | PRENATAL 19 TAB <i>prenatal vit w/ docusate-fe fumarate-folic acid</i> | TIER 2 | |
| PRENATAL-U | PRENATAL-U 106.5-1 MG CAP <i>prenatal without a vit w/ fe fumarate-folic acid</i> | TIER 2 | |
| PRETAB | PRETAB 29-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| PROVIDA OB | PROVIDA OB 20-20-1.25 MG CAP <i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i> | TIER 2 | |
| TRICARE PRENATAL DHA ONE | TRICARE PRENATAL DHA ONE 27-1-500 MG CAP <i>prenatal w/fe fumarate-fa- dss-fish oil</i> | TIER 2 | PV |
| TRINATAL RX 1 | TRINATAL RX 1 60-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| TRINATE | TRINATE TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| VINATE II | VINATE II 29-1 MG TAB <i>prenatal vit w/ fe bisglycinate chelate-folic acid</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-----------------------|
| VINATE ONE | VINATE ONE 60-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i> | TIER 2 | |
| PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL | | | |
| COMPLETE NATAL DHA | COMPLETE NATAL DHA 29-1-200 & 200 MG MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca- omega 3</i> | TIER 2 | |
| TRIVEEN-DUO DHA | TRIVEEN-DUO DHA 29-1- 200 & 300 MG MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca- omega 3</i> | TIER 2 | |
| WESNATAL DHA COMPLETE | WESNATAL DHA COMPLETE 29-1-200 & 200 MG MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca- omega 3</i> | TIER 2 | |
| PRENATAL MV & MIN W/FE-FA-DHA | | | |
| OBSTETRIX DHA | OBSTETRIX DHA 29-1 & 350 MG MISC <i>prenatal mv & min w/fe carbonyl-fa-dha</i> | TIER 2 | |
| MINERALS & ELECTROLYTES | | | |
| BICARBONATES | | | |
| SODIUM BICARBONATE | SODIUM BICARBONATE (4.2 % SOLUTION, 7.5 % SOLUTION) <i>sodium bicarbonate</i> | TIER 1 | |
| PHOSPHATE | | | |
| <i>phospha 250 neutral</i> | <i>phospha 250 neutral 155- 852-130 mg tab</i> | TIER 1 | |
| <i>phospho-trin 250 neutral</i> | <i>phospho-trin 250 neutral 155-852-130 mg tab</i> | TIER 1 | |
| <i>phospho-trin k500</i> | <i>phospho-trin k500 500 mg tab</i> | TIER 1 | |
| <i>phosphorous</i> | <i>phosphorous 155-852-130 mg tab</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>virt-phos 250 neutral</i> | <i>virt-phos 250 neutral 155-852-130 mg tab</i> | TIER 1 | |
| POTASSIUM | | | |
| <i>klor-con</i> | <i>klor-con (8 tab er, 20 packet)</i> | TIER 1 | |
| <i>klor-con 10</i> | <i>klor-con 10 10 meq tab er</i> | TIER 1 | |
| <i>klor-con m10</i> | <i>klor-con m10 10 meq tab er</i> | TIER 1 | |
| <i>klor-con m15</i> | <i>klor-con m15 15 meq tab er</i> | TIER 1 | |
| <i>klor-con m20</i> | <i>klor-con m20 20 meq tab er</i> | TIER 1 | |
| <i>klor-con sprinkle</i> | <i>klor-con sprinkle (8 cap er, 10 cap er)</i> | TIER 1 | |
| <i>potassium chloride</i> | <i>potassium chloride (10 % solution, 20 meq packet, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution)</i> | TIER 1 | |
| <i>potassium chloride crys er</i> | <i>potassium chloride crys er (crys er 10 tab er, crys er 15 tab er, crys er 20 tab er)</i> | TIER 1 | |
| <i>potassium chloride er</i> | <i>potassium chloride er (er 8 cap er, er 8 tab er, er 10 cap er, er 10 tab er, er 20 tab er)</i> | TIER 1 | |
| SODIUM | | | |
| <i>aquastat</i> | <i>aquastat 0.9 % solution</i> | TIER 1 | |
| <i>aquastat sfr</i> | <i>aquastat sfr 0.9 % solution</i> | TIER 1 | |
| <i>bd posiflush</i> | <i>bd posiflush 0.9 % solution</i> | TIER 1 | |
| <i>bd posiflush safescrub</i> | <i>bd posiflush safescrub 0.9 % solution</i> | TIER 1 | |
| <i>monoject flush syringe</i> | <i>monoject flush syringe 0.9 % solution</i> | TIER 1 | |
| <i>monoject sodium chloride flush</i> | <i>monoject sodium chloride flush 0.9 % solution</i> | TIER 1 | |
| <i>normal saline flush</i> | <i>normal saline flush 0.9 % solution</i> | TIER 1 | |
| <i>saline flush</i> | <i>saline flush 0.9 % solution</i> | TIER 1 | |
| <i>saline flush zr</i> | <i>saline flush zr 0.9 % solution</i> | TIER 1 | |
| <i>sodium chloride (pf)</i> | <i>sodium chloride (pf) 0.9 % solution</i> | TIER 1 | |
| <i>sodium chloride</i> | <i>sodium chloride 4 meq/ml solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| <i>sodium chloride flush</i> | <i>sodium chloride flush 0.9 % solution</i> | TIER 1 | |
| <i>swabflush saline flush</i> | <i>swabflush saline flush 0.9 % solution</i> | TIER 1 | |
| NUTRIENTS | | | |
| LIPIDS | | | |
| DOJOLVI | DOJOLVI 100 % LIQUID <i>triheptanoin</i> | SP-P | PA, S |
| HEMATOPOIETIC AGENTS | | | |
| COBALAMINS | | | |
| <i>cyanocobalamin</i> | <i>cyanocobalamin 1000 mcg/ml solution</i> | TIER 1 | |
| <i>dodex</i> | <i>dodex 1000 mcg/ml solution</i> | TIER 1 | |
| IRON | | | |
| MONOFERRIC | MONOFERRIC 1000 MG/10ML SOLUTION <i>ferric derisomaltose</i> | SP-M | S |
| HEMATOPOIETIC AUTOLOGOUS CELLULAR GENE THERAPY | | | |
| ZYNTEGLO | ZYNTEGLO SUSPENSION <i>betibeglogene autotemcel</i> | SP-M | PA, S |
| ERYTHROID MATURATION AGENTS | | | |
| REBLOZYL | REBLOZYL 25 MG RECON SOLN <i>luspatercept-aamt</i> | SP-M | PA, S |
| REBLOZYL | REBLOZYL 75 MG RECON SOLN <i>luspatercept-aamt</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|------|--|
| ERYTHROPOIESIS-STIMULATING AGENTS (ESAS) | | | |
| ARANESP (ALBUMIN FREE) | ARANESP (ALBUMIN FREE) (10 MCG/0.4ML SOLN PRSYR, 25 MCG/0.42ML SOLN PRSYR, 25 MCG/ML SOLUTION, 40 MCG/0.4ML SOLN PRSYR, 40 MCG/ML SOLUTION, 60 MCG/0.3ML SOLN PRSYR, 60 MCG/ML SOLUTION, 100 MCG/0.5ML SOLN PRSYR, 100 MCG/ML SOLUTION, 150 MCG/0.3ML SOLN PRSYR, 200 MCG/0.4ML SOLN PRSYR, 200 MCG/ML SOLUTION, 300 MCG/0.6ML SOLN PRSYR, 500 MCG/ML SOLN PRSYR) <i>darbepoetin alfa</i> | SP-P | S |
| EPOGEN | EPOGEN (2000 SOLUTION, 3000 SOLUTION, 4000 SOLUTION, 10000 SOLUTION, 20000 SOLUTION) <i>epoetin alfa</i> | SP-P | S, MN-PA (Medically Necessary Prior Authorization) |
| MIRCERA | MIRCERA (30 SOLN PRSYR, 50 SOLN PRSYR, 75 SOLN PRSYR, 100 SOLN PRSYR, 120 SOLN PRSYR, 150 SOLN PRSYR, 200 SOLN PRSYR) <i>methoxy polyethylene glycol-epoetin beta</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| PROCRIT | PROCRIT (2000 SOLUTION, 3000 SOLUTION, 4000 SOLUTION, 10000 SOLUTION, 20000 SOLUTION, 40000 SOLUTION) <i>epoetin alfa</i> | SP-P | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|------|---|
| RETACRIT | RETACRIT (2000 SOLUTION, 3000 SOLUTION, 4000 SOLUTION, 10000 SOLUTION, 20000 SOLUTION, 40000 SOLUTION) <i>epoetin alfa-epbx</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF) | | | |
| NEULASTA | NEULASTA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim</i> | SP-P | QL (2 PER 28 DAY(S)), S |
| NEULASTA ONPRO | NEULASTA ONPRO 6 MG/0.6ML PREF SY KT <i>pegfilgrastim</i> | SP-P | S |
| NIVESTYM | NIVESTYM (300 MCG/0.5ML SOLN PRSYR, 300 MCG/ML SOLUTION, 480 MCG/0.8ML SOLN PRSYR, 480 MCG/1.6ML SOLUTION) <i>filgrastim-aafi</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| NYVEPRIA | NYVEPRIA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-apgf</i> | SP-P | QL (2 PER 28 DAY(S)), S |
| ROLVEDON | ROLVEDON 13.2 MG/0.6ML SOLN PRSYR <i>eflaprgrastim-xnst</i> | SP-M | PA, S |
| UDENYCA ONBODY | UDENYCA ONBODY 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-cbqv</i> | SP-M | QL (2 KITS PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| ZARXIO | ZARXIO (300 MCG/0.5ML SOLN PRSYR, 480 MCG/0.8ML SOLN PRSYR) <i>filgrastim-sndz</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| HYPOXIA-INDUCIBLE FACTOR PROLYL HYDROXYLASE INHIBITORS | | | |
| JESDUVROQ | JESDUVROQ (1 MG TAB, 2 MG TAB, 4 MG TAB, 6 MG TAB, 8 MG TAB) <i>daprodustat</i> | SP-M | PA, S |
| VAFSEO | VAFSEO (150 MG TAB, 300 MG TAB) <i>vadadustat</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|--|
| THROMBOPOIETIN (TPO) RECEPTOR AGONISTS | | | |
| DOPTELET | DOPTELET 20 MG TAB <i>avatrombopag maleate</i> | SP-P | PA, QL (60 PER 30 DAY(S)), S |
| MULPLETA | MULPLETA 3 MG TAB <i>lusutrombopag</i> | SP-P | PA, QL (7 PER 14 DAY(S)), S |
| NPLATE | NPLATE (125 MCG RECON SOLN, 250 MCG RECON SOLN, 500 MCG RECON SOLN) <i>romiplostim</i> | SP-M | S |
| PROMACTA | PROMACTA (12.5 MG PACKET, 25 MG PACKET) <i>eltrombopag olamine</i> | SP-P | PA, QL (90 PER 30 DAY(S)), S |
| PROMACTA | PROMACTA (25 MG TAB, 50 MG TAB) <i>eltrombopag olamine</i> | SP-P | PA, QL (90 PER 30 DAYS), S |
| PROMACTA | PROMACTA 12.5 MG TAB <i>eltrombopag olamine</i> | SP-P | PA, QL (30 PER 30 DAYS), S |
| PROMACTA | PROMACTA 75 MG TAB <i>eltrombopag olamine</i> | SP-P | PA, QL (60 PER 30 DAYS), S |
| CXCR4 RECEPTOR ANTAGONIST | | | |
| APHEXDA | APHEXDA 62 MG RECON SOLN <i>motixafortide acetate</i> | SP-M | S |
| MOZOBIL | MOZOBIL 24 MG/1.2ML SOLUTION <i>plerixafor</i> | SP-M | S, GA |
| <i>plerixafor</i> | <i>plerixafor 24 mg/1.2ml solution</i> | SP-M | S |
| XOLREMDI | XOLREMDI 100 MG CAP <i>mavoxifafor</i> | SP-NP | PA, QL (4 CAPS PER 1 DAY(S)), S |
| AGENTS FOR GAUCHER DISEASE | | | |
| CERDELGA | CERDELGA 84 MG CAP <i>eliglustat tartrate</i> | SP-P | PA, QL (2 PER 1 DAY), S |
| CEREZYME | CEREZYME 400 UNIT RECON SOLN <i>imiglucerase</i> | SP-M | PA, S |
| ELELYSO | ELELYSO 200 UNIT RECON SOLN <i>taliglucerase alfa</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| <i>miglustat</i> | <i>miglustat 100 mg cap</i> | SP-P | PA, QL (3 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|--|
| VPRIV | VPRIV 400 UNIT RECON SOLN <i>velaglucerase alfa</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| <i>yargesa</i> | <i>yargesa 100 mg cap</i> | SP-P | PA, QL (3 PER 1 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| ZAVESCA | ZAVESCA 100 MG CAP <i>miglustat</i> | SP-NP | PA, QL (3 PER 1 DAY(S)), S, GA |
| CYTOTOXIC AGENTS | | | |
| DROXIA | DROXIA (200 MG CAP, 300 MG CAP, 400 MG CAP) <i>hydroxyurea (sickle cell disease)</i> | TIER 3 | |
| AGENTS FOR SICKLE CELL DISEASE - AUTOLOGOUS GENE THERAPY | | | |
| CASGEVY | CASGEVY SUSPENSION <i>exagamglogene autotemcel</i> | SP-M | PA, S |
| LYFGENIA | LYFGENIA SUSPENSION <i>lovotibeglogene autotemcel</i> | SP-M | PA, S |
| HEMOGLOBIN S (HBS) POLYMERIZATION INHIBITORS | | | |
| OXBRYTA | OXBRYTA 300 MG TAB <i>voxelotor</i> | SP-NP | PA, QL (3 PER DAY(S)), S |
| OXBRYTA | OXBRYTA 300 MG TAB SOL <i>voxelotor</i> | SP-NP | PA, QL (5 PER 1 DAY(S)), S |
| OXBRYTA | OXBRYTA 500 MG TAB <i>voxelotor</i> | SP-NP | PA, QL (84 PER 28 DAY(S)), S, PA-QL (140/28 days) |
| SELECTIN BLOCKERS | | | |
| ADAKVEO | ADAKVEO 100 MG/10ML SOLUTION <i>crizanlizumab-tmca</i> | SP-M | PA, S |
| ANTICOAGULANTS | | | |
| HEPARINS AND HEPARINOID-LIKE AGENTS | | | |
| <i>bd heparin posiflush</i> | <i>bd heparin posiflush (10 solution, 100 solution)</i> | TIER 1 | |
| <i>heparin na (pork) lock flsh pf</i> | <i>heparin na (pork) lock flsh pf (pf 1 solution, pf 10 solution, pf 100 solution)</i> | TIER 1 | |
| <i>heparin sod (pork) lock flush</i> | <i>heparin sod (pork) lock flush (10 solution, 100 solution)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|---|--------|-----------------------|
| <i>heparin sodium (porcine)</i> | <i>heparin sodium (porcine) (5000 solution, 10000 solution)</i> | TIER 1 | |
| <i>heparin sodium (porcine) pf</i> | <i>heparin sodium (porcine) pf 5000 unit/0.5ml solution</i> | TIER 1 | |
| LOW MOLECULAR WEIGHT HEPARINS | | | |
| <i>enoxaparin sodium</i> | <i>enoxaparin sodium (30 mg/0.3ml soln prsy, 40 mg/0.4ml soln prsy, 60 mg/0.6ml soln prsy, 80 mg/0.8ml soln prsy, 100 mg/ml soln prsy, 120 mg/0.8ml soln prsy, 150 mg/ml soln prsy, 300 mg/3ml solution)</i> | TIER 1 | |
| FRAGMIN | FRAGMIN (2500 UNIT/0.2ML SOLN PRSYR, 5000 UNIT/0.2ML SOLN PRSYR, 7500 UNIT/0.3ML SOLN PRSYR, 10000 UNIT/4ML SOLUTION, 10000 UNIT/ML SOLN PRSYR, 12500 UNIT/0.5ML SOLN PRSYR, 15000 UNIT/0.6ML SOLN PRSYR, 18000 UNT/0.72ML SOLN PRSYR, 95000 UNIT/3.8ML SOLUTION) <i>dalteparin sodium</i> | TIER 2 | |
| SYNTHETIC HEPARINOID-LIKE AGENTS | | | |
| <i>fondaparinux sodium</i> | <i>fondaparinux sodium (2.5 mg/0.5ml solution, 5 mg/0.4ml solution, 7.5 mg/0.6ml solution, 10 mg/0.8ml solution)</i> | TIER 1 | |
| COUMARIN ANTICOAGULANTS | | | |
| COUMADIN | COUMADIN (4 MG TAB, 6 MG TAB, 7.5 MG TAB) <i>warfarin sodium</i> | TIER 2 | GA |
| <i>jantoven</i> | <i>jantoven (1 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab, 10 mg tab)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| <i>warfarin sodium</i> | <i>warfarin sodium (1 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab, 10 mg tab)</i> | TIER 1 | |
| THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE | | | |
| <i>dabigatran etexilate mesylate</i> | <i>dabigatran etexilate mesylate (75 mg cap, 110 mg cap, 150 mg cap)</i> | TIER 1 | |
| DIRECT FACTOR XA INHIBITORS | | | |
| ELIQUIS | ELIQUIS (2.5 MG TAB, 5 MG TAB) <i>apixaban</i> | TIER 2 | |
| ELIQUIS DVT/PE STARTER PACK | ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK <i>apixaban</i> | TIER 2 | |
| XARELTO | XARELTO (1 MG/ML RECON SUSP, 2.5 MG TAB, 10 MG TAB, 15 MG TAB, 20 MG TAB) <i>rivaroxaban</i> | TIER 2 | |
| XARELTO STARTER PACK | XARELTO STARTER PACK 15 & 20 MG TAB THPK <i>rivaroxaban</i> | TIER 2 | PV |
| HEMOSTATICS | | | |
| HEMOSTATICS - SYSTEMIC | | | |
| <i>aminocaproic acid</i> | <i>aminocaproic acid (0.25 gm/ml solution, 500 mg tab, 1000 mg tab)</i> | TIER 1 | |
| <i>tranexamic acid</i> | <i>tranexamic acid 650 mg tab</i> | TIER 1 | |
| HEMATOLOGICAL AGENTS - MISC. | | | |
| AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA | | | |
| GIVLAARI | GIVLAARI 189 MG/ML SOLUTION <i>givosiran sodium</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------|--|------|-----------------------|
| ANTIHEMOPHILIC PRODUCTS | | | |
| ADVATE | ADVATE (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN, 4000 RECON SOLN) <i>antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)</i> | SP-M | S |
| ADYNOVATE | ADYNOVATE (250 RECON SOLN, 500 RECON SOLN, 750 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>antihemophilic factor (recombinant) pegylated</i> | SP-M | S |
| AFSTYLA | AFSTYLA (250 KIT, 500 KIT, 1000 KIT, 1500 KIT, 2000 KIT, 2500 KIT, 3000 KIT) <i>antihemophilic factor (recombinant) single chain</i> | SP-M | S |
| ALPHANATE | ALPHANATE (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN) <i>antihemophilic factor/von willebrand factor complex (human)</i> | SP-M | S |
| ALPHANATE/VWF COMPLEX/HUMAN | ALPHANATE/VWF COMPLEX/HUMAN 1500 UNIT RECON SOLN <i>antihemophilic factor/von willebrand factor complex (human)</i> | SP-M | S |
| ALPHANINE SD | ALPHANINE SD (500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN) <i>coagulation factor ix</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------|--|------|-----------------------|
| ALPROLIX | ALPROLIX (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN, 4000 RECON SOLN) <i>coagulation factor ix (recomb) fc fusion protein (rfixfc)</i> | SP-M | S |
| ALTUVIIIIO | ALTUVIIIIO (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN, 4000 RECON SOLN) <i>antihemophilic factor (rcmb) fc-vwf-xten fusion protein-ehl</i> | SP-M | S |
| BENEFIX | BENEFIX (250 KIT, 500 KIT, 1000 KIT, 2000 KIT, 3000 KIT) <i>coagulation factor ix (recombinant)</i> | SP-M | S |
| COAGADEX | COAGADEX (250 RECON SOLN, 500 RECON SOLN) <i>coagulation factor x (human)</i> | SP-M | S |
| CORIFACT | CORIFACT 1000-1600 UNIT KIT <i>factor xiii concentrate (human)</i> | SP-M | S |
| ELOCTATE | ELOCTATE (250 RECON SOLN, 500 RECON SOLN, 750 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN, 4000 RECON SOLN, 5000 RECON SOLN, 6000 RECON SOLN) <i>antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiiifc)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------|---|------|-----------------------|
| ESPEROCT | ESPEROCT (500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>antihemophilic factor (recombinant) glycopegylated-exei</i> | SP-M | S |
| FEIBA | FEIBA (500 RECON SOLN, 1000 RECON SOLN, 2500 RECON SOLN) <i>antiinhibitor coagulant complex</i> | SP-M | S |
| FIBRYGA | FIBRYGA RECON SOLN <i>fibrinogen concentrate (human)</i> | SP-M | S |
| HEMOFIL M | HEMOFIL M (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 1700 RECON SOLN) <i>antihemophilic factor (human)</i> | SP-M | S |
| HUMATE-P | HUMATE-P (250-600 RECON SOLN, 500-1200 RECON SOLN, 1000-2400 RECON SOLN) <i>antihemophilic factor/von willebrand factor complex (human)</i> | SP-M | S |
| IDELVION | IDELVION (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3500 RECON SOLN) <i>coagulation factor ix recomb albumin fusion protein (rix-fp)</i> | SP-M | S |
| IXINITY | IXINITY (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>coagulation factor ix (recombinant)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------|--|------|-----------------------|
| JIVI | JIVI (500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>antihemophil fact(rcmb) pegylated-aucl (bdd-rfviii peg-aucl)</i> | SP-M | S |
| KOATE | KOATE (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN) <i>antihemophilic factor (human)</i> | SP-M | S |
| KOATE-DVI | KOATE-DVI (500 RECON SOLN, 1000 RECON SOLN) <i>antihemophilic factor (human)</i> | SP-M | S |
| KOGENATE FS | KOGENATE FS (250 KIT, 500 KIT, 1000 KIT, 2000 KIT, 3000 KIT) <i>antihemophilic factor (recombinant)</i> | SP-M | S |
| KOVALTRY | KOVALTRY (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)</i> | SP-M | S |
| MONONINE | MONONINE 1000 UNIT RECON SOLN <i>coagulation factor ix</i> | SP-M | S |
| NOVOEIGHT | NOVOEIGHT (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)</i> | SP-M | S |
| NOVOSEVEN RT | NOVOSEVEN RT (1 MG RECON SOLN, 2 MG RECON SOLN, 5 MG RECON SOLN, 8 MG RECON SOLN) <i>coagulation factor viia (recombinant)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------|---|------|-----------------------|
| NUWIQ | NUWIQ (250 KIT, 250 RECON SOLN, 500 KIT, 500 RECON SOLN, 1000 KIT, 1000 RECON SOLN, 1500 KIT, 1500 RECON SOLN, 2000 KIT, 2000 RECON SOLN, 2500 KIT, 2500 RECON SOLN, 3000 KIT, 3000 RECON SOLN, 4000 KIT, 4000 RECON SOLN) <i>antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)</i> | SP-M | S |
| OBIZUR | OBIZUR 500 UNIT RECON SOLN <i>antihemophilic factor (recombinant porcine) (rpfviii)</i> | SP-M | S |
| PROFILNINE | PROFILNINE (500 RECON SOLN, 1000 RECON SOLN, 1500 RECON SOLN) <i>factor ix complex</i> | SP-M | S |
| REBINYN | REBINYN (500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>coagulation factor ix (recombinant) glycopegylated</i> | SP-M | S |
| RECOMBINATE | RECOMBINATE (220-400 RECON SOLN, 401-800 RECON SOLN, 801-1240 RECON SOLN, 1241-1800 RECON SOLN, 1801-2400 RECON SOLN) <i>antihemophilic factor (recombinant)</i> | SP-M | S |
| RIASTAP | RIASTAP RECON SOLN <i>fibrinogen concentrate (human)</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|------|-----------------------|
| RIXUBIS | RIXUBIS (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 2000 RECON SOLN, 3000 RECON SOLN) <i>coagulation factor ix (recombinant)</i> | SP-M | S |
| SEVENFACT | SEVENFACT (1 MG RECON SOLN, 5 MG RECON SOLN) <i>coagulation factor viia (recombinant)-jncw</i> | SP-M | S |
| TRETTEN | TRETTEN 2500 UNIT RECON SOLN <i>coagulation factor xiii a-subunit (recombinant)</i> | SP-M | S |
| VONVENDI | VONVENDI (650 RECON SOLN, 1300 RECON SOLN) <i>von willebrand factor (recombinant)</i> | SP-M | S |
| WILATE | WILATE (500-500 KIT, 1000-1000 KIT) <i>antihemophilic factor/von willebrand factor complex (human)</i> | SP-M | S |
| XYNTHA | XYNTHA (250 KIT, 500 KIT, 1000 KIT, 2000 KIT) <i>antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)</i> | SP-M | S |
| XYNTHA SOLOFUSE | XYNTHA SOLOFUSE (250 KIT, 500 KIT, 1000 KIT, 2000 KIT, 3000 KIT) <i>antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)</i> | SP-M | S |
| ANTIHEMOPHILIC PRODUCTS - GENE THERAPY AGENTS | | | |
| BEQVEZ | BEQVEZ (4 1 ML SUSP THPK, 5 1 ML SUSP THPK, 6 1 ML SUSP THPK, 7 1 ML SUSP THPK) <i>fidanacogene elaparvovec-dzkt</i> | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------|-----------------------|------|-----------------------|
|------------|-----------------------|------|-----------------------|

| | | | |
|----------|---|------|-------|
| HEMGENIX | HEMGENIX (HEMGENI10 10 ML SUSP THPK, HEMGENI11 10 ML SUSP THPK, HEMGENI12 10 ML SUSP THPK, HEMGENI13 10 ML SUSP THPK, HEMGENI14 10 ML SUSP THPK, HEMGENI15 10 ML SUSP THPK, HEMGENI16 10 ML SUSP THPK, HEMGENI17 10 ML SUSP THPK, HEMGENI18 10 ML SUSP THPK, HEMGENI19 10 ML SUSP THPK, HEMGENI20 10 ML SUSP THPK, HEMGENI21 10 ML SUSP THPK, HEMGENI22 10 ML SUSP THPK, HEMGENI23 10 ML SUSP THPK, HEMGENI24 10 ML SUSP THPK, HEMGENI25 10 ML SUSP THPK, HEMGENI26 10 ML SUSP THPK, HEMGENI27 10 ML SUSP THPK, HEMGENI28 10 ML SUSP THPK, HEMGENI29 10 ML SUSP THPK, HEMGENI30 10 ML SUSP THPK, HEMGENI31 10 ML SUSP THPK, HEMGENI32 10 ML SUSP THPK, HEMGENI33 10 ML SUSP THPK, HEMGENI34 10 ML SUSP THPK, HEMGENI35 10 ML SUSP THPK, HEMGENI36 10 ML SUSP THPK, HEMGENI37 10 ML SUSP THPK, HEMGENI38 10 ML SUSP THPK, HEMGENI39 10 ML SUSP THPK, HEMGENI40 10 ML SUSP THPK, HEMGENI41 10 ML SUSP THPK, HEMGENI42 10 ML SUSP THPK, HEMGENI43 10 ML SUSP THPK, HEMGENI44 10 ML SUSP THPK, HEMGENI45 10 ML SUSP THPK, HEMGENI46 10 ML SUSP THPK, HEMGENI47 10 ML SUSP THPK, HEMGENI48 10 ML SUSP THPK) <i>etranacogene</i> <i>dezaparvovec-drlb</i> | SP-M | PA, S |
|----------|---|------|-------|

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| ROCTAVIAN | ROCTAVIAN 2000000000000000 VG/ML SUSPENSION <i>valoctocogene roxaparvovec-rvox</i> | SP-M | PA, S |
| ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES | | | |
| HEMLIBRA | HEMLIBRA (12 MG/0.4ML SOLUTION, 30 MG/ML SOLUTION, 60 MG/0.4ML SOLUTION, 105 MG/0.7ML SOLUTION, 150 MG/ML SOLUTION, 300 MG/2ML SOLUTION) <i>emicizumab-kxwh</i> | SP-M | S |
| PLATELET AGGREGATION INHIBITORS | | | |
| <i>dipyridamole</i> | <i>dipyridamole (25 mg tab, 50 mg tab, 75 mg tab)</i> | TIER 1 | |
| ANTI-VON WILLEBRAND FACTOR AGENTS | | | |
| CABLIVI | CABLIVI 11 MG KIT <i>caplacizumab-yhdp</i> | SP-P | S |
| PHOSPHODIESTERASE III INHIBITORS | | | |
| <i>cilostazol</i> | <i>cilostazol (50 mg tab, 100 mg tab)</i> | TIER 1 | |
| QUINAZOLINE AGENTS | | | |
| <i>anagrelide hcl</i> | <i>anagrelide hcl (0.5 mg cap, 1 mg cap)</i> | TIER 1 | |
| THIENOPYRIDINE DERIVATIVES | | | |
| <i>clopidogrel bisulfate</i> | <i>clopidogrel bisulfate (75 mg tab, 300 mg tab)</i> | TIER 1 | |
| <i>prasugrel hcl</i> | <i>prasugrel hcl (5 mg tab, 10 mg tab)</i> | TIER 1 | |
| DIRECT-ACTING P2Y12 INHIBITORS | | | |
| BRILINTA | BRILINTA (60 MG TAB, 90 MG TAB) <i>ticagrelor</i> | TIER 2 | |
| PLATELET AGGREGATION INHIBITOR COMBINATIONS | | | |
| <i>aspirin-dipyridamole er</i> | <i>aspirin-dipyridamole er 25- 200 mg cap er 12h</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|--|
| AGENTS FOR CONGENITAL THROMBOTIC THROMBOCYTOPENIC PURPURA | | | |
| ADZYNMA | ADZYNMA (500 KIT, 1500 KIT) <i>adamts13 recombinant-krhn</i> | SP-M | PA, S |
| HEMATORHEOLOGIC AGENTS | | | |
| <i>pentoxifylline er</i> | <i>pentoxifylline er 400 mg tab er</i> | TIER 1 | |
| PLASMA PROTEINS | | | |
| RYPLAZIM | RYPLAZIM 68.8 MG RECON SOLN <i>plasminogen, human-tvmh</i> | SP-M | PA, S |
| HUMAN PROTEIN C | | | |
| CEPROTIN | CEPROTIN (500 RECON SOLN, 1000 RECON SOLN) <i>protein c concentrate (human)</i> | SP-M | S |
| SPLEEN TYROSINE KINASE (SYK) INHIBITORS | | | |
| TAVALISSE | TAVALISSE (100 MG TAB, 150 MG TAB) <i>fostamatinib disodium</i> | SP-P | PA, QL (2 PER DAY(S)), S |
| C1 ESTERASE INHIBITORS | | | |
| BERINERT | BERINERT 500 UNIT KIT c1 esterase inhibitor (human) | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| CINRYZE | CINRYZE 500 UNIT RECON SOLN c1 esterase inhibitor (human) | SP-M | PA, S |
| HAEGARDA | HAEGARDA (2000 RECON SOLN, 3000 RECON SOLN) c1 esterase inhibitor (human) | SP-P | PA, S |
| RUCONEST | RUCONEST 2100 UNIT RECON SOLN c1 esterase inhibitor (recombinant) | SP-M | PA, S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|---|-------|--|
| COMPLEMENT C1 INHIBITORS | | | |
| ENJAYMO | ENJAYMO 1100 MG/22ML SOLUTION <i>sutimlimab-jome</i> | SP-M | PA, S |
| COMPLEMENT C3 INHIBITORS | | | |
| EMPAVELI | EMPAVELI 1080 MG/20ML SOLUTION <i>pegcetacoplan</i> | SP-M | PA, S |
| COMPLEMENT C5 INHIBITORS | | | |
| PIASKY | PIASKY 340 MG/2ML SOLUTION <i>crovalimab-akkz</i> | SP-M | PA, QL (3 VIALS PER 28 DAY(S)), S |
| SOLIRIS | SOLIRIS 300 MG/30ML SOLUTION <i>eculizumab</i> | SP-M | PA, S |
| ULTOMIRIS | ULTOMIRIS (300 MG/30ML SOLUTION, 300 MG/3ML SOLUTION, 1100 MG/11ML SOLUTION) <i>ravulizumab-cwvz</i> | SP-M | PA, S |
| VEOPOZ | VEOPOZ 400 MG/2ML SOLUTION <i>pezelimab-bbfg</i> | SP-M | PA, S |
| COMPLEMENT C5A RECEPTOR INHIBITORS | | | |
| TAVNEOS | TAVNEOS 10 MG CAP <i>avacopan</i> | SP-NP | PA, QL (180 PER 30 DAY(S)), S |
| COMPLEMENT FACTOR D INHIBITORS | | | |
| VOYDEYA | VOYDEYA (50 & 100 MG TAB THPK, 100 MG TAB) <i>danicopan</i> | SP-NP | PA, QL (180 TAB PER 30 DAY(S)), S |
| BRADYKININ B2 RECEPTOR ANTAGONISTS | | | |
| <i>icatibant acetate</i> | <i>icatibant acetate 30 mg/3ml soln prsy</i> | SP-P | PA, QL (15 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>sajazir</i> | <i>sajazir 30 mg/3ml soln prsy</i> | SP-P | PA, QL (15 PER 30 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|------------------------------|
| PLASMA KALLIKREIN INHIBITORS | | | |
| KALBITOR | KALBITOR 10 MG/ML SOLUTION <i>ecallantide</i> | SP-M | PA, S |
| ORLADEYO | ORLADEYO (110 MG CAP, 150 MG CAP) <i>berotralstat hcl</i> | SP-P | PA, QL (30 PER 30 DAY(S)), S |
| PLASMA KALLIKREIN INHIBITORS - MONOCLONAL ANTIBODIES | | | |
| TAKHZYRO | TAKHZYRO (150 MG/ML SOLN PRSYR, 300 MG/2ML SOLN PRSYR, 300 MG/2ML SOLUTION) <i>lanadelumab-flyo</i> | SP-P | PA, QL (2 PER 28 DAY(S)), S |
| PYRUVATE KINASE ACTIVATORS | | | |
| PYRUKYND | PYRUKYND (5 MG TAB, 20 MG TAB, 50 MG TAB) <i>mitapivat sulfate</i> | SP-NP | PA, QL (2 PER 1 DAY(S)), S |
| PYRUKYND TAPER PACK | PYRUKYND TAPER PACK (PACK 7 20 MG 7 5 MG TAB THPK, PACK 7 50 MG 7 20 MG TAB THPK) <i>mitapivat sulfate</i> | SP-NP | PA, QL (1 PER 2 WEEK(S)), S |
| PYRUKYND TAPER PACK | PYRUKYND TAPER PACK 5 MG TAB THPK <i>mitapivat sulfate</i> | SP-NP | PA, QL (1 PER 1 WEEK(S)), S |
| OPHTHALMIC AGENTS | | | |
| OPHTHALMIC ANTIBIOTICS | | | |
| AZASITE | AZASITE 1 % SOLUTION <i>azithromycin (ophth)</i> | TIER 3 | |
| BACITRACIN | BACITRACIN 500 UNIT/GM OINTMENT <i>bacitracin (ophthalmic)</i> | TIER 1 | |
| BESIVANCE | BESIVANCE 0.6 % SUSPENSION <i>besifloxacin hcl</i> | TIER 3 | |
| CILOXAN | CILOXAN 0.3 % OINTMENT <i>ciprofloxacin hcl (ophth)</i> | TIER 3 | |
| <i>ciprofloxacin hcl</i> | <i>ciprofloxacin hcl 0.3 % solution</i> | TIER 1 | |
| <i>erythromycin</i> | <i>erythromycin 5 mg/gm ointment</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| <i>gatifloxacin</i> | <i>gatifloxacin 0.5 % solution</i> | TIER 1 | |
| GENTAK | GENTAK 0.3 % OINTMENT <i>gentamicin sulfate (ophth)</i> | TIER 1 | |
| <i>gentamicin sulfate</i> | <i>gentamicin sulfate 0.3 % solution</i> | TIER 1 | |
| KLARITY-A | KLARITY-A 1 % SOLUTION <i>azithromycin (ophth)</i> | TIER 3 | |
| <i>levofloxacin</i> | <i>levofloxacin 0.5 % solution</i> | TIER 1 | |
| <i>levofloxacin</i> | <i>levofloxacin 1.5 % solution</i> | TIER 1 | |
| MOXIFLOXACIN HCL (2X DAY) | MOXIFLOXACIN HCL (2X DAY) 0.5 % SOLUTION <i>moxifloxacin hcl (ophth)</i> | TIER 1 | |
| <i>moxifloxacin hcl</i> | <i>moxifloxacin hcl 0.5 % solution</i> | TIER 1 | |
| <i>ofloxacin</i> | <i>ofloxacin 0.3 % solution</i> | TIER 1 | |
| <i>tobramycin</i> | <i>tobramycin 0.3 % solution</i> | TIER 1 | |
| TOBREX | TOBREX 0.3 % OINTMENT <i>tobramycin (ophth)</i> | TIER 3 | |
| OPHTHALMIC SULFONAMIDES | | | |
| <i>sulfacetamide sodium</i> | <i>sulfacetamide sodium (10 % ointment, 10 % solution)</i> | TIER 1 | |
| OPHTHALMIC ANTIVIRALS | | | |
| TRIFLURIDINE | TRIFLURIDINE 1 % SOLUTION <i>trifluridine</i> | TIER 1 | |
| OPHTHALMIC ANTIFUNGAL | | | |
| NATACYN | NATACYN 5 % SUSPENSION <i>natamycin</i> | TIER 3 | |
| OPHTHALMIC ANTISEPTICS | | | |
| BETADINE OPHTHALMIC PREP | BETADINE OPHTHALMIC PREP 5 % SOLUTION <i>povidone-iodine (ophth)</i> | TIER 3 | |
| POVIDONE-IODINE | POVIDONE-IODINE 5 % SOLUTION <i>povidone-iodine (ophth)</i> | TIER 3 | |
| OPHTHALMIC ANTI-INFECTIVE COMBINATIONS | | | |
| <i>ak-poly-bac</i> | <i>ak-poly-bac 500-10000 unit/gm ointment</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|-----------------------|
| <i>bacitracin-polymyxin b</i> | <i>bacitracin-polymyxin b 500-10000 unit/gm ointment</i> | TIER 1 | |
| <i>neo-polycin</i> | <i>neo-polycin 3.5-400-10000 ointment</i> | TIER 1 | |
| <i>neomycin-bacitracin zn-polymyx</i> | <i>neomycin-bacitracin zn-polymyx (3.5-400-10000ointment, 5-400-10000ointment)</i> | TIER 1 | |
| NEOMYCIN-POLYMYXIN-GRAMICIDIN | NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 SOLUTION <i>neomycin-polymyxin-gramicidin</i> | TIER 1 | |
| <i>polycin</i> | <i>polycin 500-10000 unit/gm ointment</i> | TIER 1 | |
| <i>polymyxin b-trimethoprim</i> | <i>polymyxin b-trimethoprim 10000-0.1 unit/ml-% solution</i> | TIER 1 | |
| ARTIFICIAL TEAR INSERTS | | | |
| LACRISERT | LACRISERT 5 MG INSERT <i>artificial tear insert</i> | TIER 3 | |
| BETA-BLOCKERS - OPHTHALMIC | | | |
| <i>betaxolol hcl</i> | <i>betaxolol hcl 0.5 % solution</i> | TIER 1 | |
| BETIMOL | BETIMOL (0.25 % SOLUTION, 0.5 % SOLUTION) <i>timolol</i> | TIER 2 | |
| BETOPTIC-S | BETOPTIC-S 0.25 % SUSPENSION <i>betaxolol hcl (ophth)</i> | TIER 2 | |
| CARTEOLOL HCL | CARTEOLOL HCL 1 % SOLUTION <i>carteolol hcl (ophth)</i> | TIER 1 | |
| LEVOBUNOLOL HCL | LEVOBUNOLOL HCL 0.5 % SOLUTION <i>levobunolol hcl</i> | TIER 1 | |
| <i>timolol maleate</i> | <i>timolol maleate (0.25 % gel f soln, 0.25 % solution, 0.5 % (daily) solution, 0.5 % gel f soln, 0.5 % solution)</i> | TIER 1 | |
| <i>timolol maleate (once-daily)</i> | <i>timolol maleate (once-daily) 0.5 % solution</i> | TIER 1 | |
| <i>timolol maleate ocudose</i> | <i>timolol maleate ocudose 0.5 % solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| <i>timolol maleate pf</i> | <i>timolol maleate pf (pf 0.25 % solution, pf 0.5 % solution)</i> | TIER 1 | |
| BETA-BLOCKERS - OPHTHALMIC COMBINATIONS | | | |
| <i>brimonidine tartrate-timolol</i> | <i>brimonidine tartrate-timolol 0.2-0.5 % solution</i> | TIER 1 | |
| <i>dorzolamide hcl-timolol mal</i> | <i>dorzolamide hcl-timolol mal 22.3-6.8 mg/ml solution</i> | TIER 1 | |
| <i>dorzolamide hcl-timolol mal pf</i> | <i>dorzolamide hcl-timolol mal pf 2-0.5 % solution</i> | TIER 1 | |
| OPHTHALMIC STEROIDS | | | |
| ALREX | ALREX 0.2 % SUSPENSION <i>loteprednol etabonate</i> | TIER 3 | PA, GA |
| DEXAMETHASONE SODIUM PHOSPHATE | DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION <i>dexamethasone sodium phosphate (ophth)</i> | TIER 1 | |
| <i>difluprednate</i> | <i>difluprednate 0.05 % emulsion</i> | TIER 1 | |
| DUREZOL | DUREZOL 0.05 % EMULSION <i>difluprednate</i> | TIER 3 | GA |
| FLAREX | FLAREX 0.1 % SUSPENSION <i>fluorometholone acetate</i> | TIER 3 | |
| <i>fluorometholone</i> | <i>fluorometholone 0.1 % suspension</i> | TIER 1 | |
| FML | FML 0.1 % OINTMENT <i>fluorometholone (ophth)</i> | TIER 3 | |
| ILUVIEN | ILUVIEN 0.19 MG IMPLANT <i>fluocinolone acetonide (ophth)</i> | SP-M | S |
| LOTEMAX | LOTEMAX 0.5 % OINTMENT <i>loteprednol etabonate</i> | TIER 3 | |
| LOTEMAX SM | LOTEMAX SM 0.38 % GEL <i>loteprednol etabonate</i> | TIER 3 | |
| <i>loteprednol etabonate</i> | <i>loteprednol etabonate (0.5 % gel, 0.5 % suspension)</i> | TIER 1 | |
| <i>loteprednol etabonate</i> | <i>loteprednol etabonate 0.2 % suspension</i> | TIER 3 | PA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|---|--------|-----------------------|
| MAXIDEX | MAXIDEX 0.1 % SUSPENSION <i>dexamethasone (ophth)</i> | TIER 3 | |
| OZURDEX | OZURDEX 0.7 MG IMPLANT <i>dexamethasone (ophth)</i> | SP-M | S |
| PRED MILD | PRED MILD 0.12 % SUSPENSION <i>prednisolone acetate (ophth)</i> | TIER 3 | |
| <i>prednisolone acetate</i> | <i>prednisolone acetate 1 % suspension</i> | TIER 1 | |
| PREDNISOLONE SODIUM PHOSPHATE | PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION <i>prednisolone sodium phosphate (ophth)</i> | TIER 1 | |
| RETISERT | RETISERT 0.59 MG IMPLANT <i>fluocinolone acetonide (ophth)</i> | SP-M | S |
| XIPERE | XIPERE 40 MG/ML SUSPENSION <i>triamcinolone acetonide (ophth)</i> | SP-M | S |
| YUTIQ | YUTIQ 0.18 MG IMPLANT <i>fluocinolone acetonide (ophth)</i> | SP-M | S |
| OPHTHALMIC STEROID COMBINATIONS | | | |
| <i>bacitra-neomycin-polymyxin-hc</i> | <i>bacitra-neomycin-polymyxin-hc 1 % ointment</i> | TIER 1 | |
| BLEPHAMIDE | BLEPHAMIDE 10-0.2 % SUSPENSION <i>sulfacetamide sod-prednisolone</i> | TIER 3 | |
| BLEPHAMIDE S.O.P. | BLEPHAMIDE S.O.P. 10-0.2 % OINTMENT <i>sulfacetamide sod-prednisolone</i> | TIER 3 | |
| <i>neo-polycin hc</i> | <i>neo-polycin hc 1 % ointment</i> | TIER 1 | |
| <i>neomycin-polymyxin-dexameth</i> | <i>neomycin-polymyxin-dexameth (ointment, suspension)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------|---|--------|-----------------------|
| NEOMYCIN-POLYMYXIN-HC | NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION <i>neomycin-polymyxin-hc (ophth)</i> | TIER 1 | |
| PRED-G | PRED-G 0.3-1 % SUSPENSION <i>gentamicin-prednisolone acetate</i> | TIER 3 | |
| PRED-G S.O.P. | PRED-G S.O.P. 0.3-0.6 % OINTMENT <i>gentamicin-prednisolone acetate</i> | TIER 3 | |
| SULFACETAMIDE-PREDNISOLONE | SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION <i>sulfacetamide sod-prednisolone</i> | TIER 1 | |
| TOBRADEX | TOBRADEX 0.3-0.1 % OINTMENT <i>tobramycin-dexamethasone</i> | TIER 3 | |
| <i>tobramycin-dexamethasone</i> | <i>tobramycin-dexamethasone 0.3-0.1 % suspension</i> | TIER 1 | |
| ZYLET | ZYLET 0.5-0.3 % SUSPENSION <i>loteprednol etabonate-tobramycin</i> | TIER 3 | |
| PROSTAGLANDINS - OPHTHALMIC | | | |
| <i>bimatoprost</i> | <i>bimatoprost 0.03 % solution</i> | TIER 1 | |
| DURYSTA | DURYSTA 10 MCG IMPLANT <i>bimatoprost</i> | SP-M | S |
| IDOSE TR | IDOSE TR 75 MCG IMPLANT <i>travoprost</i> | SP-M | S |
| <i>latanoprost</i> | <i>latanoprost 0.005 % solution</i> | TIER 1 | |
| LUMIGAN | LUMIGAN 0.01 % SOLUTION <i>bimatoprost</i> | TIER 2 | |
| <i>tafluprost (pf)</i> | <i>tafluprost (pf) 0.0015 % solution</i> | TIER 1 | |
| <i>travoprost (bak free)</i> | <i>travoprost (bak free) 0.004 % solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|--|
| OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS | | | |
| <i>apraclonidine hcl</i> | <i>apraclonidine hcl 0.5 % solution</i> | TIER 1 | |
| <i>brimonidine tartrate</i> | <i>brimonidine tartrate (0.15 % solution, 0.2 % solution)</i> | TIER 1 | |
| IOPIDINE | IOPIDINE 1 % SOLUTION <i>apraclonidine hcl</i> | TIER 3 | |
| OPHTHALMIC - MULTIPLE RECEPTOR ANGIOGENESIS INHIBITORS | | | |
| VABYSMO | VABYSMO (6 SOLN PRSYR, 6 SOLUTION) <i>faricimab-svoa</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS | | | |
| BEOVU | BEOVU (6 SOLN PRSYR, 6 SOLUTION) <i>brolocizumab-dbli</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| BYOOVIZ | BYOOVIZ 0.5 MG/0.05ML SOLUTION <i>ranibizumab-nuna</i> | SP-M | S |
| CIMERLI | CIMERLI (0.3 SOLUTION, 0.5 SOLUTION) <i>ranibizumab-eqrn</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| EYLEA | EYLEA (2 SOLN PRSYR, 2 SOLUTION) <i>aflibercept</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| EYLEA HD | EYLEA HD 8 MG/0.07ML SOLUTION <i>aflibercept</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| LUCENTIS | LUCENTIS (0.3 SOLN PRSYR, 0.3 SOLUTION, 0.5 SOLN PRSYR, 0.5 SOLUTION) <i>ranibizumab</i> | SP-M | S |
| PAVBLU | PAVBLU (2 SOLN PRSYR, 2 SOLUTION) <i>aflibercept-ayyh</i> | P&T | S |
| SUSVIMO (IMPLANT 1ST FILL) | SUSVIMO (IMPLANT 1ST FILL) 10 MG/0.1ML SOLUTION <i>ranibizumab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| SUSVIMO (IMPLANT REFILL) | SUSVIMO (IMPLANT REFILL) 10 MG/0.1ML SOLUTION <i>ranibizumab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|----------------------------|
| OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS | | | |
| VISUDYNE | VISUDYNE 15 MG RECON SOLN <i>verteporfin</i> | SP-M | S |
| OPHTHALMIC IMMUNOMODULATORS | | | |
| RESTASIS | RESTASIS 0.05 % EMULSION <i>cyclosporine (ophth)</i> | TIER 1 | |
| RESTASIS MULTIDOSE | RESTASIS MULTIDOSE 0.05 % EMULSION <i>cyclosporine (ophth)</i> | TIER 2 | |
| LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG | | | |
| XIIDRA | XIIDRA 5 % SOLUTION <i>lifitegrast</i> | TIER 2 | |
| OPHTHALMIC LOCAL ANESTHETICS | | | |
| AKTEN | AKTEN 3.5 % GEL <i>lidocaine hcl (ophth)</i> | TIER 3 | |
| <i>altacaine</i> | <i>altacaine 0.5 % solution</i> | TIER 1 | |
| <i>proparacaine hcl</i> | <i>proparacaine hcl 0.5 % solution</i> | TIER 1 | |
| <i>tetracaine hcl</i> | <i>tetracaine hcl 0.5 % solution</i> | TIER 1 | |
| OPHTHALMIC NERVE GROWTH FACTORS | | | |
| OXERVATE | OXERVATE 0.002 % SOLUTION <i>cenegermin-bkbj</i> | SP-P | PA, QL (8 PER LIFETIME), S |
| OPHTHALMIC ANTIALLERGIC | | | |
| ALOCRIIL | ALOCRIIL 2 % SOLUTION <i>nedocromil sodium (ophth)</i> | TIER 3 | |
| ALOMIDE | ALOMIDE 0.1 % SOLUTION <i>lodoxamide tromethamine</i> | TIER 3 | |
| <i>azelastine hcl</i> | <i>azelastine hcl 0.05 % solution</i> | TIER 1 | |
| <i>bepotastine besilate</i> | <i>bepotastine besilate 1.5 % solution</i> | TIER 1 | |
| <i>cromolyn sodium</i> | <i>cromolyn sodium 4 % solution</i> | TIER 1 | |
| <i>epinastine hcl</i> | <i>epinastine hcl 0.05 % solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|---|--------|-------------------------|
| OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS | | | |
| <i>brinzolamide</i> | <i>brinzolamide 1 % suspension</i> | TIER 1 | |
| <i>dorzolamide hcl</i> | <i>dorzolamide hcl 2 % solution</i> | TIER 1 | |
| OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS | | | |
| ACUVAIL | ACUVAIL 0.45 % SOLUTION <i>ketorolac tromethamine (ophth)</i> | TIER 3 | |
| <i>bromfenac sodium (once-daily)</i> | <i>bromfenac sodium (once-daily) 0.09 % solution</i> | TIER 1 | |
| <i>diclofenac sodium</i> | <i>diclofenac sodium 0.1 % solution</i> | TIER 1 | |
| FLURBIPROFEN SODIUM | FLURBIPROFEN SODIUM 0.03 % SOLUTION <i>flurbiprofen sodium</i> | TIER 1 | |
| <i>ketorolac tromethamine</i> | <i>ketorolac tromethamine (0.4 % solution, 0.5 % solution)</i> | TIER 1 | |
| OPHTHALMICS - CYSTINOSIS AGENTS | | | |
| CYSTADROPS | CYSTADROPS 0.37 % SOLUTION <i>cysteamine hcl</i> | SP-P | QL (4 PER 28 DAY(S)), S |
| CYSTARAN | CYSTARAN 0.44 % SOLUTION <i>cysteamine hcl</i> | SP-P | QL (4 PER 28 DAY(S)), S |
| OTIC AGENTS | | | |
| OTIC ANTI-INFECTIVES | | | |
| CIPROFLOXACIN HCL | CIPROFLOXACIN HCL 0.2 % SOLUTION <i>ciprofloxacin hcl (otic)</i> | TIER 1 | |
| <i>ofloxacin</i> | <i>ofloxacin 0.3 % solution</i> | TIER 1 | |
| OTIC STEROIDS | | | |
| <i>flac</i> | <i>flac 0.01 % oil</i> | TIER 1 | |
| <i>fluocinolone acetonide</i> | <i>fluocinolone acetonide 0.01 % oil</i> | TIER 1 | |
| <i>hydrocortisone-acetic acid</i> | <i>hydrocortisone-acetic acid 1-2 % solution</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| OTIC AGENTS - MISCELLANEOUS | | | |
| <i>acetic acid</i> | <i>acetic acid 2 % solution</i> | TIER 1 | |
| OTIC STEROID-ANTI-INFECTIVE COMBINATIONS | | | |
| CIPRO HC | CIPRO HC 0.2-1 % SUSPENSION <i>ciprofloxacin- hydrocortisone</i> | TIER 3 | |
| <i>ciprofloxacin- dexamethasone</i> | <i>ciprofloxacin- dexamethasone 0.3-0.1 % suspension</i> | TIER 1 | |
| CORTISPORIN-TC | CORTISPORIN-TC 3.3-3- 10-0.5 MG/ML SUSPENSION <i>neomycin-colistin-hc- thonzonium</i> | TIER 3 | |
| <i>neomycin-polymyxin- hc</i> | <i>neomycin-polymyxin-hc (1 % solution, 3.5-10000-1 solution, 3.5-10000-1 suspension)</i> | TIER 1 | |
| MOUTH/THROAT/DENTAL AGENTS | | | |
| ANTI-INFECTIVES - THROAT | | | |
| <i>clotrimazole</i> | <i>clotrimazole 10 mg troche</i> | TIER 1 | |
| <i>nystatin</i> | <i>nystatin 100000 unit/ml suspension</i> | TIER 1 | |
| ANTISEPTICS - MOUTH/THROAT | | | |
| <i>chlorhexidine gluconate</i> | <i>chlorhexidine gluconate 0.12 % solution</i> | TIER 1 | |
| <i>paroex</i> | <i>paroex 0.12 % solution</i> | TIER 1 | |
| <i>periogard</i> | <i>periogard 0.12 % solution</i> | TIER 1 | |
| ANTISEPTIC COMBINATIONS - MOUTH/THROAT | | | |
| DEBACTEROL | DEBACTEROL 30-50 % SOLUTION <i>sulfuric acid-sulfonated phenolics</i> | TIER 3 | |
| STEROIDS - MOUTH/THROAT/DENTAL | | | |
| <i>kourzeq</i> | <i>kourzeq 0.1 % paste</i> | TIER 1 | |
| <i>oralone</i> | <i>oralone 0.1 % paste</i> | TIER 1 | |
| <i>triamcinolone acetonide</i> | <i>triamcinolone acetonide 0.1 % paste</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------|
| ANESTHETICS TOPICAL ORAL | | | |
| LIDOCAINE HCL | LIDOCAINE HCL 4 % SOLUTION <i>lidocaine hcl (mouth-throat)</i> | TIER 1 | |
| <i>lidocaine viscous hcl</i> | <i>lidocaine viscous hcl 2 % solution</i> | TIER 1 | |
| SALIVA STIMULANTS | | | |
| <i>cevimeline hcl</i> | <i>cevimeline hcl 30 mg cap</i> | TIER 1 | |
| <i>pilocarpine hcl</i> | <i>pilocarpine hcl (5 mg tab, 7.5 mg tab)</i> | TIER 1 | |
| ANORECTAL AND RELATED PRODUCTS | | | |
| RECTAL STEROIDS | | | |
| <i>anucort-hc</i> | <i>anucort-hc 25 mg suppos</i> | TIER 1 | |
| <i>hemmorex-hc</i> | <i>hemmorex-hc (25 mg suppos, 30 mg suppos)</i> | TIER 1 | |
| <i>hydrocortisone (perianal)</i> | <i>hydrocortisone (perianal) (1 % cream, 2.5 % cream)</i> | TIER 1 | |
| <i>hydrocortisone acetate</i> | <i>hydrocortisone acetate (25 mg suppos, 30 mg suppos)</i> | TIER 1 | |
| <i>procto-med hc</i> | <i>procto-med hc 2.5 % cream</i> | TIER 1 | |
| <i>procto-pak</i> | <i>procto-pak 1 % cream</i> | TIER 1 | |
| <i>proctocort</i> | <i>proctocort 1 % cream</i> | TIER 1 | |
| <i>proctosol hc</i> | <i>proctosol hc 2.5 % cream</i> | TIER 1 | |
| <i>proctozone-hc</i> | <i>proctozone-hc 2.5 % cream</i> | TIER 1 | |
| INTRARECTAL STEROIDS | | | |
| <i>budesonide</i> | <i>budesonide (2 mg foam, 2 mg/act foam)</i> | TIER 1 | |
| <i>hydrocortisone</i> | <i>hydrocortisone 100 mg/60ml enema</i> | TIER 1 | |
| NITRATE VASODILATING AGENTS | | | |
| <i>nitroglycerin</i> | <i>nitroglycerin 0.4 % ointment</i> | TIER 1 | QL (1 PER 30 DAY(S)) |
| RECTAL ANESTHETIC/STEROIDS | | | |
| <i>hydrocort-pramoxine (perianal)</i> | <i>hydrocort-pramoxine (perianal) 2.5-1 % cream</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|--|--------|-----------------------|
| HYDROCORTISONE ACE-PRAMOXINE | HYDROCORTISONE ACE-PRAMOXINE 1-1 % CREAM <i>hydrocortisone acetate w/ pramoxine</i> | TIER 1 | |
| <i>lidocaine-hydrocortisone ace</i> | <i>lidocaine-hydrocortisone ace (3-0.5 % kit, 3-2.5 % kit)</i> | TIER 1 | |
| PROCORT | PROCORT 1.85-1.15 % CREAM <i>hydrocortisone acetate w/ pramoxine</i> | TIER 3 | |
| PROCTOFOAM HC | PROCTOFOAM HC 1-1 % FOAM <i>hydrocortisone acetate w/ pramoxine</i> | TIER 3 | |
| DERMATOLOGICALS | | | |
| ACNE PRODUCTS | | | |
| <i>accutane</i> | <i>accutane (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>adapalene</i> | <i>adapalene 0.3 % gel</i> | TIER 1 | PA |
| <i>amnesteam</i> | <i>amnesteam (10 mg cap, 20 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>avita</i> | <i>avita (0.025 % cream, 0.025 % gel)</i> | TIER 1 | PA |
| <i>claravis</i> | <i>claravis (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>isotretinoin</i> | <i>isotretinoin (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>myorisan</i> | <i>myorisan (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |
| <i>tretinoin</i> | <i>tretinoin (0.01 % gel, 0.025 % cream, 0.025 % gel, 0.05 % cream, 0.05 % gel, 0.1 % cream)</i> | TIER 1 | PA |
| <i>tretinoin microsphere</i> | <i>tretinoin microsphere (0.04 % gel, 0.1 % gel)</i> | TIER 1 | PA |
| <i>tretinoin microsphere pump</i> | <i>tretinoin microsphere pump (pump 0.04 % gel, pump 0.1 % gel)</i> | TIER 1 | PA |
| <i>zenatane</i> | <i>zenatane (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|---------------------------|
| ACNE ANTIBIOTICS | | | |
| <i>clindacin</i> | <i>clindacin 1 % foam</i> | TIER 1 | PA |
| <i>clindacin etz</i> | <i>clindacin etz 1 % swab</i> | TIER 1 | |
| <i>clindacin-p</i> | <i>clindacin-p 1 % swab</i> | TIER 1 | |
| <i>clindamycin phosphate</i> | <i>clindamycin phosphate (1 % gel, 1 % lotion, 1 % swab)</i> | TIER 1 | |
| <i>clindamycin phosphate</i> | <i>clindamycin phosphate 1 % foam</i> | TIER 1 | PA |
| <i>clindamycin phosphate</i> | <i>clindamycin phosphate 1 % solution</i> | TIER 1 | QL (180 PER 30 DAY(S)) |
| <i>dapsone</i> | <i>dapsone (5 % gel, 7.5 % gel)</i> | TIER 1 | PA |
| ERY | ERY 2 % PAD <i>erythromycin (acne aid)</i> | TIER 1 | |
| <i>erythromycin</i> | <i>erythromycin (2 % gel, 2 % solution)</i> | TIER 1 | |
| <i>sulfacetamide sodium (acne)</i> | <i>sulfacetamide sodium (acne) 10 % lotion</i> | TIER 1 | |
| ACNE COMBINATIONS | | | |
| <i>benzoyl peroxide-erythromycin</i> | <i>benzoyl peroxide-erythromycin 5-3 % gel</i> | TIER 1 | |
| <i>clindamycin phos-benzoyl perox</i> | <i>clindamycin phos-benzoyl perox (1-5 % gel, 1.2-2.5 % gel, 1.2-5 % gel)</i> | TIER 1 | PA |
| <i>clindamycin-tretinoin</i> | <i>clindamycin-tretinoin 1.2-0.025 % gel</i> | TIER 1 | PA |
| <i>neuac</i> | <i>neuac 1.2-5 % gel</i> | TIER 1 | PA |
| <i>sulfacetamide sodium-sulfur</i> | <i>sulfacetamide sodium-sulfur 10-5 % lotion</i> | TIER 1 | |
| ROSACEA AGENTS | | | |
| <i>azelaic acid</i> | <i>azelaic acid 15 % gel</i> | TIER 1 | |
| <i>brimonidine tartrate</i> | <i>brimonidine tartrate 0.33 % gel</i> | TIER 1 | PA, QL (30 PER 30 DAY(S)) |
| <i>ivermectin</i> | <i>ivermectin 1 % cream</i> | TIER 1 | PA |
| <i>metronidazole</i> | <i>metronidazole (0.75 % cream, 1 % gel)</i> | TIER 1 | |
| <i>metronidazole</i> | <i>metronidazole (0.75 % gel, 0.75 % lotion)</i> | TIER 1 | |
| <i>rosadan</i> | <i>rosadan (0.75 % cream, 0.75 % gel)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|------------------------|
| ANTIBIOTICS - TOPICAL | | | |
| <i>gentamicin sulfate</i> | <i>gentamicin sulfate (0.1 % cream, 0.1 % ointment)</i> | TIER 1 | |
| <i>mupirocin</i> | <i>mupirocin 2 % ointment</i> | TIER 1 | |
| <i>mupirocin calcium</i> | <i>mupirocin calcium 2 % cream</i> | TIER 1 | QL (60 PER 30 DAY(S)) |
| ANTIFUNGALS - TOPICAL | | | |
| <i>ciclodan</i> | <i>ciclodan 8 % solution</i> | TIER 1 | |
| <i>ciclopirox</i> | <i>ciclopirox (0.77 % gel, 1 % shampoo, 8 % solution)</i> | TIER 1 | |
| <i>ciclopirox olamine</i> | <i>ciclopirox olamine (0.77 % cream, 0.77 % suspension)</i> | TIER 1 | |
| <i>naftifine hcl</i> | <i>naftifine hcl (1 % cream, 2 % cream)</i> | TIER 1 | |
| <i>nyamyc</i> | <i>nyamyc 100000 unit/gm powder</i> | TIER 1 | |
| <i>nystatin</i> | <i>nystatin (100000 cream, 100000 ointment, 100000 powder)</i> | TIER 1 | |
| <i>nystop</i> | <i>nystop 100000 unit/gm powder</i> | TIER 1 | |
| IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL | | | |
| <i>econazole nitrate</i> | <i>econazole nitrate 1 % cream</i> | TIER 1 | QL (170 PER 30 DAY(S)) |
| <i>ketoconazole</i> | <i>ketoconazole 2 % cream</i> | TIER 1 | QL (240 PER 30 DAY(S)) |
| <i>ketoconazole</i> | <i>ketoconazole 2 % foam</i> | TIER 1 | QL (200 PER 30 DAY(S)) |
| <i>ketoconazole</i> | <i>ketoconazole 2 % shampoo</i> | TIER 1 | |
| <i>ketodan</i> | <i>ketodan 2 % foam</i> | TIER 1 | QL (200 PER 30 DAY(S)) |
| <i>luliconazole</i> | <i>luliconazole 1 % cream</i> | TIER 1 | |
| <i>sulconazole nitrate</i> | <i>sulconazole nitrate (1 % cream, 1 % solution)</i> | TIER 1 | |
| ANTIFUNGALS - TOPICAL COMBINATIONS | | | |
| <i>clotrimazole-betamethasone</i> | <i>clotrimazole-betamethasone (% cream, % lotion)</i> | TIER 1 | |
| <i>miconazole-zinc oxide-petrolat</i> | <i>miconazole-zinc oxide-petrolat 0.25-15-81.35 % ointment</i> | TIER 1 | |
| <i>nystatin-triamcinolone</i> | <i>nystatin-triamcinolone (cream, ointment)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|---|--------|--|
| ANTI-INFLAMMATORY AGENTS - TOPICAL | | | |
| <i>diclofenac epolamine</i> | <i>diclofenac epolamine 1.3 % patch</i> | TIER 1 | PA, QL (60 PER 30 DAY(S)) |
| <i>diclofenac sodium</i> | <i>diclofenac sodium 1.5 % solution</i> | TIER 1 | QL (300 PER 30 DAY(S)) |
| <i>diclofenac sodium</i> | <i>diclofenac sodium 2 % solution</i> | TIER 1 | PA, QL (2 PER 30 DAY(S)) |
| ANTIPSORIATICS | | | |
| <i>calcipotriene</i> | <i>calcipotriene (0.005 % ointment, 0.005 % solution)</i> | TIER 1 | |
| <i>calcipotriene</i> | <i>calcipotriene 0.005 % cream</i> | TIER 1 | QL (120 PER 30 DAY(S)) |
| <i>calcitrene</i> | <i>calcitrene 0.005 % ointment</i> | TIER 1 | |
| <i>calcitriol</i> | <i>calcitriol 3 mcg/gm ointment</i> | TIER 1 | |
| <i>tazarotene</i> | <i>tazarotene 0.1 % cream</i> | TIER 1 | |
| ANTIPSORIATICS - SYSTEMIC | | | |
| <i>acitretin</i> | <i>acitretin (10 mg cap, 17.5 mg cap, 25 mg cap)</i> | TIER 1 | |
| COSENTYX (300 MG DOSE) | COSENTYX (300 MG DOSE) 150 MG/ML SOLN PRSYR <i>secukinumab</i> | SP-P | PA, QL (2 PER 28 DAYS), S |
| COSENTYX | COSENTYX 125 MG/5ML SOLUTION <i>secukinumab</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| COSENTYX | COSENTYX 75 MG/0.5ML SOLN PRSYR <i>secukinumab</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| COSENTYX SENSOREADY (300 MG) | COSENTYX SENSOREADY (300 MG) 150 MG/ML SOLN A-INJ <i>secukinumab</i> | SP-P | PA, QL (2 PER 28 DAYS), S |
| COSENTYX UNOREADY | COSENTYX UNOREADY 300 MG/2ML SOLN A-INJ <i>secukinumab</i> | SP-P | QL (1 PER 28 DAY(S)), S |
| ILUMYA | ILUMYA 100 MG/ML SOLN PRSYR <i>tildrakizumab-asmn</i> | SP-M | QL (1 PER 84 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization) |
| <i>methoxsalen rapid</i> | <i>methoxsalen rapid 10 mg cap</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|-------|---|
| SKYRIZI (150 MG DOSE) | SKYRIZI (150 MG DOSE) 75 MG/0.83ML PEF SY KT <i>risankizumab-rzaa</i> | SP-P | PA, QL (2 PER 84 DAY(S)), S |
| SKYRIZI | SKYRIZI 150 MG/ML SOLN PRSYR <i>risankizumab-rzaa</i> | SP-P | PA, QL (1 PER 84 DAY(S)), S |
| SKYRIZI PEN | SKYRIZI PEN 150 MG/ML SOLN A-INJ <i>risankizumab-rzaa</i> | SP-P | PA, QL (1 PER 84 DAY(S)), S |
| SPEVIGO | SPEVIGO 150 MG/ML SOLN PRSYR <i>spesolimab-sbzo</i> | SP-NP | PA, QL (2 SYR PER 28 DAY(S)), S |
| SPEVIGO | SPEVIGO 450 MG/7.5ML SOLUTION <i>spesolimab-sbzo</i> | SP-M | PA, S |
| STELARA | STELARA (45 MG/0.5ML SOLN PRSYR, 45 MG/0.5ML SOLUTION, 90 MG/ML SOLN PRSYR) <i>ustekinumab</i> | SP-P | PA, S, QLV (Quantity Limit Varies), PA-QL (for Crohn's Disease) |
| TREMFYA | TREMFYA (100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR) <i>guselkumab</i> | SP-P | PA, QL (1 PER 56 DAY(S)), S |
| TREMFYA | TREMFYA 200 MG/20ML SOLUTION <i>guselkumab</i> | SP-M | PA, S |
| TREMFYA | TREMFYA 200 MG/2ML SOLN A-INJ <i>guselkumab</i> | SP-P | PA, QL (1 PEN PER 28 DAY(S)), S |
| TREMFYA | TREMFYA 200 MG/2ML SOLN PRSYR <i>guselkumab</i> | SP-P | PA, QL (1 SYR PER 28 DAY(S)), S |
| ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES | | | |
| DUPIXENT | DUPIXENT (100 MG/0.67ML SOLN PRSYR, 200 MG/1.14ML SOLN A- INJ, 200 MG/1.14ML SOLN PRSYR, 300 MG/2ML SOLN A-INJ, 300 MG/2ML SOLN PRSYR) <i>dupilumab</i> | SP-P | PA, QL (2 PER 28 DAY(S)), S |
| EBGLYSS | EBGLYSS 250 MG/2ML SOLN A-INJ <i>lebrikizumab-lbkz</i> | P&T | QL (1 PEN PER 28 DAY(S)), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|---|
| ANTISEBORRHEIC PRODUCTS | | | |
| <i>selenium sulfide</i> | <i>selenium sulfide 2.5 % lotion</i> | TIER 1 | |
| ANTIVIRALS - TOPICAL | | | |
| <i>acyclovir</i> | <i>acyclovir (5 % cream, 5 % ointment)</i> | TIER 1 | |
| ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL | | | |
| VALCHLOR | VALCHLOR 0.016 % GEL <i>mechlorethamine hcl (topical)</i> | SP-P | QL (4 PER 1 DAY), S |
| ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL | | | |
| FLUOROPLEX | FLUOROPLEX 1 % CREAM <i>fluorouracil (topical)</i> | TIER 3 | PA |
| <i>fluorouracil</i> | <i>fluorouracil (2 % solution, 5 % cream, 5 % solution)</i> | TIER 1 | |
| <i>fluorouracil</i> | <i>fluorouracil 0.5 % cream</i> | TIER 1 | PA |
| ANTINEOPLASTIC RETINOIDS - TOPICAL | | | |
| PANRETIN | PANRETIN 0.1 % GEL <i>alitretinoin</i> | TIER 3 | |
| TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS | | | |
| <i>bexarotene</i> | <i>bexarotene 1 % gel</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| TARGRETIN | TARGRETIN 1 % GEL <i>bexarotene (topical)</i> | SP-NP | S, GA |
| BURN PRODUCTS | | | |
| <i>mafenide acetate</i> | <i>mafenide acetate 5 % packet</i> | TIER 1 | |
| <i>silver sulfadiazine</i> | <i>silver sulfadiazine 1 % cream</i> | TIER 1 | |
| <i>ssd</i> | <i>ssd 1 % cream</i> | TIER 1 | |
| SULFAMYLON | SULFAMYLON 85 MG/GM CREAM <i>mafenide acetate</i> | TIER 3 | |
| CORTICOSTEROIDS - TOPICAL | | | |
| <i>ala-cort</i> | <i>ala-cort 2.5 % cream</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|--|--------|-----------------------|
| <i>alclometasone dipropionate</i> | <i>alclometasone dipropionate (0.05 % cream, 0.05 % ointment)</i> | TIER 1 | |
| <i>amcinonide</i> | <i>amcinonide (0.1 % cream, 0.1 % lotion, 0.1 % ointment)</i> | TIER 1 | |
| <i>beser</i> | <i>beser 0.05 % lotion</i> | TIER 1 | |
| <i>betamethasone dipropionate</i> | <i>betamethasone dipropionate (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i> | TIER 1 | |
| <i>betamethasone dipropionate aug</i> | <i>betamethasone dipropionate aug (0.05 % cream, 0.05 % gel, 0.05 % lotion, 0.05 % ointment)</i> | TIER 1 | |
| <i>betamethasone valerate</i> | <i>betamethasone valerate (0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.12 % foam)</i> | TIER 1 | |
| <i>clobetasol prop emollient base</i> | <i>clobetasol prop emollient base 0.05 % cream</i> | TIER 1 | |
| <i>clobetasol propionate</i> | <i>clobetasol propionate (0.05 % cream, 0.05 % foam, 0.05 % gel, 0.05 % liquid, 0.05 % lotion, 0.05 % ointment, 0.05 % shampoo, 0.05 % solution)</i> | TIER 1 | |
| <i>clobetasol propionate e</i> | <i>clobetasol propionate e 0.05 % cream</i> | TIER 1 | |
| <i>clobetasol propionate emulsion</i> | <i>clobetasol propionate emulsion 0.05 % foam</i> | TIER 1 | |
| <i>clocortolone pivalate</i> | <i>clocortolone pivalate 0.1 % cream</i> | TIER 1 | QL (90 PER 30 DAY(S)) |
| <i>clodan</i> | <i>clodan 0.05 % shampoo</i> | TIER 1 | |
| <i>desonide</i> | <i>desonide (0.05 % cream, 0.05 % lotion, 0.05 % ointment)</i> | TIER 1 | |
| <i>desoximetasone</i> | <i>desoximetasone (0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.25 % cream, 0.25 % liquid, 0.25 % ointment)</i> | TIER 1 | |
| <i>fluocinolone acetonide</i> | <i>fluocinolone acetonide (0.01 % cream, 0.01 % solution, 0.025 % cream, 0.025 % ointment)</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|---|--------|------------------------|
| <i>fluocinolone acetonide body</i> | <i>fluocinolone acetonide body 0.01 % oil</i> | TIER 1 | |
| <i>fluocinolone acetonide scalp</i> | <i>fluocinolone acetonide scalp 0.01 % oil</i> | TIER 1 | |
| <i>fluocinonide</i> | <i>fluocinonide (0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution)</i> | TIER 1 | |
| <i>fluocinonide</i> | <i>fluocinonide 0.1 % cream</i> | TIER 1 | QL (120 PER 30 DAY(S)) |
| <i>fluocinonide emulsified base</i> | <i>fluocinonide emulsified base 0.05 % cream</i> | TIER 1 | |
| <i>flurandrenolide</i> | <i>flurandrenolide 0.05 % cream</i> | TIER 1 | |
| <i>flurandrenolide</i> | <i>flurandrenolide 0.05 % lotion</i> | TIER 1 | QL (120 PER 30 DAY(S)) |
| <i>fluticasone propionate</i> | <i>fluticasone propionate (0.005 % ointment, 0.05 % cream, 0.05 % lotion)</i> | TIER 1 | |
| <i>halobetasol propionate</i> | <i>halobetasol propionate (0.05 % cream, 0.05 % ointment)</i> | TIER 1 | |
| <i>hydrocortisone</i> | <i>hydrocortisone (2.5 % cream, 2.5 % lotion, 2.5 % ointment)</i> | TIER 1 | |
| <i>hydrocortisone butyr lipo base</i> | <i>hydrocortisone butyr lipo base 0.1 % cream</i> | TIER 1 | QL (60 PER 30 DAY(S)) |
| HYDROCORTISONE BUTYRATE | HYDROCORTISONE BUTYRATE (0.1 % CREAM, 0.1 % LOTION, 0.1 % OINTMENT, 0.1 % SOLUTION) <i>hydrocortisone butyrate</i> | TIER 1 | |
| <i>hydrocortisone valerate</i> | <i>hydrocortisone valerate (0.2 % cream, 0.2 % ointment)</i> | TIER 1 | |
| <i>mometasone furoate</i> | <i>mometasone furoate (0.1 % cream, 0.1 % ointment, 0.1 % solution)</i> | TIER 1 | |
| <i>nolix</i> | <i>nolix 0.05 % cream</i> | TIER 1 | |
| <i>nolix</i> | <i>nolix 0.05 % lotion</i> | TIER 1 | QL (120 PER 30 DAY(S)) |
| NUCORT | NUCORT 2 % LOTION <i>hydrocortisone acetate (topical)</i> | TIER 3 | |
| PREDNICARBATE | PREDNICARBATE (0.1 % CREAM, 0.1 % OINTMENT) <i>prednicarbate</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|------------------------|
| <i>tovet</i> | <i>tovet 0.05 % foam</i> | TIER 1 | |
| <i>triamcinolone acetonide</i> | <i>triamcinolone acetonide (0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment)</i> | TIER 1 | |
| <i>triamcinolone acetonide</i> | <i>triamcinolone acetonide 0.147 mg/gm aero soln</i> | TIER 1 | QL (4.5 PER 1 DAY(S)) |
| <i>triderm</i> | <i>triderm (0.1 % cream, 0.5 % cream)</i> | TIER 1 | |
| STEROID-LOCAL ANESTHETIC COMBINATIONS | | | |
| EPIFOAM | EPIFOAM 1-1 % FOAM <i>pramoxine-hc</i> | TIER 3 | |
| HYDROCORTISONE ACE-PRAMOXINE | HYDROCORTISONE ACE-PRAMOXINE 2.5-1 % CREAM <i>pramoxine-hc</i> | TIER 1 | |
| PRAMOSONE | PRAMOSONE (1-1 % CREAM, 1-1 % LOTION, 1-2.5 % LOTION) <i>pramoxine-hc</i> | TIER 1 | |
| TOPICAL STEROID COMBINATIONS | | | |
| <i>calcipotriene-betameth diprop</i> | <i>calcipotriene-betameth diprop 0.005-0.064 % ointment</i> | TIER 1 | QL (120 PER 30 DAY(S)) |
| <i>calcipotriene-betameth diprop</i> | <i>calcipotriene-betameth diprop 0.005-0.064 % suspension</i> | TIER 1 | |
| ENZYMES - TOPICAL | | | |
| SANTYL | SANTYL 250 UNIT/GM OINTMENT <i>collagenase</i> | TIER 3 | |
| KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS | | | |
| <i>podofilox</i> | <i>podofilox 0.5 % solution</i> | TIER 1 | |
| AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS | | | |
| VEREGEN | VEREGEN 15 % OINTMENT <i>sinecatechins</i> | TIER 3 | PA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|--------------------------------|
| IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL | | | |
| <i>imiquimod</i> | <i>imiquimod 3.75 % cream</i> | TIER 1 | PA |
| <i>imiquimod</i> | <i>imiquimod 5 % cream</i> | TIER 1 | |
| <i>imiquimod pump</i> | <i>imiquimod pump 3.75 % cream</i> | TIER 1 | PA |
| MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL | | | |
| <i>pimecrolimus</i> | <i>pimecrolimus 1 % cream</i> | TIER 1 | QL (100 PER 30 DAY(S)) |
| <i>tacrolimus</i> | <i>tacrolimus (0.03 % ointment, 0.1 % ointment)</i> | TIER 1 | |
| INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC | | | |
| NEMLUVIO | NEMLUVIO 30 MG A-INJ <i>nemolizumab-ilto</i> | P&T | QL (1 PEN PER 28 DAY(S)), S |
| LOCAL ANESTHETICS - TOPICAL | | | |
| <i>7t lido</i> | <i>7t lido 2 % gel</i> | TIER 1 | |
| <i>glydo</i> | <i>glydo 2 % prsyr</i> | TIER 1 | |
| <i>lidocaine</i> | <i>lidocaine 5 % ointment</i> | TIER 1 | |
| <i>lidocaine</i> | <i>lidocaine 5 % patch</i> | TIER 1 | QL (3 PER DAY) |
| <i>lidocaine hcl</i> | <i>lidocaine hcl 4 % solution</i> | TIER 1 | |
| <i>lidocaine hcl urethral/mucosal</i> | <i>lidocaine hcl urethral/mucosal (2 % gel, 2 % prsyr)</i> | TIER 1 | |
| <i>lidocan</i> | <i>lidocan 5 % patch</i> | TIER 1 | QL (3 PER DAY) |
| <i>proxivol</i> | <i>proxivol 2 % gel</i> | TIER 1 | |
| <i>tridacaine ii</i> | <i>tridacaine ii 5 % patch</i> | TIER 1 | QL (3 PER DAY) |
| <i>tridacaine iii</i> | <i>tridacaine iii 5 % patch</i> | TIER 1 | QL (3 PER DAY) |
| TOPICAL ANESTHETIC COMBINATIONS | | | |
| <i>lidocaine-prilocaine</i> | <i>lidocaine-prilocaine 2.5-2.5 % cream</i> | TIER 1 | |
| GLABELLAR LINES (FROWN LINES) AGENTS | | | |
| DAXXIFY | DAXXIFY 100 UNIT RECON SOLN <i>daxibotulinumtoxin-a-lanm</i> | SP-M | PA, S |
| SCABICIDES & PEDICULICIDES | | | |
| CROTAN | CROTAN 10 % LOTION <i>crotamiton</i> | TIER 1 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|--------------------------------|
| IVERMECTIN | IVERMECTIN 0.5 % LOTION <i>ivermectin (pediculicide)</i> | TIER 1 | GA |
| LINDANE | LINDANE 1 % SHAMPOO <i>lindane</i> | TIER 1 | |
| <i>malathion</i> | <i>malathion 0.5 % lotion</i> | TIER 1 | |
| <i>permethrin</i> | <i>permethrin 5 % cream</i> | TIER 1 | |
| MELANOCORTIN RECEPTOR AGONISTS (UV PROTECTIVE) | | | |
| SCENESSE | SCENESSE 16 MG IMPLANT <i>afamelanotide acetate</i> | SP-M | PA, QL (1 PER 60 DAY(S)), S |
| WOUND TREATMENT - GENE THERAPY | | | |
| VYJUVEK | VYJUVEK 5000000000 PFU/2.5ML GEL <i>beremagene geperpavec- svdt</i> | SP-M | PA, QL (4 PER 28 DAY(S)), S |
| WOUND CARE - GROWTH FACTOR AGENTS | | | |
| REGRANEX | REGRANEX 0.01 % GEL <i>becaplermin</i> | TIER 3 | |
| TISSUE REPLACEMENTS | | | |
| STRATAGRAFT | STRATAGRAFT SHEET <i>allogeneic keratinocytes- fibroblasts in murine collagen-dsat</i> | SP-M | S |
| ANTIDOTES AND SPECIFIC ANTAGONISTS | | | |
| <i>deferoxamine mesylate</i> | <i>deferoxamine mesylate (2 gm recon soln, 500 mg recon soln)</i> | SP-M | S |
| DESFERAL | DESFERAL 500 MG RECON SOLN <i>deferoxamine mesylate</i> | SP-M | S, GA |
| VISTOGARD | VISTOGARD 10 GM PACKET <i>uridine triacetate (emergency treatment)</i> | SP-P | QL (4 PER 1 DAY(S)), S |
| ANTIDOTES - CHELATING AGENTS | | | |
| CHEMET | CHEMET 100 MG CAP <i>succimer</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------|--|--------|---|
| <i>deferasirox</i> | <i>deferasirox (90 mg packet, 90 mg tab, 125 mg tab sol, 180 mg packet, 180 mg tab, 250 mg tab sol, 360 mg packet, 360 mg tab, 500 mg tab sol)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| <i>deferasirox granules</i> | <i>deferasirox granules (granules 90 mg packet, granules 180 mg packet, granules 360 mg packet)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| <i>deferiprone</i> | <i>deferiprone (500 mg tab, 1000 mg tab)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| EXJADE | EXJADE (125 MG TAB SOL, 250 MG TAB SOL, 500 MG TAB SOL) <i>deferasirox</i> | SP-NP | S, GA |
| FERRIPROX | FERRIPROX (500 MG TAB, 1000 MG TAB) <i>deferiprone</i> | SP-NP | S, GA |
| FERRIPROX | FERRIPROX 100 MG/ML SOLUTION <i>deferiprone</i> | SP-P | S |
| FERRIPROX TWICE-A-DAY | FERRIPROX TWICE-A-DAY 1000 MG TAB <i>deferiprone</i> | SP-P | S |
| JADENU | JADENU (90 MG TAB, 180 MG TAB, 360 MG TAB) <i>deferasirox</i> | SP-NP | S, GA |
| JADENU SPRINKLE | JADENU SPRINKLE (90 MG PACKET, 180 MG PACKET, 360 MG PACKET) <i>deferasirox</i> | SP-NP | S, GA |
| OPIOID ANTAGONISTS | | | |
| KLOXXADO | KLOXXADO 8 MG/0.1ML LIQUID <i>naloxone hcl</i> | TIER 2 | |
| <i>naloxone hcl</i> | <i>naloxone hcl (0.4 mg/ml soln cart, 2 mg/2ml soln prsyr, 4 mg/0.1ml liquid)</i> | TIER 1 | |
| <i>naltrexone hcl</i> | <i>naltrexone hcl 50 mg tab</i> | TIER 1 | |
| OPVEE | OPVEE 2.7 MG/0.1ML SOLUTION <i>nalmefene hcl (antidote)</i> | TIER 3 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------|--|--------|---|
| REXTOVY | REXTOVY 4 MG/0.25ML LIQUID <i>naloxone hcl</i> | TIER 1 | |
| ZIMHI | ZIMHI 5 MG/0.5ML SOLN PRSYR <i>naloxone hcl</i> | TIER 2 | |
| DIAGNOSTIC PRODUCTS | | | |
| DIAGNOSTIC TESTS | | | |
| ACCU-CHEK AVIVA PLUS | ACCU-CHEK AVIVA PLUS STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ACCU-CHEK GUIDE TEST | ACCU-CHEK GUIDE TEST STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ACCU-CHEK SMARTVIEW | ACCU-CHEK SMARTVIEW STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ACCUTREND GLUCOSE | ACCUTREND GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ADVANCE INTUITION TEST | ADVANCE INTUITION TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ADVANCE MICRO-DRAW TEST | ADVANCE MICRO-DRAW TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ADVOCATE REDI-CODE | ADVOCATE REDI-CODE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ADVOCATE REDI-CODE+ TEST | ADVOCATE REDI-CODE+ TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ADVOCATE TEST | ADVOCATE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| AGAMATRIX AMP TEST | AGAMATRIX AMP TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| AGAMATRIX JAZZ TEST | AGAMATRIX JAZZ TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| AGAMATRIX KEYNOTE TEST | AGAMATRIX KEYNOTE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|---|--------|---|
| AGAMATRIX PRESTO TEST | AGAMATRIX PRESTO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE 3 TEST | ASSURE 3 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE 4 TEST | ASSURE 4 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE II | ASSURE II STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE II CHECK | ASSURE II CHECK STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE PLATINUM | ASSURE PLATINUM STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE PRISM MULTI TEST | ASSURE PRISM MULTI TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ASSURE PRO TEST | ASSURE PRO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| BIOSCANNER GLUCOSE TEST | BIOSCANNER GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| BIOTEL CARE TEST STRIPS | BIOTEL CARE TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| BLOOD GLUCOSE TEST | BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| BLOOD GLUCOSE TEST STRIPS 333 | BLOOD GLUCOSE TEST STRIPS 333 STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| BLULINK GLUCOSE TEST | BLULINK GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CAREONE BLOOD GLUCOSE TEST | CAREONE BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CARESENS N GLUCOSE TEST | CARESENS N GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CARETOUCH TEST | CARETOUCH TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|--|
| CHEMSTRIP K | CHEMSTRIP K STRIP <i>acetone (urine) test</i> | TIER 2 | |
| CLEVER CHEK AUTO-CODE TEST | CLEVER CHEK AUTO-CODE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHEK AUTO-CODE VOICE | CLEVER CHEK AUTO-CODE VOICE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHEK TEST | CLEVER CHEK TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHOICE AUTO-CODE TEST | CLEVER CHOICE AUTO-CODE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHOICE MICRO TEST | CLEVER CHOICE MICRO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHOICE NO CODING | CLEVER CHOICE NO CODING STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CLEVER CHOICE TALK SYSTEM | CLEVER CHOICE TALK SYSTEM STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CONTOUR NEXT TEST | CONTOUR NEXT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days), PV |
| CONTOUR PLUS TEST | CONTOUR PLUS TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days) |
| CONTOUR TEST | CONTOUR TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days), PV |
| COOL BLOOD GLUCOSE TEST STRIPS | COOL BLOOD GLUCOSE TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CVS ADVANCED GLUCOSE TEST | CVS ADVANCED GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CVS GLUCOSE METER TEST STRIPS | CVS GLUCOSE METER TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| CVS TRUE METRIX GLUCOSE TEST | CVS TRUE METRIX GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|--|--------|---|
| DIASTIX | DIASTIX STRIP <i>glucose urine test-(glucose oxidase)</i> | TIER 2 | |
| DIASTIX REAGENT | DIASTIX REAGENT STRIP <i>glucose urine test-(glucose oxidase)</i> | TIER 2 | |
| DIATHRIVE BLOOD GLUCOSE TEST | DIATHRIVE BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| DIATHRIVE GLUCOSE TEST | DIATHRIVE GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| DIATHRIVE+ GLUCOSE TEST | DIATHRIVE+ GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| DIATRUE PLUS TEST | DIATRUE PLUS TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| DUO-CARE TEST | DUO-CARE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY MAX BLOOD GLUCOSE TEST | EASY MAX BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY PLUS II GLUCOSE TEST | EASY PLUS II GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY STEP TEST | EASY STEP TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY TALK BLOOD GLUCOSE TEST | EASY TALK BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY TALK PLUS II TEST STRIPS | EASY TALK PLUS II TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY TOUCH HEALTHPRO GLUCOSE | EASY TOUCH HEALTHPRO GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY TOUCH TEST | EASY TOUCH TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASY TRAK BLOOD GLUCOSE TEST | EASY TRAK BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| EASY TRAK II GLUCOSE TEST | EASY TRAK II GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYGLUCO | EASYGLUCO STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYGLUCO PLUS | EASYGLUCO PLUS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYMAX 15 TEST | EASYMAX 15 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYMAX TEST | EASYMAX TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYPRO BLOOD GLUCOSE TEST | EASYPRO BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EASYPRO PLUS | EASYPRO PLUS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ELEMENT COMPACT TEST | ELEMENT COMPACT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ELEMENT TEST | ELEMENT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EMBRACE BLOOD GLUCOSE TEST | EMBRACE BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EMBRACE EVO BLOOD GLUCOSE TEST | EMBRACE EVO BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EMBRACE PRO GLUCOSE TEST | EMBRACE PRO GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EMBRACE TALK GLUCOSE TEST | EMBRACE TALK GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EMBRACE WAVE BLOOD GLUCOSE | EMBRACE WAVE BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EQ BLOOD GLUCOSE TEST | EQ BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVENCARE + BLOOD GLUCOSE TEST | EVENCARE + BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|---|--------|---|
| EVENCARE BLOOD GLUCOSE TEST | EVENCARE BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVENCARE G2 TEST | EVENCARE G2 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVENCARE G3 TEST | EVENCARE G3 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVENCARE MINI GLUCOSE TEST | EVENCARE MINI GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVENCARE PROVIEW GLUCOSE TEST | EVENCARE PROVIEW GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EVOLUTION AUTOCODE | EVOLUTION AUTOCODE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EXACTECH R-S-G TEST | EXACTECH R-S-G TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| EXACTECH TEST | EXACTECH TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FIFTY50 GLUCOSE TEST 2.0 | FIFTY50 GLUCOSE TEST 2.0 STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA 6 CONNECT | FORA 6 CONNECT STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA 6 CONNECT/GTEL TEST | FORA 6 CONNECT/GTEL TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA BLOOD GLUCOSE TEST | FORA BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA D15G BLOOD GLUCOSE TEST | FORA D15G BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA D20 BLOOD GLUCOSE TEST | FORA D20 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA D40/G31 BLOOD GLUCOSE | FORA D40/G31 BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA G20 BLOOD GLUCOSE TEST | FORA G20 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| FORA G30/PREM V10 GLUCOSE TEST | FORA G30/PREM V10 GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA GD20 TEST | FORA GD20 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA GD50 BLOOD GLUCOSE TEST | FORA GD50 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA GTEL BLOOD GLUCOSE TEST | FORA GTEL BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA GTEL BLOOD KETONE TEST | FORA GTEL BLOOD KETONE TEST STRIP <i>ketone blood test</i> | TIER 2 | |
| FORA TEST N'GO ADV-VOICE-6 CON | FORA TEST N'GO ADV-VOICE-6 CON STRIP <i>ketone blood test</i> | TIER 2 | |
| FORA TN'G ADVANCE PRO | FORA TN'G ADVANCE PRO STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA TN'G/TN'G VOICE | FORA TN'G/TN'G VOICE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA V10 BLOOD GLUCOSE TEST | FORA V10 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA V12 BLOOD GLUCOSE TEST | FORA V12 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA V20 BLOOD GLUCOSE TEST | FORA V20 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORA V30A BLOOD GLUCOSE TEST | FORA V30A BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORACARE GD40 TEST | FORACARE GD40 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORACARE PREMIUM V10 TEST | FORACARE PREMIUM V10 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORACARE TEST N GO TEST | FORACARE TEST N GO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FORTISCARE G1 TEST STRIP | FORTISCARE G1 TEST STRIP STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|--------|---|
| FORTISCARE TEST | FORTISCARE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FREESTYLE INSULINX TEST | FREESTYLE INSULINX TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FREESTYLE LITE TEST | FREESTYLE LITE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FREESTYLE PRECISION NEO TEST | FREESTYLE PRECISION NEO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| FREESTYLE TEST | FREESTYLE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GE100 BLOOD GLUCOSE TEST | GE100 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GENULTIMATE TEST | GENULTIMATE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GHT TEST | GHT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCO PERFECT 3 TEST | GLUCO PERFECT 3 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCARD 01 SENSOR PLUS | GLUCOCARD 01 SENSOR PLUS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCARD EXPRESSION TEST | GLUCOCARD EXPRESSION TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCARD SHINE TEST | GLUCOCARD SHINE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCARD VITAL TEST | GLUCOCARD VITAL TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCARD X-SENSOR | GLUCOCARD X-SENSOR STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOCOM TEST | GLUCOCOM TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| GLUCONAVII BLOOD GLUCOSE TEST | GLUCONAVII BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GLUCOSE METER TEST | GLUCOSE METER TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GNP EASY TOUCH GLUCOSE TEST | GNP EASY TOUCH GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GNP TRUE METRIX GLUCOSE STRIPS | GNP TRUE METRIX GLUCOSE STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GNP TRUETRACK SMART SYSTEM | GNP TRUETRACK SMART SYSTEM STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GNP TRUETRACK TEST STRIPS | GNP TRUETRACK TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GOJJI BLOOD GLUCOSE TEST | GOJJI BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GOJJI BLOOD KETONE TEST | GOJJI BLOOD KETONE TEST STRIP <i>ketone blood test</i> | TIER 2 | |
| GOJJI BLOOD TEST STRIP/LANCETS | GOJJI BLOOD TEST STRIP/LANCETS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| GOODSENSE BLOOD GLUCOSE | GOODSENSE BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| HARMONY BLOOD GLUCOSE TEST | HARMONY BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| HW EMBRACE PRO GLUCOSE TEST | HW EMBRACE PRO GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| HW EMBRACE TALK GLUCOSE TEST | HW EMBRACE TALK GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| IGLUCOSE TEST STRIPS | IGLUCOSE TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| IHEALTH BLOOD GLUCOSE TEST STR | IHEALTH BLOOD GLUCOSE TEST STR STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|---|--------|---|
| IN TOUCH BLOOD GLUCOSE TEST | IN TOUCH BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| INFINITY BLOOD GLUCOSE TEST | INFINITY BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| INFINITY VOICE | INFINITY VOICE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| KETONE TEST | KETONE TEST STRIP <i>acetone (urine) test</i> | TIER 2 | |
| KETOSTIX | KETOSTIX STRIP <i>acetone (urine) test</i> | TIER 2 | |
| KROGER BLOOD GLUCOSE TEST | KROGER BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| KROGER HEALTHPRO GLUCOSE TEST | KROGER HEALTHPRO GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| KROGER PREMIUM GLUCOSE TEST | KROGER PREMIUM GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| KROGER TEST | KROGER TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| LIBERTY NEXT GENERATION TEST | LIBERTY NEXT GENERATION TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| LIBERTY TEST | LIBERTY TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MEIJER BLOOD GLUCOSE TEST | MEIJER BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MEIJER ESSENTIAL GLUCOSE TEST | MEIJER ESSENTIAL GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MEIJER PREMIUM GLUCOSE TEST | MEIJER PREMIUM GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MEIJER TRUETEST TEST | MEIJER TRUETEST TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MEIJER TRUETRACK TEST | MEIJER TRUETRACK TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|---|--------|---|
| MICRODOT TEST | MICRODOT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MM BLULINK GLUCOSE TEST | MM BLULINK GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MM EASY TOUCH GLUCOSE | MM EASY TOUCH GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MYGLUCOHEALTH TEST | MYGLUCOHEALTH TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| NEUTEK 2TEK TEST | NEUTEK 2TEK TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| NOVA MAX GLUCOSE TEST | NOVA MAX GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| NOVA MAX PLUS KETONE TEST | NOVA MAX PLUS KETONE TEST STRIP <i>ketone blood test</i> | TIER 2 | |
| ON CALL EXPRESS BLOOD GLUCOSE | ON CALL EXPRESS BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ONE DROP TEST | ONE DROP TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ONETOUCH ULTRA | ONETOUCH ULTRA STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days), PV |
| ONETOUCH ULTRA BLUE TEST | ONETOUCH ULTRA BLUE TEST STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days), PV |
| ONETOUCH ULTRA TEST | ONETOUCH ULTRA TEST STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days), PV |
| ONETOUCH VERIO | ONETOUCH VERIO STRIP <i>glucose blood</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days), PV |
| OPTIUM TEST | OPTIUM TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| OPTIUMEZ TEST | OPTIUMEZ TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PHARMACIST CHOICE AUTOCODE | PHARMACIST CHOICE AUTOCODE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|------------------------------|--|--------|---|
| PHARMACIST CHOICE NO CODING | PHARMACIST CHOICE NO CODING STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PIP BLOOD GLUCOSE TEST STRIP | PIP BLOOD GLUCOSE TEST STRIP STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| POCKETCHEM EZ TEST | POCKETCHEM EZ TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION PCX | PRECISION PCX STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION PCX PLUS TEST | PRECISION PCX PLUS TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION POINT OF CARE TEST | PRECISION POINT OF CARE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION QID TEST | PRECISION QID TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION SOF-TACT TEST | PRECISION SOF-TACT TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION XTRA BLOOD GLUCOSE | PRECISION XTRA BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRECISION XTRA KETONE | PRECISION XTRA KETONE STRIP <i>ketone blood test</i> | TIER 2 | |
| PREMIUM BLOOD GLUCOSE TEST | PREMIUM BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRO VOICE V8/V9 GLUCOSE | PRO VOICE V8/V9 GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PRODIGY NO CODING BLOOD GLUC | PRODIGY NO CODING BLOOD GLUC STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PTS PANELS GLUCOSE TEST | PTS PANELS GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| PTS PANELS KETONE TEST | PTS PANELS KETONE TEST STRIP <i>ketone blood test</i> | TIER 2 | |
| PTS PANELSEGLU TEST | PTS PANELSEGLU TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| QUICKTEK TEST | QUICKTEK TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| QUINTET AC BLOOD GLUCOSE TEST | QUINTET AC BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| QUINTET BLOOD GLUCOSE TEST | QUINTET BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| REFUAH PLUS BLOOD GLUCOSE TEST | REFUAH PLUS BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION BLOOD GLUCOSE TEST | RELION BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION CONFIRM/MICRO TEST | RELION CONFIRM/MICRO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION GLUCOSE TEST STRIPS | RELION GLUCOSE TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION KETONE TEST | RELION KETONE TEST STRIP <i>acetone (urine) test</i> | TIER 2 | |
| RELION PREMIER TEST | RELION PREMIER TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION PRIME TEST | RELION PRIME TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION TRUE METRIX TEST STRIPS | RELION TRUE METRIX TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RELION ULTIMA TEST | RELION ULTIMA TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| REXALL BLOOD GLUCOSE TEST | REXALL BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RIGHTEST GS100 BLOOD GLUCOSE | RIGHTEST GS100 BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RIGHTEST GS300 BLOOD GLUCOSE | RIGHTEST GS300 BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RIGHTEST GS550 BLOOD GLUCOSE | RIGHTEST GS550 BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| RIGHTEST GT333 BLOOD GLUCOSE | RIGHTEST GT333 BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| RIGHTEST GT333 GLUCOSE TEST | RIGHTEST GT333 GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SMART SENSE PREMIUM TEST | SMART SENSE PREMIUM TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SMART SENSE VALUE TEST | SMART SENSE VALUE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SMARTEST BLOOD GLUCOSE TEST | SMARTEST BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SOLUS V2 TEST | SOLUS V2 TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SUPREME TEST | SUPREME TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SURE EDGE TEST | SURE EDGE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SURE-TEST EASYPLUS MINI TEST | SURE-TEST EASYPLUS MINI TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| SURECHEK BLOOD GLUCOSE TEST | SURECHEK BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TGT BLOOD GLUCOSE TEST | TGT BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TRUE FOCUS BLOOD GLUCOSE STRIP | TRUE FOCUS BLOOD GLUCOSE STRIP STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TRUE METRIX BLOOD GLUCOSE TEST | TRUE METRIX BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TRUE METRIX PRO BLOOD GLUCOSE | TRUE METRIX PRO BLOOD GLUCOSE STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TRUETEST TEST | TRUETEST TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| TRUETRACK TEST | TRUETRACK TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|---|
| ULTRATRAK PRO TEST | ULTRATRAK PRO TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| ULTRATRAK ULTIMATE TEST | ULTRATRAK ULTIMATE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| UNISTRIP1 GENERIC | UNISTRIP1 GENERIC STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| VERASENS BLOOD GLUCOSE TEST | VERASENS BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| VIVAGUARD INO TEST STRIPS | VIVAGUARD INO TEST STRIPS STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| VOCAL POINT BLOOD GLUCOSE TEST | VOCAL POINT BLOOD GLUCOSE TEST STRIP <i>glucose blood</i> | TIER 3 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days) |
| MULTIPLE URINE TESTS | | | |
| CHEMSTRIP 10 MD | CHEMSTRIP 10 MD STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP 10/SG | CHEMSTRIP 10/SG STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP 2 GP | CHEMSTRIP 2 GP STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP 5 OB | CHEMSTRIP 5 OB STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP 7 | CHEMSTRIP 7 STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP 9 | CHEMSTRIP 9 STRIP <i>multiple urine tests</i> | TIER 2 | |
| CHEMSTRIP UGK | CHEMSTRIP UGK STRIP <i>urine glucose-ketones test</i> | TIER 2 | |
| CVS KETONE CARE | CVS KETONE CARE STRIP <i>urine glucose-ketones test</i> | TIER 2 | |
| KETO-DIASTIX | KETO-DIASTIX STRIP <i>urine glucose-ketones test</i> | TIER 2 | |
| MULTISTIX 10 SG | MULTISTIX 10 SG STRIP <i>multiple urine tests</i> | TIER 2 | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|--------|-----------------------|
| DIAGNOSTIC DRUGS | | | |
| THYROGEN | THYROGEN 0.9 MG RECON SOLN <i>thyrotropin alfa</i> | SP-M | S |
| DIAGNOSTIC RADIOPHARMACEUTICALS - CARDIAC | | | |
| CARDIOGEN-82 | CARDIOGEN-82 RECON SOLN <i>rubidium rb 82 chloride</i> | SP-M | S |
| MEDICAL DEVICES AND SUPPLIES | | | |
| NEEDLES & SYRINGES | | | |
| INSULIN PEN NEEDLE | INSULIN PEN NEEDLE <i>insulin pen needle</i> | TIER 2 | PV |
| INSULIN SYRINGE | INSULIN SYRINGE <i>insulin syringe</i> | TIER 2 | PV |
| INSULIN SYRINGE NEEDLE | INSULIN SYRINGE NEEDLE <i>insulin syringe needle</i> | TIER 2 | PV |
| SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES | | | |
| AEROCHAMBER HOLDING CHAMBER | AEROCHAMBER HOLDING CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER MINI CHAMBER | AEROCHAMBER MINI CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER MV | AEROCHAMBER MV MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLS FLOVU MTHPIECE | AEROCHAMBER PLS FLOVU MTHPIECE DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLO-VU | AEROCHAMBER PLUS FLO-VU MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| AEROCHAMBER PLUS FLO-VU INTERM | AEROCHAMBER PLUS FLO-VU INTERM DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLO-VU LARGE | AEROCHAMBER PLUS FLO-VU LARGE (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLO-VU MEDIUM | AEROCHAMBER PLUS FLO-VU MEDIUM (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLO-VU SMALL | AEROCHAMBER PLUS FLO-VU SMALL (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLO-VU W/MASK | AEROCHAMBER PLUS FLO-VU W/MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER PLUS FLOW VU | AEROCHAMBER PLUS FLOW VU MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER W/FLOWSIGNAL | AEROCHAMBER W/FLOWSIGNAL MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER Z-STAT PLUS | AEROCHAMBER Z-STAT PLUS MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER Z-STAT PLUS CHAMBR | AEROCHAMBER Z-STAT PLUS CHAMBR MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER Z-STAT PLUS/LARGE | AEROCHAMBER Z-STAT PLUS/LARGE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROCHAMBER Z-STAT PLUS/MEDIUM | AEROCHAMBER Z-STAT PLUS/MEDIUM MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|-----------------------|
| AEROCHAMBER Z-STAT PLUS/SMALL | AEROCHAMBER Z-STAT PLUS/SMALL MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| AEROVENT PLUS | AEROVENT PLUS DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHE COMFORT CHAMBER/ADULT | BREATHE COMFORT CHAMBER/ADULT DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHE COMFORT CHAMBER/CHILD | BREATHE COMFORT CHAMBER/CHILD DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHE EASE LARGE | BREATHE EASE LARGE DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHE EASE MEDIUM | BREATHE EASE MEDIUM DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHE EASE SMALL | BREATHE EASE SMALL DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE | BREATHERITE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE COLL SPACER ADULT | BREATHERITE COLL SPACER ADULT MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE COLL SPACER CHILD | BREATHERITE COLL SPACER CHILD MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE COLL SPACER INFANT | BREATHERITE COLL SPACER INFANT MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|---|--------|-----------------------|
| BREATHERITE RIGID SPACER/MASK | BREATHERITE RIGID SPACER/MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE SPACER NEONATE | BREATHERITE SPACER NEONATE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE SPACER SMALL CHILD | BREATHERITE SPACER SMALL CHILD MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE/LARGE MASK | BREATHERITE/LARGE MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE/MEDIUM MASK | BREATHERITE/MEDIUM MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| BREATHERITE/SMALL MASK | BREATHERITE/SMALL MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| CLEVER CHOICE HOLDING CHAMBER | CLEVER CHOICE HOLDING CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| COMPACT SPACE CHAMBER | COMPACT SPACE CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| COMPACT SPACE CHAMBER/LG MASK | COMPACT SPACE CHAMBER/LG MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| COMPACT SPACE CHAMBER/MED MASK | COMPACT SPACE CHAMBER/MED MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| COMPACT SPACE CHAMBER/SM MASK | COMPACT SPACE CHAMBER/SM MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|--|--------|-----------------------|
| EASIVENT | EASIVENT MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EASIVENT MASK LARGE | EASIVENT MASK LARGE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EASIVENT MASK MEDIUM | EASIVENT MASK MEDIUM MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EASIVENT MASK SMALL | EASIVENT MASK SMALL MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EQ SPACE CHAMBER ANTI-STATIC | EQ SPACE CHAMBER ANTI-STATIC DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EQ SPACE CHAMBER ANTI-STATIC L | EQ SPACE CHAMBER ANTI-STATIC L DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EQ SPACE CHAMBER ANTI-STATIC M | EQ SPACE CHAMBER ANTI-STATIC M DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| EQ SPACE CHAMBER ANTI-STATIC S | EQ SPACE CHAMBER ANTI-STATIC S DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| FLEXICHAMBER | FLEXICHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| FLEXICHAMBER ADULT MASK/SMALL | FLEXICHAMBER ADULT MASK/SMALL MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| FLEXICHAMBER CHILD MASK/LARGE | FLEXICHAMBER CHILD MASK/LARGE MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| FLEXICHAMBER CHILD MASK/SMALL | FLEXICHAMBER CHILD MASK/SMALL MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|--|--------|-----------------------|
| INSPIRACHAMBER/LARGE | INSPIRACHAMBER/LARGE DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| INSPIRACHAMBER/MEDIUM | INSPIRACHAMBER/MEDIUM DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| INSPIRACHAMBER/MOUTHPIECE | INSPIRACHAMBER/MOUTHPIECE DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| INSPIRACHAMBER/SMALL | INSPIRACHAMBER/SMALL DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| INSPIREASE | INSPIREASE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| LITEAIRE | LITEAIRE DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| MASK VORTEX/CHILD/FROG | MASK VORTEX/CHILD/FROG MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| MASK VORTEX/TODDLER/LADYBUG | MASK VORTEX/TODDLER/LADYBUG MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| MICROCHAMBER | MICROCHAMBER (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| MICROSPACER | MICROSPACER MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER ADVANTAGE-LG MASK | OPTICHAMBER ADVANTAGE-LG MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|---|--------|-----------------------|
| OPTICHAMBER ADVANTAGE-MED MASK | OPTICHAMBER ADVANTAGE-MED MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER ADVANTAGE-SM MASK | OPTICHAMBER ADVANTAGE-SM MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER DIAMOND | OPTICHAMBER DIAMOND (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER DIAMOND-LG MASK | OPTICHAMBER DIAMOND-LG MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER DIAMOND-MD MASK | OPTICHAMBER DIAMOND-MD MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER DIAMOND-SM MASK | OPTICHAMBER DIAMOND-SM MASK MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER FACE MASK-LARGE | OPTICHAMBER FACE MASK-LARGE MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER FACE MASK- MEDIUM | OPTICHAMBER FACE MASK-MEDIUM MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTICHAMBER FACE MASK-SMALL | OPTICHAMBER FACE MASK-SMALL MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| OPTIHALER | OPTIHALER (DEVICE, MISC) <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---------------------------|--|--------|-----------------------|
| PANDA MASK LARGE | PANDA MASK LARGE MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| PANDA MASK MEDIUM | PANDA MASK MEDIUM MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| PANDA MASK SMALL | PANDA MASK SMALL MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| PEDIATRIC PANDA MASK | PEDIATRIC PANDA MASK MISC <i>spacer/aerosol-holding chamber supplies - masks</i> | RX-DME | |
| POCKET CHAMBER | POCKET CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| POCKET SPACER | POCKET SPACER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PRO COMFORT SPACER ADULT | PRO COMFORT SPACER ADULT MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PRO COMFORT SPACER CHILD | PRO COMFORT SPACER CHILD MISC <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PRO COMFORT SPACER INFANT | PRO COMFORT SPACER INFANT DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PROCARE SPACER/ADULT MASK | PROCARE SPACER/ADULT MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PROCARE SPACER/CHILD MASK | PROCARE SPACER/CHILD MASK DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|--|--------|---|
| PROCHAMBER VHC | PROCHAMBER VHC DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| PURE COMFORT SPACER CHAMBER | PURE COMFORT SPACER CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| RITEFLO | RITEFLO DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| VORTEX VALVED HOLDING CHAMBER | VORTEX VALVED HOLDING CHAMBER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| WATCHHALER | WATCHHALER DEVICE <i>spacer/aerosol-holding chambers</i> | RX-DME | |
| INSULIN ADMINISTRATION SUPPLIES | | | |
| OMNIPOD 5 G6 INTRO (GEN 5) | OMNIPOD 5 G6 INTRO (GEN 5) KIT <i>insulin infusion disposable pump</i> | RX-DME | PA, QL (1 PER 5 YEAR(S)) |
| OMNIPOD 5 G6 PODS (GEN 5) | OMNIPOD 5 G6 PODS (GEN 5) MISC <i>insulin infusion disposable pump</i> | RX-DME | PA, QL (10 PODS PER 30 DAY(S)), PA-QL (30 PODS / 30 DAYS) |
| OMNIPOD 5 G7 INTRO (GEN 5) | OMNIPOD 5 G7 INTRO (GEN 5) KIT <i>insulin infusion disposable pump</i> | RX-DME | PA, QL (1 KIT PER 5 YEAR(S)) |
| OMNIPOD 5 G7 PODS (GEN 5) | OMNIPOD 5 G7 PODS (GEN 5) MISC <i>insulin infusion disposable pump</i> | RX-DME | PA, QL (10 PODS PER 30 DAY(S)), PA-QL (30 PODS / 30 DAYS) |
| OMNIPOD DASH PODS (GEN 4) | OMNIPOD DASH PODS (GEN 4) MISC <i>insulin infusion disposable pump</i> | RX-DME | PA, QL (10 PODS PER 30 DAY(S)), PA-QL (30 PODS / 30 DAYS) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|---|--------|-----------------------|
| GLUCOSE MONITORING TEST SUPPLIES | | | |
| DEXCOM G6 RECEIVER | DEXCOM G6 RECEIVER DEVICE <i>continuous blood glucose system receiver</i> | RX-DME | QL (1 PER YEAR(S)) |
| DEXCOM G6 SENSOR | DEXCOM G6 SENSOR MISC <i>continuous blood glucose system sensor</i> | RX-DME | QL (3 PER 30 DAY(S)) |
| DEXCOM G6 TRANSMITTER | DEXCOM G6 TRANSMITTER MISC <i>continuous blood glucose system transmitter</i> | RX-DME | QL (1 PER 90 DAY(S)) |
| DEXCOM G7 RECEIVER | DEXCOM G7 RECEIVER DEVICE <i>continuous blood glucose system receiver</i> | RX-DME | QL (1 PER 365 DAY(S)) |
| DEXCOM G7 SENSOR | DEXCOM G7 SENSOR MISC <i>continuous blood glucose system sensor</i> | RX-DME | QL (3 PER 30 DAY(S)) |
| FREESTYLE LIBRE 14 DAY READER | FREESTYLE LIBRE 14 DAY READER DEVICE <i>continuous blood glucose system receiver</i> | RX-DME | QL (1 PER YEAR(S)) |
| FREESTYLE LIBRE 14 DAY SENSOR | FREESTYLE LIBRE 14 DAY SENSOR MISC <i>continuous blood glucose system sensor</i> | RX-DME | QL (2 PER 28 DAY(S)) |
| FREESTYLE LIBRE 2 READER | FREESTYLE LIBRE 2 READER DEVICE <i>continuous blood glucose system receiver</i> | RX-DME | QL (1 PER YEAR(S)) |
| FREESTYLE LIBRE 2 SENSOR | FREESTYLE LIBRE 2 SENSOR MISC <i>continuous blood glucose system sensor</i> | RX-DME | QL (2 PER 28 DAY(S)) |
| FREESTYLE LIBRE 3 SENSOR | FREESTYLE LIBRE 3 SENSOR MISC <i>continuous blood glucose system sensor</i> | RX-DME | QL (2 PER 28 DAY(S)) |
| FREESTYLE LIBRE READER | FREESTYLE LIBRE READER DEVICE <i>continuous blood glucose system receiver</i> | RX-DME | QL (1 PER YEAR(S)) |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|--|--------|---|
| LANCETS | LANCETS <i>lancets</i> | TIER 2 | QL (150 PER 30 DAYS), PA-QL (300 / 30 days), PV |
| LANCETS | LANCETS <i>lancets</i> | TIER 2 | QL (150 PER 30 DAY(S)) |
| LANCETS | LANCETS <i>lancets</i> | TIER 2 | QL (150 PER 30 DAY(S)), PA-QL (300 / 30 days), PV |
| OCULAR IMPLANTS | | | |
| SUSVIMO OCULAR IMPLANT | SUSVIMO OCULAR IMPLANT <i>ocular implant</i> | SP-M | S, MN-PA (Medically Necessary Prior Authorization) |
| APPLICATORS,COTTON BALLS,ETC | | | |
| BD SWAB SINGLE USE REGULAR | BD SWAB SINGLE USE REGULAR PAD <i>alcohol swabs</i> | TIER 2 | |
| RA ALCOHOL SWABS | RA ALCOHOL SWABS 70 % PAD <i>alcohol swabs</i> | TIER 2 | |
| SM ALCOHOL PREP | SM ALCOHOL PREP (70%PAD, PAD) <i>alcohol swabs</i> | TIER 2 | |
| MISCELLANEOUS THERAPEUTIC CLASSES | | | |
| ALLOGENEIC THYMUS TISSUE | | | |
| RETHYMIC | RETHYMIC IMPLANT <i>allogeneic processed thymus tissue-agdc</i> | SP-M | S |
| CHELATING AGENTS | | | |
| <i>clovique</i> | <i>clovique 250 mg cap</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| DEPEN TITRATABS | DEPEN TITRATABS 250 MG TAB <i>penicillamine</i> | SP-NP | S, GA |
| <i>penicillamine</i> | <i>penicillamine 250 mg tab</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |
| SYPRINE | SYPRINE 250 MG CAP <i>trientine hcl</i> | SP-NP | S, GA |
| <i>trientine hcl</i> | <i>trientine hcl 250 mg cap</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|-------|--|
| ENZYMES | | | |
| XIAFLEX | XIAFLEX 0.9 MG RECON SOLN <i>collagenase clostridium histolyticum</i> | SP-M | PA, S |
| FECAL INCONTINENCE BULKING AGENT - COMBINATIONS | | | |
| SOLESTA | SOLESTA 50-15 MG/ML GEL <i>dextranomer-sodium hyaluronate</i> | SP-M | S |
| ACTIVATED PHOSPHOINOSITIDE 3-KINASE DELTA SYNDROME AGENT | | | |
| JOENJA | JOENJA 70 MG TAB <i>leniolisib phosphate</i> | SP-NP | PA, QL (2 PER 1 DAY(S)), S |
| ANTILEPROTICS | | | |
| THALOMID | THALOMID (150 MG CAP, 200 MG CAP) <i>thalidomide</i> | SP-P | QL (2 PER 1 DAY), S |
| THALOMID | THALOMID (50 MG CAP, 100 MG CAP) <i>thalidomide</i> | SP-P | QL (1 PER 1 DAY), S |
| IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES | | | |
| <i>lenalidomide</i> | <i>lenalidomide (2.5 mg cap, 5 mg cap, 10 mg cap, 15 mg cap)</i> | SP-P | QL (1 PER 1 DAY), SBG (Specialty Biosimilars and Specialty generics), S |
| <i>lenalidomide</i> | <i>lenalidomide (20 mg cap, 25 mg cap)</i> | SP-P | QL (21 PER 28 DAY(S)), SBG (Specialty Biosimilars and Specialty generics), S |
| REVLIMID | REVLIMID (2.5 MG CAP, 5 MG CAP, 10 MG CAP, 15 MG CAP) <i>lenalidomide</i> | SP-P | QL (1 PER 1 DAY), S, GA |
| REVLIMID | REVLIMID (20 MG CAP, 25 MG CAP) <i>lenalidomide</i> | SP-P | QL (21 PER 28 DAY(S)), S, GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|---|--|--------|-----------------------------|
| NEONATAL FC RECEPTOR (FCRN) ANTAGONISTS | | | |
| RYSTIGGO | RYSTIGGO (280 MG/2ML SOLUTION, 420 MG/3ML SOLUTION, 560 MG/4ML SOLUTION, 840 MG/6ML SOLUTION) <i>rozanolixizumab-noli</i> | SP-M | PA, S |
| VYVGART | VYVGART 400 MG/20ML SOLUTION <i>efgartigimod alfa-fcab</i> | SP-M | PA, S |
| ROCK INHIBITORS | | | |
| REZUROCK | REZUROCK 200 MG TAB <i>belumosudil mesylate</i> | SP-P | PA, QL (1 PER DAY(S)), S |
| IMMUNOMODULATORS - COMBINATIONS | | | |
| VYVGART HYTRULO | VYVGART HYTRULO 180-2000 MG-UNIT/ML SOLUTION <i>efgartigimod alfa and hyaluronidase-qvfc</i> | SP-M | PA, QL (4 PER 28 DAY(S)), S |
| CYCLOSPORINE ANALOGS | | | |
| <i>cyclosporine</i> | <i>cyclosporine (25 mg cap, 100 mg cap)</i> | TIER 1 | |
| <i>cyclosporine</i> | <i>cyclosporine 50 mg/ml solution</i> | SP-M | S |
| <i>cyclosporine modified</i> | <i>cyclosporine modified (25 mg cap, 50 mg cap, 100 mg cap)</i> | TIER 1 | |
| <i>cyclosporine modified</i> | <i>cyclosporine modified 100 mg/ml solution</i> | TIER 1 | |
| <i>gengraf</i> | <i>gengraf (25 mg cap, 100 mg cap, 100 mg/ml solution)</i> | TIER 1 | |
| LUPKYNIS | LUPKYNIS 7.9 MG CAP <i>voclosporin</i> | SP-NP | PA, QL (6 PER DAY(S)), S |
| NEORAL | NEORAL (25 MG CAP, 100 MG CAP, 100 MG/ML SOLUTION) <i>cyclosporine modified (for microemulsion)</i> | TIER 3 | GA |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|---|
| SANDIMMUNE | SANDIMMUNE (25 MG CAP, 100 MG CAP, 100 MG/ML SOLUTION) <i>cyclosporine</i> | TIER 3 | GA |
| SANDIMMUNE | SANDIMMUNE 50 MG/ML SOLUTION <i>cyclosporine</i> | SP-M | S, GA |
| INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS | | | |
| CELLCEPT | CELLCEPT (200 MG/ML RECON SUSP, 250 MG CAP, 500 MG TAB) <i>mycophenolate mofetil</i> | TIER 2 | GA |
| CELLCEPT INTRAVENOUS | CELLCEPT INTRAVENOUS 500 MG RECON SOLN <i>mycophenolate mofetil hcl</i> | SP-M | S, GA |
| <i>mycophenolate mofetil</i> | <i>mycophenolate mofetil (200 mg/ml recon susp, 250 mg cap, 500 mg tab)</i> | TIER 1 | |
| <i>mycophenolate mofetil</i> | <i>mycophenolate mofetil 500 mg recon soln</i> | SP-M | S |
| <i>mycophenolate mofetil hcl</i> | <i>mycophenolate mofetil hcl 500 mg recon soln</i> | SP-M | S |
| <i>mycophenolate sodium</i> | <i>mycophenolate sodium (180 mg tab dr, 360 mg tab dr)</i> | TIER 1 | |
| <i>mycophenolic acid</i> | <i>mycophenolic acid (180 mg tab dr, 360 mg tab dr)</i> | TIER 1 | |
| MYHIBBIN | MYHIBBIN 200 MG/ML SUSPENSION <i>mycophenolate mofetil</i> | TIER 2 | |
| MACROLIDE IMMUNOSUPPRESSANTS | | | |
| ASTAGRAF XL | ASTAGRAF XL (0.5 MG CAP ER 24H, 1 MG CAP ER 24H, 5 MG CAP ER 24H) <i>tacrolimus</i> | SP-P | S, PV |
| ENVARUSUS XR | ENVARUSUS XR (0.75 MG TAB ER 24H, 1 MG TAB ER 24H, 4 MG TAB ER 24H) <i>tacrolimus</i> | SP-P | S |
| <i>everolimus</i> | <i>everolimus (0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab)</i> | SP-P | SBG (Specialty Biosimilars and Specialty generics), S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|-----------------------------|
| PROGRAF | PROGRAF (0.2 MG PACKET, 0.5 MG CAP, 1 MG CAP, 1 MG PACKET, 5 MG CAP) <i>tacrolimus</i> | TIER 3 | GA |
| PROGRAF | PROGRAF 5 MG/ML SOLUTION <i>tacrolimus</i> | SP-M | S |
| <i>sirolimus</i> | <i>sirolimus (0.5 mg tab, 1 mg tab, 2 mg tab)</i> | TIER 1 | |
| <i>sirolimus</i> | <i>sirolimus 1 mg/ml solution</i> | TIER 1 | PA, QL (1200 PER 30 DAY(S)) |
| <i>tacrolimus</i> | <i>tacrolimus (0.5 mg cap, 1 mg cap, 5 mg cap)</i> | TIER 1 | |
| ZORTRESS | ZORTRESS (0.25 MG TAB, 0.5 MG TAB, 0.75 MG TAB, 1 MG TAB) <i>everolimus (immunosuppressant)</i> | SP-P | S, GA |
| MONOCLONAL ANTIBODIES | | | |
| ENSPRYNG | ENSPRYNG 120 MG/ML SOLN PRSYR <i>satralizumab-mwge</i> | SP-P | PA, QL (1 PER 28 DAY(S)), S |
| GAMIFANT | GAMIFANT (10 MG/2ML SOLUTION, 50 MG/10ML SOLUTION, 100 MG/20ML SOLUTION) <i>emapalumab-lzsg</i> | SP-M | PA, S |
| UPLIZNA | UPLIZNA 100 MG/10ML SOLUTION <i>inebilizumab-cdon</i> | SP-M | PA, S |
| PURINE ANALOGS | | | |
| <i>azathioprine</i> | <i>azathioprine 50 mg tab</i> | TIER 1 | |
| SELECTIVE T-CELL COSTIMULATION BLOCKERS | | | |
| NULOJIX | NULOJIX 250 MG RECON SOLN <i>belatacept</i> | SP-M | S |
| B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS | | | |
| BENLYSTA | BENLYSTA (120 MG RECON SOLN, 400 MG RECON SOLN) <i>belimumab</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|--|--------|--|
| BENLYSTA | BENLYSTA (200 MG/ML SOLN A-INJ, 200 MG/ML SOLN PRSYR) <i>belimumab</i> | SP-P | S |
| TYPE I INTERFERON (IFN) RECEPTOR ANTAGONISTS | | | |
| SAPHNELO | SAPHNELO 300 MG/2ML SOLUTION <i>anifrolumab-fnia</i> | SP-M | PA, S |
| POTASSIUM REMOVING AGENTS | | | |
| <i>kionex</i> | <i>kionex 15 gm/60ml suspension</i> | TIER 1 | |
| LOKELMA | LOKELMA (5 GM PACKET, 10 GM PACKET) <i>sodium zirconium cyclosilicate</i> | SP-P | S |
| <i>sodium polystyrene sulfonate</i> | <i>sodium polystyrene sulfonate (15gm/60mlsuspension, powder)</i> | TIER 1 | |
| SPS (SODIUM POLYSTYRENE SULF) | SPS (SODIUM POLYSTYRENE SULF) (15 GM/60ML SUSPENSION, 30 GM/120ML SUSPENSION) <i>sodium polystyrene sulfonate</i> | TIER 1 | |
| VELTASSA | VELTASSA (1 GM PACKET, 8.4 GM PACKET, 16.8 GM PACKET, 25.2 GM PACKET) <i>patiromer sorbitex calcium</i> | SP-P | S |
| FARNESYLTRANSFERASE INHIBITORS | | | |
| ZOKINVY | ZOKINVY (50 MG CAP, 75 MG CAP) <i>lonafarnib</i> | SP-P | PA, QL (120 PER 30 DAY(S)), S, QLV (Quantity Limit Varies) |
| INTERLEUKIN-6 (IL-6) ANTAGONISTS | | | |
| SYLVANT | SYLVANT (100 MG RECON SOLN, 400 MG RECON SOLN) <i>siltuximab</i> | SP-M | S |

| BRAND NAME | DRUG DESCRIPTION (RX) | TIER | LIMITS & RESTRICTIONS |
|--|---|-------|-----------------------------------|
| PIK3CA-RELATED OVERGROWTH SPECTRUM AGENTS - PI3K INHIB | | | |
| VIJOICE | VIJOICE (50 MG TAB THPK, 125 MG TAB THPK, 200 & 50 MG TAB THPK) <i>alpelisib (pros agents)</i> | SP-NP | PA, QL (2 PER DAY(S)), S |
| VIJOICE | VIJOICE 50 MG PACKET <i>alpelisib (pros agents)</i> | SP-NP | PA, QL (1 PACKET PER 1 DAY(S)), S |
| SCLEROSING AGENTS | | | |
| VARITHENA | VARITHENA 180 MG/18ML FOAM <i>polidocanol (laureth-9)</i> | SP-M | S |

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