

BLUE RX ESSENTIALSSM 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. You may refer to the formulary as a guide to select the most appropriate drugs and associated cost share.

Pharmacy Durable Medical Equipment (RxDME): 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 Biosimilars and Generics (SBG):** Drugs in this category will process with the preferred biosimilar or generic specialty drug cost-share.
- **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 Essentials 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 care professional through an exception

request for a non-formulary prescription drug (outlined below). Generally, one of the following guidelines must be documented 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 Essentials 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 Essentials 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	SBG	
5	SP-P	
6	SP-NP	
7	RX-DME	
8	P&T	
9	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.
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.

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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	
AUGMENTIN	AUGMENTIN 125-31.25 MG/5ML RECON SUSP <i>amoxicillin & pot clavulanate</i>	TIER 3	
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>cefditoren pivoxil</i>	<i>cefditoren pivoxil (200 mg tab, 400 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>cefixime</i>	<i>cefixime (100 mg/5ml recon susp, 200 mg/5ml recon susp, 400 mg cap)</i>	TIER 1	
<i>cefepodoxime proxetil</i>	<i>cefepodoxime 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	
<i>ceftriaxone sodium</i>	<i>ceftriaxone sodium 1 gm 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	
FIDAXOMICIN			
DIFICID	DIFICID 200 MG TAB <i>fidaxomicin</i>	TIER 3	
DIFICID	DIFICID 40 MG/ML RECON SUSP <i>fidaxomicin</i>	TIER 3	PA, QL (300 PER 30 DAY(S))
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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>mondoxyne nl</i>	<i>mondoxyne nl 100 mg cap</i>	TIER 1	
<i>morgidox</i>	<i>morgidox 100 mg cap</i>	TIER 1	
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			
BAXDELA	BAXDELA 450 MG TAB <i>delafloxacin meglumine</i>	TIER 3	
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, 500 mg tab)</i>	TIER 1	
<i>levofloxacin</i>	<i>levofloxacin (250 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
KITABIS PAK	KITABIS PAK 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
<i>neomycin sulfate</i>	<i>neomycin sulfate 500 mg tab</i>	TIER 1	
<i>paromomycin sulfate</i>	<i>paromomycin sulfate 250 mg cap</i>	TIER 1	
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>	SBG	QL (2 PER 1 DAY(S)), S
<i>tobramycin</i>	<i>tobramycin 300 mg/5ml nebu soln</i>	SBG	QL (10 PER 1 DAY), 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			
SULFADIAZINE	SULFADIAZINE 500 MG TAB <i>sulfadiazine</i>	TIER 1	GA
<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	
PRETOMANID	PRETOMANID 200 MG TAB <i>pretomanid</i>	TIER 3	QL (30 PER 30 DAY(S))
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, 300 mg cap)</i>	TIER 1	
TRECTOR	TRECTOR 250 MG TAB <i>ethionamide</i>	TIER 3	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<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			
CRESEMBA	CRESEMBA (74.5 MG CAP, 186 MG CAP) <i>isavuconazonium sulfate</i>	TIER 3	
<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
NOXAFIL	NOXAFIL 40 MG/ML SUSPENSION <i>posaconazole</i>	TIER 3	GA
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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 (100 MG/ML SUSPENSION, 600 MG TAB, 800 MG TAB) <i>darunavir</i>	TIER 3	GA

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PREZISTA	PREZISTA (75 MG TAB, 150 MG TAB) <i>darunavir ethanolate</i>	TIER 2	
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 (10 mg/ml solution, 150 mg tab, 300 mg tab)</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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
ANTIRETROVIRALS ADJUVANTS			
TYBOST	TYBOST 150 MG TAB <i>cobicistat</i>	TIER 2	
ANTIRETROVIRAL COMBINATIONS			
<i>abacavir sulfate-lamivudine</i>	<i>abacavir sulfate-lamivudine 600-300 mg tab</i>	TIER 1	
<i>abacavir-lamivudine-zidovudine</i>	<i>abacavir-lamivudine-zidovudine 300-150-300 mg tab</i>	TIER 1	
BIKTARVY	BIKTARVY 30-120-15 MG TAB <i>bictegravir-emtricitabine-tenofovir alafenamide fumarate</i>	TIER 2	QL (1 PER 1 DAY(S))
BIKTARVY	BIKTARVY 50-200-25 MG TAB <i>bictegravir-emtricitabine-tenofovir alafenamide fumarate</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 600-200-300 mg tab</i>	TIER 1	
<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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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
PREVMIS	PREVMIS (240 MG TAB, 480 MG TAB) <i>letermovir</i>	TIER 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
BARACLUDE	BARACLUDE 0.05 MG/ML SOLUTION <i>entecavir</i>	TIER 3	PA, QL (630 PER 30 DAY(S))
<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, 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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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 2 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
ANTIMALARIAL COMBINATIONS			
<i>atovaquone-proguanil hcl</i>	<i>atovaquone-proguanil hcl (62.5-25 mg tab, 250-100 mg tab)</i>	TIER 1	
COARTEM	COARTEM 20-120 MG TAB <i>artemether-lumefantrine</i>	TIER 3	
AMEBICIDES			
SOLOSEC	SOLOSEC 2 GM PACKET <i>secnidazole</i>	TIER 3	
ANTHELMINTICS			
<i>albendazole</i>	<i>albendazole 200 mg tab</i>	TIER 1	
EMVERM	EMVERM 100 MG CHEW TAB <i>mebendazole</i>	TIER 3	QL (12 PER 365 DAY(S))
<i>ivermectin</i>	<i>ivermectin 3 mg tab</i>	TIER 1	
<i>praziquantel</i>	<i>praziquantel 600 mg tab</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTI-INFECTIVE AGENTS - MISC.			
AEMCOLO	AEMCOLO 194 MG TAB DR <i>rifamycin sodium</i>	TIER 3	QL (6 PER 3 DAY(S))
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 (375 mg cap, 500 mg tab)</i>	TIER 1	
<i>metronidazole</i>	<i>metronidazole 250 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
LINCOSAMIDES			
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 (125 mg cap, 250 mg cap)</i>	TIER 3	QL (80 PER 23 DAY(S))
<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	
VANCOMYCIN HCL	VANCOMYCIN HCL 250 MG RECON SOLN <i>vancomycin hcl</i>	TIER 3	
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)
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>methenamine mandelate</i>	<i>methenamine mandelate (0.5 gm tab, 1 gm tab)</i>	TIER 1	
<i>nitrofurantoin</i>	<i>nitrofurantoin 25 mg/5ml 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTI-INFECTIVE MISC. - COMBINATIONS			
<i>sulfamethoxazole-trimethoprim</i>	<i>sulfamethoxazole-trimethoprim (200-40 mg/5ml suspension, 400-80 mg tab, 800-160 mg tab)</i>	TIER 1	
<i>sulfatrim pediatric</i>	<i>sulfatrim pediatric 200-40 mg/5ml suspension</i>	TIER 1	
URINARY ANTISEPTIC-ANTISPASMODIC &/OR ANALGESICS			
URIMAR-T	URIMAR-T 120 MG TAB <i>methenamine-hyosc-methylene blue-sod phospheryl sal</i>	TIER 3	
VACCINES			
VIRAL VACCINES			
ABRYSVO	ABRYSVO 120 MCG/0.5ML RECON SOLN <i>rsv pre-fusion f a&b protein vaccine recombinant</i>	TIER 2	QL (1 PER LIFETIME)
AFLURIA QUADRIVALENT	AFLURIA QUADRIVALENT (0.25 ML SUSP PRSYR, 0.5 ML SUSP PRSYR, SUSPENSION) <i>influenza virus vaccine split quadrivalent</i>	TIER 2	
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)
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
FLUAD	FLUAD 0.5 ML SUSP PRSYR <i>influenza virus vaccine types a & b surface antigen adjuvant</i>	TIER 2	
FLUAD QUADRIVALENT	FLUAD QUADRIVALENT 0.5 ML PRSYR <i>influenza virus vacc types a & b surf antigen adjuvant quad</i>	TIER 2	
FLUARIX QUADRIVALENT	FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR <i>influenza virus vaccine split quadrivalent</i>	TIER 2	
FLUBLOK QUADRIVALENT	FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR <i>influenza virus vac recomb hemagglutinin (ha) quadrivalent</i>	TIER 2	
FLUCELVAX QUADRIVALENT	FLUCELVAX QUADRIVALENT (0.5MLSUSPPRSYR, SUSPENSION) <i>influenza virus vaccine tissue-cultured subunit quadrivalent</i>	TIER 2	
FLULAVAL QUADRIVALENT	FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR <i>influenza virus vaccine split quadrivalent</i>	TIER 2	
FLUMIST QUADRIVALENT	FLUMIST QUADRIVALENT SUSPENSION <i>influenza virus vaccine live quadrivalent</i>	TIER 2	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
MODERNA COVID-19 VAC 6M-11Y	MODERNA COVID-19 VAC 6M-11Y 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	
NOVAVAX COVID-19 VACCINE	NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML 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	
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/0.3ML SUSPENSION <i>covid-19 (sars-cov-2) mrna virus vaccine</i>	TIER 2	

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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
VARIVAX	VARIVAX 1350 PFU/0.5ML INJECTABLE <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	
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	
TWINRIX	TWINRIX 720-20 ELU- MCG/ML SUSP PRSYR <i>hepatitis a (inactivated)- hepatitis b (recombinant) vaccines</i>	TIER 2	
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	
HIBERIX	HIBERIX 10 MCG RECON SOLN <i>haemophilus b polysac conj vac</i>	TIER 2	
MENACTRA	MENACTRA SOLUTION <i>meningococcal (a,c,y&w- 135) polysacch diphth conj vaccine</i>	TIER 2	
MENQUADFI	MENQUADFI SOLUTION <i>meningococcal (a,c,y&w- 135) polysacch tetanus conj vaccine</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
PNEUMOVAX 23	PNEUMOVAX 23 25 MCG/0.5ML INJECTABLE <i>pneumococcal vac polyvalent</i>	TIER 2	
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	
DAPTACEL	DAPTACEL 23-15-5 SUSPENSION <i>diphtheria, acellular pertussis & tetanus toxoids</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
KINRIX	KINRIX (0.5MLSUSPPRSYR, SUSPENSION) <i>diph-tetanus tox ad-acell pertussis & polio virus, ipv vac</i>	TIER 2	
PEDIARIX	PEDIARIX SUSP PRSYR <i>diph-tetanus tox-acell pert-hepatitis b recomb-polio ipv vac</i>	TIER 2	
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PASSIVE IMMUNIZING AND TREATMENT AGENTS			
IMMUNE SERUMS			
ASCENIV	ASCENIV 5 GM/50ML SOLUTION <i>immune globulin (human)-sira</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 INJECTABLE <i>cytomegalovirus immune globulin (human)</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
BENDAMUSTINE HCL	BENDAMUSTINE HCL 100 MG/4ML SOLUTION <i>bendamustine hcl</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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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
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 RECON SOLN, 1 GM/5ML SOLUTION, 2 GM RECON SOLN, 500 MG RECON SOLN, 500 MG/2.5ML SOLUTION, 500 MG/ML 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	
EVOMELA	EVOMELA 50 MG RECON SOLN <i>melphalan hcl</i>	SP-M	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
LEUKERAN	LEUKERAN 2 MG TAB <i>chlorambucil</i>	TIER 2	
MELPHALAN	MELPHALAN 2 MG TAB <i>melphalan</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
<i>carmustine</i>	<i>carmustine 100 mg recon soln</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 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>	SBG	S
TETRAHYDROISOQUINOLINES			
YONDELIS	YONDELIS 1 MG RECON SOLN <i>trabectedin</i>	SP-M	S
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	PA, S
KANJINTI	KANJINTI 150 MG RECON SOLN <i>trastuzumab-anns</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
MARGENZA	MARGENZA 250 MG/10ML SOLUTION <i>margetuximab-cmkb</i>	SP-M	S
ONTRUZANT	ONTRUZANT (150 MG RECON SOLN, 420 MG RECON SOLN) <i>trastuzumab-dttb</i>	SP-M	PA, S
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	PA, S
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
DAUNORUBICIN HCL	DAUNORUBICIN HCL (20 MG/4ML SOLUTION, 50 MG/10ML SOLUTION) <i>daunorubicin hcl</i>	SP-M	S
DOXIL	DOXIL 2 MG/ML INJECTABLE <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 injectable</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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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, 40 mg recon soln)</i>	SP-M	S
<i>mitomycin</i>	<i>mitomycin 20 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>valrubicin</i>	<i>valrubicin 40 mg/ml solution</i>	SP-M	S
VALSTAR	VALSTAR 40 MG/ML SOLUTION <i>valrubicin</i>	SP-M	S, GA
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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>	SBG	QL (4 PER 1 DAY(S)), S
<i>capecitabine</i>	<i>capecitabine 500 mg tab</i>	SBG	QL (10 PER 1 DAY(S)), 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
<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
<i>floxuridine</i>	<i>floxuridine 0.5 gm recon soln</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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PEMETREXED	PEMETREXED (1 GM/40ML SOLUTION, 100 MG/4ML SOLUTION, 500 MG/20ML SOLUTION) <i>pemetrexed</i>	SP-M	S
PEMETREXED DISODIUM	PEMETREXED DISODIUM (1 GM/40ML SOLUTION, 100 MG/4ML SOLUTION, 500 MG/20ML SOLUTION, 850 MG/34ML SOLUTION) <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
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
XATMEP	XATMEP 2.5 MG/ML SOLUTION <i>methotrexate</i>	TIER 3	PA
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS			
AVASTIN	AVASTIN (100 MG/4ML SOLUTION, 400 MG/16ML SOLUTION) <i>bevacizumab</i>	SP-M	S, MN-PA (Medically Necessary Prior Authorization)
CYRAMZA	CYRAMZA (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>ramucirumab</i>	SP-M	S
FRUZAQLA	FRUZAQLA 1 MG CAP <i>fruquintinib</i>	P&T	QL (4 PER 1 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
FRUZAQLA	FRUZAQLA 5 MG CAP <i>fruquintinib</i>	P&T	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
ZALTRAP	ZALTRAP (100 MG/4ML SOLUTION, 200 MG/8ML SOLUTION) <i>ziv-aflibercept</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	PA, S
RITUXAN	RITUXAN (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab</i>	SP-M	PA, QL (200 PER 30 DAYS), S
RUXIENCE	RUXIENCE (100 MG/10ML SOLUTION, 500 MG/50ML SOLUTION) <i>rituximab-pvvr</i>	SP-M	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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-gxbr</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>	P&T	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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
KADCYLA	KADCYLA (100 MG RECON SOLN, 160 MG RECON SOLN) <i>ado-trastuzumab emtansine</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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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-efv</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	S
LIBTAYO	LIBTAYO 350 MG/7ML SOLUTION <i>cemiplimab-rwlc</i>	SP-M	S
LOQTORZI	LOQTORZI 240 MG/6ML SOLUTION <i>toripalimab-tpzi</i>	P&T	S
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
ZYNYZ	ZYNYZ 500 MG/20ML SOLUTION <i>retifanlimab-dlwr</i>	SP-M	PA, S
ANTINEOPLASTIC - ANTI-PD-L1 ANTIBODIES			
BAVENCIO	BAVENCIO 200 MG/10ML SOLUTION <i>avelumab</i>	SP-M	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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>	SBG	QL (1 PER 1 DAY), S
<i>erlotinib hcl</i>	<i>erlotinib hcl 25 mg tab</i>	SBG	QL (2 PER 1 DAY), 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)
GILOTRIF	GILOTRIF (20 MG TAB, 30 MG TAB, 40 MG TAB) <i>afatinib dimaleate</i>	SP-P	QL (1 PER 1 DAY), 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
VECTIBIX	VECTIBIX (100 MG/5ML SOLUTION, 400 MG/20ML SOLUTION) <i>panitumumab</i>	SP-M	S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>toremifene citrate</i>	<i>toremifene citrate 60 mg tab</i>	TIER 1	
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>leuprolide acetate</i>	<i>leuprolide acetate 1 mg/0.2ml kit</i>	SP-M	S
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>	SBG	QL (4 PER 1 DAY(S)), S
<i>abiraterone acetate</i>	<i>abiraterone acetate 500 mg tab</i>	SBG	QL (2 PER 1 DAY(S)), 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			
<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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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>	SBG	S
HALAVEN	HALAVEN 1 MG/2ML SOLUTION <i>eribulin mesylate</i>	SP-M	S
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
PACLITAXEL PROTEIN-BOUND PART	PACLITAXEL PROTEIN-BOUND PART 100 MG RECON SUSP <i>paclitaxel protein-bound particles</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
<i>toposar</i>	<i>toposar (1 gm/50ml solution, 100 mg/5ml solution, 500 mg/25ml solution)</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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, 200 MG TAB) <i>capivasertib</i>	P&T	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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 (400 MG TAB, 500 MG TAB) <i>bosutinib</i>	SP-P	QL (1 PER 1 DAY(S)), S
BOSULIF	BOSULIF 100 MG TAB <i>bosutinib</i>	SP-P	QL (3 PER 1 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 100 mg tab</i>	SBG	QL (4 PER 1 DAY), S
<i>imatinib mesylate</i>	<i>imatinib mesylate 400 mg tab</i>	SBG	QL (2 PER 1 DAY), S
SCEMBLIX	SCEMBLIX (20 MG TAB, 40 MG TAB) <i>asciminib hcl</i>	SP-P	PA, QL (2 PER DAY(S)), S
SPRYCEL	SPRYCEL (50 MG TAB, 70 MG TAB, 80 MG TAB, 100 MG TAB, 140 MG TAB) <i>dasatinib</i>	SP-P	QL (1 PER 1 DAY), S
SPRYCEL	SPRYCEL 20 MG TAB <i>dasatinib</i>	SP-P	QL (3 PER 1 DAY), S
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 (6 PER 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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS			
OGSIVEO	OGSIVEO 50 MG TAB <i>nirogacestat hydrobromide</i>	P&T	QL (6 PER 1 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
ANTINEOPLASTIC - MTOR KINASE INHIBITORS			
<i>everolimus</i>	<i>everolimus (2 mg tab sol, 5 mg tab sol)</i>	SBG	QL (2 PER 1 DAY(S)), S
<i>everolimus</i>	<i>everolimus (2.5 mg tab, 7.5 mg tab, 10 mg tab)</i>	SBG	QL (60 PER 30 DAYS), S
<i>everolimus</i>	<i>everolimus 3 mg tab sol</i>	SBG	QL (3 PER 1 DAY(S)), S
<i>everolimus</i>	<i>everolimus 5 mg tab</i>	SBG	QL (120 PER 30 DAYS), 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
ANTINEOPLASTIC - MULTIKINASE INHIBITORS			
CABOMETYX	CABOMETYX (20 MG TAB, 40 MG TAB, 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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>	SBG	QL (180 PER 30 DAYS), S
NERLYNX	NERLYNX 40 MG TAB <i>neratinib maleate</i>	SP-P	QL (6 PER 1 DAY), S
<i>pazopanib hcl</i>	<i>pazopanib hcl 200 mg tab</i>	SP-P	QL (4 PER 1 DAY(S)), 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>	SBG	QL (4 PER 1 DAY), S
STIVARGA	STIVARGA 40 MG TAB <i>regorafenib</i>	SP-P	QL (3 PER 1 DAY), S
<i>sunitinib malate</i>	<i>sunitinib malate (12.5 mg cap, 25 mg cap, 37.5 mg cap, 50 mg cap)</i>	SBG	QL (1 PER 1 DAY), 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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>	P&T	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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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 40 MG CAP <i>selpercatinib</i>	SP-P	QL (2 PER 1 DAY), S
RETEVMO	RETEVMO 80 MG CAP <i>selpercatinib</i>	SP-P	QL (4 PER 1 DAY), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - PROTEASOME INHIBITORS			
<i>bortezomib</i>	<i>bortezomib (1 mg recon soln, 2.5 mg recon soln, 3.5 mg recon soln)</i>	SP-M	S
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	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>mometinib dihydrochloride</i>	P&T	QL (1 PER 1 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
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
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	S
PLUVICTO	PLUVICTO 1000 MBQ/ML SOLUTION <i>lutetium lu 177 vipivotide tetraxetan</i>	SP-M	S
QUADRAMET	QUADRAMET 1850 MBQ/ML SOLUTION <i>samarium sm 153 lexicidronam</i>	SP-M	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
BREYANZI	BREYANZI 70000000 CELLS/ML SUSPENSION <i>lisocabtagene maraleucl</i>	SP-M	PA, S
CARVYKTI	CARVYKTI 100000000 CELLS SUSPENSION <i>ciltacabtagene autoleucl</i>	SP-M	PA, S
KYMRIAH	KYMRIAH (250000000 SUSPENSION, 600000000 SUSPENSION) <i>tisagenlecleucl</i>	SP-M	PA, S
PROVENGE	PROVENGE 50000000 CELLS SUSPENSION <i>sipuleucl-t</i>	SP-M	PA, S
TECARTUS	TECARTUS (1000000000CELLSSUSPENSION, SUSPENSION) <i>brexucabtagene autoleucl</i>	SP-M	PA, S
YESCARTA	YESCARTA 200000000 CELLS SUSPENSION <i>axicabtagene ciloleucl</i>	SP-M	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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			
ELZONRIS	ELZONRIS 1000 MCG/ML SOLUTION <i>tagraxofusp-erzs</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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</i> (<i>photopheresis</i>)	SP-M	S
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>	SBG	S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC COMBINATIONS			
DARZALEX FASPRO	DARZALEX FASPRO 1800-30000 MG-UT/15ML SOLUTION <i>daratumumab- hyaluronidase-fihj</i>	SP-M	S
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	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
VYXEOS	VYXEOS 44-100 MG RECON SUSP <i>daunorubicin-cytarabine liposome</i>	SP-M	S
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	
DEPO-MEDROL	DEPO-MEDROL 20 MG/ML SUSPENSION <i>methylprednisolone acetate</i>	TIER 1	
<i>dexamethasone</i>	<i>dexamethasone (0.5 mg tab, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1.5 mg tab, 4 mg tab, 6 mg tab)</i>	TIER 1	
<i>dexamethasone</i>	<i>dexamethasone (1 mg tab, 2 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-P	PA, QL (1 PER 1 DAY), S
EMFLAZA	EMFLAZA 22.75 MG/ML SUSPENSION <i>deflazacort</i>	SP-P	PA, QL (52 PER 30 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EMFLAZA	EMFLAZA 6 MG TAB <i>deflazacort</i>	SP-P	PA, QL (2 PER 1 DAY), S
<i>hydrocortisone</i>	<i>hydrocortisone (5 mg tab, 10 mg tab, 20 mg tab)</i>	TIER 1	
KENALOG-10	KENALOG-10 10 MG/ML SUSPENSION <i>triamcinolone acetonide</i>	TIER 3	
MEDROL	MEDROL 2 MG TAB <i>methylprednisolone</i>	TIER 3	
<i>methylprednisolone</i>	<i>methylprednisolone (4 mg tab, 4 mg tab thpk, 8 mg tab, 16 mg tab)</i>	TIER 1	
<i>methylprednisolone</i>	<i>methylprednisolone 32 mg tab</i>	TIER 1	
<i>methylprednisolone sodium succ</i>	<i>methylprednisolone sodium succ 500 mg recon soln</i>	TIER 1	
<i>millipred</i>	<i>millipred 5 mg tab</i>	TIER 3	
<i>prednisolone</i>	<i>prednisolone 15 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, 15 mg/5ml solution, 20 mg/5ml solution, 25 mg/5ml solution, 30 mg tab disp)</i>	TIER 1	
<i>prednisolone sodium phosphate</i>	<i>prednisolone sodium phosphate 25 mg/5ml solution</i>	TIER 1	
PREDNISONE	PREDNISONE (1 MG TAB, 5 MG (21) TAB THPK, 5 MG (48) TAB THPK, 5 MG TAB, 5 MG/5ML SOLUTION, 10 MG TAB) <i>prednisone</i>	TIER 1	
<i>prednisone</i>	<i>prednisone (2.5 mg tab, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 20 mg tab, 50 mg tab)</i>	TIER 1	
PREDNISONE INTENSOL	PREDNISONE INTENSOL 5 MG/ML CONC <i>prednisone</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SOLU-CORTEF	SOLU-CORTEF (100 MG RECON SOLN, 250 MG RECON SOLN, 500 MG RECON SOLN) <i>hydrocortisone sod succinate</i>	TIER 1	
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 acetonide</i>	<i>triamcinolone acetonide 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 10 mg/act (2%) gel</i>	TIER 3	PA, QL (2 PER 30 DAY(S))
<i>testosterone</i>	<i>testosterone 12.5 mg/act (1%) gel</i>	TIER 2	PA, QL (4 PER 30 DAY(S))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
TESTOSTERONE ENANTHATE	TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION <i>testosterone enanthate</i>	TIER 1	
VOGELXO	VOGELXO 50 MG/5GM (1%) GEL <i>testosterone</i>	TIER 3	PA, QL (2 PER 1 DAY(S)), GA
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
<i>estradiol</i>	<i>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, 1 mg tab, 1 mg/gm gel, 1.25 mg/1.25gm gel, 2 mg tab)</i>	TIER 1	
<i>estradiol valerate</i>	<i>estradiol valerate (10 mg/ml oil, 20 mg/ml oil, 40 mg/ml oil)</i>	TIER 1	
ESTROGEL	ESTROGEL 0.75 MG/1.25 GM (0.06%) GEL <i>estradiol</i>	TIER 3	
EVAMIST	EVAMIST 1.53 MG/SPRAY SOLUTION <i>estradiol</i>	TIER 3	
<i>lyllana</i>	<i>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)</i>	TIER 1	QL (8 PER 28 DAYS)
MENEST	MENEST (0.3 MG TAB, 0.625 MG TAB, 1.25 MG TAB) <i>esterified estrogens</i>	TIER 3	
MENOSTAR	MENOSTAR 14 MCG/24HR PATCH WK <i>estradiol</i>	TIER 3	
PREMARIN	PREMARIN (0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB) <i>estrogens, conjugated</i>	TIER 2	
ESTROGEN & ANDROGEN			
<i>covaryx</i>	<i>covaryx 1.25-2.5 mg tab</i>	TIER 1	
<i>covaryx hs</i>	<i>covaryx hs 0.625-1.25 mg tab</i>	TIER 1	
<i>eemt</i>	<i>eemt 1.25-2.5 mg tab</i>	TIER 1	
<i>eemt hs</i>	<i>eemt hs 0.625-1.25 mg tab</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>est estrogens-methyltest</i>	<i>est estrogens-methyltest (rogens-methylt0.625-1.25 mg tab, rogens-methylt1.25-2.5 mg tab)</i>	TIER 1	
<i>est estrogens-methyltest ds</i>	<i>est estrogens-methyltest ds 1.25-2.5 mg tab</i>	TIER 1	
<i>est estrogens-methyltest hs</i>	<i>est estrogens-methyltest hs 0.625-1.25 mg tab</i>	TIER 1	
ESTROGEN & PROGESTIN			
<i>amabelz</i>	<i>amabelz (0.5-0.1 mg tab, 1-0.5 mg tab)</i>	TIER 1	
ANGELIQ	ANGELIQ (0.25-0.5 MG TAB, 0.5-1 MG TAB) <i>drospirenone-estradiol</i>	TIER 3	
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	
PREFEST	PREFEST 1/1-0.09 MG (15/15) TAB <i>estradiol-norgestimate</i>	TIER 3	
PREMPHASE	PREMPHASE 0.625-5 MG TAB <i>conjugated estrogens-medroxyprogesterone acetate</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB			
DUAVEE	DUAVEE 0.45-20 MG TAB <i>conjugated estrogens-bazedoxifene</i>	TIER 3	
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>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	
<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	
SLYND	SLYND 4 MG TAB <i>drospirenone</i>	TIER 3	
<i>tulana</i>	<i>tulana 0.35 mg tab</i>	TIER 1	
PROGESTIN CONTRACEPTIVES - INJECTABLE			
DEPO-SUBQ PROVERA 104	DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR <i>medroxyprogesterone acetate (contraceptive)</i>	TIER 3	
<i>medroxyprogesterone acetate</i>	<i>medroxyprogesterone acetate (150 mg/ml susp prsy, 150 mg/ml suspension)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EMERGENCY CONTRACEPTIVES			
ELLA	ELLA 30 MG TAB <i>ulipristal acetate</i>	TIER 3	
COMBINATION CONTRACEPTIVES - TRANSDERMAL			
<i>norelgestromin-eth estradiol</i>	<i>norelgestromin-eth estradiol 150-35 mcg/24hr patch wk</i>	TIER 1	
TWIRLA	TWIRLA 120-30 MCG/24HR PATCH WK <i>levonorgestrel-ethinyl estradiol</i>	TIER 3	
<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			
ANNOVERA	ANNOVERA 0.013-0.15 MG/24HR RING <i>segesterone acetate-ethinyl estradiol</i>	TIER 3	
<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>abra</i>	<i>abra 0.1-20 mg-mcg tab</i>	TIER 1	
<i>abra eq</i>	<i>abra 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
BALCOLTRA	BALCOLTRA 0.1-20 MG-MCG(21) TAB <i>levonorgestrel-ethinyl estradiol-ferrous bisglycinate</i>	TIER 3	GA
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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	
FALESSA	FALESSA 20-1-0.1 MCG-MG KIT <i>levonorgestrel-ethinyl estradiol & folic acid</i>	TIER 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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 estrad</i>	<i>levonorgestrel-ethinyl estrad (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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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-lynyah</i>	<i>mono-lynyah 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	
NEXTSTELLIS	NEXTSTELLIS 3-14.2 MG TAB <i>drospirenone-estetrol</i>	TIER 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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	
TYBLUME	TYBLUME 0.1-20 MG-MCG CHEW TAB <i>levonorgestrel & eth estradiol</i>	TIER 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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>viorele</i>	<i>viorele 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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>hydroxyprogesterone caproate</i>	<i>hydroxyprogesterone caproate 250 mg/ml oil</i>	SP-M	QL (250 PER WEEK(S)), S
MAKENA	MAKENA 250 MG/ML OIL <i>hydroxyprogesterone caproate</i>	SP-M	QL (250 PER WEEK(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, 10 mg tab)</i>	TIER 1	
<i>medroxyprogesterone acetate</i>	<i>medroxyprogesterone acetate 5 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTIDIABETICS			
HUMAN INSULIN			
BASAGLAR KWIKPEN	BASAGLAR KWIKPEN 100 UNIT/ML SOLN PEN <i>insulin glargine</i>	TIER 2	
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	
FIASP FLEXTOUCH	FIASP FLEXTOUCH 100 UNIT/ML SOLN PEN <i>insulin aspart (with niacinamide)</i>	TIER 2	
FIASP PENFILL	FIASP PENFILL 100 UNIT/ML SOLN CART <i>insulin aspart (with niacinamide)</i>	TIER 2	
FIASP PUMPCART	FIASP PUMPCART 100 UNIT/ML SOLN CART <i>insulin aspart (with niacinamide)</i>	TIER 2	
HUMULIN R U-500 (CONCENTRATED)	HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION <i>insulin regular (human)</i>	TIER 2	
HUMULIN R U-500 KWIKPEN	HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN <i>insulin regular (human)</i>	TIER 2	
INSULIN ASP PROT & ASP FLEXPEN	INSULIN ASP PROT & ASP FLEXPEN (70-30) 100 UNIT/ML SUSP PEN <i>insulin aspart protamine & aspart (human)</i>	TIER 2	
INSULIN ASPART	INSULIN ASPART 100 UNIT/ML SOLUTION <i>insulin aspart</i>	TIER 2	
INSULIN ASPART FLEXPEN	INSULIN ASPART FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin aspart</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
INSULIN ASPART PENFILL	INSULIN ASPART PENFILL 100 UNIT/ML SOLN CART <i>insulin aspart</i>	TIER 2	
INSULIN ASPART PROT & ASPART	INSULIN ASPART PROT & ASPART (70-30) 100 UNIT/ML SUSPENSION <i>insulin aspart protamine & aspart (human)</i>	TIER 2	
INSULIN DEGLUDEC	INSULIN DEGLUDEC 100 UNIT/ML SOLUTION <i>insulin degludec</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN DEGLUDEC FLEXTOUCH	INSULIN DEGLUDEC FLEXTOUCH (100 SOLN PEN, 200 SOLN PEN) <i>insulin degludec</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN GLARGINE	INSULIN GLARGINE 100 UNIT/ML SOLUTION <i>insulin glargine</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN GLARGINE MAX SOLOSTAR	INSULIN GLARGINE MAX SOLOSTAR 300 UNIT/ML SOLN PEN <i>insulin glargine</i>	TIER 2	
INSULIN GLARGINE SOLOSTAR	INSULIN GLARGINE SOLOSTAR 100 UNIT/ML SOLN PEN <i>insulin glargine</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN GLARGINE SOLOSTAR	INSULIN GLARGINE SOLOSTAR 300 UNIT/ML SOLN PEN <i>insulin glargine</i>	TIER 2	
INSULIN GLARGINE- YFGN	INSULIN GLARGINE- YFGN (100 SOLN PEN, 100 SOLUTION) <i>insulin glargine-yfgn</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN LISPRO (1 UNIT DIAL)	INSULIN LISPRO (1 UNIT DIAL) 100 UNIT/ML SOLN PEN <i>insulin lispro</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN LISPRO	INSULIN LISPRO 100 UNIT/ML SOLUTION <i>insulin lispro</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
INSULIN LISPRO JUNIOR KWIKPEN	INSULIN LISPRO JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN <i>insulin lispro</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
INSULIN LISPRO PROT & LISPRO	INSULIN LISPRO PROT & LISPRO (75-25) 100 UNIT/ML SUSP PEN <i>insulin lispro protamine & lispro</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
LEVEMIR	LEVEMIR 100 UNIT/ML SOLUTION <i>insulin detemir</i>	TIER 2	
LEVEMIR FLEXPEN	LEVEMIR FLEXPEN 100 UNIT/ML SOLN PEN <i>insulin detemir</i>	TIER 2	
LEVEMIR FLEXTOUCH	LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN <i>insulin detemir</i>	TIER 2	
NOVOLIN 70/30	NOVOLIN 70/30 (70-30) 100 UNIT/ML SUSPENSION <i>insulin nph isophane & reg (human)</i>	TIER 2	
NOVOLIN 70/30 FLEXPEN	NOVOLIN 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN <i>insulin nph isophane & reg (human)</i>	TIER 2	
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	
NOVOLIN N	NOVOLIN N 100 UNIT/ML SUSPENSION <i>insulin nph (human) (isophane)</i>	TIER 2	
NOVOLIN N FLEXPEN	NOVOLIN N FLEXPEN 100 UNIT/ML SUSP PEN <i>insulin nph (human) (isophane)</i>	TIER 2	
NOVOLIN N FLEXPEN RELION	NOVOLIN N FLEXPEN RELION 100 UNIT/ML SUSP PEN <i>insulin nph (human) (isophane)</i>	TIER 2	

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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
NOVOLOG PENFILL	NOVOLOG PENFILL 100 UNIT/ML SOLN CART <i>insulin aspart</i>	TIER 2	
NOVOLOG RELION	NOVOLOG RELION 100 UNIT/ML SOLUTION <i>insulin aspart</i>	TIER 2	
SEMGLEE (YFGN)	SEMGLEE (YFGN) (100 SOLN PEN, 100 SOLUTION) <i>insulin glargine-yfgn</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
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	
TRESIBA FLEXTOUCH	TRESIBA FLEXTOUCH (100 SOLN PEN, 200 SOLN PEN) <i>insulin degludec</i>	TIER 2	
ANTIDIABETIC - AMYLIN ANALOGS			
SYMLINPEN 120	SYMLINPEN 120 2700 MCG/2.7ML SOLN PEN <i>pramlintide acetate</i>	TIER 2	
SYMLINPEN 60	SYMLINPEN 60 1500 MCG/1.5ML SOLN PEN <i>pramlintide acetate</i>	TIER 2	
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)			
BYETTA 10 MCG PEN	BYETTA 10 MCG PEN 10 MCG/0.04ML SOLN PEN <i>exenatide</i>	TIER 3	QL (1 PER 30 DAYS), MN- PA (Medically Necessary Prior Authorization)
BYETTA 5 MCG PEN	BYETTA 5 MCG PEN 5 MCG/0.02ML SOLN PEN <i>exenatide</i>	TIER 3	QL (1 PER 30 DAYS), MN- PA (Medically Necessary Prior Authorization)
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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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))
OZEMPIC (2 MG/DOSE)	OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN <i>semaglutide</i>	TIER 2	QL (1 PER 28 DAY(S))
RYBELSUS	RYBELSUS (3 MG TAB, 7 MG TAB, 14 MG TAB) <i>semaglutide</i>	TIER 2	QL (1 PER DAY(S))
TRULICITY	TRULICITY (0.75 SOLN PEN, 1.5 SOLN PEN) <i>dulaglutide</i>	TIER 2	QL (4 PER 28 DAYS)
TRULICITY	TRULICITY (3 SOLN PEN, 4.5 SOLN PEN) <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 PER 30 DAYS)
INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS)			
MOUNJARO	MOUNJARO (2.5 SOLN PEN, 5 SOLN PEN, 7.5 SOLN PEN, 10 SOLN PEN, 12.5 SOLN PEN, 15 SOLN PEN) <i>tirzepatide</i>	TIER 2	QL (4 PER 28 DAY(S))
SULFONYLUREAS			
<i>glimepiride</i>	<i>glimepiride (1 mg tab, 2 mg tab, 4 mg tab)</i>	TIER 1	
<i>glipizide</i>	<i>glipizide 10 mg tab</i>	TIER 1	
<i>glipizide</i>	<i>glipizide 5 mg tab</i>	TIER 1	
<i>glipizide er</i>	<i>glipizide er (er 5 mg tab er 24h, er 10 mg tab er 24h)</i>	TIER 1	
<i>glipizide er</i>	<i>glipizide er 2.5 mg tab er 24h</i>	TIER 1	
<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	
<i>glyburide</i>	<i>glyburide (1.25 mg tab, 5 mg tab)</i>	TIER 1	
<i>glyburide</i>	<i>glyburide 2.5 mg tab</i>	TIER 1	

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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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</i> (<i>hyperglycemia</i>)	SP-P	PA, QL (120 PER 30 DAY(S)), S
ALPHA-GLUCOSIDASE INHIBITORS			
<i>acarbose</i>	<i>acarbose</i> (25 mg tab, 50 mg tab, 100 mg tab)	TIER 1	
<i>miglitol</i>	<i>miglitol</i> (25 mg tab, 50 mg tab, 100 mg tab)	TIER 1	
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</i> (6.25 mg tab, 12.5 mg tab, 25 mg tab)	TIER 1	
JANUVIA	JANUVIA (25 MG TAB, 50 MG TAB, 100 MG TAB) <i>sitagliptin phosphate</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
NESINA	NESINA 25 MG TAB <i>alogliptin benzoate</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization), GA
ZITUVIO	ZITUVIO (25 MG TAB, 50 MG TAB, 100 MG TAB) <i>sitagliptin</i>	P&T	
THIAZOLIDINEDIONES			
<i>pioglitazone hcl</i>	<i>pioglitazone hcl (15 mg tab, 30 mg tab, 45 mg tab)</i>	TIER 1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS			
FARXIGA	FARXIGA (5 MG TAB, 10 MG TAB) <i>dapagliflozin propanediol</i>	TIER 2	
JARDIANCE	JARDIANCE (10 MG TAB, 25 MG TAB) <i>empagliflozin</i>	TIER 2	
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	
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	
DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS			
<i>alogliptin-pioglitazone</i>	<i>alogliptin-pioglitazone (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)</i>	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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	
SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS			
GLYXAMBI	GLYXAMBI (10-5 MG TAB, 25-5 MG TAB) <i>empagliflozin-linagliptin</i>	TIER 2	
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	
SULFONYLUREA-BIGUANIDE COMBINATIONS			
<i>glipizide-metformin hcl</i>	<i>glipizide-metformin hcl (2.5-250 mg tab, 2.5-500 mg tab, 5-500 mg tab)</i>	TIER 1	
<i>glyburide-metformin</i>	<i>glyburide-metformin (1.25-250 mg tab, 2.5-500 mg tab, 5-500 mg tab)</i>	TIER 1	
SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS			
<i>pioglitazone hcl-glimepiride</i>	<i>pioglitazone hcl-glimepiride (30-2 mg tab, 30-4 mg tab)</i>	TIER 1	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
THYROID AGENTS			
THYROID HORMONES			
ADTHYZA	ADTHYZA (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB) <i>thyroid</i>	TIER 3	
ARMOUR THYROID	ARMOUR THYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB) <i>thyroid</i>	TIER 3	
<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	
NIVA THYROID	NIVA THYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB) <i>thyroid</i>	TIER 3	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
NP THYROID	NP THYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB) <i>thyroid</i>	TIER 3	
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
THYROID	THYROID (15 MG TAB, 30 MG TAB, 60 MG TAB, 90 MG TAB, 120 MG TAB) <i>thyroid</i>	TIER 3	
<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	
<i>ibandronate sodium</i>	<i>ibandronate sodium 150 mg tab</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)			
OSPHENA	OSPHENA 60 MG TAB <i>ospemifene</i>	TIER 3	
<i>raloxifene hcl</i>	<i>raloxifene hcl 60 mg tab</i>	TIER 1	PA
OVULATION STIMULANTS-GONADOTROPINS			
CHORIONIC GONADOTROPIN	CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN <i>chorionic gonadotropin</i>	SP-M	S
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 INJECTABLE <i>choriogonadotropin alfa</i>	SP-M	S
PREGNYL	PREGNYL 10000 UNIT RECON SOLN <i>chorionic gonadotropin</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
GROWTH HORMONES			
GENOTROPIN MINIQUICK	GENOTROPIN MINIQUICK (0.2 MG PRSYR, 0.4 MG PRSYR, 0.6 MG PRSYR, 0.8 MG PRSYR, 1 MG PRSYR, 1.2 MG PRSYR, 1.4 MG PRSYR, 1.6 MG PRSYR, 1.8 MG PRSYR, 2 MG PRSYR) <i>somatropin</i>	SP-P	PA, S
HUMATROPE	HUMATROPE (5 MG RECON SOLN, 6 MG CARTRIDGE, 12 MG CARTRIDGE, 24 MG CARTRIDGE) <i>somatropin</i>	SP-NP	S, MN-PA (Medically Necessary Prior Authorization)
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)
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
LANREOTIDE ACETATE	LANREOTIDE ACETATE 120 MG/0.5ML SOLUTION <i>lanreotide acetate</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>	SBG	S
<i>octreotide acetate</i>	<i>octreotide acetate (50 mcg/ml solution, 100 mcg/ml solution, 500 mcg/ml solution)</i>	SBG	QL (3 PER 1 DAY), S
<i>octreotide acetate</i>	<i>octreotide acetate 1000 mcg/ml solution</i>	SBG	QL (9 PER 30 DAY(S)), S
<i>octreotide acetate</i>	<i>octreotide acetate 200 mcg/ml solution</i>	SBG	QL (45 PER 30 DAY(S)), S
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
SANDOSTATIN LAR DEPOT	SANDOSTATIN LAR DEPOT 20 MG KIT <i>octreotide acetate</i>	SP-M	PA, QL (2 PER 28 DAY(S)), S
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	S, MN-PA (Medically Necessary Prior Authorization)
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	QL (1 PER 1 DAY), S, MN- PA (Medically Necessary Prior Authorization)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
DESMOPRESSIN ACETATE	DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION <i>desmopressin acetate</i>	SP-NP	S
<i>desmopressin acetate</i>	<i>desmopressin acetate 4 mcg/ml solution</i>	TIER 3	
<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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>tolvaptan</i>	<i>tolvaptan (15 mg tab, 30 mg tab)</i>	SBG	PA, QL (60 PER 30 DAYS), S
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	
CKD AGENT-SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR			
XPHOZAH	XPHOZAH (20 MG TAB, 30 MG TAB) <i>tenapanor hcl (ckd)</i>	P&T	QL (2 PER DAY(S))
FABRY DISEASE - AGENTS			
ELFABRIO	ELFABRIO 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)</i>	SBG	S
<i>nitisinone</i>	<i>nitisinone 20 mg cap</i>	SP-P	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ORFADIN	ORFADIN 20 MG CAP <i>nitisinone</i>	SP-P	S, GA
HOMOCYSTINURIA TREATMENT - AGENTS			
<i>betaine</i>	<i>betaine powder</i>	SBG	S
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	
RAYALDEE	RAYALDEE 30 MCG CAP ER <i>calcifediol</i>	TIER 3	
CALCIMIMETIC AGENTS			
<i>cinacalcet hcl</i>	<i>cinacalcet hcl (30 mg tab, 60 mg tab)</i>	SBG	QL (2 PER 1 DAY), S
<i>cinacalcet hcl</i>	<i>cinacalcet hcl 90 mg tab</i>	SBG	QL (4 PER 1 DAY), 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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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-vjvk</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>	P&T	PA, S
POMBILITI	POMBILITI 105 MG RECON SOLN <i>cipaglucosidase alfa-atga</i>	P&T	PA, S
UREA CYCLE DISORDER - AGENTS			
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 PELLET <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>	SBG	QL (25 PER 1 DAY(S)), S
<i>sodium phenylbutyrate</i>	<i>sodium phenylbutyrate 500 mg tab</i>	SBG	QL (40 PER 1 DAY(S)), S
HYPERAMMONEMIA TREATMENT - AGENTS			
<i>carglumic acid</i>	<i>carglumic acid 200 mg tab sol</i>	SBG	S
PHENYLKETONURIA TREATMENT - AGENTS			
<i>javygtor</i>	<i>javygtor (100 mg packet, 100 mg tab, 500 mg packet)</i>	SBG	S
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 (100 mg packet, 100 mg tab, 500 mg packet)</i>	SBG	S
TRIPEPTIDYL PEPTIDASE 1 DEFICIENCY TREATMENT - AGENTS			
BRINEURA	BRINEURA 2 X 150 MG/5ML KIT <i>cerliponase alfa</i>	SP-M	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 (125 mcg tab, 250 mcg tab)</i>	TIER 1	
<i>digox</i>	<i>digox (125 mcg tab, 250 mcg tab)</i>	TIER 1	
<i>digoxin</i>	<i>digoxin (0.05 mg/ml solution, 62.5 mcg tab, 125 mcg tab, 250 mcg tab)</i>	TIER 1	
INOTROPES			
<i>milrinone lactate in dextrose</i>	<i>milrinone lactate in dextrose 40-5 mg/200ml-% solution</i>	SP-M	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
NITRO-BID	NITRO-BID 2 % OINTMENT <i>nitroglycerin</i>	TIER 3	
NITRO-DUR	NITRO-DUR 0.8 MG/HR PATCH 24HR <i>nitroglycerin</i>	TIER 3	
NITRO-TIME	NITRO-TIME (2.5 MG CAP ER, 6.5 MG CAP ER, 9 MG CAP ER) <i>nitroglycerin</i>	TIER 1	
<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	
NITROMIST	NITROMIST 400 MCG/SPRAY AERO SOLN <i>nitroglycerin</i>	TIER 3	
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	
<i>pindolol</i>	<i>pindolol (5 mg tab, 10 mg tab)</i>	TIER 1	
<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	
<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	
<i>sorine</i>	<i>sorine (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>sotalol hcl</i>	<i>sotalol hcl (80 mg tab, 120 mg tab, 160 mg tab, 240 mg tab)</i>	TIER 1	
<i>sotalol hcl (af)</i>	<i>sotalol hcl (af) (80 mg tab, 120 mg tab, 160 mg tab)</i>	TIER 1	
SOTYLIZE	SOTYLIZE 5 MG/ML SOLUTION <i>sotalol hcl</i>	TIER 3	PA, QL (1920 PER 30 DAY(S))
<i>timolol maleate</i>	<i>timolol maleate (5 mg tab, 10 mg tab)</i>	TIER 1	
<i>timolol maleate</i>	<i>timolol maleate 20 mg tab</i>	TIER 3	
BETA BLOCKERS CARDIO-SELECTIVE			
<i>acebutolol hcl</i>	<i>acebutolol hcl (200 mg cap, 400 mg cap)</i>	TIER 1	
<i>atenolol</i>	<i>atenolol (25 mg tab, 50 mg tab, 100 mg tab)</i>	TIER 1	
<i>betaxolol hcl</i>	<i>betaxolol hcl (10 mg tab, 20 mg tab)</i>	TIER 1	
<i>bisoprolol fumarate</i>	<i>bisoprolol fumarate (5 mg tab, 10 mg tab)</i>	TIER 1	
<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	
<i>metoprolol tartrate</i>	<i>metoprolol tartrate (25 mg tab, 50 mg tab, 100 mg tab)</i>	TIER 1	
<i>nebivolol hcl</i>	<i>nebivolol hcl (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i>	TIER 1	
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	
<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	
CALCIUM CHANNEL BLOCKERS			
<i>amlodipine besylate</i>	<i>amlodipine besylate (2.5 mg tab, 5 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>amlodipine besylate</i>	<i>amlodipine besylate 10 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, 30 mg tab, 60 mg tab, 120 mg tab)</i>	TIER 1	
<i>diltiazem hcl</i>	<i>diltiazem hcl 90 mg tab</i>	TIER 1	
<i>diltiazem hcl er</i>	<i>diltiazem hcl er (er 60 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 (er 90 mg cap er 12h, er 120 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	
<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, er 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
KATERZIA	KATERZIA 1 MG/ML SUSPENSION <i>amlodipine benzoate</i>	TIER 3	PA, QL (300 PER 30 DAY(S))
<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	
NYMALIZE	NYMALIZE (30 MG/10ML SOLUTION, 60 MG/20ML SOLUTION) <i>nimodipine</i>	TIER 3	
<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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
VERELAN	VERELAN 360 MG CAP ER 24H <i>verapamil hcl</i>	TIER 3	
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	
<i>captopril</i>	<i>captopril (12.5 mg tab, 25 mg tab, 50 mg tab, 100 mg tab)</i>	TIER 1	
<i>enalapril maleate</i>	<i>enalapril maleate (2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab)</i>	TIER 1	
<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	
<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	
<i>moexipril hcl</i>	<i>moexipril hcl (7.5 mg tab, 15 mg tab)</i>	TIER 1	
<i>perindopril erbumine</i>	<i>perindopril erbumine (2 mg tab, 4 mg tab, 8 mg tab)</i>	TIER 1	
QBRELIS	QBRELIS 1 MG/ML SOLUTION <i>lisinopril</i>	TIER 3	PA, QL (1200 PER 30 DAY(S))
<i>quinapril hcl</i>	<i>quinapril hcl (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>ramipril</i>	<i>ramipril (1.25 mg cap, 2.5 mg cap, 5 mg cap, 10 mg cap)</i>	TIER 1	
<i>trandolapril</i>	<i>trandolapril (1 mg tab, 2 mg tab, 4 mg tab)</i>	TIER 1	
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	
EDARBI	EDARBI (40 MG TAB, 80 MG TAB) <i>azilsartan medoxomil</i>	TIER 3	
EPROSARTAN MESYLATE	EPROSARTAN MESYLATE 600 MG TAB <i>eprosartan mesylate</i>	TIER 1	
<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, 0.3 mg/24hr patch wk)</i>	TIER 1	
<i>clonidine hcl</i>	<i>clonidine hcl (0.1 mg tab, 0.3 mg tab)</i>	TIER 1	
<i>clonidine hcl</i>	<i>clonidine hcl 0.2 mg tab</i>	TIER 1	
<i>guanfacine hcl</i>	<i>guanfacine hcl 1 mg tab</i>	TIER 1	QL (30 PER 30 DAY(S))
<i>guanfacine hcl</i>	<i>guanfacine hcl 2 mg tab</i>	TIER 1	QL (30 PER 30 DAY(S))
<i>methylodopa</i>	<i>methylodopa (250 mg tab, 500 mg tab)</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<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, 100 mg tab)</i>	TIER 1	
<i>hydralazine hcl</i>	<i>hydralazine hcl 50 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	
TRANDOLAPRIL-VERAPAMIL HCL ER	TRANDOLAPRIL-VERAPAMIL HCL ER (ER 1-240 MG TAB ER, ER 2-180 MG TAB ER, ER 2-240 MG TAB ER, ER 4-240 MG TAB ER) <i>trandolapril-verapamil hcl</i>	TIER 3	
ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE			
<i>benazepril-hydrochlorothiazide</i>	<i>benazepril-hydrochlorothiazide (10-12.5 mg tab, 20-25 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>benazepril-hydrochlorothiazide</i>	<i>benazepril-hydrochlorothiazide (5-6.25 mg tab, 20-12.5 mg tab)</i>	TIER 1	
<i>captopril-hydrochlorothiazide</i>	<i>captopril-hydrochlorothiazide 25-15 mg tab</i>	TIER 1	
<i>enalapril-hydrochlorothiazide</i>	<i>enalapril-hydrochlorothiazide (5-12.5 mg tab, 10-25 mg tab)</i>	TIER 1	
<i>fosinopril sodium-hctz</i>	<i>fosinopril sodium-hctz (10-12.5 mg tab, 20-12.5 mg tab)</i>	TIER 1	
<i>lisinopril-hydrochlorothiazide</i>	<i>lisinopril-hydrochlorothiazide (10-12.5 mg tab, 20-25 mg tab)</i>	TIER 1	
<i>lisinopril-hydrochlorothiazide</i>	<i>lisinopril-hydrochlorothiazide 20-12.5 mg tab</i>	TIER 1	
QUINAPRIL-HYDROCHLOROTHIAZIDE	QUINAPRIL-HYDROCHLOROTHIAZIDE (10-12.5 MG TAB, 20-25 MG TAB) <i>quinapril-hydrochlorothiazide</i>	TIER 1	GA
<i>quinapril-hydrochlorothiazide</i>	<i>quinapril-hydrochlorothiazide (20-12.5 mg tab, 20-25 mg tab)</i>	TIER 1	
BETA BLOCKER & DIURETIC COMBINATIONS			
<i>atenolol-chlorthalidone</i>	<i>atenolol-chlorthalidone (50-25 mg tab, 100-25 mg tab)</i>	TIER 1	
<i>bisoprolol-hydrochlorothiazide</i>	<i>bisoprolol-hydrochlorothiazide (2.5-6.25 mg tab, 5-6.25 mg tab)</i>	TIER 1	
<i>bisoprolol-hydrochlorothiazide</i>	<i>bisoprolol-hydrochlorothiazide 10-6.25 mg tab</i>	TIER 1	
<i>metoprolol-hydrochlorothiazide</i>	<i>metoprolol-hydrochlorothiazide (50-25 mg tab, 100-25 mg tab, 100-50 mg tab)</i>	TIER 1	
PROPRANOLOL-HCTZ	PROPRANOLOL-HCTZ (40-25 MG TAB, 80-25 MG TAB) <i>propranolol & hydrochlorothiazide</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB			
<i>amlodipine besylate-valsartan</i>	<i>amlodipine besylate-valsartan (5-160 mg tab, 10-160 mg tab, 10-320 mg tab)</i>	TIER 1	
<i>amlodipine besylate-valsartan</i>	<i>amlodipine besylate-valsartan 5-320 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	
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	
EDARBYCLOR	EDARBYCLOR (40-12.5 MG TAB, 40-25 MG TAB) <i>azilsartan medoxomil-chlorthalidone</i>	TIER 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 AZIDE	METHYLDOPA-HYDROCHLOROTHIAZIDE (250-15 MG TAB, 250-25 MG TAB) <i>methyldopa & hydrochlorothiazide</i>	TIER 1	
DIURETICS			
CARBONIC ANHYDRASE INHIBITORS			
<i>acetazolamide</i>	<i>acetazolamide (125 mg tab, 250 mg tab)</i>	TIER 1	
<i>acetazolamide er</i>	<i>acetazolamide er 500 mg cap er 12h</i>	TIER 1	
<i>dichlorphenamide</i>	<i>dichlorphenamide 50 mg tab</i>	SP-P	QL (4 PER 1 DAY), S
KEVEYIS	KEVEYIS 50 MG TAB <i>dichlorphenamide</i>	SP-NP	QL (4 PER 1 DAY), S, GA
<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	
CAROSPIR	CAROSPIR 25 MG/5ML SUSPENSION <i>spironolactone</i>	TIER 3	PA, QL (600 PER 30 DAY(S)), GA

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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)</i>	TIER 1	
<i>hydrochlorothiazide</i>	<i>hydrochlorothiazide (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, 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	
<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 2	QL (2 PER RX)
<i>epinephrine (anaphylaxis)</i>	<i>epinephrine (anaphylaxis) 1 mg/ml solution</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EPIPEN 2-PAK	EPIPEN 2-PAK 0.3 MG/0.3ML SOLN A-INJ <i>epinephrine (anaphylaxis)</i>	TIER 2	QL (2 PER RX), GA
SYMJEPI	SYMJEPI (0.15 SOLN PRSYR, 0.3 SOLN PRSYR) <i>epinephrine (anaphylaxis)</i>	TIER 2	QL (2 PER FILL(S))
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	
<i>gemfibrozil</i>	<i>gemfibrozil 600 mg tab</i>	TIER 1	
LIPOFEN	LIPOFEN (50 MG CAP, 150 MG CAP) <i>fenofibrate</i>	TIER 3	GA
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS			
<i>ezetimibe</i>	<i>ezetimibe 10 mg tab</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 (2 PER 28 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 (2 PER 28 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	
<i>fluvastatin sodium</i>	<i>fluvastatin sodium (20 mg cap, 40 mg cap)</i>	TIER 1	
<i>fluvastatin sodium er</i>	<i>fluvastatin sodium er 80 mg tab er 24h</i>	TIER 1	
<i>lovastatin</i>	<i>lovastatin (10 mg tab, 20 mg tab, 40 mg tab)</i>	TIER 1	
<i>pitavastatin calcium</i>	<i>pitavastatin calcium (1 mg tab, 2 mg tab, 4 mg tab)</i>	TIER 2	
<i>pravastatin sodium</i>	<i>pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab)</i>	TIER 1	
<i>rosuvastatin calcium</i>	<i>rosuvastatin calcium (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>simvastatin</i>	<i>simvastatin (5 mg tab, 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab)</i>	TIER 1	
ZYPITAMAG	ZYPITAMAG (1 MG TAB, 2 MG TAB, 4 MG TAB) <i>pitavastatin magnesium</i>	TIER 2	
NICOTINIC ACID DERIVATIVES			
NIACIN (ANTHYPERLIPIDE MIC)	NIACIN (ANTHYPERLIPIDEMIC) 500 MG TAB <i>niacin (antihyperlipidemic)</i>	TIER 3	
<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	
NIACOR	NIACOR 500 MG TAB <i>niacin (antihyperlipidemic)</i>	TIER 3	
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
ANTHYPERLIPIDEMICS - MISC.			
<i>icosapent ethyl</i>	<i>icosapent ethyl (0.5 gm cap, 1 gm cap)</i>	TIER 3	PA, QL (4 PER DAY(S))
VASCEPA	VASCEPA (0.5 GM CAP, 1 GM CAP) <i>icosapent ethyl</i>	TIER 3	PA, QL (4 PER DAY(S)), GA
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			
<i>isoxsuprine hcl</i>	<i>isoxsuprine hcl 10 mg tab</i>	TIER 1	
<i>isoxsuprine hcl</i>	<i>isoxsuprine hcl 20 mg tab</i>	TIER 2	

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>	SBG	PA, QL (60 PER 30 DAYS), 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>	SBG	PA, QL (720 PER 30 DAYS), S
<i>sildenafil citrate</i>	<i>sildenafil citrate 20 mg tab</i>	SBG	PA, QL (360 PER 30 DAYS), S
<i>tadalafil (pah)</i>	<i>tadalafil (pah) 20 mg tab</i>	SBG	PA, QL (60 PER 30 DAYS), S
TADLIQ	TADLIQ 20 MG/5ML SUSPENSION <i>tadalafil (pulmonary hypertension)</i>	SP-NP	PA, QL (10 PER DAY(S)), S
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS			
<i>ambrisentan</i>	<i>ambrisentan (5 mg tab, 10 mg tab)</i>	SBG	PA, QL (30 PER 30 DAYS), S
<i>bosentan</i>	<i>bosentan (62.5 mg tab, 125 mg tab)</i>	SBG	PA, QL (60 PER 30 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
OPSUMIT	OPSUMIT 10 MG TAB <i>macitentan</i>	SP-P	PA, QL (30 PER 30 DAYS), S
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
<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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 X48MCG 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
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
PROSTAGLANDIN - IMPOTENCE AGENTS			
CAVERJECT	CAVERJECT (20 MCG RECON SOLN, 40 MCG RECON SOLN) <i>alprostadil (vasodilator)</i>	TIER 3	QL (6 PER 30 DAYS)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
CAVERJECT IMPULSE	CAVERJECT IMPULSE (10 MCG KIT, 20 MCG KIT) <i>alprostadil (vasodilator)</i>	TIER 3	QL (6 PER 30 DAYS)
EDEX	EDEX (10 MCG KIT, 20 MCG KIT, 40 MCG KIT) <i>alprostadil (vasodilator)</i>	TIER 3	QL (6 PER 30 DAYS)
MUSE	MUSE (125 MCG PELLETT, 250 MCG PELLETT, 500 MCG PELLETT, 1000 MCG PELLETT) <i>alprostadil (vasodilator)</i>	TIER 3	QL (6 PER 30 DAYS)
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			
CORLANOR	CORLANOR (5 MG TAB, 7.5 MG TAB) <i>ivabradine hcl</i>	TIER 3	PA, QL (60 PER 30 DAY(S))
CORLANOR	CORLANOR 5 MG/5ML SOLUTION <i>ivabradine hcl</i>	TIER 3	PA, QL (450 PER 30 DAY(S))
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)			
VERQUVO	VERQUVO (2.5 MG TAB, 5 MG TAB, 10 MG TAB) <i>vericiguat</i>	TIER 3	PA, QL (30 PER 30 DAY(S))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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)
CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB			
<i>amlodipine-atorvastatin</i>	<i>amlodipine-atorvastatin</i> (2.5-10 mg tab, 2.5-20 mg tab, 5-20 mg tab, 5-80 mg tab, 10-10 mg tab, 10-20 mg tab)	TIER 1	
<i>amlodipine-atorvastatin</i>	<i>amlodipine-atorvastatin</i> (2.5-40 mg tab, 5-10 mg tab, 5-40 mg tab, 10-40 mg tab, 10-80 mg tab)	TIER 1	
ANTIHISTAMINES			
ANTIHISTAMINES - ETHANOLAMINES			
<i>carbinoxamine maleate</i>	<i>carbinoxamine maleate</i> (4 mg tab, 4 mg/5ml solution)	TIER 1	
CLEMASTINE FUMARATE	CLEMASTINE FUMARATE 2.68 MG TAB <i>clemastine fumarate</i>	TIER 1	
<i>diphenhydramine hcl</i>	<i>diphenhydramine hcl</i> 50 mg/ml solution	TIER 1	
ANTIHISTAMINES - PHENOTHIAZINES			
<i>promethazine hcl</i>	<i>promethazine hcl</i> (6.25 mg/5ml solution, 12.5 mg suppos, 12.5 mg tab, 25 mg suppos, 25 mg tab, 50 mg tab)	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</i> (2 mg/5ml syrup, 4 mg tab)	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTIHISTAMINES - NON-SEDATING			
DESLORATADINE	DESLORATADINE (2.5 MG TAB DISP, 5 MG TAB, 5 MG TAB DISP) <i>desloratadine</i>	TIER 1	
NASAL AGENTS - SYSTEMIC AND TOPICAL			
NASAL STEROIDS			
BECONASE AQ	BECONASE AQ 42 MCG/SPRAY SUSPENSION <i>beclomethasone diprop monohyd</i>	TIER 3	PA
<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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
MISC. RESPIRATORY INHALANTS			
HYPERSAL	HYPERSAL 3.5 % NEBU SOLN <i>sodium chloride (inhalant)</i>	TIER 3	
<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	
DECONGESTANT & ANTIHISTAMINE			
PROMETHAZINE VC	PROMETHAZINE VC 6.25-5 MG/5ML SYRUP <i>promethazine & phenylephrine</i>	TIER 1	GA
<i>promethazine-phenylephrine</i>	<i>promethazine-phenylephrine 6.25-5 mg/5ml syrup</i>	TIER 1	
OPIOID ANTITUSSIVE-ANTIHISTAMINE			
<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-ANTIHISTAMINE			
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-ANTIHISTAMINE			
<i>promethazine-dm</i>	<i>promethazine-dm 6.25-15 mg/5ml syrup</i>	TIER 1	
NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE			
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTIASTHMATIC 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	
TUDORZA PRESSAIR	TUDORZA PRESSAIR 400 MCG/ACT AER POW BA <i>aclidinium bromide</i>	TIER 3	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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			
ADVAIR DISKUS	ADVAIR DISKUS (100-50 AER POW BA, 250-50 AER POW BA, 500-50 AER POW BA) <i>fluticasone-salmeterol</i>	TIER 1	GA
ADVAIR HFA	ADVAIR HFA (45-21 AEROSOL, 115-21 AEROSOL, 230-21 AEROSOL) <i>fluticasone-salmeterol</i>	TIER 2	GA
ANORO ELLIPTA	ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA <i>umeclidinium-vilanterol</i>	TIER 2	
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>breyna</i>	<i>breyna (80-4.5 aerosol, 160-4.5 aerosol)</i>	TIER 3	
<i>budesonide-formoterol fumarate</i>	<i>budesonide-formoterol fumarate (80-4.5 aerosol, 160-4.5 aerosol)</i>	TIER 1	MN-PA (Medically Necessary Prior Authorization)
COMBIVENT RESPIMAT	COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN <i>ipratropium-albuterol</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>fluticasone-salmeterol</i>	<i>fluticasone-salmeterol (55-14 aer pow ba, 113-14 aer pow ba, 232-14 aer pow ba)</i>	TIER 1	
<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	
SYMBICORT	SYMBICORT (80-4.5 AEROSOL, 160-4.5 AEROSOL) <i>budesonide-formoterol fumarate dihydrate</i>	TIER 2	GA
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	
XANTHINES			
<i>elixophyllin</i>	<i>elixophyllin 80 mg/15ml elixir</i>	TIER 1	
<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))
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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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))
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))
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))
ASMANEX HFA	ASMANEX HFA (50 AEROSOL, 100 AEROSOL, 200 AEROSOL) <i>mometasone furoate (inhalation)</i>	TIER 1	QL (1 PER 30 DAY(S))
<i>budesonide</i>	<i>budesonide (0.25 suspension, 0.5 suspension, 1 suspension)</i>	TIER 1	
FLOVENT DISKUS	FLOVENT DISKUS (50 AER POW BA, 100 AER POW BA, 250 AER POW BA) <i>fluticasone propionate (inhalation)</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
FLUTICASONE PROPIONATE DISKUS	FLUTICASONE PROPIONATE DISKUS (50 AER POW BA, 100 AER POW BA, 250 AER POW BA) <i>fluticasone propionate (inhalation)</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
FLUTICASONE PROPIONATE HFA	FLUTICASONE PROPIONATE HFA (44 AEROSOL, 110 AEROSOL, 220 AEROSOL) <i>fluticasone propionate hfa</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
QVAR REDIHALER	QVAR REDIHALER (40 AERO BA, 80 AERO BA) <i>beclomethasone dipropionate hfa</i>	TIER 1	QL (2 PER 30 DAY(S))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 RECON SOLN <i>omalizumab</i>	SP-M	PA, QL (8 PER 28 DAY(S)), S
XOLAIR	XOLAIR 150 MG/ML SOLN PRSYR <i>omalizumab</i>	SP-P	PA, QL (8 PER 28 DAY(S)), S
XOLAIR	XOLAIR 75 MG/0.5ML SOLN PRSYR <i>omalizumab</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)			
FASENRA	FASENRA 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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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			
<i>difil-g forte</i>	<i>difil-g forte 100-100 mg/5ml liquid</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
ZEMAIRA	ZEMAIRA (4000 MG RECON SOLN, 5000 MG RECON SOLN) <i>alpha1-proteinase inhibitor (human)</i>	SP-M	PA, S
ZEMAIRA	ZEMAIRA 1000 MG RECON SOLN <i>alpha1-proteinase inhibitor (human)</i>	SP-M	S, MN-PA (Medically Necessary Prior Authorization)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PULMONARY FIBROSIS AGENTS			
ESBRIET	ESBRIET 267 MG CAP <i>pirfenidone</i>	SP-NP	PA, QL (270 PER 30 DAYS), S, GA
<i>pirfenidone</i>	<i>pirfenidone 267 mg cap</i>	SBG	PA, QL (270 PER 30 DAYS), 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>	SBG	PA, QL (90 PER 30 DAY(S)), 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	
STIMULANT LAXATIVES			
CASCARA SAGRADA	CASCARA SAGRADA 1 GM/ML FL EXTRACT <i>cascara sagrada</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			
CLENPIQ	CLENPIQ (-GM/160ML SOLUTION, -GM/175ML SOLUTION) <i>sodium picosulfate-magnesium oxide-anhydrous citric acid</i>	TIER 3	
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	
PLENVU	PLENVU 140 GM RECON SOLN <i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	TIER 3	
SUFLAVE	SUFLAVE 178.7 GM RECON SOLN <i>peg 3350-kcl-sod chloride-sod sulfate-magnesium sulfate</i>	TIER 3	
SUTAB	SUTAB 1479-225-188 MG TAB <i>sodium sulfate-magnesium sulfate-potassium chloride</i>	TIER 3	
<i>trilyte</i>	<i>trilyte 420 gm recon soln</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<i>nizatidine</i>	<i>nizatidine (15 mg/ml solution, 150 mg cap, 300 mg cap)</i>	TIER 1	
ULCER DRUGS - PROSTAGLANDINS			
<i>misoprostol</i>	<i>misoprostol 100 mcg tab</i>	TIER 1	
<i>misoprostol</i>	<i>misoprostol 200 mcg tab</i>	TIER 1	
PROTON PUMP INHIBITORS			
ACIPHEX SPRINKLE	ACIPHEX SPRINKLE (5 MG CAP SPRINK, 10 MG CAP SPRINK) <i>rabeprazole sodium</i>	TIER 3	PA, QL (30 PER 30 DAYS), PA-QL (60 / 30 days)
<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)
ESOMEPRAZOLE STRONTIUM	ESOMEPRAZOLE STRONTIUM 49.3 MG CAP DR <i>esomeprazole strontium</i>	TIER 3	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)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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)
PRILOSEC	PRILOSEC (2.5 MG PACKET, 10 MG PACKET) <i>omeprazole magnesium</i>	TIER 3	PA, QL (60 PER 30 DAYS), PA-QL (90 / 30 days)
RABEPRAZOLE SODIUM	RABEPRAZOLE SODIUM 10 MG CAP SPRINK <i>rabeprazole sodium</i>	TIER 3	PA, QL (30 PER 30 DAYS), PA-QL (60 / 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)
PPI - POTASSIUM-COMPETITIVE ACID BLOCKERS (P-CAB)			
VOQUEZNA	VOQUEZNA (10 MG TAB, 20 MG TAB) <i>vonoprazan fumarate</i>	P&T	QL (1 PER DAY(S))
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	
PROTON PUMP INHIBITOR-ANTACID COMBINATIONS			
<i>omeprazole-sodium bicarbonate</i>	<i>omeprazole-sodium bicarbonate 40-1100 mg cap</i>	TIER 3	QL (30 PER 30 DAY(S))
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	
5-HT3 RECEPTOR ANTAGONISTS			
ANZEMET	ANZEMET (50 MG TAB, 100 MG TAB) <i>dolasetron mesylate</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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, 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)
SANCUSO	SANCUSO 3.1 MG/24HR PATCH <i>granisetron</i>	TIER 3	QL (4 PER 28 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
AKYNZEO	AKYNZEO 300-0.5 MG CAP <i>netupitant-palonosetron</i>	TIER 3	

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	
PANCREAZE	PANCREAZE (2600-8800 CP DR PART, 4200-14200 CP DR PART, 10500-35500 CP DR PART, 16800-56800 CP DR PART, 21000-54700 CP DR PART, 37000-97300 CP DR PART) <i>pancrelipase (lipase-protease-amylase)</i>	TIER 3	
PERTZYE	PERTZYE (4000 CP DR PART, 4000-14375 CP DR PART, 8000 CP DR PART, 16000 CP DR PART, 16000-57500 CP DR PART, 24000-86250 CP DR PART) <i>pancrelipase (lipase-protease-amylase)</i>	TIER 3	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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) <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	
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 9.5 MG/ML SOLUTION <i>maralixibat chloride</i>	SP-NP	PA, QL (90 PER 30 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<i>mesalamine</i>	<i>mesalamine (1.2 gm tab dr, 4 gm enema, 400 mg cap dr, 800 mg tab dr, 1000 mg suppos)</i>	TIER 1	
<i>mesalamine er</i>	<i>mesalamine er (er 0.375 gm cap er 24h, er 500 mg cap er)</i>	TIER 1	
PENTASA	PENTASA 250 MG CAP ER <i>mesalamine</i>	TIER 3	
<i>sulfasalazine</i>	<i>sulfasalazine (500 mg tab, 500 mg tab dr)</i>	TIER 1	
INTEGRIN RECEPTOR ANTAGONISTS			
ENTYVIO	ENTYVIO 108 MG/0.68ML SOLN PEN <i>vedolizumab</i>	P&T	PA, QL (2 PER 28 DAY(S)), S
ENTYVIO	ENTYVIO 300 MG RECON SOLN <i>vedolizumab</i>	SP-M	PA, S
INTERLEUKIN ANTAGONISTS			
OMVOH	OMVOH 100 MG/ML SOLN A-INJ <i>mirikizumab-mrkz</i>	P&T	PA, QL (2 PER 28 DAY(S)), S
OMVOH	OMVOH 300 MG/15ML SOLUTION <i>mirikizumab-mrkz</i>	P&T	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SKYRIZI	SKYRIZI (180 MG/1.2ML SOLN CART, 360 MG/2.4ML SOLN CART) <i>risankizumab-rzaa (crohn's)</i>	SP-P	PA, QL (1 PER 56 DAY(S)), S
SKYRIZI	SKYRIZI 600 MG/10ML SOLUTION <i>risankizumab-rzaa (crohn's)</i>	SP-M	PA, QL (3 PER 56 DAY(S)), S
STELARA	STELARA 130 MG/26ML SOLUTION <i>ustekinumab (iv)</i>	SP-M	PA, QL (4 PER FILL), S
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS (GI)			
VELSIPITY	VELSIPITY 2 MG TAB <i>etrasimod arginine</i>	P&T	PA, QL (1 PER DAY(S)), S
TUMOR NECROSIS FACTOR ALPHA BLOCKERS			
AVSOLA	AVSOLA 100 MG RECON SOLN <i>infliximab-axxq</i>	SP-M	PA, S
INFLECTRA	INFLECTRA 100 MG RECON SOLN <i>infliximab-dyyb</i>	SP-M	PA, S
INFLIXIMAB	INFLIXIMAB 100 MG RECON SOLN <i>infliximab</i>	SP-M	PA, S
REMICADE	REMICADE 100 MG RECON SOLN <i>infliximab</i>	SP-M	PA, S
RENFLEXIS	RENFLEXIS 100 MG RECON SOLN <i>infliximab-abda</i>	SP-M	PA, S
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS			
LINZESS	LINZESS (72 MCG CAP, 145 MCG CAP, 290 MCG CAP) <i>linaclotide</i>	TIER 2	
IBS AGENT - MU-OPIOID RECEPTOR AGONISTS			
VIBERZI	VIBERZI (75 MG TAB, 100 MG TAB) <i>eluxadoline</i>	TIER 3	
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
RELISTOR	RELISTOR (8 MG/0.4ML SOLUTION, 12 MG/0.6ML SOLUTION) <i>methylnaltrexone bromide</i>	TIER 3	QL (30 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization)
RELISTOR	RELISTOR 150 MG TAB <i>methylnaltrexone bromide</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
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
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	
VELPHORO	VELPHORO 500 MG CHEW TAB <i>sucroferric oxyhydroxide</i>	TIER 3	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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>tropium chloride</i>	<i>tropium chloride 20 mg tab</i>	TIER 1	
<i>tropium chloride er</i>	<i>tropium chloride er 60 mg cap er 24h</i>	TIER 1	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
CLINDESSE	CLINDESSE 2 % CREAM <i>clindamycin phosphate (one dose)</i>	TIER 3	
<i>metronidazole</i>	<i>metronidazole 0.75 % gel</i>	TIER 1	
NUVESSA	NUVESSA 1.3 % GEL <i>metronidazole vaginal</i>	TIER 3	
IMIDAZOLE-RELATED ANTIFUNGALS			
GYNAZOLE-1	GYNAZOLE-1 2 % CREAM <i>butoconazole nitrate (one dose)</i>	TIER 3	
<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	
GENITOURINARY AGENTS - MISCELLANEOUS			
PHOSPHATES			
K-PHOS NO 2	K-PHOS NO 2 305-700 MG TAB <i>potassium & sodium acid phosphates</i>	TIER 3	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
URINARY STONE AGENTS			
LITHOSTAT	LITHOSTAT 250 MG TAB <i>acetohydroxamic acid</i>	TIER 3	
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>	SBG	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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 (5 mg cap, 10 mg cap)</i>	TIER 1	
<i>chlordiazepoxide hcl</i>	<i>chlordiazepoxide hcl 25 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>diazepam</i>	<i>diazepam (2 mg tab, 5 mg tab, 5 mg/5ml solution, 5 mg/ml conc, 10 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 (10 mg tab, 15 mg tab)</i>	TIER 1	
<i>buspirone hcl</i>	<i>buspirone hcl (5 mg tab, 7.5 mg tab, 30 mg tab)</i>	TIER 1	
<i>hydroxyzine hcl</i>	<i>hydroxyzine hcl (10 mg tab, 10 mg/5ml syrup, 50 mg tab)</i>	TIER 1	
<i>hydroxyzine hcl</i>	<i>hydroxyzine hcl 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	
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
MONOAMINE OXIDASE INHIBITORS (MAOIS)			
EMSAM	EMSAM (6 MG/24HR PATCH 24HR, 9 MG/24HR PATCH 24HR, 12 MG/24HR PATCH 24HR) <i>selegiline</i>	TIER 3	
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 (100 mg tab, 150 mg tab)</i>	TIER 1	
<i>trazodone hcl</i>	<i>trazodone hcl 50 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	
<i>citalopram hydrobromide</i>	<i>citalopram hydrobromide 10 mg/5ml solution</i>	TIER 1	PA, QL (600 PER 30 DAY(S))
<i>escitalopram oxalate</i>	<i>escitalopram oxalate (5 mg tab, 5 mg/5ml solution, 10 mg tab, 20 mg tab)</i>	TIER 1	
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	
<i>fluvoxamine maleate</i>	<i>fluvoxamine maleate (50 mg tab, 100 mg tab)</i>	TIER 1	
<i>fluvoxamine maleate</i>	<i>fluvoxamine maleate 25 mg tab</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>fluvoxamine maleate er</i>	<i>fluvoxamine maleate er (er 100 mg cap er 24h, 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	
<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	
<i>sertraline hcl</i>	<i>sertraline hcl (20 mg/ml conc, 25 mg tab, 50 mg tab, 100 mg tab)</i>	TIER 1	
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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 200 mg tab er 12h)</i>	TIER 1	
<i>bupropion hcl er (sr)</i>	<i>bupropion hcl er (sr) 150 mg tab er 12h</i>	TIER 1	
<i>bupropion hcl er (xl)</i>	<i>bupropion hcl er (xl) (er 150 mg tab er 24h, er 300 mg tab er 24h)</i>	TIER 1	
MAPROTILINE HCL	MAPROTILINE HCL (25 MG TAB, 50 MG TAB, 75 MG TAB) <i>maprotiline hcl</i>	TIER 1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS			
BENZISOXAZOLES			
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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, 2 mg tab, 4 mg tab)</i>	TIER 1	
<i>risperidone</i>	<i>risperidone (0.5 mg tab, 1 mg tab, 3 mg tab)</i>	TIER 1	
<i>risperidone</i>	<i>risperidone 1 mg/ml solution</i>	TIER 1	PA, QL (480 PER 30 DAY(S))
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 (100 mg tab, 200 mg tab)</i>	TIER 1	
<i>clozapine</i>	<i>clozapine (12.5 mg tab disp, 25 mg tab, 25 mg tab disp, 50 mg tab, 100 mg tab disp)</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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 RELPREVV	ZYPREXA RELPREVV (210 MG RECON SUSP, 405 MG RECON SUSP) <i>olanzapine pamoate</i>	SP-M	S
PHENOTHIAZINES			
<i>chlorpromazine hcl</i>	<i>chlorpromazine hcl (10 mg tab, 25 mg tab, 50 mg tab, 100 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, 2.5 mg tab, 5 mg tab, 10 mg tab)</i>	TIER 1	
FLUPHENAZINE HCL	FLUPHENAZINE HCL (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			
<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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
THIOXANTHENES			
<i>thiothixene</i>	<i>thiothixene (1 mg cap, 2 mg cap, 5 mg cap, 10 mg cap)</i>	TIER 1	
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
VRAYLAR	VRAYLAR (1.5 & 3 MG CAP THPK, 1.5 MG CAP, 3 MG CAP, 4.5 MG CAP, 6 MG CAP) <i>cariprazine hcl</i>	TIER 3	PA, QL (30 PER 30 DAYS)
<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 3	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
FLURAZEPAM HCL	FLURAZEPAM HCL (15 MG CAP, 30 MG CAP) <i>flurazepam hcl</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	
<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	PA
<i>tasimelteon</i>	<i>tasimelteon 20 mg cap</i>	SP-P	PA, QL (30 PER 30 DAYS), 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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
<i>zenzedi</i>	<i>zenzedi (5 mg tab, 10 mg tab)</i>	TIER 1	
AMPHETAMINE MIXTURES			
<i>amphetamine-dextroamphet er</i>	<i>amphetamine-dextroamphet 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)</i>	TIER 1	PA
<i>amphetamine-dextroamphetamine</i>	<i>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)</i>	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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANALEPTICS			
<i>caffeine citrate</i>	<i>caffeine citrate (20 mg/ml solution, 60 mg/3ml solution)</i>	TIER 1	
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS			
<i>clonidine hcl er</i>	<i>clonidine hcl er 0.1 mg tab er 12h</i>	TIER 1	
<i>guanfacine hcl er</i>	<i>guanfacine hcl er (er 1 mg tab er 24h, er 2 mg tab er 24h)</i>	TIER 1	QL (1 PER DAY(S))
<i>guanfacine hcl er</i>	<i>guanfacine hcl er 3 mg tab er 24h</i>	TIER 1	QL (2 PER DAY(S))
<i>guanfacine hcl er</i>	<i>guanfacine hcl er 4 mg tab er 24h</i>	TIER 1	QL (1 PER DAY(S))
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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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
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)
QUILLIVANT XR	QUILLIVANT XR 25 MG/5ML SRER <i>methylphenidate hcl</i>	TIER 3	PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.			
ERGOLOID MESYLATES	ERGOLOID MESYLATES 1 MG TAB <i>ergoloid mesylates</i>	TIER 1	
PIMOZIDE	PIMOZIDE (1 MG TAB, 2 MG TAB) <i>pimozide</i>	TIER 1	

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 DETERRENTS			
<i>bupropion hcl er (smoking det)</i>	<i>bupropion hcl er (smoking det) 150 mg tab er 12h</i>	TIER 1	
CHANTIX STARTING MONTH PAK	CHANTIX STARTING MONTH PAK 0.5 MG X 11 & 1 MG X 42 TAB THPK <i>varenicline tartrate</i>	TIER 3	GA
<i>varenicline tartrate (starter)</i>	<i>varenicline tartrate (starter) 0.5 mg x 11 & 1 mg x 42 tab thpk</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 12 MG TAB ER 24H <i>deutetrabenazine</i>	SP-P	PA, QL (4 PER 1 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 6 MG TAB ER 24H <i>deutetrabenazine</i>	SP-P	PA, QL (3 PER 1 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 40 & 80 MG CAP THPK <i>valbenazine tosylate</i>	SP-P	PA, QL (1 PER 28 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>	SBG	QL (240 PER 30 DAYS), S
<i>tetrabenazine</i>	<i>tetrabenazine 25 mg tab</i>	SBG	QL (120 PER 30 DAYS), S
MULTIPLE SCLEROSIS AGENTS			
COPAXONE	COPAXONE 20 MG/ML SOLN PRSYR <i>glatiramer acetate</i>	SP-P	PA, QL (30 PER 30 DAY(S)), S, GA
COPAXONE	COPAXONE 40 MG/ML SOLN PRSYR <i>glatiramer acetate</i>	SP-P	PA, QL (12 PER 28 DAYS), S, GA
<i>glatiramer acetate</i>	<i>glatiramer acetate 20 mg/ml soln prsy</i>	SBG	PA, QL (30 PER 30 DAY(S)), S
<i>glatiramer acetate</i>	<i>glatiramer acetate 40 mg/ml soln prsy</i>	SBG	PA, QL (12 PER 28 DAYS), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>glatopa</i>	<i>glatopa 20 mg/ml soln prsyr</i>	SBG	PA, QL (30 PER 30 DAY(S)), S
<i>glatopa</i>	<i>glatopa 40 mg/ml soln prsyr</i>	SBG	PA, QL (12 PER 28 DAYS), S
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES			
MAVENCLAD (10 TABS)	MAVENCLAD (10 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (4 TABS)	MAVENCLAD (4 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (5 TABS)	MAVENCLAD (5 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (6 TABS)	MAVENCLAD (6 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (7 TABS)	MAVENCLAD (7 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (8 TABS)	MAVENCLAD (8 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MAVENCLAD (9 TABS)	MAVENCLAD (9 TABS) 10 MG TAB THPK <i>cladribine (multiple sclerosis)</i>	SP-P	PA, QL (20 PER 9 MONTH(S)), S
MULTIPLE SCLEROSIS AGENTS - INTERFERONS			
BETASERON	BETASERON 0.3 MG KIT <i>interferon beta-1b</i>	SP-P	PA, QL (15 PER 30 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	S, MN-PA (Medically Necessary Prior Authorization)
TYSABRI	TYSABRI 300 MG/15ML CONC <i>natalizumab</i>	SP-M	PA, QL (1 PER 28 DAYS), S
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS			
<i>dimethyl fumarate</i>	<i>dimethyl fumarate (120 mg cap dr, 240 mg cap dr)</i>	SBG	PA, QL (60 PER 30 DAYS), S
<i>dimethyl fumarate starter pack</i>	<i>dimethyl fumarate starter pack 120 & 240 mg cpdr thpk</i>	SBG	PA, QL (1 PER FILL), 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>	SBG	QL (60 PER 30 DAYS), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS			
<i>fingolimod hcl</i>	<i>fingolimod hcl 0.5 mg cap</i>	SBG	PA, QL (30 PER 30 DAYS), S
GILENYA	GILENYA 0.25 MG CAP <i>fingolimod hcl</i>	SP-NP	PA, QL (30 PER 30 DAY(S)), S
GILENYA	GILENYA 0.5 MG CAP <i>fingolimod hcl</i>	SP-NP	PA, QL (30 PER 30 DAYS), S, GA
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
FIBROMYALGIA AGENT - SNRIS			
SAVELLA	SAVELLA (12.5 MG TAB, 25 MG TAB, 50 MG TAB, 100 MG TAB) <i>milnacipran hcl</i>	TIER 3	QL (60 PER 30 DAY(S))
SAVELLA TITRATION PACK	SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC <i>milnacipran hcl</i>	TIER 3	QL (1 PER LIFETIME)
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
ANALGESIC COMBINATIONS			
DURAXIN	DURAXIN 300-200-20 MG CAP <i>acetaminophen- salicylamide- phenyltoloxamine</i>	TIER 1	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<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			
ABSTRAL	ABSTRAL (400 MCG SL TAB, 600 MCG SL TAB, 800 MCG SL TAB) <i>fentanyl citrate</i>	TIER 3	PA
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)</i>	TIER 1	PA, QL (10 PER 25)
<i>fentanyl</i>	<i>fentanyl (25 patch 72hr, 50 patch 72hr, 62.5 patch 72hr, 75 patch 72hr, 87.5 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))
FENTORA	FENTORA 100 MCG TAB <i>fentanyl citrate</i>	TIER 3	QL (4 PER 1 DAY(S)), GA

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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)
HYDROMORPHONE HCL	HYDROMORPHONE HCL 3 MG SUPPOS <i>hydromorphone hcl</i>	TIER 1	PA, QL (120 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)
<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))
LAZANDA	LAZANDA (100 SOLUTION, 300 SOLUTION, 400 SOLUTION) <i>fentanyl citrate</i>	TIER 3	QL (1 PER 1 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)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>methadose</i>	<i>methadose 40 mg tab sol</i>	TIER 1	
<i>morphine sulfate</i>	<i>morphine sulfate (30 mg suppos, 30 mg tab)</i>	TIER 1	PA, QL (90 PER 25)
MORPHINE SULFATE	MORPHINE SULFATE (5 MG SUPPOS, 10 MG SUPPOS, 15 MG TAB) <i>morphine sulfate</i>	TIER 1	PA, QL (180 PER 25)
<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)
MORPHINE SULFATE	MORPHINE SULFATE 20 MG SUPPOS <i>morphine sulfate</i>	TIER 1	PA, QL (120 PER 25)
<i>morphine sulfate</i>	<i>morphine sulfate 20 mg/5ml solution</i>	TIER 1	PA, QL (675 PER 25)
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 cap, 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)
<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/5ml solution</i>	TIER 1	PA, QL (900 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)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
OXYCODONE HCL ER	OXYCODONE HCL ER (ER 20 MG TB12 DETER, ER 80 MG TB12 DETER) <i>oxycodone hcl</i>	TIER 2	PA, QL (60 PER 25)
OXYCODONE HCL ER	OXYCODONE HCL ER 10 MG TB12 DETER <i>oxycodone hcl</i>	TIER 2	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)
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)
SUBSYS	SUBSYS (100 MCG LIQUID, 200 MCG LIQUID, 400 MCG LIQUID, 600 MCG LIQUID, 800 MCG LIQUID) <i>fentanyl</i>	TIER 3	QL (4 PER 1 DAY(S))
SUBSYS	SUBSYS (1200 (600 MCG LIQUID, 1600 (800 MCG LIQUID) <i>fentanyl</i>	TIER 3	QL (8 PER 1 DAY(S))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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
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)
<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)
<i>oxycodone-acetaminophen</i>	<i>oxycodone-acetaminophen (2.5-325 mg tab, 5-325 mg tab)</i>	TIER 1	QL (360 PER 25)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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 7.5-325 mg tab</i>	TIER 1	QL (240 PER 25)
OXYCODONE-ASPIRIN	OXYCODONE-ASPIRIN 4.8355-325 MG TAB <i>oxycodone-aspirin</i>	TIER 1	QL (360 PER 25)
CODEINE COMBINATIONS			
<i>acetaminophen-codeine</i>	<i>acetaminophen-codeine 120-12 mg/5ml solution</i>	TIER 1	QL (2700 PER 25)
<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	
<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	
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, 5-217 mg/10ml solution, 7.5-325 mg/15ml solution)</i>	TIER 1	QL (2700 PER 25)
<i>hydrocodone-acetaminophen</i>	<i>hydrocodone-acetaminophen (5-300 mg tab, 5-325 mg tab)</i>	TIER 1	QL (240 PER 25)
<i>hydrocodone-acetaminophen</i>	<i>hydrocodone-acetaminophen 10-300 mg tab</i>	TIER 1	QL (180 PER 25 DAY(S))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>hydrocodone-acetaminophen</i>	<i>hydrocodone-acetaminophen 10-325 mg tab</i>	TIER 1	QL (180 PER 24)
<i>hydrocodone-acetaminophen</i>	<i>hydrocodone-acetaminophen 7.5-300 mg tab</i>	TIER 1	QL (180 PER 25)
<i>hydrocodone-acetaminophen</i>	<i>hydrocodone-acetaminophen 7.5-325 mg tab</i>	TIER 1	QL (180 PER 25)
<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)
<i>lorcet</i>	<i>lorcet 5-325 mg tab</i>	TIER 1	QL (240 PER 25)
<i>lorcet hd</i>	<i>lorcet hd 10-325 mg tab</i>	TIER 1	QL (180 PER 24)
LORTAB	LORTAB 10-300 MG/15ML ELIXIR <i>hydrocodone-acetaminophen</i>	TIER 3	QL (2025 PER 25)
TRAMADOL COMBINATIONS			
<i>tramadol-acetaminophen</i>	<i>tramadol-acetaminophen 37.5-325 mg tab</i>	TIER 1	QL (40 PER 25)
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
INDOCIN	INDOCIN 25 MG/5ML SUSPENSION <i>indomethacin</i>	TIER 2	PA, QL (1200 PER 30 DAY(S))
<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	
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	
<i>tolmetin sodium</i>	<i>tolmetin sodium (400 mg cap, 600 mg tab)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
CYCLOOXYGENASE 2 (COX-2) INHIBITORS			
<i>celecoxib</i>	<i>celecoxib (50 mg cap, 100 mg cap, 200 mg cap)</i>	TIER 1	QL (60 PER 30 DAYS)
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	
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 (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 (antirheumatic)</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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			
ABRILADA (1 PEN)	ABRILADA (1 PEN) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-afzb</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ABRILADA (2 PEN)	ABRILADA (2 PEN) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-afzb</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ABRILADA (2 SYRINGE)	ABRILADA (2 SYRINGE) (20 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-afzb</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
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
ADALIMUMAB-ADAZ	ADALIMUMAB-ADAZ (40 SOLN A-INJ, 40 SOLN PRSYR) <i>adalimumab-adaz</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB-ADBM (2 PEN)	ADALIMUMAB-ADBM (2 PEN) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB-ADBM (2 SYRINGE)	ADALIMUMAB-ADBM (2 SYRINGE) (10 MG/0.2ML PREF SY KT, 20 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ADALIMUMAB- ADBM(CD/UC/HS STRT)	ADALIMUMAB- ADBM(CD/UC/HS STRT) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB- ADBM(PS/UV STARTER)	ADALIMUMAB- ADBM(PS/UV STARTER) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB-FKJP (2 PEN)	ADALIMUMAB-FKJP (2 PEN) 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-fkjp</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB-FKJP (2 SYRINGE)	ADALIMUMAB-FKJP (2 SYRINGE) (20 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-fkjp</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
ADALIMUMAB-FKJP	ADALIMUMAB-FKJP (20 MG/0.4ML PREF SY KT, 40 MG/0.8ML AUT-IJ KIT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-fkjp</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
AMJEVITA	AMJEVITA (10 MG/0.2ML SOLN PRSYR, 20 MG/0.4ML SOLN PRSYR, 40 MG/0.8ML SOLN A-INJ, 40 MG/0.8ML SOLN PRSYR) <i>adalimumab-atto</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
CYLTEZO	CYLTEZO (10 MG/0.2ML PREF SY KT, 20 MG/0.4ML PREF SY KT, 40 MG/0.8ML AUT-IJ KIT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
CYLTEZO-CD/UC/HS STARTER	CYLTEZO-CD/UC/HS STARTER 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
CYLTEZO- PSORIASIS STARTER	CYLTEZO-PSORIASIS STARTER 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-adbm</i>	P&T	PA, QL (4 PER 28 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
HADLIMA	HADLIMA (40 MG/0.4ML SOLN PRSYR, 40 MG/0.8ML SOLN PRSYR) <i>adalimumab-bwwd</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HADLIMA PUSHTOUCH	HADLIMA PUSHTOUCH (40 MG/0.4ML SOLN A-INJ, 40 MG/0.8ML SOLN A-INJ) <i>adalimumab-bwwd</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HULIO (2 SYRINGE)	HULIO (2 SYRINGE) (20 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT) <i>adalimumab-fkjp</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HULIO	HULIO 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-fkjp</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HUMIRA	HUMIRA (10 MG/0.1ML PREF SY KT, 20 MG/0.2ML PREF SY KT, 40 MG/0.4ML PREF SY KT) <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
HUMIRA (2 PEN)	HUMIRA (2 PEN) 40 MG/0.4ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
HUMIRA (2 PEN)	HUMIRA (2 PEN) 40 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAYS), S
HUMIRA (2 PEN)	HUMIRA (2 PEN) 80 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HUMIRA (2 SYRINGE)	HUMIRA (2 SYRINGE) (10 MG/0.1ML PREF SY KT, 20 MG/0.2ML PREF SY KT, 40 MG/0.4ML PREF SY KT) <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
HUMIRA (2 SYRINGE)	HUMIRA (2 SYRINGE) 40 MG/0.8ML PREF SY KT <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAYS), S
HUMIRA PEDIATRIC CROHNS START	HUMIRA PEDIATRIC CROHNS START (80 & 40MG/0.4ML PREF SY KT, 80 PREF SY KT) <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
HUMIRA PEN	HUMIRA PEN 80 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (4 PER 28 DAY(S)), S
HUMIRA PEN-CD/UC/HS STARTER	HUMIRA PEN-CD/UC/HS STARTER 80 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HUMIRA PEN-PSOR/UEVIT STARTER	HUMIRA PEN-PSOR/UEVIT STARTER 80 MG/0.8ML & 40MG/0.4ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HUMIRA-CD/UC/HS STARTER	HUMIRA-CD/UC/HS STARTER 40 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HUMIRA-PED \geq 40KG UC STARTER	HUMIRA-PED \geq 40KG UC STARTER 80 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HUMIRA-PS/UV/ADOL HS STARTER	HUMIRA-PS/UV/ADOL HS STARTER 40 MG/0.8ML PEN KIT <i>adalimumab</i>	SP-P	PA, QL (1 PER LIFETIME), S
HYRIMOZ	HYRIMOZ (10 MG/0.1 ML SOLN PRSYR, 20 MG/0.2ML SOLN PRSYR, 40 MG/0.4ML SOLN A-INJ, 40 MG/0.4ML SOLN PRSYR, 40 MG/0.8ML SOLN A-INJ, 40 MG/0.8ML SOLN PRSYR, 80 MG/0.8ML SOLN A-INJ) <i>adalimumab-adaz</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HYRIMOZ-CROHNS/UC STARTER	HYRIMOZ-CROHNS/UC STARTER 80 MG/0.8ML SOLN A-INJ <i>adalimumab-adaz</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
HYRIMOZ-CROHNS/UC STARTER PACK	HYRIMOZ-CROHNS/UC STARTER PACK 80 MG/0.8ML SOLN A-INJ <i>adalimumab-adaz</i>	P&T	PA, QL (1 PER LIFETIME), S
HYRIMOZ-PED CROHNS STARTER	HYRIMOZ-PED CROHNS STARTER (80 & 40MG/0.4ML SOLN PRSYR, 80 SOLN PRSYR) <i>adalimumab-adaz</i>	P&T	PA, QL (1 PER LIFETIME), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
HYRIMOZ-PLAQUE PSORIASIS START	HYRIMOZ-PLAQUE PSORIASIS START 80 MG/0.8ML & 40MG/0.4ML SOLN A-INJ <i>adalimumab-adaz</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
IDACIO	IDACIO (40 AUT-IJ KIT, 40 PREF SY KT) <i>adalimumab-aacf</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
IDACIO FOR CROHNS DISEASE/UC	IDACIO FOR CROHNS DISEASE/UC 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-aacf</i>	P&T	PA, QL (1 PER LIFETIME), S
IDACIO FOR PLAQUE PSORIASIS	IDACIO FOR PLAQUE PSORIASIS 40 MG/0.8ML AUT-IJ KIT <i>adalimumab-aacf</i>	P&T	PA, QL (1 PER LIFETIME), S
SIMPONI ARIA	SIMPONI ARIA 50 MG/4ML SOLUTION <i>golimumab</i>	SP-M	PA, S
YUFLYMA (1 PEN)	YUFLYMA (1 PEN) 40 MG/0.4ML AUT-IJ KIT <i>adalimumab-aaty</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
YUFLYMA (2 PEN)	YUFLYMA (2 PEN) 40 MG/0.4ML AUT-IJ KIT <i>adalimumab-aaty</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
YUFLYMA 2-SYRINGE KIT	YUFLYMA 2-SYRINGE KIT 40 MG/0.4ML PREF SY KT <i>adalimumab-aaty</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
YUSIMRY	YUSIMRY 40 MG/0.8ML SOLN PEN <i>adalimumab-aqvh</i>	P&T	PA, QL (4 PER 28 DAY(S)), S
PYRIMIDINE SYNTHESIS INHIBITORS			
<i>leflunomide</i>	<i>leflunomide (10 mg tab, 20 mg tab)</i>	TIER 1	
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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)
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
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 28 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 30 MG TAB <i>apremilast</i>	SP-P	PA, QL (60 PER 30 DAYS), S
MIGRAINE PRODUCTS			
<i>dihydroergotamine mesylate</i>	<i>dihydroergotamine mesylate 1 mg/ml solution</i>	TIER 1	
ERGOMAR	ERGOMAR 2 MG SL TAB <i>ergotamine tartrate</i>	TIER 3	
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</i>	TIER 1	QL (18 PER 30 DAY(S))
<i>eletriptan hydrobromide</i>	<i>eletriptan hydrobromide 40 mg tab</i>	TIER 1	PA, 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, 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 soln prsy, 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))
<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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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))
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, 0.5 mg tab disp, 2 mg tab disp)</i>	TIER 1	
<i>clonazepam</i>	<i>clonazepam (0.25 mg tab disp, 0.5 mg tab, 1 mg tab, 1 mg tab disp, 2 mg tab)</i>	TIER 1	
DIASTAT ACUDIAL	DIASTAT ACUDIAL (10 MG GEL, 20 MG GEL) <i>diazepam (anticonvulsant)</i>	TIER 3	GA
DIASTAT PEDIATRIC	DIASTAT PEDIATRIC 2.5 MG GEL <i>diazepam (anticonvulsant)</i>	TIER 3	GA
<i>diazepam</i>	<i>diazepam (2.5 mg gel, 10 mg gel)</i>	TIER 1	
<i>diazepam</i>	<i>diazepam 20 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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
GABA MODULATORS			
<i>tiagabine hcl</i>	<i>tiagabine hcl (2 mg tab, 4 mg tab, 16 mg tab)</i>	TIER 1	
<i>tiagabine hcl</i>	<i>tiagabine hcl 12 mg tab</i>	TIER 1	
<i>vigabatrin</i>	<i>vigabatrin (500 mg packet, 500 mg tab)</i>	SBG	QL (180 PER 30 DAYS), S
<i>vigadrone</i>	<i>vigadrone (500 mg packet, 500 mg tab)</i>	SBG	QL (180 PER 30 DAYS), S
<i>vigpoder</i>	<i>vigpoder 500 mg packet</i>	SBG	QL (180 PER 30 DAYS), S
HYDANTOINS			
DILANTIN	DILANTIN 30 MG CAP <i>phenytoin sodium extended</i>	TIER 3	
PEGANONE	PEGANONE 250 MG TAB <i>ethotoin</i>	TIER 2	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<i>valproic acid</i>	<i>valproic acid (250 mg cap, 250 mg/5ml 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</i>	TIER 1	
<i>carbamazepine er</i>	<i>carbamazepine er (er 100 mg cap er 12h, er 100 mg tab 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 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, 100 mg tab, 150 mg tab, 200 mg tab)</i>	TIER 1	
<i>lamotrigine</i>	<i>lamotrigine (25 mg tab disp, 50 mg tab disp, 100 mg tab, 100 mg tab disp, 200 mg tab disp)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>lamotrigine</i>	<i>lamotrigine (5 mg chew tab, 25 mg chew tab, 25 mg tab, 150 mg tab, 200 mg tab)</i>	TIER 1	
<i>lamotrigine er</i>	<i>lamotrigine er (er 25 mg tab er 24h, er 100 mg tab er 24h, er 300 mg tab er 24h)</i>	TIER 1	
<i>lamotrigine er</i>	<i>lamotrigine er (er 50 mg tab er 24h, er 200 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)</i>	TIER 1	
<i>levetiracetam</i>	<i>levetiracetam (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	
MOTPOLY XR	MOTPOLY XR (150 MG CAP ER 24H, 200 MG CAP ER 24H) <i>lacosamide</i>	TIER 3	QL (2 PER 1 DAY(S))
MOTPOLY XR	MOTPOLY XR 100 MG CAP ER 24H <i>lacosamide</i>	TIER 3	QL (1 PER 1 DAY(S))
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
<i>topiramate er</i>	<i>topiramate er (er 25 mg cp24 sprnk, er 50 mg cp24 sprnk, er 100 mg cp24 sprnk, er 150 mg cp24 sprnk, 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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>apomorphine hcl</i>	<i>apomorphine hcl 30 mg/3ml soln cart</i>	SP-M	S
NEUPRO	NEUPRO (1 MG/24HR PATCH 24HR, 2 MG/24HR PATCH 24HR, 3 MG/24HR PATCH 24HR, 4 MG/24HR PATCH 24HR, 6 MG/24HR PATCH 24HR, 8 MG/24HR PATCH 24HR) <i>rotigotine</i>	TIER 3	PA, QL (1 PER 1 DAY(S))
<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, 1 mg tab, 3 mg tab, 5 mg tab)</i>	TIER 1	
<i>ropinirole hcl</i>	<i>ropinirole hcl (0.5 mg tab, 2 mg tab, 4 mg tab)</i>	TIER 1	
<i>ropinirole hcl er</i>	<i>ropinirole hcl er (er 2 mg tab er 24h, er 6 mg tab er 24h)</i>	TIER 1	PA, QL (2 PER 1 DAY(S))
<i>ropinirole hcl er</i>	<i>ropinirole hcl er (er 4 mg tab er 24h, er 8 mg tab er 24h, er 12 mg tab er 24h)</i>	TIER 1	PA, QL (2 PER 1 DAY(S))
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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	
XADAGO	XADAGO (50 MG TAB, 100 MG TAB) <i>safinamide mesylate</i>	TIER 3	PA
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
DYSPORT	DYSPORT (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 - MISCELLANEOUS			
RADICAVA	RADICAVA 30 MG/100ML SOLUTION <i>edaravone</i>	SP-M	PA, S
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)
ALS AGENT COMBINATIONS			
RELYVRIO	RELYVRIO 3-1 GM PACKET <i>sodium phenylbutyrate- taurursodiol</i>	SP-NP	QL (2 PER 1 DAY(S)), S
MUSCULAR DYSTROPHY - GENE THERAPY AGENTS			
AMONDYS 45	AMONDYS 45 100 MG/2ML SOLUTION <i>casimersen</i>	SP-M	S
EXONDYS 51	EXONDYS 51 (51 100 MG/2ML SOLUTION, 51 500 MG/10ML SOLUTION) <i>eteplirsen</i>	SP-M	S
VILTEPSO	VILTEPSO 250 MG/5ML SOLUTION <i>viltolarsen</i>	SP-M	S
VYONDYS 53	VYONDYS 53 100 MG/2ML SOLUTION <i>golodirsen</i>	SP-M	S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
ZOLGENSMA 3.1-3.5 KG	ZOLGENSMA 3.1-3.5 KG 2X5.5ML & 1X8.3ML KIT <i>onasemnogene 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 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 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 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 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 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 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 abeparvovec-xioi</i>	SP-M	PA, QL (1 PER LIFETIME), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ZOLGENSMA 7.1-7.5 KG	ZOLGENSMA 7.1-7.5 KG 5X8.3 ML KIT <i>onasemnogene 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 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 abeparvovec-xioi</i>	SP-M	PA, QL (1 PER LIFETIME), S
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 (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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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	S, MN-PA (Medically Necessary Prior Authorization)
GEL-ONE	GEL-ONE 30 MG/3ML PRSYR <i>cross-linked hyaluronate</i>	SP-M	PA, 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 SOLN PRSYR, 20 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	PA, S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SODIUM HYALURONATE	SODIUM HYALURONATE 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement)	SP-M	S, MN-PA (Medically Necessary Prior Authorization)
SUPARTZ FX	SUPARTZ FX 25 MG/2.5ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement)	SP-M	S, MN-PA (Medically Necessary Prior Authorization)
SYNOJOYNT	SYNOJOYNT 20 MG/2ML SOLN PRSYR <i>sodium hyaluronate</i> (viscosupplement)	SP-M	S, MN-PA (Medically Necessary Prior Authorization)
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	S, MN-PA (Medically Necessary Prior Authorization)
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	CARISOPRODOL-ASPIRIN 200-325 MG TAB <i>carisoprodol w/ aspirin</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<i>pyridostigmine bromide</i>	<i>pyridostigmine bromide (60 mg tab, 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
COMPLETENATE	COMPLETENATE 29-1 MG CHEW TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i>	TIER 2	
CONCEPT OB	CONCEPT OB 130-92.4-1 MG CAP <i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</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	
MYNATAL	MYNATAL 90-1 MG TAB <i>prenatal vit w/ docusate- iron carbonyl-folic acid</i>	TIER 2	
MYNATAL ADVANCE	MYNATAL ADVANCE TAB <i>prenatal vit w/ docusate- iron carbonyl-folic acid</i>	TIER 2	
MYNATE 90 PLUS	MYNATE 90 PLUS TAB ER <i>prenatal vit w/ docusate-fe fumarate-folic acid</i>	TIER 2	
NATALVIT	NATALVIT TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i>	TIER 2	
O-CAL PRENATAL	O-CAL PRENATAL TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i>	TIER 2	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PNV TABS 29-1	PNV TABS 29-1 29-1 MG TAB <i>prenatal vit w/ iron carbonyl-folic acid</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 (19CHEWTAB, 19TAB, 1929-1MGCHEWTAB, 1929-1MGTAB) <i>prenatal vit w/ docusate-fe fumarate-folic acid</i>	TIER 2	
PRENATAL PLUS IRON	PRENATAL PLUS IRON 29-1 MG TAB <i>prenatal vit w/ iron carbonyl-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	
SE-NATAL 19	SE-NATAL 19 (19 MG CHEW TAB, 19 MG TAB) <i>prenatal vit w/ docusate-fe fumarate-folic acid</i>	TIER 2	
THRIVITE RX	THRIVITE RX 29-1 MG TAB <i>prenatal vit w/ iron carbonyl-folic acid</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	
TRINATAL RX 1	TRINATAL RX 1 60-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
VINATE ONE	VINATE ONE 60-1 MG TAB <i>prenatal vit w/ ferrous fumarate-folic acid</i>	TIER 2	
VOL-TAB RX	VOL-TAB RX 29-1 MG TAB <i>prenatal vit w/ iron carbonyl-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	
PR NATAL 400	PR NATAL 400 29-1-200 & 400 MG MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>	TIER 2	
PR NATAL 400 EC	PR NATAL 400 EC 29-1-200 & 400 MG (DR) MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>	TIER 2	
PR NATAL 430	PR NATAL 430 29-1-200 & 430 MG MISC <i>prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3</i>	TIER 2	
PR NATAL 430 EC	PR NATAL 430 EC 29-1-200 & 430 MG (DR) 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
IODINE PRODUCTS			
IODINE STRONG	IODINE STRONG 5 % SOLUTION <i>iodine strong (lugol's)</i>	TIER 3	
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	
<i>virt-phos 250 neutral</i>	<i>virt-phos 250 neutral 155-852-130 mg tab</i>	TIER 1	
POTASSIUM			
K-TAB	K-TAB 8 MEQ TAB ER <i>potassium chloride</i>	TIER 3	GA
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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 15 tab er, er 20 tab er)</i>	TIER 1	
POTASSIUM COMBINATIONS			
EFFER-K	EFFER-K (10 EFFER TAB, 20 EFFER TAB) <i>potassium bicarbonate-citric acid</i>	TIER 3	
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>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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
FOLIC ACID/FOLATES			
<i>folic acid</i>	<i>folic acid 1 mg tab</i>	TIER 1	
<i>kp folic acid</i>	<i>kp folic acid 1 mg tab</i>	TIER 1	
<i>true folic acid</i>	<i>true folic acid 1 mg tab</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, 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-P	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>	SBG	S
GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)			
FULPHILA	FULPHILA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-jmdb</i>	SBG	PA, QL (2 PER 28 DAY(S)), S
FYLNETRA	FYLNETRA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-pbbk</i>	SBG	QL (2 PER 28 DAY(S)), S
NEULASTA ONPRO	NEULASTA ONPRO 6 MG/0.6ML PREF SY KT <i>pegfilgrastim</i>	SP-P	PA, 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>	SBG	S
NYVEPRIA	NYVEPRIA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-apgf</i>	SBG	QL (2 PER 28 DAY(S)), S
RELEUKO	RELEUKO (300 MCG/0.5ML SOLN PRSYR, 300 MCG/ML SOLUTION, 480 MCG/0.8ML SOLN PRSYR, 480 MCG/1.6ML SOLUTION) <i>filgrastim-ayow</i>	SBG	S
ROLVEDON	ROLVEDON 13.2 MG/0.6ML SOLN PRSYR <i>eflapegrastim-xnst</i>	SP-M	PA, S
STIMUFEND	STIMUFEND 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-fpgk</i>	SP-M	S
UDENYCA	UDENYCA 6 MG/0.6ML SOLN A-INJ <i>pegfilgrastim-cbqv</i>	SBG	PA, S
UDENYCA	UDENYCA 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-cbqv</i>	SBG	QL (2 PER 28 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ZARXIO	ZARXIO (300 MCG/0.5ML SOLN PRSYR, 480 MCG/0.8ML SOLN PRSYR) <i>filgrastim-sndz</i>	SBG	S
ZIEXTENZO	ZIEXTENZO 6 MG/0.6ML SOLN PRSYR <i>pegfilgrastim-bmez</i>	SBG	QL (2 PER 28 DAY(S)), 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
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>motixafor tide 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	S, MN-PA (Medically Necessary Prior Authorization)
ELELYSO	ELELYSO 200 UNIT RECON SOLN <i>taliglucerase alfa</i>	SP-M	PA, S
<i>miglustat</i>	<i>miglustat 100 mg cap</i>	SBG	PA, QL (3 PER 1 DAY(S)), S
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>	SBG	PA, QL (3 PER 1 DAY(S)), S
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>	P&T	S
LYFGENIA	LYFGENIA SUSPENSION <i>lovotibeglogene autotemcel</i>	P&T	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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTICOAGULANTS			
HEPARINS AND HEPARINOID-LIKE AGENTS			
<i>bd heparin posiflush</i>	<i>bd heparin posiflush (10 solution, 100 solution)</i>	TIER 1	
<i>heparin lock flush</i>	<i>heparin lock flush 10 unit/ml 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 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	
<i>heparin sodium lock flush</i>	<i>heparin sodium lock flush 100 unit/ml 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<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, 150 mg cap)</i>	TIER 1	MN-PA (Medically Necessary Prior Authorization)
PRADAXA	PRADAXA (30 MG PACKET, 40 MG PACKET, 50 MG PACKET, 110 MG PACKET) <i>dabigatran etexilate mesylate</i>	TIER 3	PA, QL (4 PER 1 DAY(S)), MN-PA (Medically Necessary Prior Authorization)
PRADAXA	PRADAXA 110 MG CAP <i>dabigatran etexilate mesylate</i>	TIER 3	MN-PA (Medically Necessary Prior Authorization)
PRADAXA	PRADAXA 150 MG PACKET <i>dabigatran etexilate mesylate</i>	TIER 3	PA, QL (2 PER 1 DAY(S)), MN-PA (Medically Necessary Prior Authorization)
PRADAXA	PRADAXA 20 MG PACKET <i>dabigatran etexilate mesylate</i>	TIER 3	PA, QL (1 PER 1 DAY(S)), MN-PA (Medically Necessary Prior Authorization)
DIRECT FACTOR XA INHIBITORS			
ELIQUIS	ELIQUIS (2.5 MG TAB, 5 MG TAB) <i>apixaban</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ALTUVIIIIO	ALTUVIIIIO (250 RECON SOLN, 500 RECON SOLN, 1000 RECON SOLN, 3000 RECON SOLN, 4000 RECON SOLN) <i>antihemophilic factor (rcmb) fc-vwf-xten fusion protein-eh1</i>	SP-M	S
ALTUVIIIIO	ALTUVIIIIO 2000 UNIT RECON SOLN <i>antihemophilic factor (rcmb) fc-vwf-xten fusion protein-eh1</i>	SP-M	
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-rfviiiic)</i>	SP-M	S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTIHEMOPHILIC PRODUCTS - GENE THERAPY AGENTS			

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
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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 (30 MG/ML SOLUTION, 60 MG/0.4ML SOLUTION, 105 MG/0.7ML SOLUTION, 150 MG/ML 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>	P&T	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			
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>pozelimab-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 B INHIBITORS			
FABHALTA	FABHALTA 200 MG CAP <i>iptacopan hcl</i>	P&T	QL (2 PER 1 DAY(S)), S
BRADYKININ B2 RECEPTOR ANTAGONISTS			
<i>icatibant acetate</i>	<i>icatibant acetate 30 mg/3ml soln prsyr</i>	SBG	PA, QL (15 PER 30 DAY(S)), S
<i>sajazir</i>	<i>sajazir 30 mg/3ml soln prsyr</i>	SBG	PA, QL (15 PER 30 DAY(S)), S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
TOBEX	TOBEX 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	
ZIRGAN	ZIRGAN 0.15 % GEL <i>ganciclovir ophthalmic</i>	TIER 3	
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	
OPHTHALMIC ECTOPARASITICIDE			
XDEMZY	XDEMZY 0.25 % SOLUTION <i>lotilaner</i>	TIER 3	QL (1 PER 180 DAY(S)), S
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS			
<i>ak-poly-bac</i>	<i>ak-poly-bac 500-10000 unit/gm ointment</i>	TIER 1	
<i>bacitracin-polymyxin b</i>	<i>bacitracin-polymyxin b 500- 10000 unit/gm ointment</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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 ocudose</i>	<i>timolol maleate ocudose 0.5 % solution</i>	TIER 1	
<i>timolol maleate pf</i>	<i>timolol maleate pf (pf 0.25 % solution, pf 0.5 % solution)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
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	
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	
MAXIDEX	MAXIDEX 0.1 % SUSPENSION <i>dexamethasone (ophth)</i>	TIER 3	
OZURDEX	OZURDEX 0.7 MG IMPLANT <i>dexamethasone (ophth)</i>	SP-M	S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PRED MILD	PRED MILD 0.12 % SUSPENSION <i>prednisolone acetate</i> (ophth)	TIER 3	
<i>prednisolone acetate</i>	<i>prednisolone acetate 1 %</i> <i>suspension</i>	TIER 1	
PREDNISOLONE SODIUM PHOSPHATE	PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION <i>prednisolone sodium phosphate</i> (ophth)	TIER 1	
RETISERT	RETISERT 0.59 MG IMPLANT <i>fluocinolone acetonide</i> (ophth)	SP-M	S
XIPERE	XIPERE 40 MG/ML SUSPENSION <i>triamcinolone acetonide</i> (ophth)	SP-M	S
YUTIQ	YUTIQ 0.18 MG IMPLANT <i>fluocinolone acetonide</i> (ophth)	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	
NEOMYCIN-POLYMYXIN-HC	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION <i>neomycin-polymyxin-hc</i> (ophth)	TIER 1	
PRED-G	PRED-G 0.3-1 % SUSPENSION <i>gentamicin-prednisolone acetate</i>	TIER 3	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
TOBRADEX ST	TOBRADEX ST 0.3-0.05 % SUSPENSION <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>	P&T	
<i>latanoprost</i>	<i>latanoprost 0.005 % solution</i>	TIER 1	
LUMIGAN	LUMIGAN 0.01 % SOLUTION <i>bimatoprost</i>	TIER 2	
<i>travoprost (bak free)</i>	<i>travoprost (bak free) 0.004 % solution</i>	TIER 1	
CYCLOPLEGIC MYDRIATICS			
<i>altafrin</i>	<i>altafrin (2.5 % solution, 10 % solution)</i>	TIER 1	
<i>atropine sulfate</i>	<i>atropine sulfate 1 % solution</i>	TIER 1	
<i>cyclopentolate hcl</i>	<i>cyclopentolate hcl (0.5 % solution, 1 % solution, 2 % solution)</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
HOMATROPAIRE	HOMATROPAIRE 5 % SOLUTION <i>homatropine hbr</i>	TIER 1	
ISOPTO ATROPINE	ISOPTO ATROPINE 1 % SOLUTION <i>atropine sulfate (ophthalmic)</i>	TIER 1	GA
<i>phenylephrine hcl</i>	<i>phenylephrine hcl (2.5 % solution, 10 % solution)</i>	TIER 1	
<i>tropicamide</i>	<i>tropicamide (0.5 % solution, 1 % solution)</i>	TIER 1	
OPHTHALMIC GENE THERAPY			
LUXTURNA	LUXTURNA 5000000000000000 VG/ML SUSPENSION <i>voretigene neparvovec-rzyl</i>	SP-M	PA, S
OPHTHALMIC COMPLEMENT C3 INHIBITORS			
SYFOVRE	SYFOVRE 15 MG/0.1ML SOLUTION <i>pegcetacoplan (ophthalmic)</i>	SP-M	PA, S
OPHTHALMIC COMPLEMENT C5 INHIBITORS			
IZERVAY	IZERVAY 2 MG/0.1ML SOLUTION <i>avacincaptad pegol</i>	SP-M	PA, S
MIOTICS - DIRECT ACTING			
<i>pilocarpine hcl</i>	<i>pilocarpine hcl (1 % solution, 2 % solution, 4 % solution)</i>	TIER 1	
MIOTICS - CHOLINESTERASE INHIBITORS			
PHOSPHOLINE IODIDE	PHOSPHOLINE IODIDE 0.125 % RECON SOLN <i>echothiophate iodide</i>	TIER 3	
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS			
ALPHAGAN P	ALPHAGAN P 0.1 % SOLUTION <i>brimonidine tartrate</i>	TIER 3	GA
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>brimonidine tartrate</i>	<i>brimonidine tartrate 0.1 % solution</i>	TIER 3	
IOPIDINE	IOPIDINE 1 % SOLUTION <i>apraclonidine hcl</i>	TIER 3	
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB			
SIMBRINZA	SIMBRINZA 1-0.2 % SUSPENSION <i>brinzolamide-brimonidine tartrate</i>	TIER 3	
OPHTHALMIC - MULTIPLE RECEPTOR ANGIOGENESIS INHIBITORS			
VABYSMO	VABYSMO 6 MG/0.05ML SOLUTION <i>faricimab-svoa</i>	SP-M	PA, S
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS			
BEOVU	BEOVU (6 SOLN PRSYR, 6 SOLUTION) <i>brolocizumab-dbli</i>	SP-M	PA, S
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	PA, S
EYLEA	EYLEA (2 SOLN PRSYR, 2 SOLUTION) <i>aflibercept</i>	SP-M	PA, S
EYLEA HD	EYLEA HD 8 MG/0.07ML SOLUTION <i>aflibercept</i>	SP-M	PA, S
LUCENTIS	LUCENTIS (0.3 SOLN PRSYR, 0.3 SOLUTION, 0.5 SOLN PRSYR, 0.5 SOLUTION) <i>ranibizumab</i>	SP-M	S
MACUGEN	MACUGEN 0.3 MG SOLUTION <i>pegaptanib sodium</i>	SP-M	S
SUSVIMO (IMPLANT 1ST FILL)	SUSVIMO (IMPLANT 1ST FILL) 10 MG/0.1ML SOLUTION <i>ranibizumab</i>	SP-M	PA, S
SUSVIMO (IMPLANT REFILL)	SUSVIMO (IMPLANT REFILL) 10 MG/0.1ML SOLUTION <i>ranibizumab</i>	SP-M	PA, S

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			
ALOCRIL	ALOCRIL 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
LASTACAFT	LASTACAFT 0.25 % SOLUTION <i>alcaftadine</i>	TIER 3	
<i>olopatadine hcl</i>	<i>olopatadine hcl 0.1 % solution</i>	TIER 3	
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	
PROLENSA	PROLENSA 0.07 % SOLUTION <i>bromfenac sodium (ophth)</i>	TIER 3	
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			
CETRAXAL	CETRAXAL 0.2 % SOLUTION <i>ciprofloxacin hcl (otic)</i>	TIER 3	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	
ORAVIG	ORAVIG 50 MG TAB <i>miconazole (mouth-throat)</i>	TIER 3	
ANTISEPTICS - MOUTH/THROAT			
<i>chlorhexidine gluconate</i>	<i>chlorhexidine gluconate 0.12 % solution</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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>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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
INTRARECTAL STEROIDS			
<i>budesonide</i>	<i>budesonide 2 mg foam</i>	TIER 1	
<i>colocort</i>	<i>colocort 100 mg/60ml enema</i>	TIER 1	
<i>hydrocortisone</i>	<i>hydrocortisone 100 mg/60ml enema</i>	TIER 1	
UCERIS	UCERIS 2 MG/ACT FOAM <i>budesonide (intrarectal)</i>	TIER 3	GA
RECTAL ANESTHETIC/STEROIDS			
<i>hydrocort-pramoxine (perianal)</i>	<i>hydrocort-pramoxine (perianal) 2.5-1 % cream</i>	TIER 1	
HYDROCORTISONE ACE-PRAMOXINE	HYDROCORTISONE ACE-PRAMOXINE 1-1 % CREAM <i>hydrocortisone acetate w/ pramoxine</i>	TIER 1	
<i>lidocaine-hydrocort (perianal)</i>	<i>lidocaine-hydrocort (perianal) 3-0.5 % cream</i>	TIER 1	
<i>lidocaine-hydrocortisone ace</i>	<i>lidocaine-hydrocortisone ace (2.8-0.55 % gel, 3-0.5 % kit, 3-1 % kit, 3-2.5 % kit)</i>	TIER 1	
<i>lidocort</i>	<i>lidocort 3-0.5 % cream</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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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>doxycycline</i>	<i>doxycycline 40 mg cap dr</i>	TIER 3	PA
FINACEA	FINACEA 15 % FOAM <i>azelaic acid</i>	TIER 3	PA
<i>ivermectin</i>	<i>ivermectin 1 % cream</i>	TIER 1	PA
<i>metronidazole</i>	<i>metronidazole (0.75 % cream, 0.75 % gel, 0.75 % lotion, 1 % gel)</i>	TIER 1	
ORACEA	ORACEA 40 MG CAP DR <i>doxycycline (rosacea)</i>	TIER 3	PA, GA
<i>rosadan</i>	<i>rosadan (0.75 % cream, 0.75 % gel)</i>	TIER 1	
ANTIBIOTICS - TOPICAL			
ALTABAX	ALTABAX 1 % OINTMENT <i>retapamulin</i>	TIER 3	
<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))
XEPI	XEPI 1 % CREAM <i>ozenoxacin</i>	TIER 3	QL (1 PER 5 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>klayesta</i>	<i>klayesta 100000 unit/gm powder</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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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))
ERTACZO	ERTACZO 2 % CREAM <i>sertaconazole nitrate</i>	TIER 3	
EXELDERM	EXELDERM 1 % CREAM <i>sulconazole nitrate</i>	TIER 3	
<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	
LUZU	LUZU 1 % CREAM <i>luliconazole</i>	TIER 3	GA
SULCONAZOLE NITRATE	SULCONAZOLE NITRATE 1 % CREAM <i>sulconazole nitrate</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	
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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL			
EUCRISA	EUCRISA 2 % OINTMENT <i>crisaborole</i>	TIER 3	PA
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	
TAZORAC	TAZORAC 0.05 % CREAM <i>tazarotene</i>	TIER 3	
VECTICAL	VECTICAL 3 MCG/GM OINTMENT <i>calcitriol (topical)</i>	TIER 3	GA
ANTIPSORIATICS - SYSTEMIC			
<i>acitretin</i>	<i>acitretin (10 mg cap, 17.5 mg cap, 25 mg cap)</i>	TIER 1	
BIMZELX	BIMZELX (160 MG/ML SOLN A-INJ, 160 MG/ML SOLN PRSYR) <i>bimekizumab-bkzx</i>	P&T	PA, QL (2 PER 56 DAY(S)), S
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>	P&T	PA, S
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 (2 PER 28 DAY(S)), S, MN-PA (Medically Necessary Prior Authorization)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<i>methoxsalen rapid</i>	<i>methoxsalen rapid 10 mg cap</i>	TIER 1	
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 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 PEN, 100 MG/ML SOLN PRSYR) <i>guselkumab</i>	SP-P	PA, QL (1 PER 56 DAY(S)), S
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES			
DUPIXENT	DUPIXENT (100 MG/0.67ML SOLN PRSYR, 200 MG/1.14ML SOLN PEN, 200 MG/1.14ML SOLN PRSYR, 300 MG/2ML SOLN PEN, 300 MG/2ML SOLN PRSYR) <i>dupilumab</i>	SP-P	PA, QL (2 PER 28 DAY(S)), S
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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>	SBG	S
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL MISC.			
PICATO	PICATO (0.015 % GEL, 0.05 % GEL) <i>ingenol mebutate</i>	TIER 3	PA
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	
<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>besser</i>	<i>besser 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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	
BRYHALI	BRYHALI 0.01 % LOTION <i>halobetasol propionate</i>	TIER 3	QL (200 PER 30 DAY(S))
CAPEX	CAPEX 0.01 % SHAMPOO <i>fluocinolone acetonide</i>	TIER 3	
<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	
<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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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))
<i>hydrocortisone butyrate</i>	<i>hydrocortisone butyrate (0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.1 % solution)</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	
TEXACORT	TEXACORT 2.5 % SOLUTION <i>hydrocortisone (topical)</i>	TIER 3	
<i>tovet</i>	<i>tovet 0.05 % foam</i>	TIER 1	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
<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			
PODOCON-25	PODOCON-25 25 % SOLUTION <i>podophyllum resin</i>	TIER 1	
<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
ZYCLARA PUMP	ZYCLARA PUMP 2.5 % CREAM <i>imiquimod</i>	TIER 3	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	
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>premium lidocaine</i>	<i>premium lidocaine 5 % ointment</i>	TIER 1	
<i>proxivol</i>	<i>proxivol 2 % gel</i>	TIER 1	
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>daxibotulinumtoxina-lanm</i>	SP-M	PA, S
SCABICIDES & PEDICULICIDES			
CROTAN	CROTAN 10 % LOTION <i>crotamiton</i>	TIER 1	
IVERMECTIN	IVERMECTIN 0.5 % LOTION <i>ivermectin (pediculicide)</i>	TIER 1	GA

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
LINDANE	LINDANE 1 % SHAMPOO <i>lindane</i>	TIER 1	
<i>malathion</i>	<i>malathion 0.5 % lotion</i>	TIER 1	
NATROBA	NATROBA 0.9 % SUSPENSION <i>spinosad</i>	TIER 3	
<i>permethrin</i>	<i>permethrin 5 % cream</i>	TIER 1	
SPINOSAD	SPINOSAD 0.9 % SUSPENSION <i>spinosad</i>	TIER 3	
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ANTIDOTES - CHELATING AGENTS			
CHEMET	CHEMET 100 MG CAP <i>succimer</i>	TIER 2	
<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>	SBG	S
<i>deferasirox granules</i>	<i>deferasirox granules (granules 90 mg packet, granules 180 mg packet, granules 360 mg packet)</i>	SBG	S
<i>deferiprone</i>	<i>deferiprone (500 mg tab, 1000 mg tab)</i>	SBG	S
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
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 prsy, 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>nalmeffene hcl (antidote)</i>	TIER 3	
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 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ACCU-CHEK COMPACT PLUS	ACCU-CHEK COMPACT PLUS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ACCU-CHEK GUIDE	ACCU-CHEK GUIDE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ACCU-CHEK SMARTVIEW	ACCU-CHEK SMARTVIEW STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ACCUTREND GLUCOSE	ACCUTREND GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ADVANCE INTUITION TEST	ADVANCE INTUITION TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ADVOCATE REDI-CODE	ADVOCATE REDI-CODE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ADVOCATE TEST	ADVOCATE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
AGAMATRIX AMP TEST	AGAMATRIX AMP TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
AGAMATRIX JAZZ TEST	AGAMATRIX JAZZ TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
AGAMATRIX KEYNOTE TEST	AGAMATRIX KEYNOTE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE 3 TEST	ASSURE 3 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE 4 TEST	ASSURE 4 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE II	ASSURE II STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE II CHECK	ASSURE II CHECK STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE PLATINUM	ASSURE PLATINUM STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ASSURE PRO TEST	ASSURE PRO TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
BIOSCANNER GLUCOSE TEST	BIOSCANNER GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
BLOOD GLUCOSE TEST	BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
BLULINK GLUCOSE TEST	BLULINK GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
CARETOUCH TEST	CARETOUCH TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
CLEVER CHEK TEST	CLEVER CHEK TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
CONTOUR NEXT TEST	CONTOUR NEXT TEST STRIP <i>glucose blood</i>	TIER 2	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 2	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
COOL BLOOD GLUCOSE TEST STRIPS	COOL BLOOD GLUCOSE TEST STRIPS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
D-CARE BLOOD GLUCOSE	D-CARE BLOOD GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
DIASTIX	DIASTIX 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
DIATHRIVE GLUCOSE TEST	DIATHRIVE GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
DIATHRIVE+ GLUCOSE TEST	DIATHRIVE+ GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
DIATRUE PLUS TEST	DIATRUE 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)
DUO-CARE TEST	DUO-CARE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EASY PLUS II GLUCOSE TEST	EASY PLUS II GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASY STEP TEST	EASY STEP TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASY TOUCH TEST	EASY TOUCH TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASY TRAK II GLUCOSE TEST	EASY TRAK II GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASYGLUCO	EASYGLUCO STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASYGLUCO PLUS	EASYGLUCO PLUS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASYMAX 15 TEST	EASYMAX 15 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASYMAX TEST	EASYMAX TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EASYPRO BLOOD GLUCOSE TEST	EASYPRO BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EASYPRO PLUS	EASYPRO PLUS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ELEMENT COMPACT TEST	ELEMENT COMPACT TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ELEMENT TEST	ELEMENT TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
EVENCARE G2 TEST	EVENCARE G2 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EVENCARE G3 TEST	EVENCARE G3 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EVOLUTION AUTOCODE	EVOLUTION AUTOCODE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
EXACTECH TEST	EXACTECH TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FORA 6 CONNECT	FORA 6 CONNECT STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
FORA D20 BLOOD GLUCOSE TEST	FORA D20 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FORA G30/PREM V10 GLUCOSE TEST	FORA G30/PREM V10 GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FORA GD20 TEST	FORA GD20 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
FORA V12 BLOOD GLUCOSE TEST	FORA V12 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FORACARE GD40 TEST	FORACARE GD40 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FORTISCARE TEST	FORTISCARE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FREESTYLE INSULINX TEST	FREESTYLE INSULINX TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FREESTYLE LITE TEST	FREESTYLE LITE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
FREESTYLE TEST	FREESTYLE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
GE100 BLOOD GLUCOSE TEST	GE100 BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GENULTIMATE TEST	GENULTIMATE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GHT TEST	GHT TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOCARD EXPRESSION TEST	GLUCOCARD EXPRESSION TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOCARD SHINE TEST	GLUCOCARD SHINE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOCARD VITAL TEST	GLUCOCARD VITAL TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOCARD X-SENSOR	GLUCOCARD X-SENSOR STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOCOM TEST	GLUCOCOM TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCONAVII BLOOD GLUCOSE TEST	GLUCONAVII BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GLUCOSE METER TEST	GLUCOSE METER TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
GNP EASY TOUCH GLUCOSE TEST	GNP EASY TOUCH GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
GOODSENSE BLOOD GLUCOSE	GOODSENSE BLOOD GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
IGLUCOSE TEST STRIPS	IGLUCOSE TEST STRIPS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
INFINITY VOICE	INFINITY VOICE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
KROGER TEST	KROGER TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
LIBERTY TEST	LIBERTY TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
MEIJER PREMIUM GLUCOSE TEST	MEIJER PREMIUM GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
MEIJER TRUETEST TEST	MEIJER TRUETEST TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
MEIJER TRUETRACK TEST	MEIJER TRUETRACK TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
MICRODOT TEST	MICRODOT TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
MYGLUCOHEALTH TEST	MYGLUCOHEALTH TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
NEUTEK 2TEK TEST	NEUTEK 2TEK TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ON CALL PLUS BLOOD GLUCOSE	ON CALL PLUS BLOOD GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
ON CALL VIVID BLOOD GLUCOSE	ON CALL VIVID BLOOD GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ONE DROP TEST	ONE DROP TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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)
ONETOUCH ULTRA TEST	ONETOUCH ULTRA TEST STRIP <i>glucose blood</i>	TIER 2	QL (150 PER 30 DAYS), PA-QL (300 / 30 days)
ONETOUCH VERIO	ONETOUCH VERIO STRIP <i>glucose blood</i>	TIER 2	QL (150 PER 30 DAYS), PA-QL (300 / 30 days)
OPTIUM TEST	OPTIUM TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
OPTIUMEZ TEST	OPTIUMEZ TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
OPTUMRX BLOOD GLUCOSE TEST	OPTUMRX BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
PHARMACIST CHOICE AUTOCODE	PHARMACIST CHOICE AUTOCODE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
PHARMACIST CHOICE NO CODING	PHARMACIST CHOICE NO CODING STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
POCKETCHEM EZ TEST	POCKETCHEM EZ TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
PRECISION PCX	PRECISION PCX STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
PRECISION PCX PLUS TEST	PRECISION PCX 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)
PRECISION POINT OF CARE TEST	PRECISION POINT OF CARE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
PRECISION QID TEST	PRECISION QID TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
RELION PRIME TEST	RELION PRIME TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
RELION ULTIMA TEST	RELION ULTIMA TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
REVEAL BLOOD GLUCOSE TEST	REVEAL BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
REXALL BLOOD GLUCOSE TEST	REXALL BLOOD GLUCOSE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
RIGHTEST GT333 BLOOD GLUCOSE	RIGHTEST GT333 BLOOD GLUCOSE STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
SOLUS V2 TEST	SOLUS V2 TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
SUPREME TEST	SUPREME TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
SURE EDGE TEST	SURE EDGE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SURE-TEST EASYPLUS MINI TEST	SURE-TEST EASYPLUS MINI TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
TRUETEST TEST	TRUETEST TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
TRUETRACK TEST	TRUETRACK TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ULTRATRAK PRO TEST	ULTRATRAK PRO TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
ULTRATRAK ULTIMATE TEST	ULTRATRAK ULTIMATE TEST STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)
UNISTRIP1 GENERIC	UNISTRIP1 GENERIC STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), PA-QL (300 / 30 days)

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
VIVAGUARD INO TEST STRIPS	VIVAGUARD INO TEST STRIPS STRIP <i>glucose blood</i>	TIER 3	QL (150 PER 30 DAYS), MN-PA (Medically Necessary Prior Authorization), 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), MN-PA (Medically Necessary Prior Authorization), 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	
DIAGNOSTIC DRUGS			
THYROGEN	THYROGEN 0.9 MG RECON SOLN <i>thyrotropin alfa</i>	SP-M	S
MEDICAL DEVICES AND SUPPLIES			
NEEDLES & SYRINGES			
INSULIN PEN NEEDLE	INSULIN PEN NEEDLE <i>insulin pen needle</i>	TIER 2	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
INSULIN SYRINGE	INSULIN SYRINGE <i>insulin syringe</i>	TIER 2	
INSULIN SYRINGE NEEDLE	INSULIN SYRINGE NEEDLE <i>insulin syringe needle</i>	TIER 2	
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	
AIRIAL CHAMBER	AIRIAL CHAMBER 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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
INSPIREASE	INSPIREASE MISC <i>spacer/aerosol-holding chambers</i>	RX-DME	
LITEAIRE	LITEAIRE DEVICE <i>spacer/aerosol-holding chambers</i>	RX-DME	
MASK VORTEX	MASK VORTEX MISC <i>spacer/aerosol-holding chamber supplies - masks</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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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	
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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 PER 30 DAY(S))
OMNIPOD DASH PODS (GEN 4)	OMNIPOD DASH PODS (GEN 4) MISC <i>insulin infusion disposable pump</i>	RX-DME	PA, QL (10 PER 30 DAY(S))
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))

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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))
FREESTYLE LIBRE SENSOR SYSTEM	FREESTYLE LIBRE SENSOR SYSTEM MISC <i>continuous blood glucose system sensor</i>	RX-DME	QL (3 PER 30 DAY(S))
LANCETS	LANCETS <i>lancets</i>	TIER 2	QL (150 PER 30 DAYS), PA-QL (300 / 30 days)
LANCETS	LANCETS <i>lancets</i>	TIER 2	QL (150 PER 30 DAY(S))
OCULAR IMPLANTS			
SUSVIMO OCULAR IMPLANT	SUSVIMO OCULAR IMPLANT IMPLANT <i>ocular implant</i>	SP-M	PA, S
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	

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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>	SBG	S
<i>penicillamine</i>	<i>penicillamine 250 mg tab</i>	SBG	S
<i>trientine hcl</i>	<i>trientine hcl 250 mg cap</i>	SBG	S
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>	SBG	QL (1 PER 1 DAY), S
<i>lenalidomide</i>	<i>lenalidomide (20 mg cap, 25 mg cap)</i>	SBG	QL (21 PER 28 DAY(S)), S

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
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
NEONATAL FC RECEPTOR (FCRN) ANTAGONISTS			
RYSTIGGO	RYSTIGGO 280 MG/2ML 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, 100 mg/ml solution)</i>	TIER 1	
<i>cyclosporine modified</i>	<i>cyclosporine modified (50 mg cap, 100 mg cap)</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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
NEORAL	NEORAL (25 MG CAP, 100 MG CAP, 100 MG/ML SOLUTION) <i>cyclosporine modified (for microemulsion)</i>	TIER 3	GA
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	
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
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>	SBG	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	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	
<i>sps</i>	<i>sps 15 gm/60ml suspension</i>	TIER 1	
VELTASSA	VELTASSA (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
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

BRAND NAME	DRUG DESCRIPTION (RX)	TIER	LIMITS & RESTRICTIONS
SCLEROSING AGENTS			
VARITHENA	VARITHENA 180 MG/18ML FOAM <i>polidocanol (laureth-9)</i>	SP-M	S

Index of covered drugs

A

ABACAVIR SULFATE	14	Acuvail	239
ABACAVIR SULFATE-LAMIVUDINE	15	ACYCLOVIR	19
ABACAVIR SULFATE-LAMIVUDINE-ZIDOVUDINE	15	ACYCLOVIR TOPICAL	247
ABACAVIR-DOLUTEGRAVIR-LAMIVUDINE	17	Adacel	29
ABATACEPT	188	ADAGRASIB	60
Abecma	67	Adakveo	215
ABEMACICLIB	57	ADALIMUMAB	185,186
ABIRATERONE ACETATE	53,54	ADALIMUMAB-AACF	183,187
ABOBOTULINUMTOXINA	197	Adalimumab-aacf (2 Pen)	183
Abrilada (1 Pen)	183	ADALIMUMAB-AATY	187
Abrilada (2 Pen)	183	ADALIMUMAB-ADAZ	183,186,187
Abrilada (2 Syringe)	183	Adalimumab-adaz	183
Abrysvo	23	ADALIMUMAB-ADBM	183,184
Abstral	174	Adalimumab-adbm (2 Pen)	183
ACALABRUTINIB MALEATE	58	Adalimumab-adbm (2 Syringe)	183
ACAMPROSATE CALCIUM	172	Adalimumab-adbm(CD/UC/HS Strt)	184
ACARBOSE	96	Adalimumab-adbm(Ps/UV Starter)	184
Accu-Chek Aviva Plus	254	ADALIMUMAB-AFZB	183
Accu-Chek Compact Plus	255	ADALIMUMAB-AQVH	187
Accu-Chek Guide	255	ADALIMUMAB-ATTO	184
Accu-Chek SmartView	255	ADALIMUMAB-BWWD	185
Accutrend Glucose	255	ADALIMUMAB-FKJP	184,185
ACEBUTOLOL HCL	113	Adalimumab-fkjp	184
ACETAMINOPHEN W/ CODEINE	179	Adalimumab-fkjp (2 Pen)	184
ACETAMINOPHEN-CAFF-DIHYDROCOD	179	Adalimumab-fkjp (2 Syringe)	184
ACETAMINOPHEN-SALICYLAMIDE- PHENYLTOLOXAMINE	173	ADAMTS13 RECOMBINANT-KRHN	228
ACETAZOLAMIDE	122	ADAPALENE	242
ACETIC ACID (OTIC)	240	Adcetris	48
ACETOHYDROXAMIC ACID	154	ADEFOVIR DIPIVOXIL	17
ACETONE (URINE) TEST	257,266,270	Adempas	127
ACETYLCYSTEINE	132	ADO-TRASTUZUMAB EMTANSINE	48
AcipHex Sprinkle	144	Adrenalin	123
ACITRETIN	246	Adthyza	99
ACLIDINIUM BROMIDE	134	Advair Diskus	135
Actemra	188	Advair HFA	135
Acthar	106	Advance Intuition Test	255
ActHIB	28	Advance Micro-Draw Test	255
Actimmune	68	Advate	218
		Advocate Redi-Code	255
		Advocate Redi-Code+ Test	255
		Advocate Test	255

Adynovate	219	ALCLOMETASONE DIPROPIONATE	248
Adzynma	228	ALCOHOL SWABS	283
Aemcolo	21	ALDESLEUKIN	69
AeroChamber Holding Chamber	274	Aldurazyme	109
AeroChamber Mini Chamber	274	Alecensa	56
AeroChamber MV	274	ALECTINIB HCL	56
AeroChamber Pls FloVu Mthpiece	274	ALEMTUZUMAB (MS)	170
AeroChamber Plus Flo-Vu	274	ALENDRONATE SODIUM	100
AeroChamber Plus Flo-Vu Interm	274	Alferon N	68
AeroChamber Plus Flo-Vu Large	274	ALFUZOSIN HCL	155
AeroChamber Plus Flo-Vu Medium	274	ALGLUCOSIDASE ALFA	109
AeroChamber Plus Flo-Vu Small	274	Alinia	22
AeroChamber Plus Flo-Vu w/Mask	275	Aliqopa	64
AeroChamber Plus Flow VU	275	ALIROCUMAB	125
AeroChamber w/FLOWSIGnal	275	ALISKIREN FUMARATE	118
AeroChamber Z-Stat Plus	275	ALITRETINOIN	248
AeroChamber Z-Stat Plus Chambr	275	ALLOGENEIC KERATINOCYTES-FIBROBLASTS IN MURINE COLLAGEN-DSAT	253
AeroChamber Z-Stat Plus/Large	275	ALLOGENEIC PROCESSED THYMUS TISSUE- AGDC	284
AeroChamber Z-Stat Plus/Medium	275	ALLOPURINOL	190
AeroChamber Z-Stat Plus/Small	275	ALMOTRIPTAN MALATE	189
AeroVent Plus	275	Alocril	238
AFAMELANOTIDE ACETATE	253	ALOGLIPTIN BENZOATE	96,97
AFATINIB DIMALEATE	50	ALOGLIPTIN-METFORMIN HCL	97
AFLIBERCEPT	237	ALOGLIPTIN-PIOGLITAZONE	97
Afluria Quadrivalent	23	Alomide	238
Afstyla	219	ALOSETRON HCL	150
AGALSIDASE BETA	107	ALPELISIB	64,65
AgaMatrix AMP Test	255	ALPELISIB (PROS AGENTS)	288
AgaMatrix Jazz Test	255	ALPHA1-PROTEINASE INHIBITOR (HUMAN)	139
AgaMatrix KeyNote Test	255	Alphagan P	236
AgaMatrix Presto Test	256	Alphanate	219
Airial Chamber	275	Alphanate/VWF Complex/Human	219
Ajovy	190	AlphaNine SD	219
Akeega	54	ALPRAZOLAM	155
Akten	238	ALPRAZolam Intensol	155
Akynzeo	146	Alprolix	219
Akynzeo (Ready-to-Use)	146	ALPROSTADIL (VASODILATOR)	129,130
ALBENDAZOLE	20	Alrex	233
ALBUTEROL SULFATE	134	Altabax	244
Albuterol Sulfate ER	134		
ALCAFTADINE	239		

Altuviiiio	220	Annovera	79
Alunbrig	56	Anoro Ellipta	135
ALVIMOPAN	151	ANTIHEMOPHIL FACT(RCMB) PEGYLATED-AUCL (BDD-RFVIII PEG-AUCL)	221
AMANTADINE HCL	195	ANTIHEMOPHILIC FACTOR (HUMAN)	221,222
AMBRISENTAN	127	ANTIHEMOPHILIC FACTOR (RCMB) BD TRUNCATED (BD TRUNC-RFVIII)	222
AMCINONIDE	248	ANTIHEMOPHILIC FACTOR (RCMB) FC FUSION PROTEIN(BDD-RFVIIIIFC)	220
AMIFAMPRIDINE	205	ANTIHEMOPHILIC FACTOR (RCMB) FC-VWF-XTEN FUSION PROTEIN-EHTL	220
AMIFAMPRIDINE PHOSPHATE	205	ANTIHEMOPHILIC FACTOR (RCMB) MOROCTOCOG ALFA(BDD-RFVIII,MOR)	224
AMIFOSTINE	70	ANTIHEMOPHILIC FACTOR (RCMB) PLASMA/ALBUMIN FREE (RAHF-PFM)	218,222
AMIKACIN SULFATE LIPOSOME	9	ANTIHEMOPHILIC FACTOR (RCMB) SIMOCTOCOG ALFA(BDD-RFVIII,SIM)	223
AMILORIDE & HYDROCHLOROTHIAZIDE	123	ANTIHEMOPHILIC FACTOR (RECOMBINANT PORCINE) (RPFVIII)	223
AMILORIDE HCL	122	ANTIHEMOPHILIC FACTOR (RECOMBINANT)	222,223
AMINOCAPROIC ACID	218	ANTIHEMOPHILIC FACTOR (RECOMBINANT) GLYCOPEGYLATED-EXEI	220
AMINOSALICYLIC ACID	10	ANTIHEMOPHILIC FACTOR (RECOMBINANT) PEGYLATED	219
AMIODARONE HCL	117	ANTIHEMOPHILIC FACTOR (RECOMBINANT) SINGLE CHAIN	219
AMITRIPTYLINE HCL	158	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR COMPLEX (HUMAN)	219,221,224
AMIVANTAMAB-VMJW	50	ANTIINHIBITOR COAGULANT COMPLEX	221
Amjevita	184	Anzemet	145
AMLODIPINE BENZOATE	115	APALUTAMIDE	51
AMLODIPINE BESYLATE	113,114	APAP-Caff-Dihydrocodeine	179
AMLODIPINE BESYLATE-ATORVASTATIN CALCIUM	131	Aphexda	214
AMLODIPINE BESYLATE-BENAZEPRIL HCL	119	APIXABAN	217,218
AMLODIPINE BESYLATE-OLMESARTAN MEDOXOMIL	121	Apokyn	195
AMLODIPINE BESYLATE-VALSARTAN	121	APOMORPHINE HYDROCHLORIDE	195,196
Amondys 45	198	APRACLONIDINE HCL	236,237
AMOXAPINE	158	APREMILAST	189
AMOXICILLIN	5	APREPITANT	146
AMOXICILLIN & POT CLAVULANATE	5,6	Apretude	12
AMOXICILLIN-CLARITHROMYCIN W/ LANSOPRAZOLE	145		
Amoxicillin-Pot Clavulanate ER	6		
AMPHETAMINE-DEXTROAMPHETAMINE	164		
AMPICILLIN	5		
Amvuttra	172		
Anadrol-50	75		
ANAGRELIDE HCL	227		
ANASTROZOLE	52		
Angeliq	77		
ANIFROLUMAB-FNIA	288		

Aptivus	13	ATAZANAVIR SULFATE-COBICISTAT	16
Aralast NP	139	ATENOLOL	113
Aranesp (Albumin Free)	212	ATENOLOL & CHLORTHALIDONE	120
Arcalyst	188	ATEZOLIZUMAB	50
Arexvy	23	ATOMOXETINE HCL	165
ARFORMOTEROL TARTRATE	134	ATORVASTATIN CALCIUM	125
Arikayce	9	ATOVAQUONE	22
ARIPIPRAZOLE	161	ATOVAQUONE-PROGUANIL HCL	20
ARMODAFINIL	165	ATROPINE SULFATE (OPHTHALMIC)	235,236
Armour Thyroid	99	Atrovent HFA	134
Arranon	42	Augmentin	6
ARSENIC TRIOXIDE	68	Augtyro	62
ARTEMETHER-LUMEFANTRINE	20	AURANOFIN	182
ARTIFICIAL TEAR INSERT	232	Austedo	168
Arzerra	46	Austedo Patient Titration Kit	168
Asceniv	31	Austedo XR	168
ASCIMINIB HCL	58	Austedo XR Patient Titration	168
ASENAPINE MALEATE	160	AVACINCAPTAD PEGOL	236
ASFOTASE ALFA	108	AVACOPAN	229
Asmanex (120 Metered Doses)	136	AVALGLUCOSIDASE ALFA-NGPT	109
Asmanex (14 Metered Doses)	136	AVAPRITINIB	54
Asmanex (30 Metered Doses)	137	Avastin	44
Asmanex (60 Metered Doses)	137	AVATROMBOPAG MALEATE	214
Asmanex (7 Metered Doses)	137	Aveed	74
Asmanex HFA	137	AVELUMAB	49
ASPARAGINASE ERWINIA CHRYSANTHEMI	41	Avsola	150
ASPARAGINASE ERWINIA CHRYSANTHEMI (RECOMBINANT)-RYWN	42	AXICABTAGENE CILOLEUCEL	67
Asparlas	41	AXITINIB	45
ASPIRIN-DIPYRIDAMOLE	227	Ayvakit	54
Assure 3 Test	256	AZACITIDINE	42,43,44
Assure 4 Test	256	AzaSite	230
Assure II	256	AZATHIOPRINE	287
Assure II Check	256	Azedra Dosimetric	67
Assure Platinum	256	Azedra Therapeutic	67
Assure Prism multi Test	256	AZELAIC ACID	244
Assure Pro Test	256	AZELASTINE HCL	132
Astagraf XL	286	AZELASTINE HCL (OPHTH)	238
Atabex EC	205	AZILSARTAN MEDOXOMIL	118
Atabex OB	205	AZILSARTAN MEDOXOMIL-CHLORTHALIDONE	121
ATAZANAVIR SULFATE	13,14	AZITHROMYCIN	8
		AZITHROMYCIN (OPHTH)	230,231

AZTREONAM LYSINE	21	Benlysta	287,288
B		BENRALIZUMAB	138
Bacitracin	230	BENZONATATE	132
BACITRACIN (OPHTHALMIC)	230	BENZOYL PEROXIDE-ERYTHROMYCIN	243
BACITRACIN-POLY-NEOMYCIN-HC	234	BENZTROPINE MESYLATE	195
BACITRACIN-POLYMYXIN B (OPHTH)	231,232	Beovu	237
BACLOFEN	202	BEPOTASTINE BESILATE	238
Balcoltra	80	BEREMAGENE GEPERPAVEC-SVDT	253
BALOXAVIR MARBOXIL	19	Berinert	228
BALSALAZIDE DISODIUM	149	BEROTRALSTAT HCL	229
Balversa	59	BESIFLOXACIN HCL	230
Baqsimi One Pack	95	Besivance	230
Baqsimi Two Pack	95	Besponsa	47
Baraclude	18	Besremi	68
Basaglar KwikPen	89	Betadine Ophthalmic Prep	231
Basaglar Tempo Pen	89	BETAINE	108
Bavencio	49	BETAMETHASONE DIPROPIONATE (TOPICAL)	248
Baxdela	9	BETAMETHASONE DIPROPIONATE AUGMENTED	249
BCG LIVE INTRAVESICAL	68	BETAMETHASONE VALERATE	249
BCG VACCINE	28	Betaseron	169
BCG Vaccine	28	BETAXOLOL HCL	113
BD Swab Single Use Regular	283	BETAXOLOL HCL (OPHTH)	232
BECAPLERMIN	253	BETHANECHOL CHLORIDE	152
BECLOMETHASONE DIPROP MONOHYD	132	BETIBEGLOGENE AUTOTEMCEL	211
BECLOMETHASONE DIPROPIONATE HFA	137	Betimol	232
Beconase AQ	132	Betoptic-S	232
BELANTAMAB MAFODOTIN-BLMF	46	BEVACIZUMAB	44
BELATACEPT	287	BEVACIZUMAB-AWWB	45
Beleodaq	57	BEVACIZUMAB-BVZR	46
BELIMUMAB	287,288	BEXAROTENE	69
BELINOSTAT	57	BEXAROTENE (TOPICAL)	248
Belrapzo	37	Bexsero	28
BELUMOSUDIL MESYLATE	285	Beyfortus	35
BELZUTIFAN	54	BICALUTAMIDE	51
BENAZEPRIL & HYDROCHLOROTHIAZIDE	119,120	Bicillin L-A	5
BENAZEPRIL HCL	117	BiCNU	39
BENDAMUSTINE HCL	37,38	BICTEGRAVIR-EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE	15
Bendamustine HCl	37	Biktarvy	15
Bendeka	37	BIMATOPROST	235
BeneFIX	220		

BIMEKIZUMAB-BKZX	246	BREXANOLONE	156
Bimzelx	246	BREXUCABTAGENE AUTOLEUCEL	67
BINIMETINIB	62	Breyanzi	67
Bioscanner Glucose Test	256	BRIGATINIB	56
BioTel Care Test Strips	256	Brilinta	227
BISOPROLOL & HYDROCHLOROTHIAZIDE	120	BRIMONIDINE TARTRATE	236,237
BISOPROLOL FUMARATE	113	BRIMONIDINE TARTRATE-TIMOLOL MALEATE	233
Bivigam	31	Brineura	110
Blenrep	46	BRINZOLAMIDE	239
BLEOMYCIN SULFATE	40	BRINZOLAMIDE-BRIMONIDINE TARTRATE	237
Blephamide	234	Briumvi	170
Blephamide S.O.P.	234	Brixadi	178
BLINATUMOMAB	47	Brixadi (Weekly)	178
Blincyto	47	BROLUCIZUMAB-DBLL	237
Blood Glucose Test	256	BROMFENAC SODIUM (OPHTH)	239
Blood Glucose Test Strips 333	256	BROMOCRIPTINE MESYLATE	195
BluLink Glucose Test	257	Brukinsa	58
Boostrix	29	Bryhali	249
BORTEZOMIB	64	BUDESONIDE	72
BOSENTAN	127,128	BUDESONIDE (INHALATION)	137
Bosulif	57	BUDESONIDE (INTRARECTAL)	242
BOSUTINIB	57	BUDESONIDE-FORMOTEROL FUMARATE DIHYDRATE	135,136
Botox	197	BUMETANIDE	122
Braftovi	58	BUPRENORPHINE	178
Breathe Comfort Chamber/Adult	275	BUPRENORPHINE HCL	178
Breathe Comfort Chamber/Child	276	BUPRENORPHINE HCL-NALOXONE HCL DIHYDRATE	178
Breathe Ease Large	276	BUPROPION HCL	159
Breathe Ease Medium	276	BUPROPION HCL (SMOKING DETERRENT)	167
Breathe Ease Small	276	BUROSUMAB-TWZA	111
BreatheRite	276	BUSPIRONE HCL	156
BreatheRite Coll Spacer Adult	276	BUSULFAN	37
BreatheRite Coll Spacer Child	276	Busulfex	37
BreatheRite Coll Spacer Infant	276	BUTALBITAL-ACETAMINOPHEN	173,174
BreatheRite Rigid Spacer/Mask	276	BUTALBITAL-ACETAMINOPHEN-CAFFEINE	173,174
BreatheRite Spacer Neonate	276	BUTALBITAL-ACETAMINOPHEN-CAFFEINE W/ CODEINE	179
BreatheRite Spacer Small Child	276	BUTALBITAL-ASPIRIN-CAFFEINE	174
BreatheRite/Large Mask	276	BUTALBITAL-ASPIRIN-CAFFEINE W/COD	179
BreatheRite/Medium Mask	277	BUTOCONAZOLE NITRATE (ONE DOSE)	153
BreatheRite/Small Mask	277		
BRENTUXIMAB VEDOTIN	48		
Breo Ellipta	135		

BUTORPHANOL TARTRATE	178	CAPLACIZUMAB-YHDP	227
Byetta 10 MCG Pen	93	CAPMATINIB HCL	62
Byetta 5 MCG Pen	93	Caprelsa	60
Bylvay	148	CAPTOPRIL	117
Bylvay (Pellets)	148	CAPTOPRIL & HYDROCHLOROTHIAZIDE	120
Bynfezia Pen	104	CARBAMAZEPINE	193
Byooviz	237	CARBIDOPA	197
C		CARBIDOPA-LEVODOPA	196
C1 ESTERASE INHIBITOR (HUMAN)	228	CARBIDOPA-LEVODOPA-ENTACAPONE	197
C1 ESTERASE INHIBITOR (RECOMBINANT)	228	CARBINOXAMINE MALEATE	131
CABAZITAXEL	55	CARBOPLATIN	37,38
Cabenuva	16	CareOne Blood Glucose Test	257
CABERGOLINE	106	CareSens N Glucose Test	257
Cablivi	227	CareTouch Test	257
Cabometyx	60	CARFILZOMIB	64
CABOTEGRAVIR	12	CARGLUMIC ACID	110
CABOTEGRAVIR & RILPIVIRINE	16	Carimune NF	31
CABOZANTINIB S-MALATE	60,61	CARIPRAZINE HCL	162
CAFFEINE CITRATE	165	CARISOPRODOL	202,203
CALASPARGASE PEGOL-MKNL	41	CARISOPRODOL W/ ASPIRIN	204
CALCIFEDIOL	108	CARISOPRODOL W/ ASPIRIN & CODEINE	205
CALCIPOTRIENE	246	Carisoprodol-Aspirin	204
CALCIPOTRIENE-BETAMETHASONE DIPROPIONATE	251	Carisoprodol-Aspirin-Codeine	205
CALCITONIN (SALMON)	101	CARMUSTINE	39
CALCITRIOL	108	CARMUSTINE IN POLIFEPROSAN	39
CALCITRIOL (TOPICAL)	246	CaroSpir	122
CALCIUM ACETATE (PHOSPHATE BINDER)	151	Carteolol HCL	232
Calquence	58	CARTEOLOL HCL (OPHTH)	232
Camcevi	52	CARVEDILOL	113
Camptosar	65	CARVEDILOL PHOSPHATE	113
Camzyos	129	Carvykti	67
CANAKINUMAB	188	CASCARA SAGRADA	141
CANDESARTAN CILEXETIL	118	Cascara Sagrada	141
CANDESARTAN CILEXETIL- HYDROCHLOROTHIAZIDE	121	Casgevy	215
CANNABIDIOL	193	CASIMERSEN	198
CAPECITABINE	42	Caverject	129
Capex	249	Caverject Impulse	130
CAPIVASERTIB	56	Cayston	21
		CEFACLOR	6
		Cefaclor	6
		Cefaclor ER	6

CEFACTOR MONOHYDRATE.....	6	CHLORDIAZEPOXIDE HCL.....	155
CEFADROXIL.....	6	CHLORDIAZEPOXIDE HCL-CLIDINIUM	
CEFDINIR.....	6	BROMIDE.....	144
CEFDITOREN PIVOXIL.....	6	CHLORDIAZEPOXIDE-AMITRIPTYLINE.....	173
CEFEPIME HCL.....	7	Chlordiazepoxide-Amitriptyline.....	173
CEFEPIME HCL-DEXTROSE.....	7	CHLORHEXIDINE GLUCONATE (MOUTH-	
Cefepime-Dextrose.....	7	THROAT).....	240,241
CEFIXIME.....	7	CHLOROQUINE PHOSPHATE.....	20
CEFPODOXIME PROXETIL.....	7	CHLOROTHIAZIDE.....	123
CEFPROZIL.....	6	CHLORPROMAZINE HCL.....	161
CEFTRIAZONE SODIUM.....	7	CHLORTHALIDONE.....	123
CEFUROXIME AXETIL.....	6	CHLORZOXAZONE.....	202
CELECOXIB.....	182	CHOLESTYRAMINE.....	124
CellCept.....	286	CHOLESTYRAMINE LIGHT.....	124
CellCept Intravenous.....	286	CHOLINE FENOFIBRATE.....	124
CEMIPLIMAB-RWLC.....	49	CHORIOGONADOTROPIN ALFA.....	102
CENEGERMIN-BKBJ.....	238	CHORIONIC GONADOTROPIN.....	102
CEPHALEXIN.....	6	Chorionic Gonadotropin.....	102
Ceprotin.....	228	CICLOPIROX.....	244
Cerdelga.....	215	CICLOPIROX OLAMINE.....	244
Cerezyme.....	215	CILOSTAZOL.....	227
CERITINIB.....	56	Ciloxan.....	230
CERLIPONASE ALFA.....	110	CILTACABTAGENE AUTOLEUCEL.....	67
Cetralax.....	239	Cimduo.....	16
CETRORELIX ACETATE.....	103	Cimerli.....	237
Cetrotide.....	103	CIMETIDINE.....	144
CETUXIMAB.....	50	CIMETIDINE HCL.....	144
CEVIMELINE HCL.....	241	CINACALCET HCL.....	108
Chantix Starting Month Pak.....	167	Cinqair.....	139
Chemet.....	254	Cinryze.....	228
Chemstrip 10 MD.....	273	CIPAGLUCOSIDASE ALFA-ATGA.....	109
Chemstrip 10/SG.....	273	Cipro.....	9
Chemstrip 2 GP.....	273	Cipro HC.....	240
Chemstrip 5 OB.....	273	CIPROFLOXACIN.....	9
Chemstrip 7.....	273	CIPROFLOXACIN HCL.....	9
Chemstrip 9.....	273	Ciprofloxacin HCl.....	240
Chemstrip K.....	257	CIPROFLOXACIN HCL (OPHTH).....	230
Chemstrip uGK.....	273	CIPROFLOXACIN HCL (OTIC).....	239,240
Chenodal.....	148	CIPROFLOXACIN-DEXAMETHASONE.....	240
CHENODIOL.....	148	CIPROFLOXACIN-HYDROCORTISONE.....	240
CHLORAMBUCIL.....	38	CISPLATIN.....	37

CITALOPRAM HYDROBROMIDE	157	CLOTTRIMAZOLE	240
CLADRIBINE	42	CLOTTRIMAZOLE W/ BETAMETHASONE	245
CLADRIBINE (MULTIPLE SCLEROSIS)	169	CLOZAPINE	160
CLARITHROMYCIN	8	Co-Natal FA	205
CLEMASTINE FUMARATE	131	Coagadex	220
Clemastine Fumarate	131	COAGULATION FACTOR IX	219,222
Clenpiq	142	COAGULATION FACTOR IX (RECOMB) FC FUSION PROTEIN (RFXFC)	219
Cleocin	152	COAGULATION FACTOR IX (RECOMBINANT)	220,221,224
Clever Chek Auto-Code Test	257	COAGULATION FACTOR IX (RECOMBINANT) GLYCOPEGYLATED	223
Clever Chek Auto-Code Voice	257	COAGULATION FACTOR IX RECOMB ALBUMIN FUSION PROTEIN (RIX-FP)	221
Clever Chek Test	257	COAGULATION FACTOR VIIA (RECOMBINANT)	222
Clever Choice Auto-Code Test	257	COAGULATION FACTOR VIIA (RECOMBINANT)- JNCW	224
Clever Choice Holding Chamber	277	COAGULATION FACTOR X (HUMAN)	220
Clever Choice Micro Test	257	COAGULATION FACTOR XIII A-SUBUNIT (RECOMBINANT)	224
Clever Choice No Coding	257	Coartem	20
Clever Choice Talk System	257	COBICISTAT	15
Climara Pro	77	COBIMETINIB FUMARATE	61
CLINDAMYCIN HCL	21	CODEINE SULFATE	174
CLINDAMYCIN PALMITATE HYDROCHLORIDE	21	Codeine Sulfate	174
CLINDAMYCIN PHOSPHATE	21	COLCHICINE	190
CLINDAMYCIN PHOSPHATE (ONE DOSE)	153	COLCHICINE W/ PROBENECID	191
CLINDAMYCIN PHOSPHATE (TOPICAL)	243	COLESEVELAM HCL	124
CLINDAMYCIN PHOSPHATE VAGINAL	152	COLESTIPOL HCL	124
CLINDAMYCIN PHOSPHATE-BENZOYL PEROXIDE (REFRIGERATE)	243,244	COLLAGENASE	251
CLINDAMYCIN PHOSPHATE-TRETINOIN	244	COLLAGENASE CLOSTRIDIUM HISTOLYTICUM	284
Clindesse	153	Columvi	47
CLOBAZAM	191	CombiPatch	77
CLOBETASOL PROPIONATE	249	Combivent Respiant	135
CLOBETASOL PROPIONATE EMOLLIENT BASE	249	Cometriq (100 mg Daily Dose)	60
CLOBETASOL PROPIONATE EMULSION	249,250	Cometriq (140 mg Daily Dose)	61
CLOCORTOLONE PIVALATE	249	Cometriq (60 mg Daily Dose)	61
CLOFARABINE	42	Comirnaty	23
Clolar	42	Compact Space Chamber	277
CLOMIPRAMINE HCL	158	Compact Space Chamber/Lg Mask	277
CLONAZEPAM	191	Compact Space Chamber/Med Mask	277
CLONIDINE	118		
CLONIDINE HCL	118		
CLONIDINE HCL (ADHD)	165		
CLOPIDOGREL BISULFATE	227		
CLORAZEPATE DIPOTASSIUM	155		

Compact Space Chamber/Sm Mask	277	COVID-19 MRNA BIVALENT VIRUS VACCINE	
Complera	16	(PFIZER)	26
Complete Natal DHA	208	Creon	147
CompleteNate	206	Cresemba	11
Concept OB	206	Crinone	153
CONJUGATED ESTROGENS-BAZEDOXIFENE	78	CRISABOROLE	246
CONJUGATED ESTROGENS-		Crixivan	13
MEDROXYPROGESTERONE ACETATE	77,78	CRIZANLIZUMAB-TMCA	215
CONTINUOUS BLOOD GLUCOSE SYSTEM		CRIZOTINIB	56
RECEIVER	282,283	CROMOLYN SODIUM	134
CONTINUOUS BLOOD GLUCOSE SYSTEM		CROMOLYN SODIUM (MASTOCYTOSIS)	148
SENSOR	282,283	CROMOLYN SODIUM (OPHTH)	238
CONTINUOUS BLOOD GLUCOSE SYSTEM		CROSS-LINKED HYALURONATE	203
TRANSMITTER	282	CROTAMITON	252
Contour Next Test	258	Crotan	252
Contour Test	258	Crysvita	111
Cool Blood Glucose Test Strips	258	Cutaquig	31
COPANLISIB HCL	64	Cuvitru	31
Copaxone	168	CVS Advanced Glucose Test	258
Copiktra	64	CVS Glucose Meter Test Strips	258
Corifact	220	CVS Ketone Care	273
Corlanor	130	CYANOCOBALAMIN	211
CORTICOTROPIN	106	CYCLOBENZAPRINE HCL	202
Cortisporin-TC	240	CYCLOPENTOLATE HCL	235
Cortrophin	106	CYCLOPHOSPHAMIDE	38
Cosela	70	Cyclophosphamide	38
Cosentyx	246	CYCLOSERINE	10
Cosentyx (300 MG Dose)	246	CYCLOSPORINE	285,286
Cosentyx Sensoready (300 MG)	246	CYCLOSPORINE (OPHTH)	238
Cosentyx UnoReady	246	CYCLOSPORINE MODIFIED (FOR	
Cosmegen	40	MICROEMULSION)	285,286
Cotellic	61	Cyltezo	184
Coumadin	217	Cyltezo-CD/UC/HS Starter	184
COVID-19 (SARS-COV-2) ADENOVIRUS VACCINE 25		Cyltezo-Psoriasis Starter	184
COVID-19 (SARS-COV-2) MRNA VIRUS		CYPROHEPTADINE HCL	131
VACCINE	23,25,26,27	Cyramza	44
COVID-19 (SARS-COV-2) SUBUNIT (SPIKE)		Cystadrops	239
PROTEIN VIRUS VACCINE	26	Cystagon	154
COVID-19 MRNA BIVALENT VIRUS VACCINE		Cystaran	239
(MODERNA)	25	CYSTEAMINE BITARTRATE	154
		CYSTEAMINE HCL	239

CYTARABINE.....	42	DAUNORubicin HCl.....	40
Cytarabine.....	42	DAUNORUBICIN-CYTARABINE LIPOSOME.....	72
Cytogam.....	31	Daurismo.....	51
CYTOMEGALOVIRUS IMMUNE GLOBULIN		DAXIBOTULINUMTOXINA-LANM.....	252
(HUMAN).....	31	Daxxify.....	252
Cytra K Crystals.....	153	Daybue.....	198
D		Debacterol.....	241
D-Care Blood Glucose.....	258	DECITABINE.....	42
DABIGATRAN ETEXILATE MESYLATE.....	217	DECITABINE-CEDAZURIDINE.....	71
DABRAFENIB MESYLATE.....	58	DEFERASIROX.....	254
DACARBAZINE.....	68	DEFERIPRONE.....	254
Dacogen.....	42	DEFEROXAMINE MESYLATE.....	253
DACOMITINIB.....	51	DEFLAZACORT.....	72,73
DACTINOMYCIN.....	40	DEGARELIX ACETATE.....	53
DALFAMPRIDINE.....	170	DELAFLOXACIN MEGLUMINE.....	9
DALTEPARIN SODIUM.....	216	Delestrogen.....	75
DANAZOL.....	74	Delstrigo.....	16
DANTROLENE SODIUM.....	203	DEMECLOCYCLINE HCL.....	8
Danyelza.....	49	DENOSUMAB.....	101
DAPAGLIFLOZIN PROPANEDIOL.....	97	Depo-Estradiol.....	75
DAPAGLIFLOZIN-METFORMIN HCL.....	98	DEPO-Medrol.....	72
DAPRODUSTAT.....	214	Depo-SubQ Provera 104.....	78
DAPSONE.....	22	Depo-Testosterone.....	74
DAPSONE (TOPICAL).....	243	Descovy.....	16
Daptacel.....	29	Desferal.....	253
DARATUMUMAB.....	48	DESIPRAMINE HCL.....	159
DARATUMUMAB-HYALURONIDASE-FIHJ.....	71	DESLORATADINE.....	132
DARBEPOETIN ALFA.....	212	Desloratadine.....	132
DARIFENACIN HYDROBROMIDE.....	152	DESMOPRESSIN ACETATE.....	106
DAROLUTAMIDE.....	51	Desmopressin Acetate.....	106
DARUNAVIR.....	13	DESMOPRESSIN ACETATE SPRAY.....	106
DARUNAVIR ETHANOLATE.....	14	DESMOPRESSIN ACETATE SPRAY	
DARUNAVIR-COBICISTAT.....	17	REFRIGERATED.....	106
DARUNAVIR-COBICISTAT-EMTRICITABINE-		DESOGESTREL & ETHINYL	
TENOFOVIR ALAFENAMIDE.....	17	ESTRADIOL.....	79,80,81,82,84
Darzalex.....	48	DESOGESTREL-ETHINYL ESTRADIOL	
Darzalex Faspro.....	71	(BIPHASIC).....	85
DASATINIB.....	58	DESOGESTREL-ETHINYL ESTRADIOL	
DASIGLUCAGON HCL.....	96	(TRIPHASIC).....	85,87
DAUNORUBICIN HCL.....	40	DESONIDE.....	249
		DESOXIMETASONE.....	249

DESVENLAFAXINE SUCCINATE	158	DIFLUNISAL	173
DEUTETRABENAZINE	168	DIFLUPREDNATE	233
DEXAMETHASONE	72	DIGOXIN	111
DEXAMETHASONE (OPHTH)	233	DIHYDROERGOTAMINE MESYLATE	189
Dexamethasone Intensol	72	Dilantin	192
DEXAMETHASONE SODIUM PHOSPHATE	72	DILTIAZEM HCL	114,115
Dexamethasone Sodium Phosphate	233	DILTIAZEM HCL COATED BEADS	114
DEXAMETHASONE SODIUM PHOSPHATE (OPHTH)	233	DILTIAZEM HCL EXTENDED RELEASE BEADS	114,115
Dexcom G6 Receiver	282	DIMETHYL FUMARATE	170
Dexcom G6 Sensor	282	DINUTUXIMAB	49
Dexcom G6 Transmitter	282	Dipentum	149
Dexcom G7 Receiver	282	DIPH-AC PERT-TET TOX AD-POLIO IPV- HAEMOPHIL B POLY VAC	30
Dexcom G7 Sensor	282	DIPH-TET TOX-ACELL PERT AD-POLIO IPV-HIB- HEPATITIS B RECOMB	30
DEXLANSOPRAZOLE	144	DIPH-TETANUS TOX AD-ACELL PERTUSSIS & POLIO VIRUS, IPV VAC	30
DEXMETHYLPHENIDATE HCL	165	DIPH-TETANUS TOX-ACELL PERT-HEPATITIS B RECOMB-POLIO IPV VAC	30
DEXRAZOXANE HCL	69	DIPHENHYDRAMINE HCL	131
DEXTRANOMER-SODIUM HYALURONATE	284	DIPHENOXYLATE W/ ATROPINE	143
DEXTROAMPHETAMINE SULFATE	163,164	Diphenoxylate-Atropine	143
Diacomit	193	DIPHThERIA, ACELLULAR PERTUSSIS & TETANUS TOXOIDS	29,30
Diastat AcuDial	191	DIPHThERIA-TETANUS TOXOIDS (DT)	30
Diastat Pediatric	191	Diphtheria-Tetanus Toxoids DT	30
Diastix	258	DIPYRIDAMOLE	227
Diathrive Blood Glucose Test	258	DIROXIMEL FUMARATE	170
Diathrive Glucose Test	258	DISOPYRAMIDE PHOSPHATE	116
Diathrive+ Glucose Test	258	DISULFIRAM	172
DiaTrue Plus Test	258	Diuril	123
DIAZEPAM	156	DIVALPROEX SODIUM	193
DIAZEPAM (ANTICONVULSANT)	191,192	DOCETAXEL	54,55
DICHLORPHENAMIDE	122	DOFETILIDE	117
DICLOFENAC EPOLAMINE	245	Dojolvi	211
DICLOFENAC POTASSIUM	180	DOLASETRON MESYLATE	145
DICLOFENAC SODIUM	180	DOLUTEGRAVIR SODIUM	13
DICLOFENAC SODIUM (OPHTH)	239	DOLUTEGRAVIR SODIUM-LAMIVUDINE	16
DICLOFENAC SODIUM (TOPICAL)	245	DOLUTEGRAVIR SODIUM-RILPIVIRINE HCL	16
DICLOFENAC W/ MISOPROSTOL	182	DONEPEZIL HYDROCHLORIDE	167
DICLOXACILLIN SODIUM	5		
DICYCLOMINE HCL	144		
DIDANOSINE	14		
Didanosine	14		
Difidic	8		

Doptelet	214	DUTASTERIDE-TAMSULOSIN HCL	155
DORAVIRINE	15	DUVELISIB	64
DORAVIRINE-LAMIVUDINE-TENOFOVIR		DYPHYLLINE-GUAIFENESIN	139
DISOPROXIL FUMARATE	16	Dysport	197
DORNASE ALFA	140		
DORZOLAMIDE HCL	239	E	
DORZOLAMIDE HCL-TIMOLOL MALEATE	233	EasiVent	277
DOSTARLIMAB-GXLY	49	EasiVent Mask Large	277
Dovato	16	EasiVent Mask Medium	277
DOXAZOSIN MESYLATE	119	EasiVent Mask Small	277
DOXEPIN HCL	159	Easy Plus II Glucose Test	259
DOXEPIN HCL (SLEEP)	163	Easy Step Test	259
DOXERCALCIFEROL	108	Easy Talk Blood Glucose Test	259
Doxil	40	Easy Talk Plus II Test Strips	259
DOXORUBICIN HCL	40	Easy Touch HealthPro Glucose	259
DOXORUBICIN HCL LIPOSOMAL	40	Easy Touch Test	259
DOXYCYCLINE (MONOHYDRATE)	8,9	Easy Trak Blood Glucose Test	259
DOXYCYCLINE (ROSACEA)	244	Easy Trak II Glucose Test	259
DOXYCYCLINE CALCIUM	9	EasyGluco	259
DOXYCYCLINE HYCLATE	8,9	EasyGluco Plus	259
DRONABINOL	146	EasyMax 15 Test	259
DRONEDARONE HCL	117	EasyMax Test	259
DROSPIRENONE	78	EasyPRO Blood Glucose Test	260
DROSPIRENONE-ESTETROL	83	EasyPRO Plus	260
DROSPIRENONE-ESTRADIOL	77	ECALLANTIDE	229
DROSPIRENONE-ETHINYL		ECHOTHIOPHATE IODIDE	236
ESTRADIOL	81,82,83,84,85	ECONAZOLE NITRATE	245
DROSPIRENONE-ETHINYL ESTRADIOL-		ECULIZUMAB	229
LEVOMEFOLATE CALCIUM	81,84	EDARAVONE	198
Droxia	215	Edarbi	118
Duavee	78	Edarbyclor	121
DULAGLUTIDE	94	Edex	130
DULOXETINE HCL	158	Edurant	15
Duo-Care Test	258	EFAVIRENZ	15
DUPILUMAB	247	EFAVIRENZ-EMTRICITABINE-TENOFOVIR	
Dupixent	247	DISOPROXIL FUMARATE	16
Duraxin	173	EFAVIRENZ-LAMIVUDINE-TENOFOVIR	
Durolane	203	DISOPROXIL FUMARATE	16
DURVALUMAB	50	Effer-K	210
Durysta	235	EFGARTIGIMOD ALFA AND HYALURONIDASE-	
DUTASTERIDE	155	QVFC	285

EFGARTIGIMOD ALFA-FCAB	285	Emend	146
EFLAPEGRASTIM-XNST	213	Emflaza	72,73
EFLORNITHINE HYDROCHLORIDE	70	Emgality	190
ELACESTRANT HYDROCHLORIDE	52	Emgality (300 MG Dose)	190
Elahere	48	EMICIZUMAB-KXWH	227
ELAPEGADEMASE-LVLR	107	EMPAGLIFLOZIN	97
Elaprase	109	EMPAGLIFLOZIN-LINAGLIPTIN	98
ElELYso	215	EMPAGLIFLOZIN-LINAGLIPTIN-METFORMIN	98
Element Compact Test	260	EMPAGLIFLOZIN-METFORMIN HCL	97,98
Element Test	260	Empaveli	229
ELETRIPTAN HYDROBROMIDE	189	Empliciti	50
ELEXACAF TOR-TEZACAF TOR-IVACAF TOR	140	Emsam	157
Elfabrio	107	EMTRICITABINE	14
Eligard	52	EMTRICITABINE-RILPIVIRINE-TENOFOVIR ALAFENAMIDE FUMARATE	17
ELIGLUSTAT TARTRATE	215	EMTRICITABINE-RILPIVIRINE-TENOFOVIR DISOPROXIL FUMARATE	16
Eliquis	217	EMTRICITABINE-TENOFOVIR ALAFENAMIDE FUMARATE	16
Eliquis DVT/PE Starter Pack	218	EMTRICITABINE-TENOFOVIR DISOPROXIL FUMARATE	16
Elitek	70	Emtriva	14
ELIVALDOGENE AUTOTEMCEL	167	Emverm	20
Ella	79	ENALAPRIL MALEATE	117
Ellence	40	ENALAPRIL MALEATE & HYDROCHLOROTHIAZIDE	120
Elmiron	154	ENASIDENIB MESYLATE	63
Eloctate	220	Enbrel	187
ELOSULFASE ALFA	109	Enbrel Mini	188
ELOTUZUMAB	50	Enbrel SureClick	188
ELRANATAMAB-BCMM	47	ENCORAFENIB	58
Elrexio	47	ENFORTUMAB VEDOTIN-EJFV	49
ELTROMBOPAG OLAMINE	214	ENFUVIRTIDE	12
ELUXADOLINE	151	Engerix-B	23
ELVITEGRAVIR-COBICISTAT-EMTRICITABINE- TENOFOVIR ALAFENAMIDE	16	Enhertu	48
ELVITEGRAVIR-COBICISTAT-EMTRICITABINE- TENOFOVIR DF	17	Enjaymo	229
Elzonris	68	ENOXAPARIN SODIUM	216
EMAPALUMAB-LZSG	287	Enspryng	287
Embrace Blood Glucose Test	260	ENTACAPONE	195
Embrace Evo Blood Glucose Test	260	ENTECAVIR	18
Embrace Pro Glucose Test	260	ENTRECTINIB	62
Embrace Talk Glucose Test	260		
Embrace Wave Blood Glucose	260		
Emcyt	52		

Entresto	131	Erwinase	41
Entyvio	149	Erwinaze	41
Envarsus XR	286	Ery	243
ENZALUTAMIDE	51	Erythrocin Stearate	7
Epclusa	18	ERYTHROMYCIN (ACNE AID)	243
EPCORITAMAB-BYSP	47	ERYTHROMYCIN (OPHTH)	230
Epidiolex	193	ERYTHROMYCIN BASE	7
Epifoam	251	ERYTHROMYCIN ETHYLSUCCINATE	7
EPINASTINE HCL (OPHTH)	238	ERYTHROMYCIN STEARATE	7
EPINEPHRINE (ANAPHYLAXIS)	123,124	Esbriet	141
EpiPen 2-Pak	124	ESCITALOPRAM OXALATE	157
EPIRUBICIN HCL	40	ESOMEPRAZOLE MAGNESIUM	144
Epivir HBV	18	ESOMEPRAZOLE STRONTIUM	144
Epkinly	47	Esomeprazole Strontium	144
EPLERENONE	119	Esperoct	220
EPOETIN ALFA	212	ESTAZOLAM	162
EPOETIN ALFA-EPBX	213	ESTERIFIED ESTROGENS	76
Epogen	212	ESTERIFIED ESTROGENS & METHYLTESTOSTERONE	76,77
EPOPROSTENOL SODIUM	128,129	ESTRADIOL	75,76
EPROSARTAN MESYLATE	118	ESTRADIOL & NORETHINDRONE ACETATE	77
Eprosartan Mesylate	118	ESTRADIOL CYPIONATE	75
EPTINEZUMAB-JJMR	190	ESTRADIOL VAGINAL	153
EQ Blood Glucose Test	260	ESTRADIOL VALERATE	75,76
EQ Space Chamber Anti-Static	278	ESTRADIOL VALERATE-DIENOGEST	87
EQ Space Chamber Anti-Static L	278	ESTRADIOL-LEVONORGESTREL	77
EQ Space Chamber Anti-Static M	278	ESTRADIOL-NORGESTIMATE	77
EQ Space Chamber Anti-Static S	278	ESTRAMUSTINE PHOSPHATE SODIUM	52
Erbitux	50	Estring	153
ERDAFITINIB	59	Estrogel	76
ERGOCALCIFEROL	205	ESTROGENS, CONJUGATED	76
ERGOLOID MESYLATES	166	ESTROGENS, CONJUGATED VAGINAL	153
Ergoloid Mesylates	166	ESZOPICLONE	163
Ergomar	189	ETANERCEPT	187,188
ERGOTAMINE TARTRATE	189	ETELCALCETIDE HCL	108
ERGOTAMINE W/ CAFFEINE	190	ETEPLIRSEN	198
Ergotamine-Caffeine	190	ETHACRYNIC ACID	122
ERIBULIN MESYLATE	55	ETHAMBUTOL HCL	10
Erivedge	51	ETHIONAMIDE	10
Erleada	51	ETHOSUXIMIDE	192
ERLOTINIB HCL	50	ETHOTOIN	192
Ertaczo	245		

ETHYNODIOL DIACET & ETH ESTRAD	81,82,85	EZETIMIBE-SIMVASTATIN	126
Ethyol	70	F	
ETODOLAC	180	Fabhalta	229
ETONOGESTREL-ETHINYL ESTRADIOL	79	Fabrazyme	107
Etopophos	55	FACTOR IX COMPLEX	223
ETOPOSIDE	55	FACTOR XIII CONCENTRATE (HUMAN)	220
Etoposide	55	FaLessa	81
ETOPOSIDE PHOSPHATE	55	FAM-TRASTUZUMAB DERUXTECAN-NXKI	48
ETRANACOGENE DEZAPARVOVEC-DRLB	225	FAMCICLOVIR	19
ETRASIMOD ARGININE	150	FAMOTIDINE	144
ETRAVIRINE	15	FARICIMAB-SVOA	237
Eucrisa	246	Farxiga	97
Euflexxa	203	Farydak	57
Evamist	76	Fasenra	138
EvenCare + Blood Glucose Test	260	Fasenra Pen	138
EvenCare Blood Glucose Test	260	Faslodex	52
EvenCare G2 Test	261	FEBUXOSTAT	190
EvenCare G3 Test	261	FECAL MICROBIOTA, LIVE-JSLM	150
EvenCare Mini Glucose Test	261	FEDRATINIB HCL	64
EvenCare ProView Glucose Test	261	Feiba	221
Evenity	101	FELBAMATE	192
EVEROLIMUS	60	FELODIPINE	114
EVEROLIMUS (IMMUNOSUPPRESSANT)	286,287	FENOFIBRATE	124
EVINACUMAB-DGNB	125	FENOFIBRATE MICRONIZED	124
Evkeeza	125	FENOPROFEN CALCIUM	180
EVOLOCUMAB	125	Fensolvi (6 Month)	103
Evolution Autocode	261	FENTANYL	174,177
Evomela	38	FENTANYL CITRATE	174,175
Evotaz	16	Fentora	174
Evrysdi	202	FERRIC DERISOMALTOSE	211
ExacTech R-S-G Test	261	Ferriprox	254
ExacTech Test	261	Ferriprox Twice-A-Day	254
EXAGAMGLOGENE AUTOTEMCEL	215	FESOTERODINE FUMARATE	152
Exelderm	245	Fiasp	89
EXEMESTANE	52	Fiasp FlexTouch	89
EXENATIDE	93	Fiasp PenFill	89
Exkivity	50	Fiasp PumpCart	89
Exondys 51	198	FIBRINOGEN CONCENTRATE (HUMAN)	221,223
Eylea	237	Fibryga	221
Eylea HD	237	FIDAXOMICIN	8
EZETIMIBE	124		

Fifty50 Glucose Test 2.0	261	FLUOROMETHOLONE ACETATE	233
FILGRASTIM-AAFI	213	Fluoroplex	248
FILGRASTIM-AYOW	213	FLUOROURACIL	42
FILGRASTIM-SNDZ	214	FLUOROURACIL (TOPICAL)	248
Filspari	154	FLUOXETINE HCL	157
Finacea	244	FLUoxetine HCl	157
FINASTERIDE	155	FLUPHENAZINE HCL	161
FINGOLIMOD HCL	171	FluPHENAZine HCl	161
Firdapse	205	FLURANDRENOLIDE	250
Firmagon	53	FLURAZEPAM HCL	163
Firmagon (240 MG Dose)	53	Flurazepam HCl	163
Firvanq	22	FLURBIPROFEN	180
Flarex	233	FLURBIPROFEN SODIUM	239
FLAVOXATE HCL	152	Flurbiprofen Sodium	239
Flebogamma DIF	32	FLUTAMIDE	51
FLECAINIDE ACETATE	116	FLUTICASONE FUROATE-VILANTEROL	135
Flexichamber	278	FLUTICASONE PROPIONATE	248,250
Flexichamber Adult Mask/Small	278	FLUTICASONE PROPIONATE (INHALATION)	137
Flexichamber Child Mask/Large	278	Fluticasone Propionate Diskus	137
Flexichamber Child Mask/Small	278	FLUTICASONE PROPIONATE HFA	137
Flolan	128	Fluticasone Propionate HFA	137
Flovent Diskus	137	FLUTICASONE-SALMETEROL	135,136
FLOXURIDINE	42	FLUTICASONE-UMECLIDINIUM-VILANTEROL	136
Fluad	24	FLUVASTATIN SODIUM	125
Fluad Quadrivalent	24	FLUVOXAMINE MALEATE	157,158
Fluarix Quadrivalent	24	Fluzone High-Dose Quadrivalent	24
Flublok Quadrivalent	24	Fluzone Quadrivalent	25
Flucelvax Quadrivalent	24	FML	233
FLUCONAZOLE	11	FOLIC ACID	211
FLUCYTOSINE	11	Folivane-OB	206
FLUDARABINE PHOSPHATE	42	Follistim AQ	102
FLUDROCORTISONE ACETATE	74	FOLLITROPIN ALFA	102
Flulaval Quadrivalent	24	FOLLITROPIN BETA	102
FluMist Quadrivalent	24	Folotyn	43
FLUNISOLIDE (NASAL)	132	FONDAPARINUX SODIUM	217
FLUOCINOLONE ACETONIDE	249	Fora 6 Connect	261
FLUOCINOLONE ACETONIDE (OPHTH)	233,234	Fora 6 Connect/GTel Test	261
FLUOCINOLONE ACETONIDE (OTIC)	240	FORA Blood Glucose Test	261
FLUOCINONIDE	249,250	FORA D15g Blood Glucose Test	261
FLUOCINONIDE EMULSIFIED BASE	250	FORA D20 Blood Glucose Test	262
FLUOROMETHOLONE (OPHTH)	233	Fora D40/G31 Blood Glucose	262

FORA G20 Blood Glucose Test	262	FreeStyle Test	263
FORA G30/Prem V10 Glucose Test	262	FREMANEZUMAB-VFRM	190
Fora GD20 Test	262	FROVATRIPTAN SUCCINATE	189
FORA GD50 Blood Glucose Test	262	FRUQUINTINIB	44,45
FORA GTel Blood Glucose Test	262	Fruzaqla	44,45
FORA GTel Blood Ketone Test	262	Fulphila	213
Fora Test N'Go Adv-Voice-6 Con	262	FULVESTRANT	52
FORA TN'G Advance Pro	262	FUROSEMIDE	122
Fora TN'G/TN'G Voice	262	FUTIBATINIB	59
FORA V10 Blood Glucose Test	262	Fuzeon	12
FORA V12 Blood Glucose Test	263	Fyarro	60
FORA V20 Blood Glucose Test	263	Fylnetra	213
FORA V30a Blood Glucose Test	263		
ForaCare GD40 Test	263	G	
ForaCare premium V10 Test	263	GABAPENTIN	193
ForaCare Test N Go Test	263	Galafold	107
FORMOTEROL FUMARATE	134	GALANTAMINE HYDROBROMIDE	167
FortisCare G1 Test Strip	263	GALCANEZUMAB-GNLM	190
FortisCare Test	263	GALSULFASE	109
FOSAMPRENAVIR CALCIUM	13	GamaSTAN	32
FOSDENOPTERIN HYDROBROMIDE	108	Gamifant	287
FOSFOMYCIN TROMETHAMINE	22	Gammagard	32
FOSINOPRIL SODIUM	117	Gammagard S/D Less IgA	32
FOSINOPRIL SODIUM & HYDROCHLOROTHIAZIDE	120	Gammaked	32
FOSNETUPITANT CHORIDE-PALONOSETRON HCL	146	Gammaplex	32
FOSTAMATINIB DISODIUM	228	Gamunex-C	33
FOSTEMSAVIR TROMETHAMINE	12	GANAXOLONE	195
Fotivda	61	GANCICLOVIR OPHTHALMIC	231
Fragmin	216	GANIRELIX ACETATE	103
FreeStyle InsuLinx Test	263	Gardasil 9	25
FreeStyle Libre 14 Day Reader	282	GATIFLOXACIN (OPHTH)	230
FreeStyle Libre 14 Day Sensor	282	GaviLyte-C	142
FreeStyle Libre 2 Reader	283	Gavreto	63
FreeStyle Libre 2 Sensor	283	Gazyva	46
FreeStyle Libre 3 Sensor	283	GE100 Blood Glucose Test	264
FreeStyle Libre Reader	283	GEFITINIB	50
FreeStyle Libre Sensor System	283	Gel-One	203
FreeStyle Lite Test	263	Gelsyn-3	203
FreeStyle Precision Neo Test	263	GEMCITABINE HCL	43
		GEMCITABINE HCL-SODIUM CHLORIDE	43
		GEMFIBROZIL	124

GEMTUZUMAB OZOGAMICIN	48	GLUCOSE	
Genotropin MiniQuick	104	BLOOD .254,255,256,257,258,259,260,261,262,263,264,265,266,267,268,269,270,271,272,273	
Gentak	230	Glucose Meter Test	264
GENTAMICIN SULFATE (OPHTH)	230	GLUCOSE URINE TEST-(GLUCOSE OXIDASE) . .	258
GENTAMICIN SULFATE (TOPICAL)	244	GLYBURIDE	94
GENTAMICIN-PREDNISOLONE ACETATE . . .	234,235	GLYBURIDE MICRONIZED	95
GenUltimate Test	264	GlyBURIDE Micronized	95
GenVisc 850	203	GLYBURIDE-METFORMIN	98
Genvoya	16	GLYCOPYRROLATE	143
GHT Test	264	Glyxambi	98
Gilenya	171	GNP Easy Touch Glucose Test	265
Gilotrif	50	GNP True Metrix Glucose Strips	265
GILTERITINIB FUMARATE	61	GNP TrueTrack Smart System	265
Givlaari	218	GNP Truetrack Test Strips	265
GIVOSIRAN SODIUM	218	Gojji Blood Glucose Test	265
GLASDEGIB MALEATE	51	Gojji Blood Ketone Test	265
Glassia	139	Gojji Blood Test Strip/Lancets	265
GLATIRAMER ACETATE	168,169	GOLIMUMAB	187
GLECAPREVIR-PIBRENTASVIR	19	GOLODIRSEN	198
Gleostine	39	Gonal-f	102
Gliadel Wafer	39	Gonal-f RFF	102
GLIMEPIRIDE	94	Gonal-f RFF Rediject	102
GLIPIZIDE	94	GoodSense Blood Glucose	265
GLIPIZIDE-METFORMIN HCL	98	GOSERELIN ACETATE	53
GLOFITAMAB-GXBM	47	GRANISETRON	146
GlucaGen HypoKit	95	GRANISETRON HCL	146
GLUCAGON	95,96	GRISEOFULVIN MICROSIZE	11
GLUCAGON (RDNA)	95	GRISEOFULVIN ULTRAMICROSIZE	11
Glucagon Emergency	95	GUANFACINE HCL	118
GLUCAGON HCL	95	GUANFACINE HCL (ADHD)	165
GLUCAGON HCL (RDNA)	95	GUANIDINE HCL	205
GLUCARPIDASE	70	Guanidine HCl	205
Gluco Perfect 3 Test	264	GUSELKUMAB	247
Glucocard 01 Sensor Plus	264	Gvoke HypoPen 1-Pack	96
Glucocard Expression Test	264	Gvoke HypoPen 2-Pack	96
Glucocard Shine Test	264	Gvoke Kit	96
Glucocard Vital Test	264	Gvoke PFS	96
Glucocard X-Sensor	264	Gynazole-1	153
GlucoCom Test	264		
GlucoNavii Blood Glucose Test	264		

H

Hadlima	185	Hulio	185
Hadlima PushTouch	185	Hulio (2 Syringe)	185
Haegarda	228	HUMAN PAPILLOMAVIRUS (HPV) 9-VALENT RECOMBINANT VACCINE	25
HAEMOPHILUS B POLYSAC CONJ VAC	28,29	Humate-P	221
Halaven	55	Humatrope	104
HALOBETASOL PROPIONATE	249,250	Humira	185
HALOPERIDOL	160	Humira (2 Pen)	185
HALOPERIDOL LACTATE	160	Humira (2 Syringe)	185
Harmony Blood Glucose Test	265	Humira Pediatric Crohns Start	185
Harvoni	18	Humira Pen	186
Havrix	25	Humira Pen-CD/UC/HS Starter	186
Hemangeol	112	Humira Pen-Psor/Uveit Starter	186
Hemgenix	225	Humira-CD/UC/HS Starter	186
Hemlibra	227	Humira-Ped>=40kg UC Starter	186
Hemofil M	221	Humira-Ps/UV/Adol HS Starter	186
HepaGam B	33	HumuLIN R U-500 (CONCENTRATED)	89
HEPARIN SODIUM (PORCINE)	216	HumuLIN R U-500 KwikPen	89
HEPARIN SODIUM (PORCINE) LOCK FLUSH	216	HW Embrace Pro Glucose Test	265
HEPATITIS A (INACTIVATED)-HEPATITIS B (RECOMBINANT) VACCINES	28	HW Embrace Talk Glucose Test	265
HEPATITIS A VACCINE	25,27	Hyalgan	203
HEPATITIS B IMMUNE GLOBULIN (HUMAN)	33	HYALURONAN	203
HEPATITIS B VACCINE (RECOMB)	23,27	Hycamtin	65
HEPATITIS B VACCINE 3-ANTIGEN RECOMBINANT	27	HYDRALAZINE HCL	119
HEPATITIS B VACCINE RECOMBINANT ADJUVANTED	25	HYDROCHLOROTHIAZIDE	123
Hepilisav-B	25	HYDROCODONE BITARTRATE	175
Herceptin	39	HYDROCODONE BITARTRATE-HOMATROPINE METHYLBROMIDE	132
Herceptin Hylecta	71	HYDROCODONE POLISTIREX- CHLORPHENIRAMINE POLISTIREX	133
Herzuma	39	HYDROCODONE-ACETAMINOPHEN	179,180
Hetlioz	163	HYDROCODONE-IBUPROFEN	180
Hetlioz LQ	163	HYDROCORTISONE	73
Hiberix	28	HYDROCORTISONE (INTRARECTAL)	242
HISTRELIN ACETATE	53	HYDROCORTISONE (RECTAL)	241
HISTRELIN ACETATE (CPP)	103	HYDROCORTISONE (TOPICAL)	248,250
Hizentra	33	Hydrocortisone Ace-Pramoxine	242,251
Homatropaire	236	HYDROCORTISONE ACETATE (RECTAL)	241
HOMATROPINE HBR	236	HYDROCORTISONE ACETATE (TOPICAL)	250
		HYDROCORTISONE ACETATE W/ PRAMOXINE	242
		HYDROCORTISONE BUTYRATE	250

HYDROCORTISONE BUTYRATE HYDROPHILIC LIPO BASE	250	IDELALISIB	65
HYDROCORTISONE SOD SUCCINATE	74	Idelvion	221
HYDROCORTISONE VALERATE	250	IDHIFA	63
HYDROCORTISONE W/ACETIC ACID	240	iDose TR	235
HYDROMORPHONE HCL	175	IDURSULFASE	109
HYDRomorphone HCl	175	Ifex	38
HYDROXYCHLOROQUINE SULFATE	20	IFOSFAMIDE	38
HYDROXYPROGESTERONE CAPROATE	88	iGlucose Test Strips	265
HYDROXYUREA	68	Ilaris	188
HYDROXYUREA (SICKLE CELL DISEASE)	215	ILOPROST	129
HYDROXYZINE HCL	156	Ilumya	246
HYDROXYZINE PAMOATE	156	Iluvien	233
HYLAN	204	IMATINIB MESYLATE	58
Hymovis	203	Imbruvica	58,59
HYOSCYAMINE SULFATE	143	Imcivree	164
HyperHEP B	33	Imfinzi	50
HyperRHO S/D	33	IMIGLUCERASE	215
HyperSal	133	IMIPRAMINE HCL	159
Hyqvia	35	IMIQUIMOD	252
Hyrimoz	186	Imjudo	48
Hyrimoz-Crohns/UC Starter	186	Imlygic	66
Hyrimoz-Crohns/UC Starter Pack	186	IMMUNE GLOBULIN (HUMAN) IM	32
Hyrimoz-Ped Crohns Starter	186	IMMUNE GLOBULIN (HUMAN) IV	31,32,34
Hyrimoz-Plaque Psoriasis Start	187	IMMUNE GLOBULIN (HUMAN) IV OR SUBCUTANEOUS	32,33
		IMMUNE GLOBULIN (HUMAN) SUBCUTANEOUS	31,33
		IMMUNE GLOBULIN (HUMAN)-HIPPI	31
		IMMUNE GLOBULIN (HUMAN)-HYALURONIDASE (HUMAN RECOMBINANT)	35
		IMMUNE GLOBULIN (HUMAN)-IFAS	34
		IMMUNE GLOBULIN (HUMAN)-KLHW	35
		IMMUNE GLOBULIN (HUMAN)-SLRA	31
		Impavido	21
		In Touch Blood Glucose Test	266
		Inatal GT	206
		INCLISIRAN SODIUM	125
		INCOBOTULINUMTOXINA	197
		Increlex	104
		INDAPAMIDE	123
		INDINAVIR SULFATE	13
IBALIZUMAB-UIYK	12		
IBANDRONATE SODIUM	100		
Ibrance	57		
IBRUTINIB	58,59		
IBUPROFEN	181		
ICATIBANT ACETATE	229		
Iclusig	58		
ICOSAPENT ETHYL	126		
Idacio	187		
Idacio for Crohns Disease/UC	187		
Idacio for Plaque Psoriasis	187		
Idamycin PFS	41		
IDARUBICIN HCL	41		
IDECABTAGENE VICLEUCEL	67		

Indocin	181	INSULIN ASPART	89,90,92,93
INDOMETHACIN	181	Insulin Aspart	89
INEBILIZUMAB-CDON	287	INSULIN ASPART (WITH NIACINAMIDE)	89
Infanrix	30	Insulin Aspart FlexPen	89
INFIGRATINIB PHOSPHATE	59	Insulin Aspart PenFill	90
Infinity Blood Glucose Test	266	Insulin Aspart Prot & Aspart	90
Infinity Voice	266	INSULIN ASPART PROTAMINE & ASPART (HUMAN)	89,90,92
Inflectra	150	INSULIN DEGLUDEC	90,93
INFLIXIMAB	150	Insulin Degludec	90
inFLIXimab	150	Insulin Degludec FlexTouch	90
INFLIXIMAB-ABDA	150	INSULIN DETEMIR	91
INFLIXIMAB-AXXQ	150	INSULIN GLARGINE	89,90,93
INFLIXIMAB-DYYB	150	Insulin Glargine	90
INFLUENZA VIRUS VAC RECOMB HEMAGGLUTININ (HA) QUADRIVALENT	24	Insulin Glargine Max SoloStar	90
INFLUENZA VIRUS VAC SPLIT HIGH-DOSE QUAD PRESERVATIVE FREE	24	Insulin Glargine Solostar	90
INFLUENZA VIRUS VACC TYPES A & B SURF ANTIGEN ADJUVANT QUAD	24	INSULIN GLARGINE-YFGN	90,93
INFLUENZA VIRUS VACCINE LIVE QUADRIVALENT	24	Insulin Glargine-yfgn	90
INFLUENZA VIRUS VACCINE SPLIT QUADRIVALENT	23,24,25	INSULIN INFUSION DISPOSABLE PUMP	282
INFLUENZA VIRUS VACCINE TISSUE-CULTURED SUBUNIT QUADRIVALENT	24	INSULIN LISPRO	90
INFLUENZA VIRUS VACCINE TYPES A & B SURFACE ANTIGEN ADJUVANT	24	Insulin Lispro	90
Infugem	43	Insulin Lispro (1 Unit Dial)	90
INGENOL MEBUTATE	248	Insulin Lispro Junior KwikPen	90
Ingrezza	168	Insulin Lispro Prot & Lispro	91
Inlyta	45	INSULIN LISPRO PROTAMINE & LISPRO	91
INOTERSEN SODIUM	172	INSULIN NPH (HUMAN) (ISOPHANE)	91,92
INOTUZUMAB OZOGAMICIN	47	INSULIN NPH ISOPHANE & REG (HUMAN)	91
Inqovi	71	INSULIN PEN NEEDLE	273
Inrebic	64	INSULIN REGULAR (HUMAN)	89,92
InspiraChamber/Large	278	INSULIN SYRINGE	274
InspiraChamber/Medium	278	INSULIN SYRINGE NEEDLE	274
InspiraChamber/Mouthpiece	278	Intelence	15
InspiraChamber/Small	278	INTERFERON ALFA-2B	68
Inspirease	279	INTERFERON ALFA-N3	68
Insulin Asp Prot & Asp FlexPen	89	INTERFERON BETA-1A	169,170
		INTERFERON BETA-1B	169
		INTERFERON GAMMA-1B	68
		Intron A	68
		Invirase	13
		IOBENGUANE I 131	67
		Iodine Strong	209

IODINE STRONG (LUGOL'S)	209
lopidine	237
IPILIMUMAB	49
Ipol	25
IPRATROPIUM BROMIDE	134
IPRATROPIUM BROMIDE (NASAL)	132
IPRATROPIUM BROMIDE HFA	134
IPRATROPIUM-ALBUTEROL	135,136
IPTACOPAN HCL	229
IRBESARTAN	118
IRBESARTAN-HYDROCHLOROTHIAZIDE	121
IRINOTECAN HCL	65
Irinotecan HCl	65
IRINOTECAN HCL LIPOSOME	65
ISATUXIMAB-IRFC	48
ISAVUCONAZONIUM SULFATE	11
Isentress	12,13
Isentress HD	13
ISOCARBOXAZID	157
ISONIAZID	10
Isopto Atropine	236
ISOSORBIDE DINITRATE	111
ISOSORBIDE MONONITRATE	111
ISOTRETINOIN	242,243
ISOXSUPRINE HCL	126
ISRADIPINE	114
Istodax	57
ITRACONAZOLE	11
IVABRADINE HCL	130
IVACAFTOR	140
IVERMECTIN	20
Ivermectin	252
IVERMECTIN (PEDICULICIDE)	252
IVERMECTIN (ROSACEA)	244
IVOSIDENIB	63
Iwilfin	70
IXABEPILONE	55
IXAZOMIB CITRATE	64
Ixempra Kit	55
Ixinity	221
Izervay	236

J

Jakafi	64
Janssen COVID-19 Vaccine	25
Janumet	97
Janumet XR	97
Januvia	96
Jardiance	97
Jaypirca	59
Jelmyto	41
Jemperli	49
Jesduvrog	214
Jevtana	55
Jivi	221
Joenja	284
Juluca	16
Juxtapid	126
Jynarque	106

K

K-Phos No 2	153
K-Tab	209
Kadcyla	48
Kalbitor	229
Kalydeco	140
Kanjinti	39
Kanuma	108
Katerzia	115
Kemoplaf	37
Kenalog-10	73
Kepivance	70
Kesimpta	170
Keto-Diastix	273
KETOCONAZOLE	11
KETOCONAZOLE (TOPICAL)	245
KETONE BLOOD TEST	262,265,267,269
Ketone Test	266
KETOPROFEN	181
Ketoprofen ER	181
KETOROLAC TROMETHAMINE	181
KETOROLAC TROMETHAMINE (OPHTH)	239

Ketostix	266	LAMOTRIGINE	193,194
Keveyis	122	Lamzede	107
Keytruda	49	LANADELUMAB-FLYO	230
Khapzory	69	LANCETS	283
Kimmtrak	47	LANREOTIDE ACETATE	105
Kinrix	30	Lanreotide Acetate	105
Kisqali (200 MG Dose)	57	LANSOPRAZOLE	144
Kisqali (400 MG Dose)	57	LANTHANUM CARBONATE	151
Kisqali (600 MG Dose)	57	LAPATINIB DITOSYLATE	61
Kisqali Femara (200 MG Dose)	71	LARONIDASE	109
Kisqali Femara (400 MG Dose)	71	LAROTRECTINIB SULFATE	62
Kisqali Femara (600 MG Dose)	71	Lartruvo	54
Kitabis Pak	9	Lastacaft	239
Klarity-A	231	LATANOPROST	235
Kloxxado	254	Lazanda	175
Koate	222	LEDIPASVIR-SOFOSBUVIR	18
Koate-DVI	222	Ledipasvir-Sofosbuvir	18
Kogenate FS	222	LEFLUNOMIDE	187
Korlym	96	Lemtrada	170
Koselugo	62	LENACAPAVIR SODIUM	12
Kovaltry	222	LENALIDOMIDE	284,285
Krazati	60	LENIOLISIB PHOSPHATE	284
Kroger Blood Glucose Test	266	LENVATINIB MESYLATE	45
Kroger HealthPro Glucose Test	266	Lenvima (10 MG Daily Dose)	45
Kroger Premium Glucose Test	266	Lenvima (12 MG Daily Dose)	45
Kroger Test	266	Lenvima (14 MG Daily Dose)	45
Krystexxa	191	Lenvima (18 MG Daily Dose)	45
Kymriah	67	Lenvima (20 MG Daily Dose)	45
Kyprolis	64	Lenvima (24 MG Daily Dose)	45
		Lenvima (4 MG Daily Dose)	45
		Lenvima (8 MG Daily Dose)	45
L		Leqvio	125
LABETALOL HCL	113	LETERMOVIR	17
LACOSAMIDE	193,194	LETROZOLE	52
Lacrisert	232	LEUCOVORIN CALCIUM	69
LACTULOSE	141	Leukeran	38
LACTULOSE (ENCEPHALOPATHY)	149	LEUPROLIDE ACETATE	52,53
LAMIVUDINE	14	LEUPROLIDE ACETATE & NORETHINDRONE ACETATE	103
LAMIVUDINE (HBV)	18	LEUPROLIDE ACETATE (3 MONTH)	52,53
LAMIVUDINE-TENOFOVIR DISOPROXIL FUMARATE	16,17	Leuprolide Acetate (3 Month)	52
LAMIVUDINE-ZIDOVUDINE	16		

LEUPROLIDE ACETATE (4 MONTH).....	53	LIDOCAINE HCL (MOUTH-THROAT).....	241
LEUPROLIDE ACETATE (6 MONTH).....	53	LIDOCAINE HCL (OPHTH).....	238
LEUPROLIDE ACETATE (CPP).....	103	LIDOCAINE-HYDROCORTISONE ACETATE (RECTAL).....	242
LEUPROLIDE ACETATE (CPP) (3 MONTH).....	103	LIDOCAINE-PRILOCAINE.....	252
LEUPROLIDE ACETATE (CPP) (6 MONTH).....	103	LIFITEGRAST.....	238
LEUPROLIDE MESYLATE (6 MONTH).....	52	Likmez.....	21
LEVALBUTEROL HCL.....	135	LINACLOTIDE.....	151
LEVALBUTEROL TARTRATE.....	135	LINDANE.....	253
Levemir.....	91	Lindane.....	253
Levemir FlexPen.....	91	LINEZOLID.....	21
Levemir FlexTouch.....	91	Linzess.....	151
LEVETIRACETAM.....	194	LIOTHYRONINE SODIUM.....	99
LEVOBUNOLOL HCL.....	232	Lipofen.....	124
Levobunolol HCl.....	232	LIRAGLUTIDE.....	94
LEVOCARNITINE (METABOLIC MODIFIERS).....	107	LISDEXAMFETAMINE DIMESYLATE.....	164
LEVOFLOXACIN.....	9	LISINOPRIL.....	117
LEVOFLOXACIN (OPHTH).....	231	LISINOPRIL & HYDROCHLOROTHIAZIDE.....	120
LEVOLEUCOVORIN.....	69	LISOCABTAGENE MARALEUCEL.....	67
LEVOLEUCOVORIN CALCIUM.....	69,70	LiteAire.....	279
LEVONORGESTREL & ETH ESTRADIOL.....	79,80,81,82,83,84,85	LITHIUM.....	162
LEVONORGESTREL-ETH ESTRADIOL (TRIPHASIC).....	86,87	LITHIUM CARBONATE.....	162
LEVONORGESTREL-ETHINYL ESTRADIOL.....	79	Lithostat.....	154
LEVONORGESTREL-ETHINYL ESTRADIOL & FOLIC ACID.....	81	Livmarli.....	148
LEVONORGESTREL-ETHINYL ESTRADIOL (91- DAY).....	87,88	Livtency.....	17
LEVONORGESTREL-ETHINYL ESTRADIOL (CONTINUOUS).....	88	Lo Loestrin Fe.....	85
LEVONORGESTREL-ETHINYL ESTRADIOL- FERROUS BISGLYCINATE.....	80,81,82	LODOXAMIDE TROMETHAMINE.....	238
LEVORPHANOL TARTRATE.....	175	Lokelma.....	288
LEVOTHYROXINE SODIUM.....	99,100	LOMITAPIDE MESYLATE.....	126
Lexiva.....	13	LOMUSTINE.....	39
Liberty Next Generation Test.....	266	LONAFARNIB.....	288
Liberty Test.....	266	LONCASTUXIMAB TESIRINE-LPYL.....	46
Libtayo.....	49	Lonsurf.....	71
LIDOCAINE.....	252	LOPINAVIR-RITONAVIR.....	17
Lidocaine HCl.....	241	Loqtorzi.....	49
LIDOCAINE HCL.....	252	LORAZEPAM.....	156
		Lorbrena.....	56
		LORLATINIB.....	56
		Lortab.....	180
		LOSARTAN POTASSIUM.....	118

LOSARTAN POTASSIUM & HYDROCHLOROTHIAZIDE.....	121	Lytgobi (12 MG Daily Dose).....	59
Lotemax.....	233	Lytgobi (16 MG Daily Dose).....	59
Lotemax SM.....	233	Lytgobi (20 MG Daily Dose).....	59
LOTEPREDNOL ETABONATE.....	233	M	
LOTEPREDNOL ETABONATE-TOBRAMYCIN.....	235	M-M-R II.....	28
LOTILANER.....	231	MACITENTAN.....	128
LOVASTATIN.....	125	Macugen.....	237
LOVOTIBEGLOGENE AUTOTEMCEL.....	215	MAFENIDE ACETATE.....	248
LOXAPINE SUCCINATE.....	160	Makena.....	88
LUBIPROSTONE.....	149	MALATHION.....	253
Lucentis.....	237	MAPROTILINE HCL.....	159
LULICONAZOLE.....	245	Maprotiline HCl.....	159
LUMACAFTOR-IVACAFTOR.....	140	MARALIXIBAT CHLORIDE.....	148
Lumakras.....	60	MARAVIROC.....	12
LUMASIRAN SODIUM.....	155	Margenza.....	40
Lumigan.....	235	MARGETUXIMAB-CMKB.....	40
Lumizyme.....	109	MARIBAVIR.....	17
Lumoxiti.....	47	Marplan.....	157
Lunsumio.....	47	Marqibo.....	55
Lupaneta Pack.....	103	Mask Vortex.....	279
Lupkynis.....	285	Mask Vortex/Child/Frog.....	279
Lupron Depot (1-Month).....	53	Mask Vortex/Toddler/Ladybug.....	279
Lupron Depot (3-Month).....	53	Matulane.....	68
Lupron Depot (4-Month).....	53	MAVACAMTEN.....	129
Lupron Depot (6-Month).....	53	Mavenclad (10 Tabs).....	169
Lupron Depot-Ped (1-Month).....	103	Mavenclad (4 Tabs).....	169
Lupron Depot-Ped (3-Month).....	103	Mavenclad (5 Tabs).....	169
Lupron Depot-Ped (6-Month).....	103	Mavenclad (6 Tabs).....	169
LURASIDONE HCL.....	162	Mavenclad (7 Tabs).....	169
LURBINECTEDIN.....	38	Mavenclad (8 Tabs).....	169
LUSPATERCEPT-AAMT.....	211	Mavenclad (9 Tabs).....	169
LUSUTROMBOPAG.....	214	Mavyret.....	19
Lutathera.....	67	Maxidex.....	233
LUTETIUM LU 177 DOTATATE.....	67	Mayzent.....	171
LUTETIUM LU 177 VIPIVOTIDE TETRAXETAN.....	67	Mayzent Starter Pack.....	171
Luxturna.....	236	MEASLES, MUMPS & RUBELLA VIRUS VACCINES.....	28
Luzu.....	245	MEASLES-MUMPS-RUBELLA-VARICELLA VIRUS VACCINES.....	28
Lyfgenia.....	215	MEBENDAZOLE.....	20
Lynparza.....	63		
Lysodren.....	51		

MECASERMIN	104	Menveo	29
MECHLORETHAMINE HCL (TOPICAL)	247	MEPERIDINE HCL	175
MECLOFENAMATE SODIUM	181	Meperidine HCl	175
Meclofenamate Sodium	181	MEPOLIZUMAB	138
Medrol	73	MEPROBAMATE	156
MEDROXYPROGESTERONE ACETATE	88	Mepsevii	109
MEDROXYPROGESTERONE ACETATE (CONTRACEPTIVE)	78	MERCAPTOPURINE	43,44
MEFENAMIC ACID	181	MESALAMINE	149
MEFLOQUINE HCL	20	MESNA	70
MEGESTROL ACETATE	52	Mesnex	70
MEGESTROL ACETATE (APPETITE)	88	METAXALONE	202
Meijer Blood Glucose Test	266	METFORMIN HCL	95
Meijer Essential Glucose Test	266	METHADONE HCL	175,176
Meijer Premium Glucose Test	267	METHAMPHETAMINE HCL	164
Meijer TRUEtest Test	267	METHAZOLAMIDE	122
Meijer TRUEtrack Test	267	METHENAMINE HIPPURATE	22
Mekinist	62	METHENAMINE MANDELATE	22
Mektovi	62	METHENAMINE-HYOSC-METHYLENE BLUE-SOD PHOS-PHENYL SAL	23
MELOXICAM	181	METHIMAZOLE	100
MELPHALAN	38	METHOCARBAMOL	202
Melphalan	38	METHOTREXATE	44
MELPHALAN FLUFENAMIDE HCL	39	METHOTREXATE (ANTIRHEUMATIC)	182,183
MELPHALAN HCL	38	METHOTREXATE SODIUM	43
MEMANTINE HCL	167	METHOXSALEN (PHOTOPHERESIS)	69
Menactra	28	METHOXSALEN RAPID	247
Menest	76	METHOXY POLYETHYLENE GLYCOL-EPOETIN BETA	212
MENINGOCOCCAL (A,C,Y&W-135) OLIGOSACCHARIDE CONJUGATE VAC	29	METHSCOPOLAMINE BROMIDE	143
MENINGOCOCCAL (A,C,Y&W-135) POLYSACCH DIPHTH CONJ VACCINE	28	METHSUXIMIDE	192
MENINGOCOCCAL (A,C,Y&W-135) POLYSACCH TETANUS CONJ VACCINE	28	METHYLDOPA	118
MENINGOCOCCAL GROUP B VACCINE (RECOMBINANT)	29	METHYLDOPA & HYDROCHLOROTHIAZIDE	122
MENINGOCOCCAL VAC GROUP B (RECOMBANT OMV ADJUVANTED)	28	MethylDopa-Hydrochlorothiazide	122
Menopur	102	METHYLERGONOVINE MALEATE	100
Menostar	76	METHYLNALTREXONE BROMIDE	151
MENOTROPINS	102	METHYLPHENIDATE	165
MenQuadfi	28	METHYLPHENIDATE HCL	166
		Methylphenidate HCl ER	166
		METHYLPREDNISOLONE	73
		METHYLPREDNISOLONE ACETATE	72
		METHYLPREDNISOLONE SOD SUCC	73,74

METHYLTESTOSTERONE	74	MM Easy Touch Glucose	267
METOCLOPRAMIDE HCL	148	MOBOCERTINIB SUCCINATE	50
METOLAZONE	123	MODAFINIL	166
METOPROLOL & HYDROCHLOROTHIAZIDE	120	Moderna COVID-19 Bival 6m-5y	25
METOPROLOL SUCCINATE	113	Moderna COVID-19 Bival Booster	25
METOPROLOL TARTRATE	113	Moderna COVID-19 Bivalent	25
METRONIDAZOLE	21	Moderna COVID-19 Vac (Booster)	25
METRONIDAZOLE (TOPICAL)	244	Moderna COVID-19 Vac 6m-11y	26
METRONIDAZOLE VAGINAL	153	Moderna COVID-19 Vaccine	26
METYROSINE	119	MOEXIPRIL HCL	117
MEXILETINE HCL	116	MOGAMULIZUMAB-KPKC	46
MICONAZOLE (MOUTH-THROAT)	240	MOMELOTINIB DIHYDROCHLORIDE	64
MICONAZOLE-ZINC OXIDE-WHITE		MOMETASONE FUROATE	250
PETROLATUM	245	MOMETASONE FUROATE (INHALATION)	136,137
MICRhoGAM Ultra-Filtered Plus	33	Monjuvi	46
Microchamber	279	Monoferric	211
Microdot Test	267	Mononine	222
Microspacer	279	Monovisc	203
MIDAZOLAM (ANTICONVULSANT)	191	MONTELUKAST SODIUM	138
MIDODRINE HCL	123	MORPHINE SULFATE	176
MIDOSTAURIN	61	Morphine Sulfate	176
MIFEPRISTONE (HYPERGLYCEMIA)	96	Morphine Sulfate ER	176
MIGALASTAT HCL	107	MOSUNETUZUMAB-AXGB	47
MIGLITOL	96	MOTIXAFORTIDE ACETATE	214
MIGLUSTAT	215	Motpoly XR	194
MIGLUSTAT (GAA DEFICIENCY)	109	Mounjaro	94
MILNACIPRAN HCL	172	Movantik	151
MILRINONE LACTATE IN DEXTROSE	111	MOXETUMOMAB PASUDOTOX-TDFK	47
MILTEFOSINE	21	MOXIFLOXACIN HCL	9
MINOCYCLINE HCL	8,9	Moxifloxacin HCl (2X Day)	231
MINOXIDIL	119	MOXIFLOXACIN HCL (OPHTH)	231
Mircera	212	Mozobil	214
MIRIKIZUMAB-MRKZ	149	Mulpleta	214
MIRTAZAPINE	156	Multaq	117
MIRVETUXIMAB SORAVTANSINE-GYNX	48	MULTIPLE URINE TESTS	273
MISOPROSTOL	144	Multistix 10 SG	273
MITAPIVAT SULFATE	230	MUPIROCIN	244
MITOMYCIN	41	MUPIROCIN CALCIUM (TOPICAL)	244
MITOTANE	51	Muse	130
MITOXANTRONE HCL	41	Mvasi	45
MM BluLink Glucose Test	267	MYCOPHENOLATE MOFETIL	286

MYCOPHENOLATE MOFETIL HCL.....	286	NEOMYCIN SULFATE.....	10
MYCOPHENOLATE SODIUM.....	286	NEOMYCIN-BACITRACIN ZN-POLYMYXIN.....	232
MyGlucoHealth Test.....	267	NEOMYCIN-COLISTIN-HC-THONZONIUM.....	240
Myleran.....	37	NEOMYCIN-POLYMY-DEXAMETH.....	234
Mylotarg.....	48	NEOMYCIN-POLYMYXIN-GRAMICIDIN.....	232
Mynatal.....	206	Neomycin-Polymyxin-Gramicidin.....	232
Mynatal Advance.....	206	Neomycin-Polymyxin-HC.....	234
Mynate 90 Plus.....	206	NEOMYCIN-POLYMYXIN-HC (OPHTH).....	234
Myobloc.....	197	NEOMYCIN-POLYMYXIN-HC (OTIC).....	240
N		Neoral.....	286
Nabi-HB.....	33	NERATINIB MALEATE.....	61
NABUMETONE.....	181	Nerlynx.....	61
NADOLOL.....	112	Nesina.....	97
NAFTIFINE HCL.....	244	NETUPITANT-PALONOSETRON.....	146
Naglazyme.....	109	Neulasta Onpro.....	213
NALMEFENE HCL (ANTIDOTE).....	254	Neupro.....	196
NALOXEGOL OXALATE.....	151	Neutek 2Tek Test.....	267
NALOXONE HCL.....	254	NEVIRAPINE.....	15
NALTREXONE HCL.....	254	Nevirapine.....	15
NAPROXEN.....	180,181	Nextstellis.....	83
NAPROXEN SODIUM.....	181	Nexviazyme.....	109
NARATRIPTAN HCL.....	189	NIACIN (ANTIHYPERLIPIDEMIC).....	126
Natacyn.....	231	Niacin (Antihyperlipidemic).....	126
NATALIZUMAB.....	170	Niacor.....	126
Natalvit.....	206	NICARDIPINE HCL.....	115
NATAMYCIN.....	231	NIFEDIPINE.....	115
Natazia.....	87	NILOTINIB HCL.....	58
NATEGLINIDE.....	95	NILUTAMIDE.....	51
Natpara.....	101	NIMODIPINE.....	115
Natroba.....	253	Ninlaro.....	64
Navelbine.....	55	NINTEDANIB ESYLATE.....	141
NAXITAMAB-GQGK.....	49	Nipent.....	68
Nayzilam.....	191	NIRAPARIB TOSYLATE.....	63
NEBIVOLOL HCL.....	113	NIRAPARIB TOSYLATE-ABIRATERONE ACETATE.....	54
NECITUMUMAB.....	50	NIRMATRELVIR-RITONAVIR.....	20
NEDOCROMIL SODIUM (OPHTH).....	238	NIROGACESTAT HYDROBROMIDE.....	60
NEFAZODONE HCL.....	157	NIRSEVIMAB-ALIP.....	35
Nefazodone HCl.....	157	NISOLDIPINE.....	115
NELARABINE.....	42,43	NITAZOXANIDE.....	22
NELFINAVIR MESYLATE.....	14	NITISINONE.....	107,108
		Nitro-Bid.....	112

Nitro-Dur	112	Novavax COVID-19 Vaccine	26
Nitro-Time	112	Novoeight	222
NITROFURANTOIN	22	NovoLIN 70/30	91
NITROFURANTOIN MACROCRYSTAL	22	NovoLIN 70/30 FlexPen	91
NITROFURANTOIN MONOHYD MACRO	22	NovoLIN 70/30 FlexPen Relion	91
NITROGLYCERIN	111,112	NovoLIN 70/30 ReliOn	91
NitroMist	112	NovoLIN N	91
Niva Thyroid	99	NovoLIN N FlexPen	91
Nivestym	213	NovoLIN N FlexPen ReliOn	91
NIVOLUMAB	49	NovoLIN N ReliOn	92
NIVOLUMAB-RELATLIMAB-RMBW	72	NovoLIN R	92
NIZATIDINE	144	NovoLIN R FlexPen	92
Norditropin FlexPro	104	NovoLIN R FlexPen ReliOn	92
NORELGESTROMIN-ETHINYL ESTRADIOL	79	NovoLIN R ReliOn	92
NORETHIN ACET & ESTRAD-FE	80,81,82,83,84	NovoLOG	92
NORETHINDRONE & ETH ESTRADIOL	79,80,83,84,85	NovoLOG 70/30 FlexPen ReliOn	92
NORETHINDRONE & ETHINYL ESTRADIOL- FE	82,83,85	NovoLOG FlexPen	92
NORETHINDRONE (CONTRACEPTIVE)	78	NovoLOG FlexPen ReliOn	92
NORETHINDRONE ACET & ETH ESTRA	79,80,81,82,83,84	NovoLOG Mix 70/30	92
NORETHINDRONE ACETATE	88	NovoLOG Mix 70/30 FlexPen	92
NORETHINDRONE ACETATE-ETHINYL ESTRADIOL	77	NovoLOG Mix 70/30 ReliOn	92
NORETHINDRONE ACETATE-ETHINYL ESTRADIOL-FE	86	NovoLOG PenFill	93
NORETHINDRONE ACETATE-ETHINYL ESTRADIOL-FE FUM (BIPHASIC)	85	NovoLOG ReliOn	93
NORETHINDRONE-ETH ESTRADIOL (TRIPHASIC)	85,86	NovoSeven RT	222
NORGESTIMATE-ETHINYL ESTRADIOL	81,83,84,85	Noxafil	11
NORGESTIMATE-ETHINYL ESTRADIOL (TRIPHASIC)	86,87	NP Thyroid	100
NORGESTREL & ETHINYL ESTRADIOL	80,81,83,84	Nplate	214
Norpace CR	116	Nubeqa	51
NORTRIPTYLINE HCL	159	Nucala	138
Norvir	13	NuCort	250
Nova Max Glucose Test	267	Nulibry	108
Nova Max Plus Ketone Test	267	Nulojix	287
Novarel	102	Nuplazid	162
		NUSINERSEN	198
		Nuvessa	153
		Nuwiq	223
		Nymalize	115
		NYSTATIN	11
		NYSTATIN (MOUTH-THROAT)	240
		NYSTATIN (TOPICAL)	244,245
		NYSTATIN-TRIAMCINOLONE	245

Nyvepria.....	213	Olpruva (2 GM Dose).....	109
		Olpruva (3 GM Dose).....	109
		Olpruva (4 GM Dose).....	110
		Olpruva (5 GM Dose).....	110
		Olpruva (6 GM Dose).....	110
		Olpruva (6.67 GM Dose).....	110
		OLSALAZINE SODIUM.....	149
		OLUTASIDENIB.....	63
		OMACETAXINE MEPESUCCINATE.....	68
		OMALIZUMAB.....	138
		OMAVELOXOLONE.....	197
		OMEPRAZOLE.....	145
		OMEPRAZOLE MAGNESIUM.....	145
		OMEPRAZOLE-SODIUM BICARBONATE.....	145
		OMIDUBICEL-ONLY.....	67
		Omisirge.....	67
		Omnipod 5 G6 Intro (Gen 5).....	282
		Omnipod 5 G6 Pods (Gen 5).....	282
		Omnipod DASH Pods (Gen 4).....	282
		Omnitrope.....	104
		OmvoH.....	149
		On Call Express Blood Glucose.....	267
		On Call Plus Blood Glucose.....	267
		On Call Vivid Blood Glucose.....	268
		ONABOTULINUMTOXINA.....	197
		ONASEMNOGENE ABEPARVOVEC- XIOI.....	199,200,201,202
		Oncaspar.....	41
		ONDANSETRON.....	146
		ONDANSETRON HCL.....	146
		One Drop Test.....	268
		OneTouch Ultra.....	268
		OneTouch Ultra Test.....	268
		OneTouch Verio.....	268
		Ongentys.....	195
		Onivyde.....	65
		Onpatro.....	172
		Ontruzant.....	40
		Onureg.....	43
		Opdivo.....	49
		Opdualag.....	72
O-Cal Prenatal.....	206		
OBETICHOLIC ACID.....	151		
OBINUTUZUMAB.....	46		
Obizur.....	223		
Obstetrix DHA.....	209		
Obstetrix EC (with Docusate).....	206		
Ocaliva.....	151		
OCRELIZUMAB.....	170		
Ocrevus.....	170		
Octagam.....	34		
OCTREOTIDE ACETATE.....	104,105		
Octreotide Acetate.....	105		
OCULAR IMPLANT.....	283		
Odefsey.....	17		
ODEVIXIBAT.....	148		
Odomzo.....	51		
OFATUMUMAB.....	46		
OFATUMUMAB (MS).....	170		
Ofev.....	141		
OFLOXACIN.....	9		
OFLOXACIN (OPHTH).....	231		
OFLOXACIN (OTIC).....	240		
Ogsiveo.....	60		
Ojjaara.....	64		
OLANZAPINE.....	161		
OLANZAPINE PAMOATE.....	161		
OLANZAPINE-FLUOXETINE HCL.....	173		
OLAPARIB.....	63		
OLARATUMAB.....	54		
OLIPUDASE ALFA-RPCP.....	107		
OLMESARTAN MEDOXOMIL.....	118		
OLMESARTAN MEDOXOMIL- HYDROCHLOROTHIAZIDE.....	122		
OLMESARTAN MEDOXOMIL- HYDROCHLOROTHIAZIDE.....	121		
OLODATEROL HCL.....	135		
OLOPATADINE HCL.....	239		
OLOPATADINE HCL (NASAL).....	132		

Opfolda	109	OXALIPLATIN	37
OPICAPONE	195	OXANDROLONE	75
OPIUM TINCTURE	143	OXAPROZIN	181
Opsumit	128	OXAZEPAM	156
OptiChamber Advantage-Lg Mask	279	Oxbryta	215
OptiChamber Advantage-Med Mask	279	OXCARBAZEPINE	194
OptiChamber Advantage-Sm Mask	279	Oxervate	238
OptiChamber Diamond	279	Oxlumo	155
OptiChamber Diamond-Lg Mask	280	OXYBUTYNIN CHLORIDE	152
OptiChamber Diamond-Md Mask	280	OXYCODONE HCL	176,177
OptiChamber Diamond-Sm Mask	280	OxyCODONE HCl ER	177
OptiChamber Face Mask-Large	280	oxyCODONE HCl ER	177
OptiChamber Face Mask-Medium	280	OXYCODONE W/ ACETAMINOPHEN	178,179
OptiChamber Face Mask-Small	280	OXYCODONE-ASPIRIN	179
OptiHaler	280	Oxycodone-Aspirin	179
Optium Test	268	OxyCONTIN	177
OptiumEZ Test	268	OXYMETHOLONE	75
OptumRx Blood Glucose Test	268	OXYMORPHONE HCL	177
Opvee	254	oxyMORphone HCl ER	177
Oracea	244	OZANIMOD HCL	171
Oravig	240	Ozempic (0.25 or 0.5 MG/DOSE)	93
Orencia	188	Ozempic (1 MG/DOSE)	94
Orenitram	128	Ozempic (2 MG/DOSE)	94
Orenitram Month 1	128	OZENOXACIN	244
Orenitram Month 2	128	Ozurdex	233
Orenitram Month 3	128		
Orfadin	108		
Orgovyx	53	P	
Orkambi	140	PACLITAXEL	55
Orladeyo	229	PACLitaxel Protein-Bound Part	55
ORPHENADRINE CITRATE	203	PACLITAXEL PROTEIN-BOUND PARTICLES	55
Orserdu	52	PACRITINIB CITRATE	64
OrthoVisc	203	Padcev	49
OSELTAMIVIR PHOSPHATE	19	PALBOCICLIB	57
OSIMERTINIB MESYLATE	50	Palforzia (12 MG Daily Dose)	35
OsmoPrep	141	Palforzia (120 MG Daily Dose)	36
OSPEMIFENE	102	Palforzia (160 MG Daily Dose)	36
Osphena	102	Palforzia (20 MG Daily Dose)	36
Otezla	189	Palforzia (200 MG Daily Dose)	36
Otrexup	182	Palforzia (240 MG Daily Dose)	36
Ovidrel	102	Palforzia (3 MG Daily Dose)	36
		Palforzia (300 MG Maintenance)	36

Palforzia (300 MG Titration)	36	PEG 3350-KCL-NACL-NA SULFATE-NA	
Palforzia (40 MG Daily Dose)	36	ASCORBATE-ASCORBIC ACID	142
Palforzia (6 MG Daily Dose)	36	PEG 3350-KCL-SOD BICARB-SOD CHLORIDE-SOD	
Palforzia (80 MG Daily Dose)	37	SULFATE	142
Palforzia Initial Escalation	37	PEG 3350-KCL-SOD CHLORIDE-SOD SULFATE-	
PALIFERMIN	70	MAGNESIUM SULFATE	142
PALIPERIDONE	159	PEG 3350-POTASSIUM CHLORIDE-SOD	
PALIVIZUMAB	35	BICARBONATE-SOD CHLORIDE	142
PALOVAROTENE	204	Peganone	192
Palynziq	110	PEGAPTANIB SODIUM	237
PAMIDRONATE DISODIUM	101	PEGASPARGASE	41
Pancreaze	147	Pegasys	18
PANCRELIPASE (LIPASE-PROTEASE-		Pegasys ProClick	18
AMYLASE)	147,148	PEGCETACOPLAN	229
Panda Mask Large	280	PEGCETACOPLAN (OPHTHALMIC)	236
Panda Mask Medium	280	PEGFILGRASTIM	213
Panda Mask Small	280	PEGFILGRASTIM-APGF	213
PANITUMUMAB	51	PEGFILGRASTIM-BMEZ	214
PANOBINOSTAT LACTATE	57	PEGFILGRASTIM-CBQV	213
Panretin	248	PEGFILGRASTIM-FPGK	213
PANTOPRAZOLE SODIUM	145	PEGFILGRASTIM-JMDB	213
Panzyga	34	PEGFILGRASTIM-PBBK	213
PARATHYROID HORMONE (RECOMBINANT)	101	PEGINTERFERON ALFA-2A	18
PARICALCITOL	108	PEGINTERFERON ALFA-2B	18
PAROMOMYCIN SULFATE	10	PegIntron	18
PAROXETINE HCL	158	PEGLOTICASE	191
Parsabiv	108	PEGUNIGALSIDASE ALFA-IWXJ	107
Paser	10	PEGVALIASE-PQPZ	110
PASIREOTIDE DIASPARTATE	105	PEGVISOMANT	105
PASIREOTIDE PAMOATE	105	Pemazyre	59
PATIROMER SORBITEX CALCIUM	288	PEMBROLIZUMAB	49
PATISIRAN SODIUM	172	PEMETREXED	44
Paxlovid (150/100)	20	PEMEtrexed	44
Paxlovid (300/100)	20	PEMETREXED DISODIUM	44
PAZOPANIB HCL	61	PEMEtrexed Disodium	44
PEANUT (ARACHIS HYPOGAEA) ALLERGEN		PEMETREXED DITROMETHAMINE	44
POWDER-DNFP	35,36,37	PEMEtrexed Ditromethamine	44
Pediarix	30	Pemfexy	44
Pediatric Panda Mask	280	PEMIGATINIB	59
Pedmark	70	PENICILLAMINE	284
Pedvax HIB	29	PENICILLIN G BENZATHINE	5

PENICILLIN V POTASSIUM	5	Picato	248
Pentacel	30	Pifeltro	15
PENTAMIDINE ISETHIONATE	21	PILOCARPINE HCL	236
Pentasa	149	PILOCARPINE HCL (ORAL)	241
PENTAZOCINE W/ NALOXONE	178	PIMAVANSERIN TARTRATE	162
PENTOSAN POLYSULFATE SODIUM	154	PIMECROLIMUS	252
PENTOSTATIN	68	PIMOZIDE	166
PENTOXIFYLLINE	228	Pimozide	166
Pepaxto	39	PINDOLOL	112
PERINDOPRIL ERBUMINE	117	PIOGLITAZONE HCL	97
Perjeta	40	PIOGLITAZONE HCL-GLIMEPIRIDE	98
PERMETHRIN	253	PIOGLITAZONE HCL-METFORMIN HCL	98
PERPHENAZINE	161	Pip Blood Glucose Test Strip	268
PERPHENAZINE-AMITRIPTYLINE	173	Piqray (200 MG Daily Dose)	64
Perphenazine-Amitriptyline	173	Piqray (250 MG Daily Dose)	64
PERTUZUMAB	40	Piqray (300 MG Daily Dose)	65
PERTUZUMAB-TRASTUZUMAB-HYALURONIDASE-ZZXF	71	PIRFENIDONE	141
Pertzye	147	Pirfenidone	141
PEXIDARTINIB HCL	61	PIROXICAM	181
Pfizer COVID-19 Bival 6mo-4yr	26	PIRTOBRUTINIB	59
Pfizer COVID-19 Vac Bival 5-11	26	PITAVASTATIN CALCIUM	125
Pfizer COVID-19 Vac Bivalent	26	PITAVASTATIN MAGNESIUM	126
Pfizer COVID-19 Vac-TriS 5-11y	26	PLASMINOGEN, HUMAN-TVMH	228
Pfizer COVID-19 Vac-TriS 6m-4y	26	PLECANATIDE	150
Pfizer-BioNT COVID-19 Vac-TriS	27	Plenvu	142
Pfizer-BioNTech COVID-19 Vacc	27	PLERIXAFOR	214
Pharmacist Choice Autocode	268	Pluvicto	67
Pharmacist Choice No Coding	268	PNEUMOCOCCAL 13-VALENT CONJUGATE VACCINE	29
Pheburane	110	PNEUMOCOCCAL 15-VALENT CONJUGATE VACCINE	29
PHENAZOPYRIDINE HCL	154	PNEUMOCOCCAL 20-VALENT CONJUGATE VACCINE	29
PHENELZINE SULFATE	157	PNEUMOCOCCAL VAC POLYVALENT	29
PHENOBARBITAL	162	Pneumovax 23	29
PHENOXYBENZAMINE HCL	119	PNV Prenatal Plus Multivit+DHA	206
PHENYLEPHRINE HCL (MYDRIATIC)	235,236	PNV Tabs 29-1	207
PHENYTOIN	192	Pocket Chamber	281
PHENYTOIN SODIUM EXTENDED	192	Pocket Spacer	281
Phesgo	71	PocketChem EZ Test	268
Phospholine Iodide	236	Podocon-25	251
Photofrin	69		
PHYTONADIONE	205		

PODOFILOX.....	251	PRAMLINTIDE ACETATE.....	93
PODOPHYLLUM RESIN.....	251	Pramosone.....	251
POLATUZUMAB VEDOTIN-PIIQ.....	48	PRAMOXINE-HC.....	251
POLIDOCANOL (LAURETH-9).....	289	PRASUGREL HCL.....	227
POLIOVIRUS VACCINE, IPV.....	25	PRAVASTATIN SODIUM.....	125
Polivy.....	48	PRAZICQUANTEL.....	20
POLYMYXIN B-TRIMETHOPRIM.....	232	PRAZOSIN HCL.....	119
POMALIDOMIDE.....	54	Precision PCx.....	268
Pomalyst.....	54	Precision PCX Plus Test.....	269
Pombiliti.....	109	Precision Point of Care Test.....	269
PONATINIB HCL.....	58	Precision QID Test.....	269
PONESIMOD.....	171	Precision Sof-Tact Test.....	269
Ponvory.....	171	Precision Xtra Blood Glucose.....	269
Ponvory Starter Pack.....	171	Precision Xtra Ketone.....	269
PORFIMER SODIUM.....	69	Pred Mild.....	234
Portrazza.....	50	Pred-G.....	234
POSACONAZOLE.....	11	Pred-G S.O.P.....	235
POT & SOD CITRATES W/CITRIC AC.....	153,154	PREDNICARBATE.....	250
POT PHOSPHATE MONOBASIC W/ SOD		Prednicarbate.....	250
PHOSPHATE DIBASIC & MONOBASIC.....	209	PREDNISOLONE.....	73
POTASSIUM & SODIUM ACID PHOSPHATES.....	153	PREDNISOLONE ACETATE (OPHTH).....	234
POTASSIUM BICARBONATE-CITRIC ACID.....	210	PREDNISOLONE SODIUM PHOSPHATE.....	73
POTASSIUM CHLORIDE.....	209,210	PrednisoLONE Sodium Phosphate.....	234
POTASSIUM CHLORIDE MICROENCAPSULATED		PREDNISOLONE SODIUM PHOSPHATE	
CRYSTALS ER.....	209,210	(OPHTH).....	234
POTASSIUM CITRATE (ALKALINIZER).....	154	PREDNISONE.....	73
POTASSIUM CITRATE-CITRIC ACID.....	153,154	PredniSONE.....	73
POTASSIUM PHOSPHATE MONOBASIC.....	209	PredniSONE Intensol.....	73
Poteligeo.....	46	Prefest.....	77
POVIDONE-IODINE (OPHTH).....	231	PREGABALIN.....	194
POZELIMAB-BBFG.....	229	PREGABALIN (ONCE-DAILY).....	172
PR Natal 400.....	208	Pregnyl.....	102
PR Natal 400 ec.....	208	PreHevbrio.....	27
PR Natal 430.....	208	Premarin.....	76,153
PR Natal 430 ec.....	208	Premium Blood Glucose Test.....	269
Pradaxa.....	217	Premphase.....	77
PRALATREXATE.....	43,44	Prempro.....	78
PRALAtrexate.....	44	Prenatabs FA.....	207
PRALSETINIB.....	63	Prenatal 19.....	207
Praluent.....	125	PRENATAL MV & MIN W/FE BISGLYC-FE PROT	
PRAMIPEXOLE DIHYDROCHLORIDE.....	196	SUCC-FA-CA-OMEGA 3.....	208,209

PRENATAL MV & MIN W/FE CARBONYL-FA-DHA	209	PROCARBAZINE HCL	68
Prenatal Plus Iron	207	Procare Spacer/Adult Mask	281
PRENATAL VIT W/ DOCUSATE-FE FUMARATE-FOLIC ACID	206,207	Procare Spacer/Child Mask	281
PRENATAL VIT W/ DOCUSATE-IRON CARBONYL-FOLIC ACID	205,206	ProChamber VHC	281
PRENATAL VIT W/ FE BISGLYCINATE CHELATE-FOLIC ACID	205,208	PROCHLORPERAZINE	161
PRENATAL VIT W/ FERROUS FUMARATE-FA-OMEGA 3 FATTY ACIDS	206	PROCHLORPERAZINE MALEATE	161
PRENATAL VIT W/ FERROUS FUMARATE-FOLIC ACID	205,206,207,208	ProCort	242
PRENATAL VIT W/ IRON CARBONYL-FOLIC ACID	207,208	Procrit	212
PRENATAL W/FE FUMARATE-FA-DSS-FISH OIL	207	Proctofoam HC	242
PRENATAL WITHOUT A VIT W/ FE FUM-IRON POLYSACCH COMPLEX -FA	206,207	Prodigy No Coding Blood Gluc	269
PRENATAL WITHOUT A VIT W/ FE FUMARATE-FOLIC ACID	207	Profilnine	223
Prenatal-U	207	PROGESTERONE	88
PreTAB	207	PROGESTERONE (VAGINAL)	153
PRETOMANID	10	Prograf	287
Pretomanid	10	Prolastin-C	139
Pevnar 13	29	Prolensa	239
Pevnar 20	29	Proleukin	69
Prevymis	17	Prolia	101
Prezcobix	17	Promacta	214
Prezista	13,14	PROMETHAZINE & PHENYLEPHRINE	133
Prialt	173	PROMETHAZINE HCL	131
Priftin	10	Promethazine VC	133
PriLOSEC	145	Promethazine VC/Codeine	133
PRIMAQUINE PHOSPHATE	20	PROMETHAZINE W/CODEINE	133
PRIMIDONE	194	PROMETHAZINE-DM	133
Primsol	21	PROMETHAZINE-PHENYLEPHRINE-CODEINE	133
Priorix	28	Promethegan	131
Privigen	34	PROPAFENONE HCL	116,117
Pro Comfort Spacer Adult	281	PROPANTHELIN BROMIDE	143
Pro Comfort Spacer Child	281	Propantheline Bromide	143
Pro Comfort Spacer Infant	281	PROPARACAINE HCL	238
Pro Voice V8/V9 Glucose	269	PROPRANOLOL & HYDROCHLOROTHIAZIDE	120
PROBENECID	191	PROPRANOLOL HCL	112
		Propranolol-HCTZ	120
		PROPYLTHIOURACIL	100
		ProQuad	28
		PROTEIN C CONCENTRATE (HUMAN)	228
		PROTRIPTYLINE HCL	159
		Provenga	67
		Provida OB	207
		PSEUDOEPHED-BROMPHEN-DM	133

PTS Panels Glucose Test	269	RAMELTEON	163
PTS Panels Ketone Test	269	RAMIPRIL	118
PTS PanelseGlu Test	269	RAMUCIRUMAB	44
Pulmozyme	140	RANIBIZUMAB	237
Pure Comfort Spacer Chamber	281	RANIBIZUMAB-EQRN	237
Purixan	44	RANIBIZUMAB-NUNA	237
PYRAZINAMIDE	10	RANOLAZINE	112
PYRIDOSTIGMINE BROMIDE	205	RASAGILINE MESYLATE	197
PYRIMETHAMINE	20	RASBURICASE	70
Pyrukynd	230	Rasuvo	182
Pyrukynd Taper Pack	230	RAVULIZUMAB-CWVZ	229
		Rayaldee	108
		Rebif	169
Q		Rebif Rebidoso	169
Qbrelis	117	Rebif Rebidoso Titration Pack	170
Qinlock	61	Rebif Titration Pack	170
Quadracel	30	Rebinyn	223
Quadramet	67	Reblozyl	211
QUETIAPINE FUMARATE	160	Rebyota	150
QuickTek Test	270	Reclast	101
Quillivant XR	166	Recombinate	223
QUINAPRIL HCL	117	Recombivax HB	27
QUINAPRIL-HYDROCHLOROTHIAZIDE	120	RediTrex	183
Quinapril-hydroCHLOROthiazide	120	RefuAH Plus Blood Glucose Test	270
QUINIDINE GLUCONATE	116	REGORAFENIB	61
QUINIDINE SULFATE	116	Regranex	253
quiNIDine Sulfate	116	Relenza Diskhaler	20
QUININE SULFATE	20	Releuko	213
Quintet AC Blood Glucose Test	270	ReliOn Blood Glucose Test	270
Quintet Blood Glucose Test	270	ReliOn Confirm/micro Test	270
QUIZARTINIB DIHYDROCHLORIDE	61	ReliOn Ketone Test	270
Qvar RediHaler	137	ReliOn Premier Test	270
		ReliOn Prime Test	270
		ReliOn True Metrix Test Strips	270
		ReliOn Ultima Test	270
R		Relistor	151
RA Alcohol Swabs	283	RELUGOLIX	53
RABEPRAZOLE SODIUM	144,145	Relyvrio	198
RABEprazole Sodium	145	Remicade	150
Radicava	198	Remodulin	128
Radicava ORS	198	Renflexis	150
Radicava ORS Starter Kit	198		
RALOXIFENE HCL	102		
RALTEGRAVIR POTASSIUM	12,13		

REPAGLINIDE	95	Rightest GT333 Glucose Test	271
Repatha	125	RILONACEPT	188
Repatha Pushtronex System	125	RILPIVIRINE HCL	15
Repatha SureClick	125	RILUZOLE	197
REPOTRECTINIB	62	RIMABOTULINUMTOXINB	197
RESLIZUMAB	139	RiMANTAdine HCl	19
Restasis	238	RIMANTADINE HYDROCHLORIDE	19
Restasis MultiDose	238	Rinvoq	188
Retacrit	213	RIOCIGUAT	127
RETAPAMULIN	244	Riomet ER	95
Retevmo	63	RIPRETINIB	61
Rethymic	284	RISANKIZUMAB-RZAA	247
RETIFANLIMAB-DLWR	49	RISANKIZUMAB-RZAA (CROHN'S)	150
Retisert	234	RISDIPLAM	202
Retrovir	14	RISEDRONATE SODIUM	101
Revatio	127	RISPERIDONE	160
Revcovi	107	RiteFlo	281
Reveal Blood Glucose Test	270	RITONAVIR	13,14
Revlimid	285	Rituxan	46
Rexall Blood Glucose Test	271	Rituxan Hycela	71
Reyataz	14	RITUXIMAB	46
Rezlidhia	63	RITUXIMAB-ABBS	47
Rezurock	285	RITUXIMAB-ARRX	46
RHO D IMMUNE GLOBULIN (HUMAN)	33,34,35	RITUXIMAB-HYALURONIDASE HUMAN	71
RhoGAM Ultra-Filtered Plus	34	RITUXIMAB-PVVR	46
Rhophylac	34	RIVAROXABAN	218
Riabni	46	RIVASTIGMINE	167
RiaSTAP	223	RIVASTIGMINE TARTRATE	167
RIBAVIRIN (HEPATITIS C)	18	Rixubis	224
RIBOCICLIB SUCCINATE	57	RIZATRIPTAN BENZOATE	189
RIBOCICLIB SUCCINATE-LETROZOLE	71	Roctavian	227
Ridaura	182	ROFLUMILAST	138
RIFABUTIN	10	ROLAPITANT HCL	146
RIFAMPIN	10	Rolvedon	213
RIFAMYCIN SODIUM	21	ROMIDEPSIN	57
RIFAPENTINE	10	romiDEPsin	57
RIFAXIMIN	21	ROMIPLOSTIM	214
Rightest GS100 Blood Glucose	271	ROMOSOZUMAB-AQQG	101
Rightest GS300 Blood Glucose	271	ROPEGINTERFERON ALFA-2B-NJFT	68
Rightest GS550 Blood Glucose	271	ROPINIROLE HYDROCHLORIDE	196
Rightest GT333 Blood Glucose	271	ROSUVASTATIN CALCIUM	125

Rotarix	27	SAQUINAVIR MESYLATE	13
RotaTeq	27	Sarclisa	48
ROTAVIRUS VACCINE, LIVE ORAL	27	SATRALIZUMAB-MWGE	287
ROTAVIRUS VACCINE, LIVE ORAL PENTAVALENT	27	Savella	172
ROTIGOTINE	196	Savella Titration Pack	172
ROZANOLIXIZUMAB-NOLI	285	Scemblix	58
Rozlytrek	62	Scenesse	253
RSV PRE-FUSION F A&B PROTEIN VACCINE RECOMBINANT	23	SCOPOLAMINE	145
RSV PRE-FUSION F3 PROTEIN (RSVPREF3) VAC RECOMB ADJUVANTED	23	Se-Natal 19	207
Rubraca	63	SEBELIPASE ALFA	108
RUCAPARIB CAMSYLATE	63	SECNIDAZOLE	20
Ruconest	228	SECOBARBITAL SODIUM	162
RUFINAMIDE	194	Seconal	162
Rukobia	12	SECUKINUMAB	246
Ruxience	46	SEGESTERONE ACETATE-ETHINYL ESTRADIOL .79	
RUXOLITINIB PHOSPHATE	64	SELEGILINE	157
Ruzurgi	205	SELEGILINE HCL	197
Rybelsus	94	SELENIUM SULFIDE	247
Rybrevant	50	SELEXIPAG	127
Rydapt	61	SELINEXOR	65,66
Rylaze	42	SELPERCATINIB	63
Ryplazim	228	SELUMETINIB SULFATE	62
Rystiggo	285	Selzentry	12
S		SEMAGLUTIDE	93,94
SACITUZUMAB GOVITECAN-HZIY	65	Semglee (yfgn)	93
SACROSIDASE	147	Serevent Diskus	135
SACUBITRIL-VALSARTAN	131	Serostim	104
SAFINAMIDE MESYLATE	197	SERTACONAZOLE NITRATE	245
SALMETEROL XINAFOATE	135	SERTRALINE HCL	158
SALSALATE	173	SETMELANOTIDE ACETATE	164
SAMARIUM SM 153 LEXIDRONAM	67	SEVELAMER CARBONATE	151
Sancuso	146	SEVELAMER HCL	151
SandIMMUNE	286	Sevenfact	224
SandoSTATIN LAR Depot	105	Shingrix	27
Santyl	251	Signifor	105
Saphnelo	288	Signifor LAR	105
SAPROPTERIN DIHYDROCHLORIDE	110	SILDENAFIL CITRATE	130
		SILDENAFIL CITRATE (PULMONARY HYPERTENSION)	127
		SILODOSIN	155
		SILTUXIMAB	288

SILVER SULFADIAZINE	248	SODIUM SULFATE-MAGNESIUM SULFATE-	
Simbrinza	237	POTASSIUM CHLORIDE	142
Simponi Aria	187	SODIUM SULFATE-POTASSIUM SULFATE-	
SIMVASTATIN	126	MAGNESIUM SULFATE	142
SINECATECHINS	251	SODIUM THIOSULFATE (OTOPROTECTIVE)	70
SIPONIMOD FUMARATE	171	SODIUM ZIRCONIUM CYCLOSILICATE	288
SIPULEUCEL-T	67	SOFOSBUVIR-VELPATASVIR	18,19
SIROLIMUS	287	Sofosbuvir-Velpatasvir	19
SIROLIMUS PROTEIN-BOUND PARTICLES	60	SOFOSBUVIR-VELPATASVIR-VOXILAPREVIR	19
SITAGLIPTIN	97	Sohonos	204
SITAGLIPTIN PHOSPHATE	96	Solesta	284
SITAGLIPTIN-METFORMIN HCL	97	SOLIFENACIN SUCCINATE	152
Sivextro	21	Soliris	229
Skyclarys	197	Solodyn	9
Skyrizi	150,247	Solosec	20
Skyrizi (150 MG Dose)	247	Soltamox	51
Skyrizi Pen	247	Solu-CORTEF	74
Skysona	167	SOLU-medrol	74
Slynd	78	SOLU-Medrol (PF)	74
SM Alcohol Prep	283	Solus V2 Test	271
Smart Sense Premium Test	271	SOMATROPIN	104
Smart Sense Value Test	271	SOMATROPIN (NON-REFRIGERATED)	104
Smartest Blood Glucose Test	271	Somatuline Depot	105
SODIUM BICARBONATE	209	Somavert	105
Sodium Bicarbonate	209	SONIDEGIB PHOSPHATE	51
SODIUM CHLORIDE	210	SORAFENIB TOSYLATE	61
SODIUM CHLORIDE (INHALANT)	133	SOTALOL HCL	112,113
SODIUM CHLORIDE FLUSH	210	SOTALOL HCL (AFIB/AFL)	113
SODIUM CITRATE & CITRIC ACID	154	SOTORASIB	60
Sodium Hyaluronate	204	Sotylize	113
SODIUM HYALURONATE		SPACER/AEROSOL-HOLDING CHAMBER	
(VISCOSUPPLEMENT)	203,204	SUPPLIES - MASKS	278,279,280
SODIUM OXYBATE	172	SPACER/AEROSOL-HOLDING	
Sodium Oxybate	172	CHAMBERS	274,275,276,277,278,279,280,281,282
SODIUM PHENYLBUTYRATE	109,110	SPARSENTAN	154
SODIUM PHENYLBUTYRATE-TAURURSODIOL	198	SPESOLIMAB-SBZO	247
SODIUM PHOSPHATE MONOBASIC-SODIUM		Spevigo	247
PHOSPHATE DIBASIC	141	Spikevax	27
SODIUM PICOSULFATE-MAGNESIUM OXIDE-		Spikevax COVID-19 Vaccine	27
ANHYDROUS CITRIC ACID	142	SPINOSAD	253
SODIUM POLYSTYRENE SULFONATE	288	Spinoad	253

Spinraza	198	SUMATRIPTAN-NAPROXEN SODIUM	190
Spiriva HandiHaler	134	SUNITINIB MALATE	61
Spiriva Respimat	134	Sunlenca	12
SPIRONOLACTONE	122,123	Supartz FX	204
SPIRONOLACTONE & HYDROCHLOROTHIAZIDE	123	Supprelin LA	103
Sprycel	58	Suprax	7
STAVUDINE	14	Supreme Test	271
Stelara	150,247	Sure Edge Test	271
Stimate	106	Sure-Test EasyPlus Mini Test	272
Stimufend	213	SureChek Blood Glucose Test	272
Stiolto Respimat	136	Susvimo (Implant 1st Fill)	237
STIRIPENTOL	193	Susvimo (Implant Refill)	237
Stivarga	61	Susvimo Ocular Implant	283
StrataGraft	253	Sutab	142
Strensiq	108	SUTIMLIMAB-JOME	229
STREPTOZOCIN	39	Syfovre	236
Stribild	17	Sylvant	288
Striverdi Respimat	135	Symbicort	136
Subsys	177	Symdeko	140
SUCCIMER	254	Symjepi	124
Sucraid	147	SymlinPen 120	93
SUCRALFATE	145	SymlinPen 60	93
SUCROFERRIC OXYHYDROXIDE	151	Symtuza	17
Suflave	142	Synagis	35
SULCONAZOLE NITRATE	245	Synjardy	97
Sulconazole Nitrate	245	Synjardy XR	98
SULFACETAMIDE SOD-PREDNISOLONE	234,235	SynoJoynt	204
SULFACETAMIDE SODIUM (ACNE)	243	Synribo	68
SULFACETAMIDE SODIUM (OPHTH)	231	Synthroid	100
SULFACETAMIDE SODIUM W/ SULFUR	244	Synvisc	204
Sulfacetamide-Prednisolone	235	Synvisc One	204
SULFADIAZINE	10		
sulfADIAZINE	10	T	
SULFAMETHOXAZOLE-TRIMETHOPRIM	23	Tabloid	44
Sulfamylon	248	Tabrecta	62
SULFASALAZINE	149	TACROLIMUS	286,287
SULFURIC ACID-SULFONATED PHENOLICS	241	TACROLIMUS (TOPICAL)	252
SULINDAC	181	TADALAFIL	130
SUMATRIPTAN	189	TADALAFIL (PULMONARY HYPERTENSION)	127
SUMATRIPTAN SUCCINATE	189,190	Tadliq	127
		TAFAMIDIS	130

TAFAMIDIS MEGLUMINE (CARDIAC).....	130	TENIPOSIDE.....	55
TAFASITAMAB-CXIX.....	46	Teniposide.....	55
Tafinlar.....	58	Tenivac.....	30
TAGRAXOFUSP-ERZS.....	68	TENOFOVIR ALAFENAMIDE FUMARATE.....	18
Tagrisso.....	50	TENOFOVIR DISOPROXIL FUMARATE.....	14,15
Takhzyro.....	230	Tepadina.....	38
TALAZOPARIB TOSYLATE.....	63	Tepezza.....	106
TALIGLUCERASE ALFA.....	215	TEPLIZUMAB-MZVV.....	96
TALIMOGENE LAHERPAREPVEC.....	66	Tepmetko.....	62
TALQUETAMAB-TGVS.....	47	TEPOTINIB HCL.....	62
Talvey.....	47	TEPROTUMUMAB-TRBW.....	106
Talzenna.....	63	TERAZOSIN HCL.....	119
TAMOXIFEN CITRATE.....	51	TERBINAFINE HCL.....	11
TAMSULOSIN HCL.....	155	TERBUTALINE SULFATE.....	135
Tasigna.....	58	TERCONAZOLE VAGINAL.....	153
TASIMELTEON.....	163	TERIFLUNOMIDE.....	170
Tavalisse.....	228	TERIPARATIDE (RECOMBINANT).....	101
Tavneos.....	229	Teriparatide (Recombinant).....	101
Taxotere.....	55	TESTOSTERONE.....	74,75
TAZAROTENE.....	246	TESTOSTERONE CYPIONATE.....	74,75
TAZEMETOSTAT HBR.....	62	TESTOSTERONE ENANTHATE.....	75
Tazorac.....	246	Testosterone Enanthate.....	75
Tazverik.....	62	TESTOSTERONE UNDECANOATE.....	74
TDVAX.....	30	TETANUS TOXOID-DIPHThERIA-ACELLULAR	
TEBENTAFUSP-TEBN.....	47	PERTUSSIS ADSORB (TDAP).....	29
Tecartus.....	67	TETANUS-DIPHThERIA TOXOIDS (TD).....	30
Tecentriq.....	50	Tetanus-Diphtheria Toxoids Td.....	30
TECLISTAMAB-CQYV.....	47	TETRABENAZINE.....	168
Tecvayli.....	47	TETRACAINE HCL (OPHTH).....	238
TEDIZOLID PHOSPHATE.....	21	TETRACYCLINE HCL.....	9
Tegsedi.....	172	Texacort.....	250
TELMISARTAN.....	118	TEZACAF TOR-IVACAF TOR.....	140
TELMISARTAN-AMLODIPINE.....	121	TEZEPELUMAB-EKKO.....	139
TELMISARTAN-HYDROCHLOROTHIAZIDE.....	121	Tezspire.....	139
TEMAZEPAM.....	163	TGT Blood Glucose Test.....	272
Temixys.....	17	THALIDOMIDE.....	284
Temodar.....	39	Thalomid.....	284
TEMOZOLOMIDE.....	39	THEOPHYLLINE.....	136
TEMSIROLIMUS.....	60	Theophylline ER.....	136
TENAPANOR HCL (CKD).....	107	THIOGUANINE.....	44
Tencon.....	174	Thiola EC.....	154

THIORIDAZINE HCL.....	161	TOLCAPONE.....	195
THIOTEPA.....	38	TOLMETIN SODIUM.....	181
THIOTHIXENE.....	162	TOLTERODINE TARTRATE.....	152
Thrivite Rx.....	207	TOLVAPTAN.....	106,107
Thyrogen.....	273	TOPIRAMATE.....	195
THYROID.....	99,100	TOPOTECAN HCL.....	65
Thyroid.....	100	TOREMIFENE CITRATE.....	52
THYROTROPIN ALFA.....	273	TORIPALIMAB-TPZI.....	49
TIAGABINE HCL.....	192	Torisel.....	60
Tibsovo.....	63	TORSEMIDE.....	122
TICAGRELOR.....	227	Totect.....	69
Tice BCG.....	68	Toujeo Max SoloStar.....	93
TILDRAKIZUMAB-ASMN.....	246	Toujeo SoloStar.....	93
TIMOLOL.....	232	TRABECTEDIN.....	39
TIMOLOL MALEATE.....	113	Tracleer.....	128
TIMOLOL MALEATE (OPHTH).....	232	TRAMADOL HCL.....	178
TINIDAZOLE.....	21	TRAMADOL-ACETAMINOPHEN.....	180
TIOPRONIN.....	154	TRAMETINIB DIMETHYL SULFOXIDE.....	62
TIOTROPIUM BROMIDE MONOHYDRATE.....	134	TRANDOLAPRIL.....	118
TIOTROPIUM BROMIDE-OLODATEROL HCL.....	136	TRANDOLAPRIL-VERAPAMIL HCL.....	119
TIPRANAVIR.....	13	Trandolapril-Verapamil HCl ER.....	119
TIRZEPATIDE.....	94	TRANEXAMIC ACID.....	218
TISAGENLECLEUCEL.....	67	TRANLYCYPROMINE SULFATE.....	157
TISOTUMAB VEDOTIN-TFTV.....	50	TRASTUZUMAB.....	39
Tivdak.....	50	TRASTUZUMAB-ANNS.....	39
Tivicay.....	13	TRASTUZUMAB-DTTB.....	40
Tivicay PD.....	13	TRASTUZUMAB-HYALURONIDASE-OYSK.....	71
TIVOZANIB HCL.....	61	TRASTUZUMAB-PKRB.....	39
TIZANIDINE HCL.....	203	TRASTUZUMAB-QYYP.....	40
Tobi Podhaler.....	10	TRAVOPROST.....	235
TobraDex.....	235	Trazimera.....	40
TobraDex ST.....	235	TRAZODONE HCL.....	157
TOBRAMYCIN.....	9,10	Trecator.....	10
TOBRAMYCIN (OPHTH).....	231	Trelegy Ellipta.....	136
TOBRAMYCIN SULFATE.....	10	Trelstar Mixject.....	53
TOBRAMYCIN-DEXAMETHASONE.....	235	TREMELIMUMAB-ACTL.....	48
Tobrex.....	231	Tremfya.....	247
TOCILIZUMAB.....	188	TREPROSTINIL.....	128,129
TOFACITINIB CITRATE.....	188,189	TREPROSTINIL DIOLAMINE.....	128
TOLBUTAMIDE.....	95	Tresiba.....	93
TOLBUTamide.....	95	Tresiba FlexTouch.....	93

TRETINOIN	242,243	TROSPIUM CHLORIDE	152
TRETINOIN (CHEMOTHERAPY)	69	True Focus Blood Glucose Strip	272
TRETINOIN MICROSPHERE	243	True Metrix Blood Glucose Test	272
Tretten	224	True Metrix Pro Blood Glucose	272
TRIAMCINOLONE ACETONIDE	73,74	TRUEtest Test	272
TRIAMCINOLONE ACETONIDE (MOUTH)	241	TrueTrack Test	272
TRIAMCINOLONE ACETONIDE (OPHTH)	234	Trulance	150
TRIAMCINOLONE ACETONIDE (TOPICAL)	251	Trulicity	94
TRIAMTERENE	123	Trumenba	29
TRIAMTERENE & HYDROCHLOROTHIAZIDE	123	Truqap	56
TRIAZOLAM	163	Truseltiq (100MG Daily Dose)	59
TriCare Prenatal DHA ONE	207	Truseltiq (125MG Daily Dose)	59
TRIENTINE HCL	284	Truseltiq (50MG Daily Dose)	59
TRIFLUOPERAZINE HCL	161	Truseltiq (75MG Daily Dose)	59
TRIFLURIDINE	231	Truxima	47
Trifluridine	231	TUCATINIB	40
TRIFLURIDINE-TIPIRACIL	71	Tudorza Pressair	134
TRiheptanoIN	211	Tukysa	40
TRIHExYPHENIDYL HCL	195	Turalio	61
Trijardy XR	98	Twinrix	28
Trikafta	140	Twirla	79
TRILACICLIB DIHYDROCHLORIDE	70	Tyblume	84
Triluron	204	Tybost	15
TRIMETHOBENZAMIDE HCL	145	Tysabri	170
TRIMETHOPRIM	21	Tyvaso	128
TRIMETHOPRIM HCL	21	Tyvaso DPI Maintenance Kit	129
TRIMIPRAMINE MALEATE	159	Tyvaso DPI Titration Kit	129
Trinatal Rx 1	207	Tyvaso Refill	129
Trinate	208	Tyvaso Starter	129
Triptodur	103	Tzield	96
TRIPTORELIN PAMOATE	53		
TRIPTORELIN PAMOATE (CPP)	103	U	
Trisenox	68	UBLITUXIMAB-XIIY	170
Triumeq	17	Uceris	242
Triumeq PD	17	Udenyca	213
Triveen-Duo DHA	208	Ukoniq	61
TriVisc	204	ULIPRISTAL ACETATE	79
Trodelyv	65	Ultomiris	229
TROFINETIDE	198	UltraTRAK PRO Test	272
Trogarzo	12	UltraTRAK Ultimate Test	272
TROPICAMIDE	236	UMBRALISIB TOSYLATE	61

UMECLIDINIUM-VILANTEROL	135	VARICELLA-ZOSTER IMMUNE GLOBULIN	
Unistrip1 Generic	272	(HUMAN)	34
Unituxin	49	Varithena	289
UPADACITINIB	188	Varivax	28
Uplizna	287	VariZIG	34
Uptravi	127	Varubi (180 MG Dose)	146
URIDINE TRIACETATE (EMERGENCY		Vascepa	126
TREATMENT)	253	Vixelis	30
Urimar-T	23	Vaxneuvance	29
URINE GLUCOSE-KETONES TEST	273	Vectibix	51
URSODIOL	148	Vectical	246
USTEKINUMAB	247	VEDOLIZUMAB	149
USTEKINUMAB (IV)	150	VELAGLUCERASE ALFA	215
Uvadex	69	Velcade	64
		Veletri	129
V		Velivet	87
Vabysmo	237	VELMANASE ALFA-TYCV	107
VALACYCLOVIR HCL	19	Velphoro	151
VALBENZAZINE TOSYLATE	168	Velsipity	150
Valchlor	247	Veltassa	288
VALGANCICLOVIR HCL	17	Vemlidy	18
VALOCTOCOGENE ROXAPARVOVEC-RVOX	227	VEMURAFENIB	58
VALPROATE SODIUM	193	Venclexta	54
VALRUBICIN	41	Venclexta Starting Pack	54
VALSARTAN	118	VENETOCLAX	54
VALSARTAN-HYDROCHLOROTHIAZIDE	121	VENLAFAXINE HCL	158
Valstar	41	Ventavis	129
Valtoco 10 MG Dose	191	Veopoz	229
Valtoco 15 MG Dose	191	VERAPAMIL HCL	115,116
Valtoco 20 MG Dose	192	Verapamil HCl ER	116
Valtoco 5 MG Dose	192	Verasens Blood Glucose Test	272
VANCOMYCIN HCL	22	Veregen	251
Vancomycin HCl	22	Verelan	116
VANDETANIB	60	VERICIGUAT	130
Vanflyta	61	Verquvo	130
Vantas	53	VERTEPORFIN	238
Vaqta	27	Verzenio	57
VARDENAFIL HCL	130	VESTRONIDASE ALFA-VJBK	109
VARENICLINE TARTRATE	167	Vfend IV	11
VARICELLA VIRUS VACCINE LIVE	28	Viberzi	151
		Vibramycin	9

Victoza	94	Vosevi	19
Vidaza	44	VOSORITIDE	111
VIGABATRIN	192	Votrient	61
Vijoice	288	VOXELOTOR	215
VILAZODONE HCL	157	Voxzogo	111
Viltepso	198	Vpriv	215
VILTOLARSEN	198	Vraylar	162
Vimizim	109	Vumerity	170
Vinate II	208	VUTRISIRAN SODIUM	172
Vinate One	208	Vyepti	190
VINBLASTINE SULFATE	56	Vyjuvek	253
VinBLASStine Sulfate	56	Vyndamax	130
VINCRISTINE SULFATE	56	Vyndaqel	130
VinCRISStine Sulfate	56	Vyondys 53	198
VINCRISTINE SULFATE LIPOSOME	55	Vyvanse	164
VINORELBINE TARTRATE	55,56	Vyvgart	285
Viokace	147	Vyvgart Hytrulo	285
Viracept	14	Vyxeos	72
Viread	14,15		
Visco-3	204	W	
VISMODEGIB	51	WARFARIN SODIUM	217
Vistogard	253	Watchhaler	282
Visudyne	238	Welireg	54
Vitrakvi	62	WesNatal DHA Complete	209
VivaGuard Ino Test Strips	273	Wilate	224
Vivimusta	38	WinRho SDF	35
Vizimpro	51		
Vocal Point Blood Glucose Test	273	X	
VOCLOSPORIN	285	Xadago	197
Vogelxo	75	Xalkori	56
Vol-Tab Rx	208	Xarelto	218
VON WILLEBRAND FACTOR (RECOMBINANT)	224	Xarelto Starter Pack	218
Vonjo	64	Xatmep	44
VONOPRAZAN FUMARATE	145	Xdemvy	231
Vonvendi	224	Xeljanz	188
Voquezna	145	Xeljanz XR	188,189
Voraxaze	70	Xembify	35
VORETIGENE NEPARVOVEC-RZYL	236	Xenpozyme	107
VORICONAZOLE	11	Xeomin	197
VORINOSTAT	57	Xepi	244
Vortex Valved Holding Chamber	281	Xgeva	101

Xiaflex.....	284	Zegalogue.....	96
Xifaxan.....	21	Zejula.....	63
Xigduo XR.....	98	Zelboraf.....	58
Xiidra.....	238	Zemaira.....	139
Xipere.....	234	Zenpep.....	148
Xofluza (40 MG Dose).....	19	Zeposia.....	171
Xofluza (80 MG Dose).....	19	Zeposia 7-Day Starter Pack.....	171
Xolair.....	138	Zeposia Starter Kit.....	171
Xospata.....	61	Zepzelca.....	38
Xphozah.....	107	ZICONOTIDE ACETATE.....	173
Xpovio (100 MG Once Weekly).....	65	ZIDOVUDINE.....	14
Xpovio (40 MG Once Weekly).....	66	Ziextenzo.....	214
Xpovio (40 MG Twice Weekly).....	66	ZILEUTON.....	138
Xpovio (60 MG Once Weekly).....	66	Zimhi.....	254
Xpovio (60 MG Twice Weekly).....	66	ZIPRASIDONE HCL.....	162
Xpovio (80 MG Once Weekly).....	66	Zirabev.....	46
Xpovio (80 MG Twice Weekly).....	66	Zirgan.....	231
Xtandi.....	51	Zituvio.....	97
Xyntha.....	224	ZIV-AFLIBERCEPT.....	45
Xyntha Solofuse.....	224	Zokinvy.....	288
Xyrem.....	172	Zoladex.....	53
Y		ZOLEDRONIC ACID.....	101
Yervoy.....	49	Zolgensma 20.6-21.0 kg.....	199
Yescarta.....	67	Zolgensma 10.1-10.5 kg.....	199
Yondelis.....	39	Zolgensma 10.6-11.0 kg.....	199
Yonsa.....	54	Zolgensma 11.1-11.5 kg.....	199
Yuflyma (1 Pen).....	187	Zolgensma 11.6-12.0 kg.....	199
Yuflyma (2 Pen).....	187	Zolgensma 12.1-12.5 kg.....	199
Yuflyma 2-Syringe Kit.....	187	Zolgensma 12.6-13.0 kg.....	199
Yusimry.....	187	Zolgensma 13.1-13.5 kg.....	199
Yutiq.....	234	Zolgensma 13.6-14.0 kg.....	199
Z		Zolgensma 14.1-14.5 kg.....	199
ZAFIRLUKAST.....	138	Zolgensma 14.6-15.0 kg.....	200
ZALEPLON.....	163	Zolgensma 15.1-15.5 kg.....	200
Zaltrap.....	45	Zolgensma 15.6-16.0 kg.....	200
ZANAMIVIR.....	20	Zolgensma 16.1-16.5 kg.....	200
Zanosar.....	39	Zolgensma 16.6-17.0 kg.....	200
ZANUBRUTINIB.....	58	Zolgensma 17.1-17.5 kg.....	200
Zarxio.....	214	Zolgensma 17.6-18.0 kg.....	200
		Zolgensma 18.1-18.5 kg.....	200
		Zolgensma 18.6-19.0 kg.....	200

Zolgensma 19.1-19.5 kg	200
Zolgensma 19.6-20.0 kg	201
Zolgensma 2.6-3.0 kg	201
Zolgensma 20.1-20.5 kg	201
Zolgensma 3.1-3.5 kg	201
Zolgensma 3.6-4.0 kg	201
Zolgensma 4.1-4.5 kg	201
Zolgensma 4.6-5.0 kg	201
Zolgensma 5.1-5.5 kg	201
Zolgensma 5.6-6.0 kg	201
Zolgensma 6.1-6.5 kg	201
Zolgensma 6.6-7.0 kg	201
Zolgensma 7.1-7.5 kg	202
Zolgensma 7.6-8.0 kg	202
Zolgensma 8.1-8.5 kg	202
Zolgensma 8.6-9.0 kg	202
Zolgensma 9.1-9.5 kg	202
Zolgensma 9.6-10.0 kg	202
Zolinza	57
ZOLMITRIPTAN	190
ZOLPIDEM TARTRATE	163
ZONISAMIDE	195
Zorbtive	104
Zortress	287
ZOSTER VACCINE RECOMBINANT	
ADJUVANTED	27
Ztalmy	195
Zulresso	156
ZURANOLONE	156
Zurzuvae	156
Zyclara Pump	252
Zydelig	65
Zykadia	56
Zylet	235
Zynlonta	46
Zynteglo	211
Zynyz	49
Zypitamag	126
ZyPREXA Relprevv	161



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ВНИМАНИЕ! Если ваш родной язык русский, вам могут быть предоставлены бесплатные переводческие услуги. Обращайтесь 800-524-9242 (телетайп: 888-781-4262).

تنبيه: إذا كنت تتحدث اللغة العربية، فإننا نوفر لك خدمات المساعدة اللغوية، المجانية. اتصل بالرقم 800-524-9242 أو (خدمة الهاتف النصي: 888-781-4262).

सावधान: यदि तपाईं नेपाली बोल्नुहुन्छ भने, तपाईंका लागि निःशुल्क रूपमा भाषा सहायता सेवाहरू उपलब्ध गराइन्छ। 800-524-9242 वा (TTY: 888-781-4262) मा सम्पर्क गर्नुहोस्।

ສິ່ງຄວນເອົາໃຈໃສ່, ພາສາລາວ ຖ້າທ່ານເວົ້າ: ພວກເຮົາມີບໍລິການຄວາມຊ່ວຍເຫຼືອດ້ານພາສາ ໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ ຫຼື 800-524-9242 ທີ່ຕໍ່ຕິ. (TTY: 888-781-4262.)

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주의: 한국어를 사용하시는 경우, 무료 언어 지원 서비스를 이용하실 수 있습니다. 800-524-9242번 또는 (TTY: 888-781-4262)번으로 연락해 주십시오.

HEETINA To a wolwa Fulfulde laabi walliinde dow wolde, naa e njobdi, ene ngoodi ngam maada. Hebir 800-524-9242 malla (TTY: 888-781-4262).

ध्यान रखें : अगर आपकी भाषा हिन्दी है, तो आपके लिए भाषा सहायता सेवाएँ, निःशुल्क उपलब्ध हैं। 800-524-9242 पर संपर्क करें या (TTY: 888-781-4262)।

FUULEFFANNA: Yo isin Oromiffaa, kan dubbattan taatan, tajaajiloonni gargaarsa afaanii, kaffaltii malee, isiniif ni jiru. 800-524-9242 yookin (TTY: 888-781-4262) quunnamaa.

ATTENTION : si vous parlez français, des services d'assistance dans votre langue sont à votre disposition gratuitement. Appelez le 800 524 9242 (ou la ligne ATS au 888 781 4262).

УВАГА! Якщо ви розмовляєте українською мовою, для вас доступні безкоштовні послуги мовної підтримки. Зателефонуйте за номером 800-524-9242 або (телетайп: 888-781-4262).

Ge': Diné k'éhjí yáníłti'go níká bizaad bee áká' adoowoł, t'áá jiik'é, náhóló. Kojí' hółne' 800-524-9242 doodaii' (TTY: 888-781-4262)