Comprehensive

PREFERRED DRUG LIST



Pharmacy Program

YouthCare HealthChoice Illinois is committed to providing high quality drug coverage to our members. We work with providers and pharmacists, as well as the Illinois Department of Healthcare and Family Services and the Department of Children and Family Services to make sure we cover drugs used to treat many conditions and diseases. YouthCare covers prescription and certain over-the-counter (OTC) medications when ordered by a network provider. The pharmacy program does not cover all medications. Some medications require prior authorization (PA) or have limitations on age, dosage, and maximum quantities.

Filling a Prescription

You can have your prescriptions filled at a network pharmacy. At the pharmacy, you will need to give the pharmacist your prescription and your ID card. You can find a pharmacy that is in the YouthCare network by using the Find a Provider tool on www.ilyouthcare.com. If you need help finding a pharmacy near you, or if you have any questions about drug coverage, call us at 844-289-2264 (TTY: 711).

There is no cost for covered drugs.

If your medication is not on the preferred drug list or is on the preferred drug list but has limitations, you can:

1. Speak with your doctor about switching to a similar medication that is on the preferred drug list.

2. Request a prior authorization, or speak to your doctor about submitting a prior authorization for you. You or your doctor may do this by submitting the medication prior authorization form, found on www.ilyouthcare.com.

Psychotropic Medication Consent (DCFS Rule 325)

For Children in YouthCare whom the Illinois Department of Children and Family Services (DCFS) is legally responsible for, consent must be obtained prior to the administration of any psychotropic medication. Consent requests must be submitted directly to the DCFS Centralized Consent Unit (CCU) using Form CSF431-A, available on www2.illinois.gov/dcfs.

CFS 431-A Psychotropic Medication Request Form

CFS 431-A Psychotropic Medication Request Cover Sheet

Generic Drugs

Generic drugs have the same active ingredient and work the same as brand name drugs. When generic drugs are available, the brand name drug will not be covered without prior authorization, unless the brand name is preferred over the generic.

Specialty Drugs

Specialty drugs are usually not available at retail pharmacies, and require additional review and monitoring. These drugs are only covered when supplied by a YouthCare network specialty pharmacy. We work with Evolve Pharmacy Solutions and AcariaHealth to help oversee these drugs. Prior authorization request forms for specialty drugs are located on the YouthCare website at www.ilyouthcare.com.

Pharmacy Benefit Exclusions

The following drug categories are not part of the YouthCare pharmacy benefit:

- Fertility enhancing drugs
- Anorexia, weight loss, or weight gain drugs
- Durable Medical Equipment (DME) products and medical supplies (unless listed on the PDL)
- Drugs and other agents used for cosmetic purposes or for hair growth
- Erectile dysfunction drugs prescribed to treat impotence
- Drug Efficacy Study Implementation (DESI) and Identical, Related and Similar (IRS) drugs that are classified as ineffective
- OTC products (unless listed on the PDL)
- Drugs not included in the Medicaid Drug Rebate Program, drug product data file (unless listed on the PDL)

Legend

P	Preferred Drug	Drugs preferred by YouthCare.
NP	Non-Preferred	Drugs not preferred by YouthCare.
AL	Age Limit	Drug is limited to specific ages.
PA	Prior Authorization	Prior Authorization required before prescription can be filled.
APA	Advanced Prior Authorization	Prior Authorization required before prescription can be filled. Criteria may be met automatically.
QL	Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific time frame.
SP	Specialty Drug	Products that must be dispensed by a specialty pharmacy.
ST	Step Therapy	Requires trial and failure of one or more preferred products prior to coverage.
RX/OTC	Both RX and OTC NDCs	Over the Counter (OTC) products eligible for coverage with a valid prescription written by a licensed physician/clinician.
MT	Maintenance Therapy	Products used to treat long-term conditions or illnesses, available for a 90-Day (3-month) supply.

The publication date of this preferred drug list appears at the bottom of all subsequent pages, and this list is accurate of that date.

For more information regarding the preferred drug list or to receive updated information, call YouthCare at 844-289-2264 (TTY: 711) from 8:00 a.m. – 6:00 p.m. Monday through Friday, or email ILYouthCare@centene.com.

For a printed copy of the preferred drug list or to report inaccuracies, call YouthCare at 844-289-2264 (TTY: 711) from 8:00 a.m. – 6:00 p.m. Monday through Friday, or email ILYouthCare@centene.com.

Drug Name	Tier	Drug Restriction
ALTERNATIVE THERAPY		
ALTERNATIVE THERAPY - ANTIOXIDANT		
Macuvite With Lutein 5,000 unit-60 mg-30 unit-2 mg tablet	P	QL(Allowed 1 per 1 day)
Prosight 5,000 unit-60 mg-30 unit tablet	P	QL(Allowed 1 per 1 day)
Vision Formula-2 250 mg-90 mg-40 mg-1 mg capsule	P	QL(Allowed 1 per 1 day)
ALTERNATIVE THERAPY - UNCLASSIFIED		
PhytoMulti 3 mg-3 mg-200 mg tablet	P	QL(Allowed 1 per 1 day)
ANALGESIC, ANTI-INFLAMMATORY OR ANTIPYRETIC		
ANALGESIC OPIOID AGONISTS		
Abstral 100 mcg sublingual tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Abstral 200 mcg sublingual tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 1,200 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 1,600 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 200 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 400 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 600 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Actiq 800 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
codeine sulfate 15 mg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim))
codeine sulfate 30 mg tablet	P	AL(Minimum Age 12 Years); QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
codeine sulfate 60 mg tablet	P	AL(Minimum Age 12 Years); QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
ConZip 100 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
ConZip 200 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
ConZip 300 mg capsule, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Dilaudid 1 mg/mL oral liquid	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Dilaudid 2 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Dilaudid 4 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Dilaudid 8 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Diskets 40 mg soluble tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
Duragesic 100 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Duragesic 12 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Duragesic 25 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Duragesic 50 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Duragesic 75 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 1,200 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 1,600 mcg lozenge on a handle	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
fentanyl 100 mcg buccal tablet, effervescent	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
fentanyl 100 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 12 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 200 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 200 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 25 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 37.5 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 400 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 400 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 50 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 600 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 600 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 62.5 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 75 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 800 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
fentanyl 800 mcg lozenge on a handle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
fentanyl 87.5 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Fentora 100 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Fentora 200 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Fentora 400 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Fentora 600 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Fentora 800 mcg buccal tablet, effervescent	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone bitartrate ER 10 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 100 mg tablet, crush resist,extend.rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 120 mg tablet, crush resist,extend.rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
hydrocodone bitartrate ER 15 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 20 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 20 mg tablet,crush resist,extended rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 30 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 30 mg tablet,crush resist,extended rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 40 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 40 mg tablet,crush resist,extended rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 50 mg capsule, oral only, extended rel 12 hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
hydrocodone bitartrate ER 60 mg tablet,crush resist,extended rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydrocodone bitartrate ER 80 mg tablet,crush resist,extended rel. 24hr	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
hydromorphone 1 mg/mL oral liquid	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone 2 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone 3 mg rectal suppository	P	QL(Allowed 12 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone 4 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone 8 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone ER 12 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone ER 16 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone ER 32 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydromorphone ER 8 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 100 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 120 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 20 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 30 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 40 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 60 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Hysingla ER 80 mg tablet, crush resistant, extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Kadian 10 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 100 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 20 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 200 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 30 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 40 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 50 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 60 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Kadian 80 mg capsule,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
levorphanol tartrate 2 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
levorphanol tartrate 3 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
meperidine 100 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
meperidine 50 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
meperidine 50 mg/5 mL oral solution	NP	QL(Allowed 500 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 10 mg tablet	NP	QL(Allowed 10 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 10 mg/5 mL oral solution	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 10 mg/mL oral concentrate	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 40 mg soluble tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 5 mg tablet	NP	QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
methadone 5 mg/0.5 mL oral syringe (FOR ORAL USE ONLY)	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
methadone 5 mg/5 mL oral solution	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Methadone Intensol 10 mg/mL oral concentrate	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Methadose 10 mg/mL oral concentrate	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Methadose 40 mg soluble tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
MorphaBond ER 100 mg tablet,oral ONLY (not feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
MorphaBond ER 15 mg tablet,oral ONLY (not feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
MorphaBond ER 30 mg tablet,oral ONLY (not feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
MorphaBond ER 60 mg tablet,oral ONLY (not feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 10 mg rectal suppository	P	QL(Allowed 24 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 10 mg/5 mL oral solution	P	QL(QL Overtime: Allowed 500 over 23 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 15 mg immediate release tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 20 mg rectal suppository	P	QL(Allowed 24 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 20 mg/5 mL (4 mg/mL) oral solution	P	QL(QL Overtime: Allowed 500 over 23 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 30 mg immediate release tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 30 mg rectal suppository	P	QL(Allowed 24 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine 5 mg rectal suppository	P	QL(Allowed 24 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine concentrate 10 mg/0.5 mL oral syringe (FOR ORAL USE ONLY)	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine concentrate 100 mg/5 mL (20 mg/mL) oral solution	P	QL(Allowed 240 per Rx); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 10 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 100 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 100 mg tablet,extended release	P	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
morphine ER 120 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 15 mg tablet,extended release	P	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 20 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 200 mg tablet,extended release	P	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 30 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 30 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 30 mg tablet,extended release	P	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 40 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 45 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 50 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 60 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 60 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 60 mg tablet,extended release	P	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 75 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 80 mg capsule,extended release pellets	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
morphine ER 90 mg capsule,extended release 24 hr multiphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
MS Contin 100 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
MS Contin 15 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
MS Contin 200 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
MS Contin 30 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
MS Contin 60 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta 100 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta 50 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta 75 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta ER 100 mg tablet,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta ER 150 mg tablet,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta ER 200 mg tablet,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta ER 250 mg tablet,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Nucynta ER 50 mg tablet,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Oxaydo 5 mg tablet,oral ONLY (not feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Oxaydo 7.5 mg tablet,oral ONLY (not for feeding tubes)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 10 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 10 mg/0.5 mL oral syringe (FOR ORAL USE ONLY)	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 15 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 20 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 20 mg/mL oral concentrate	P	QL(Allowed 6 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 30 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 5 mg capsule	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone 5 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
oxycodone 5 mg/5 mL oral solution	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 10 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 15 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 20 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 30 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 40 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 60 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone ER 80 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 10 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 15 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 20 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 30 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 40 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 60 mg tablet,crush resistant,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
OxyContin 80 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone 10 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone 5 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 10 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 15 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
oxymorphone ER 20 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 30 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 40 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 5 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxymorphone ER 7.5 mg tablet,extended release,12 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Qdolo 5 mg/mL oral solution	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
Roxicodone 15 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Roxicodone 30 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Roxicodone 5 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol 100 mg tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
tramadol 50 mg tablet	P	AL(Minimum Age 18 Years); QL(Allowed 8 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 100 mg capsule 24h,extended release(25-75)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 100 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 100 mg tablet,extended release 24hr mphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 200 mg capsule 24h,extended release(25-75)	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 200 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 200 mg tablet,extended release 24hr mphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 300 mg capsule 24 hr,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 300 mg tablet,extended release 24 hr	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
tramadol ER 300 mg tablet,extended release 24hr mphase	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Ultram 50 mg tablet	NP	AL(Minimum Age 18 Years); QL(Allowed 8 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Xtampza ER 13.5 mg capsule sprinkle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Xtampza ER 18 mg capsule sprinkle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Xtampza ER 27 mg capsule sprinkle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Xtampza ER 36 mg capsule sprinkle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Xtampza ER 9 mg capsule sprinkle	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 10 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 15 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 20 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 30 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 40 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Zohydro ER 50 mg capsule, oral only,extended release	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
ANALGESIC OPIOID CODEINE COMBINATIONS		
acetaminophen 120 mg-codeine 12 mg/5 mL (5 mL) oral solution	P	AL(Minimum Age 12 Years); QL(Allowed 30 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 120 mg-codeine 12 mg/5 mL oral solution	P	AL(Minimum Age 12 Years); QL(Allowed 30 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 300 mg-codeine 15 mg tablet	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 300 mg-codeine 30 mg tablet	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 300 mg-codeine 30 mg/12.5 mL (12.5 mL) oral solution	P	AL(Minimum Age 12 Years); QL(Allowed 30 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 300 mg-codeine 60 mg tablet	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Ascomp with Codeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
butalbital 50 mg-acetaminophen 300 mg-caffeine 40 mg-codeine 30 mg cap	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
butalbital 50 mg-acetaminophen 325 mg-caffeine 40 mg-codeine 30 mg cap	NP	AL(Minimum Age 12 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Butalbital Compound with Codeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
codeine-butalbital-ASA-caffeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Fioricet with Codeine 50 mg-300 mg-40 mg-30 mg capsule	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
Fiorinal-Codeine #3 30 mg-50 mg-325 mg-40 mg capsule	NP	AL(Minimum Age 12 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
ANALGESIC OPIOID DIHYDROCODEINE, NON-SALICYLATE ANALGESIC,XANTHINE		
acetaminophen 320.5 mg-caffeine 30 mg-dihydrocodeine 16 mg capsule	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
acetaminophen 325 mg-caffeine 30 mg-dihydrocodeine 16 mg tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
Panlor (acetaminophen-caff-dihydrocodeine) 325 mg-30 mg-16 mg tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
ANALGESIC OPIOID HYDROCODONE AND NON-SALICYLATE COMBINATIONS		
Apadaz 4.08 mg-325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Apadaz 6.12 mg-325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Apadaz 8.16 mg-325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
benzhydrocodone 4.08 mg-acetaminophen 325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
benzhydrocodone 6.12 mg-acetaminophen 325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
benzhydrocodone 8.16 mg-acetaminophen 325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 10 mg-acetaminophen 300 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 10 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 5 mg-acetaminophen 300 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
hydrocodone 5 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 7.5 mg-acetaminophen 300 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 7.5 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 7.5 mg-acetaminophen 325 mg/15 mL oral solution	P	QL(Allowed 180 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Lorcet (hydrocodone) 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Lorcet HD 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Lorcet Plus 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Lortab Elixir 10 mg-300 mg/15 mL oral solution	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Norco 10 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Norco 5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Norco 7.5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Verdrocet 2.5 mg-325 mg tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
ANALGESIC OPIOID HYDROCODONE AND NSAID COMBINATIONS		
hydrocodone 10 mg-ibuprofen 200 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 5 mg-ibuprofen 200 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
hydrocodone 7.5 mg-ibuprofen 200 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
Reprexain 10 mg-200 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Reprexain 5 mg-200 mg tablet	NP	PA; QL(QL (Limit 31 days supply(ies) per claim))
Xylon 10 10 mg-200 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
ANALGESIC OPIOID OXYCODONE AND NON-SALICYLATE COMBINATIONS		
Endocet 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Endocet 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Endocet 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone-acetaminophen 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone-acetaminophen 2.5 mg-325 mg tablet	P	QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone-acetaminophen 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
oxycodone-acetaminophen 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Percocet 10 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Percocet 2.5 mg-325 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Percocet 5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Percocet 7.5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); QL(QL (Limit 31 days supply(ies) per claim)); APA
Primlev 10 mg-300 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Primlev 5 mg-300 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Primlev 7.5 mg-300 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
ANALGESIC OPIOID OXYCODONE AND SALICYLATE COMBINATIONS		
oxycodone-aspirin 4.8355 mg-325 mg tablet	NP	QL(Allowed 6 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
ANALGESIC OPIOID PARTIAL-MIXED AGONISTS		
Belbuca 150 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 300 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 450 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 600 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 75 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 750 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Belbuca 900 mcg buccal film	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA



Drug Name	Tier	Drug Restriction
buprenorphine 10 mcg/hour weekly transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
buprenorphine 15 mcg/hour weekly transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
buprenorphine 20 mcg/hour weekly transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
buprenorphine 5 mcg/hour weekly transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
buprenorphine 7.5 mcg/hour weekly transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
butorphanol 10 mg/mL nasal spray	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Butrans 10 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Butrans 15 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Butrans 20 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Butrans 5 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
Butrans 7.5 mcg/hour transdermal patch	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA
pentazocine 50 mg-naloxone 0.5 mg tablet	NP	QL(QL (Limit 31 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
ANALGESIC OPIOID TRAMADOL AND NON-SALICYLATE COMBINATIONS		
tramadol 37.5 mg-acetaminophen 325 mg tablet	NP	AL(Minimum Age 18 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
Ultracet 37.5 mg-325 mg tablet	NP	AL(Minimum Age 18 Years); QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim)); APA
ANALGESIC OR ANTIPYRETIC NON-OPIOID		
	P	
Acephen 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Acephen 325 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Acephen 650 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
acetaminophen 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
acetaminophen 160 mg/5 mL (5 mL) oral solution	P	
acetaminophen 160 mg/5 mL (5 mL) oral suspension	P	
acetaminophen 160 mg/5 mL oral elixir	P	
acetaminophen 160 mg/5 mL oral liquid	P	

Drug Name	Tier	Drug Restriction
acetaminophen 160 mg/5 mL oral suspension	P	
acetaminophen 325 mg tablet	P	
acetaminophen 325 mg/10.15 mL oral solution	P	
acetaminophen 325 mg/10.15 mL oral suspension	P	
acetaminophen 500 mg tablet	P	
acetaminophen 650 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
acetaminophen 650 mg/20.3 mL oral solution	P	
acetaminophen 650 mg/20.3 mL oral suspension	P	
acetaminophen 80 mg/0.8 mL oral drops,suspension	P	
Acetaminophen Extra Strength 500 mg tablet	P	
Acetaminophen Pain Relief 500 mg tablet	P	
Aphen 325 mg tablet	P	

Drug Name	Tier	Drug Restriction
Athenol 325 mg tablet	P	
BetaTemp 160 mg/5 mL oral suspension	P	
Children's Acetaminophen 160 mg/5 mL (5 mL) oral suspension	P	
Children's Acetaminophen 160 mg/5 mL oral liquid	P	
Children's Acetaminophen 160 mg/5 mL oral suspension	P	
Children's Acetaminophen 80 mg chewable tablet	P	
Children's Aurophen Pain-Fever 160 mg/5 mL oral suspension	P	
Children's Fever Reducer-Pain Reliever 160 mg/5 mL oral suspension	P	
Children's Fever Reducing 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Children's Mapap 80 mg chewable tablet	P	

Drug Name	Tier	Drug Restriction
Children's Non-Aspirin 160 mg/5 mL oral suspension	P	
Children's Pain and Fever Relief 160 mg/5 mL oral liquid	P	
Children's Pain and Fever Relief 160 mg/5 mL oral suspension	P	
Children's Pain and Fever Relief 80 mg chewable tablet	P	
Children's Pain Relief 160 mg/5 mL oral elixir	P	
Children's Pain Relief 160 mg/5 mL oral suspension	P	
Children's Pain Reliever 160 mg/5 mL oral suspension	P	
Children's Pain Reliever 80 mg chewable tablet	P	
Children's Pain Reliever and Fever Reducer 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Children's Q-PAP 160 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Children's Tactinal 80 mg chewable tablet	P	
Children's Tylenol 160 mg/5 mL oral suspension	P	
Ed-APAP 160 mg/5 mL oral liquid	P	
Fever Reducer 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Feverall 120 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Feverall 325 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Feverall 650 mg rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Infant Fever Reducer-Pain Relief 160 mg/5 mL oral suspension	P	
Infant Pain Reliever 160 mg/5 mL oral suspension	P	
Infant's Acetaminophen 160 mg/5 mL oral suspension	P	
Infants' Pain and Fever 160 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Infants' Pain Relief 160 mg/5 mL oral suspension	P	
Infant's Pain Relief 160 mg/5 mL oral suspension	P	
Infant's Tylenol 160 mg/5 mL oral suspension	P	
Little Remedies Fever and Pain Reliever 160 mg/5 mL oral liquid	P	
Mapap (acetaminophen) 160 mg/5 mL oral liquid	P	
Mapap (acetaminophen) 160 mg/5 mL oral suspension	P	
Mapap (acetaminophen) 325 mg tablet	P	
Mapap (acetaminophen) 500 mg capsule	P	
Mapap Extra Strength 500 mg tablet	P	
M-PAP 160 mg/5 mL oral liquid	P	
Non-Aspirin 160 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Non-Aspirin 325 mg tablet	P	
Non-Aspirin 80 mg chewable tablet	P	
Non-Aspirin Children's 80 mg chewable tablet	P	
Non-Aspirin Extra Strength 500 mg tablet	P	
Non-Aspirin Pain Relief 500 mg tablet	P	
Nortemp 160 mg/5 mL oral suspension	P	
Nortemp 80 mg/0.8 mL oral drops	P	
Pain and Fever 325 mg tablet	P	
Pain and Fever 500 mg tablet	P	
Pain Relief (acetaminophen) 160 mg/5 mL oral liquid	P	
Pain Relief (acetaminophen) 500 mg tablet	P	
Pain Relief Extra Strength 500 mg tablet	P	

P Preferred Drug | NP Non-Preferred | AL Age Limit | PA Prior Authorization | APA Advanced Prior Authorization | QL Quantity Limit | SP Specialty Drug | ST Step Therapy | RX/OTC Both RX and OTC NDCs | MT Maintenance Therapy

Drug Name	Tier	Drug Restriction
Pain Relief Regular Strength 325 mg tablet	P	
Pain Reliever (acetaminophen) 325 mg tablet	P	
Pain Reliever (acetaminophen) 500 mg capsule	P	
Pain Reliever (acetaminophen) 500 mg tablet	P	
Pain Reliever Extra Strength 500 mg tablet	P	
PediaCare Fever Reducer 160 mg/5 mL oral suspension	P	
Pharbetol 325 mg tablet	P	
Pharbetol 500 mg tablet	P	
Q-PAP 325 mg tablet	P	
Q-PAP 500 mg tablet	P	
Q-PAP Extra Strength 500 mg tablet	P	
Shake That Ache 500 mg tablet	P	
Tactinal 325 mg tablet	P	
Tactinal Extra Strength 500 mg tablet	P	
Tylenol 325 mg tablet	P	
Tylenol Extra Strength 500 mg tablet	P	
ANALGESIC OR ANTIPYRETIC NON-OPIOID/SEDATIVE COMBINATIONS		
Allzital 25 mg-325 mg tablet	NP	PA
Bupap 50 mg-300 mg tablet	P	
butalbital 50 mg-acetaminophen 300 mg capsule	NP	PA
butalbital 50 mg-acetaminophen 300 mg tablet	P	
butalbital 50 mg-acetaminophen 325 mg tablet	P	
butalbital-acetaminophen-caffeine 50 mg-300 mg-40 mg capsule	P	
butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg capsule	P	QL(Allowed 4 per 1 day)
butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet	P	QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
Esgic 50 mg-325 mg-40 mg capsule	P	QL(Allowed 4 per 1 day)
Esgic 50 mg-325 mg-40 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Fioricet 50 mg-300 mg-40 mg capsule	NP	PA
Marten-Tab 50 mg-325 mg tablet	P	
Vanatol LQ 50 mg-325 mg-40 mg/15 mL oral solution	NP	PA
Vanatol S 50 mg-325 mg-40 mg/15 mL oral solution	NP	PA
Vtol LQ 50 mg-325 mg-40 mg/15 mL oral solution	NP	PA
Zebutal 50 mg-325 mg-40 mg capsule	P	QL(Allowed 4 per 1 day)
ANTI-INFLAMMATORY - INTERLEUKIN-1 BETA BLOCKERS		
Ilaris (PF) 150 mg/mL subcutaneous solution	NP	PA; SP
ANTI-INFLAMMATORY - INTERLEUKIN-1 RECEPTOR ANTAGONIST		
Arcalyst 220 mg subcutaneous solution	NP	PA; SP
ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITING AGNTS,NON-SEIECTIVE		
Enbrel 25 mg (1 mL) subcutaneous powder for solution	P	PA; SP
Enbrel 25 mg/0.5 mL (0.5 mL) subcutaneous syringe	P	PA; SP
Enbrel 25 mg/0.5 mL subcutaneous solution	P	PA; SP
Enbrel 50 mg/mL (1 mL) subcutaneous syringe	P	PA; SP
Enbrel Mini 50 mg/mL (1 mL) subcutaneous cartridge	P	PA; SP
Enbrel SureClick 50 mg/mL (1 mL) subcutaneous pen injector	P	PA; SP
ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITING AGNTS,TNF-ALPHA SEL		
Avsola 100 mg intravenous solution	NP	PA; SP
Cimzia 400 mg/2 mL (200 mg/mL x 2) subcutaneous syringe kit	P	PA; SP
Cimzia Powder for Recon 400 mg (200 mg x 2 vials) subcutaneous kit	NP	PA; SP
Cimzia Starter Kit 400 mg/2 mL (200 mg/mL x2) subcutaneous syringe kit	P	PA; SP

Drug Name	Tier	Drug Restriction
Humira 40 mg/0.8 mL subcutaneous syringe kit	P	PA; SP
Humira Pen 40 mg/0.8 mL subcutaneous kit	P	PA; SP
Humira Pen Crohn's-Ulc Colitis-Hid Sup Starter 40 mg/0.8 mL subcut kit	P	PA; SP
Humira Pen Psoriasis-Uveitis-Adol Hid Sup Start 40 mg/0.8 mL subcut kt	P	PA; SP
Humira(CF) 10 mg/0.1 mL subcutaneous syringe kit	P	PA; SP
Humira(CF) 20 mg/0.2 mL subcutaneous syringe kit	P	PA; SP
Humira(CF) 40 mg/0.4 mL subcutaneous syringe kit	P	PA; SP
Humira(CF) Pedi Crohn's Start 80 mg/0.8 mL-40 mg/0.4 mL subcut syr kit	P	PA; SP
Humira(CF) Pediatric Crohn's Starter 80 mg/0.8 mL subcut syringe kit	P	PA; SP
Humira(CF) Pen 40 mg/0.4 mL subcutaneous kit	P	PA; SP
Humira(CF) Pen 80 mg/0.8 mL subcutaneous kit	P	PA; SP
Humira(CF) Pen Crohn's-Ulc Colitis-Hid Sup Strt 80 mg/0.8 mL subcut kt	P	PA; SP
Humira(CF) Pen Pediatric Ulcer Colitis Starter 80 mg/0.8 mL subcut kit	P	PA; SP
Humira(CF) Pen Ps-Uv-Adol HS 80 mg/0.8 mL(1)-40 mg/0.4 mL(2)subcut kit	P	PA; SP
Inflectra 100 mg intravenous solution	NP	PA; SP
Remicade 100 mg intravenous solution	NP	PA; SP
Renflexis 100 mg intravenous solution	NP	PA; SP

Drug Name	Tier	Drug Restriction
Simponi 100 mg/mL subcutaneous pen injector	NP	PA; SP
Simponi 100 mg/mL subcutaneous syringe	NP	PA; SP
Simponi 50 mg/0.5 mL subcutaneous pen injector	NP	PA; SP
Simponi 50 mg/0.5 mL subcutaneous syringe	NP	PA; SP
Simponi ARIA 12.5 mg/mL intravenous solution	NP	PA; SP
DMARD - ANTIMETABOLITES		
Otrexup (PF) 10 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 12.5 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 15 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 17.5 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 20 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 22.5 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Otrexup (PF) 25 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 10 mg/0.2 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 12.5 mg/0.25 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 15 mg/0.3 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 17.5 mg/0.35 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 20 mg/0.4 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 22.5 mg/0.45 mL subcutaneous auto-injector	NP	PA; SP

Drug Name	Tier	Drug Restriction
Rasuvo (PF) 25 mg/0.5 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 30 mg/0.6 mL subcutaneous auto-injector	NP	PA; SP
Rasuvo (PF) 7.5 mg/0.15 mL subcutaneous auto-injector	NP	PA; SP
RediTrex (PF) 10 mg/0.4 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 12.5 mg/0.5 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 15 mg/0.6 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 17.5 mg/0.7 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 20 mg/0.8 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 22.5 mg/0.9 mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 25 mg/mL subcutaneous syringe	NP	PA; SP
RediTrex (PF) 7.5 mg/0.3 mL subcutaneous syringe	NP	PA; SP
DMARD - ANTINFLAMMATORY, SELECT. COSTIMULATION MODULATOR,T-CELL INHIB.		
Orencia (with maltose) 250 mg intravenous solution	NP	PA; SP
Orencia 125 mg/mL subcutaneous syringe	NP	PA; SP
Orencia 50 mg/0.4 mL subcutaneous syringe	NP	PA; SP
Orencia 87.5 mg/0.7 mL subcutaneous syringe	NP	PA; SP
Orencia ClickJect 125 mg/mL subcutaneous auto-injector	NP	PA; SP
DMARD - GOLD COMPOUNDS		
Ridaura 3 mg capsule	NP	PA
DMARD - INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		

Drug Name	Tier	Drug Restriction
Kineret 100 mg/0.67 mL subcutaneous syringe	NP	PA; SP
DMARD - INTERLEUKIN-6 (IL-6) RECEPTOR INHIBITORS, MONOCLONAL ANTIBODY		
Actemra 162 mg/0.9 mL subcutaneous syringe	NP	PA; SP
Actemra 200 mg/10 mL (20 mg/mL) intravenous solution	NP	PA; SP
Actemra 400 mg/20 mL (20 mg/mL) intravenous solution	NP	PA; SP
Actemra 80 mg/4 mL (20 mg/mL) intravenous solution	NP	PA; SP
Actemra ACTPen 162 mg/0.9 mL subcutaneous pen injector	NP	PA; SP
Kevzara 150 mg/1.14 mL subcutaneous pen injector	NP	PA; SP
Kevzara 150 mg/1.14 mL subcutaneous syringe	NP	PA; SP
Kevzara 200 mg/1.14 mL subcutaneous pen injector	NP	PA; SP
Kevzara 200 mg/1.14 mL subcutaneous syringe	NP	PA; SP
DMARD - JANUS KINASE (JAK) INHIBITORS		
Olumiant 1 mg tablet	NP	PA; SP
Olumiant 2 mg tablet	NP	PA; SP
Rinvoq 15 mg tablet,extended release	NP	PA; SP
Xeljanz 1 mg/mL oral solution	P	PA; SP
Xeljanz 5 mg tablet	P	PA; SP
Xeljanz XR 11 mg tablet,extended release	P	PA; SP
DMARD - PHOSPHODIESTERASE-4 (PDE4) INHIBITORS		
Otezla 30 mg tablet	NP	PA; SP
Otezla Starter 10 mg (4)-20 mg (4)-30 mg(47) tablets in a dose pack	NP	PA; SP
DMARD - PYRIMIDINE SYNTHESIS INHIBITORS		
Arava 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Arava 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
leflunomide 10 mg tablet	P	QL(Allowed 1 per 1 day)
leflunomide 20 mg tablet	P	QL(Allowed 1 per 1 day)
IMMUNOMODULATOR B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITOR MCAB		
Benlysta 200 mg/mL subcutaneous auto-injector	NP	PA; SP
Benlysta 200 mg/mL subcutaneous syringe	NP	PA; SP
NSAID ANALGESIC AND HISTAMINE H2 RECEPTOR ANTAGONIST COMBINATIONS		
Duexis 800 mg-26.6 mg tablet	NP	PA
NSAID ANALGESIC AND PROSTAGLANDIN ANALOG COMBINATIONS		
Arthrotec 50 mg-200 mcg tablet,film-coated	NP	PA; MT
Arthrotec 75 75 mg-200 mcg tablet,film-coated	NP	PA; MT
diclofenac 50 mg-misoprostol 200 mcg tablet,immed.and delayed release	NP	PA; MT
diclofenac 75 mg-misoprostol 200 mcg tablet,immediate,delayed release	NP	PA; MT
NSAID ANALGESIC AND PROTON PUMP INHIBITOR COMBINATIONS		
naproxen 375 mg-esomeprazole 20 mg tablet,immediate and delay release	NP	PA; MT
naproxen 500 mg-esomeprazole 20 mg tablet,immediate and delay release	NP	PA; MT
Vimovo 375 mg-20 mg tablet,immediate and delay release	NP	PA; MT
Vimovo 500 mg-20 mg tablet,immediate and delay release	NP	PA; MT
NSAID ANALGESIC, CYCLOOXYGENASE-2 (COX-2) SELECTIVE INHIBITORS		
Celebrex 100 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Celebrex 200 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Celebrex 400 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Celebrex 50 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
celecoxib 100 mg capsule	P	QL(Allowed 2 per 1 day); MT
celecoxib 200 mg capsule	P	QL(Allowed 2 per 1 day); MT
celecoxib 400 mg capsule	P	QL(Allowed 2 per 1 day); MT
celecoxib 50 mg capsule	P	QL(Allowed 2 per 1 day); MT
NSAID ANALGESICS (COX NON-SPECIFIC) - ANTHRANILIC ACID DERIVATIVES		
meclofenamate 100 mg capsule	NP	PA; MT
meclofenamate 50 mg capsule	NP	PA; MT
mefenamic acid 250 mg capsule	NP	PA; MT
NSAID ANALGESICS (COX NON-SPECIFIC) - OTHER		
ketorolac 10 mg tablet	P	QL(QL Overtime: Allowed 20 over 30 days)
ketorolac 15.75 mg/spray nasal spray	NP	PA
nabumetone 500 mg tablet	P	MT
nabumetone 750 mg tablet	P	MT
Relafen DS 1,000 mg tablet	NP	PA
Sprix 15.75 mg/spray nasal spray	NP	PA

Drug Name	Tier	Drug Restriction
sulindac 150 mg tablet	P	MT
sulindac 200 mg tablet	P	MT
tolmetin 200 mg tablet	NP	PA; MT
tolmetin 400 mg capsule	NP	PA; MT
tolmetin 600 mg tablet	NP	PA; MT
NSAID ANALGESICS (COX NON-SPECIFIC) - OXICAM DERIVATIVES		
Feldene 10 mg capsule	NP	PA; MT
Feldene 20 mg capsule	NP	PA; MT
meloxicam 15 mg tablet	P	MT
meloxicam 7.5 mg tablet	P	MT
meloxicam submicronized 10 mg capsule	NP	PA
meloxicam submicronized 5 mg capsule	NP	PA
Mobic 15 mg tablet	NP	PA; MT
Mobic 7.5 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
piroxicam 10 mg capsule	NP	PA; MT
piroxicam 20 mg capsule	NP	PA; MT
Qmiiz ODT 15 mg disintegrating tablet	NP	PA
Qmiiz ODT 7.5 mg disintegrating tablet	NP	PA
Vivlodex 10 mg capsule	NP	PA
Vivlodex 5 mg capsule	NP	PA
NSAID ANALGESICS (COX NON-SPECIFIC) - PHENYLACETIC ACID DERIVATIVES		
diclofenac ER 100 mg tablet,extended release 24 hr	P	MT
diclofenac potassium 50 mg tablet	P	MT
diclofenac sodium 25 mg tablet,delayed release	P	MT
diclofenac sodium 50 mg tablet,delayed release	P	MT
diclofenac sodium 75 mg tablet,delayed release	P	MT
Zipsor 25 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Zorvolex 18 mg capsule	NP	PA
Zorvolex 35 mg capsule	NP	PA
NSAID ANALGESICS (COX NON-SPECIFIC) - PROPIONIC ACID DERIVATIVES		
Children's Ibuprofen 100 mg/5 mL oral suspension	P	MT
Children's Motrin 100 mg/5 mL oral suspension	P	MT
Daypro 600 mg tablet	NP	PA; MT
EC-Naproxen 375 mg tablet,delayed release	P	QL(Allowed 2 per 1 day); MT
EC-Naproxen 500 mg tablet,delayed release	P	QL(Allowed 2 per 1 day); MT
fenoprofen 400 mg capsule	NP	PA; MT
fenoprofen 600 mg tablet	NP	PA; MT
flurbiprofen 100 mg tablet	P	MT
IBU 400 mg tablet	P	MT
IBU 600 mg tablet	P	MT
IBU 800 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
IBU-200 200 mg tablet	P	
Ibupak 600 mg oral kit	NP	PA
ibuprofen 100 mg tablet	P	
ibuprofen 100 mg/5 mL oral suspension	NP	PA; MT
ibuprofen 200 mg capsule	P	
ibuprofen 200 mg tablet	P	
ibuprofen 400 mg tablet	P	MT
ibuprofen 50 mg/1.25 mL oral drops,suspension	P	
ibuprofen 600 mg tablet	P	MT
ibuprofen 800 mg tablet	P	MT
Ibuprofen IB 200 mg tablet	P	
Infant's Ibuprofen 50 mg/1.25 mL oral drops,suspension	P	
ketoprofen 25 mg capsule	P	MT
ketoprofen 50 mg capsule	P	MT
ketoprofen 75 mg capsule	P	MT
ketoprofen ER 200 mg 24 hr capsule,extended release	NP	PA; MT
Nalfon 400 mg capsule	NP	PA; MT
Nalfon 600 mg tablet	NP	PA; MT
Naprelan CR 375 mg tab,extended release 24 hr mphase	NP	PA; MT
Naprelan CR 500 mg tab,extended release 24 hr mphase	NP	PA; MT
Naprelan CR 750 mg tab,extended release 24 hr mphase	NP	PA
Naprosyn 125 mg/5 mL oral suspension	NP	PA; MT
naproxen 125 mg/5 mL oral suspension	P	MT
naproxen 250 mg tablet	P	MT
naproxen 375 mg tablet	P	MT
naproxen 375 mg tablet,delayed release	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
naproxen 500 mg tablet	P	MT
naproxen 500 mg tablet,delayed release	P	QL(Allowed 2 per 1 day); MT
naproxen sodium 275 mg tablet	P	MT
naproxen sodium 550 mg tablet	P	MT
naproxen sodium ER (CR) 375 mg tablet,extended release 24 hr mphase	NP	PA; MT
naproxen sodium ER (CR) 500 mg tablet,extended release 24 hr mphase	NP	PA; MT
naproxen sodium ER (CR) 750 mg tablet,extended release 24 hr mphase	NP	PA
oxaprozin 600 mg tablet	NP	PA; MT
Provil 200 mg tablet	P	
NSAID ANALGESICS, (COX NON-SPECIFIC) - INDOLE ACETIC ACID DERIVATIVES		
etodolac 200 mg capsule	P	MT
etodolac 300 mg capsule	P	MT

Drug Name	Tier	Drug Restriction
etodolac 400 mg tablet	P	MT
etodolac 500 mg tablet	P	MT
etodolac ER 400 mg tablet,extended release 24 hr	P	MT
etodolac ER 500 mg tablet,extended release 24 hr	P	MT
etodolac ER 600 mg tablet,extended release 24 hr	P	MT
Indocin 25 mg/5 mL oral suspension	NP	PA
Indocin 50 mg rectal suppository	NP	PA
indomethacin 25 mg capsule	P	QL(QL (Limit 31 days supply(ies) per claim)); MT
indomethacin 50 mg capsule	P	MT
indomethacin ER 75 mg capsule,extended release	P	MT
Tivorbex 20 mg capsule	NP	PA
Tivorbex 40 mg capsule	NP	PA
SALICYLATE ANALGESIC AND SEDATIVE COMBINATIONS		

Drug Name	Tier	Drug Restriction
butalbital-aspirin-caffeine 50 mg-325 mg-40 mg capsule	P	QL(Allowed 4 per 1 day); QL(QL (Limit 31 days supply(ies) per claim))
Fiorinal 50 mg-325 mg-40 mg capsule	NP	PA; QL(Allowed 4 per 1 day)
SALICYLATE ANALGESICS		
diflunisal 500 mg tablet	P	
salsalate 500 mg tablet	P	
salsalate 750 mg tablet	P	
SALICYLATE ANALGESICS, BUFFERED		
aspirin,buffered (calcium carbonate-magnesium) 325 mg tablet	P	
Buffered Aspirin 325 mg tablet	P	
Bufferin 325 mg tablet	P	
Tri-Buffered Aspirin 325 mg tablet	P	
ANESTHETICS		
LOCAL ANESTHETIC - AMIDES		
lidocaine HCl 4 % laryngotracheal solution	P	
ANORECTAL PREPARATIONS		
ANAL FISSURE PAIN/TREATMENT AGENTS - NITRATES		
Rectiv 0.4 % (w/w) ointment	NP	PA

Drug Name	Tier	Drug Restriction
ANORECTAL - GLUCOCORTICOIDS		
Anusol-HC 2.5 % topical cream with perineal applicator	NP	PA; QL(Allowed 30 per Rx)
hydrocortisone 1 % topical cream with perineal applicator	P	
hydrocortisone 2.5 % topical cream with perineal applicator	P	QL(Allowed 30 per Rx)
Procto-Med HC 2.5 % topical cream perineal applicator	P	QL(Allowed 30 per Rx)
Proctosol HC 2.5 % topical cream perineal applicator	P	QL(Allowed 30 per Rx)
Proctozone-HC 2.5 % topical cream perineal applicator	P	QL(Allowed 30 per Rx)
ANORECTAL - HEMORRHOIDAL COMBINATIONS OTHER		
Hemorrhoid ointment	P	QL(QL Overtime: Allowed 31 over 31 days)
Hemorrhoidal (phenyleph-cocoa) 0.25 %-88.44 % rectal suppository	P	
Hemorrhoidal 0.25 %-3 % rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Hemorrhoidal H rectal suppository	P	QL(QL Overtime: Allowed 12 over 31 days)
Hemorrhoidal ointment	P	QL(QL Overtime: Allowed 31 over 31 days)

Drug Name	Tier	Drug Restriction
Hemorrhoidal(phenyleph-min oil-petrolat)0.25 %-14 %-74.9 % rectal oint	P	QL(QL Overtime: Allowed 91 over 31 days)
Preparation H(phenyleph,cocoa buttr) 0.25 %-88.44 % rectal suppository	P	
ANORECTAL - HEMORRHOIDAL RECTAL GLUCOCORTICOID-LOCAL ANESTHETIC COMB		
Ana-Lex 2 %-2 % rectal kit	NP	PA
lidocaine 2 %-hydrocortisone 2 % (7 gram) rectal kit cream and wipes	NP	PA
lidocaine 3 %-hydrocortisone 0.5 % rectal cream	NP	PA
lidocaine 3 %-hydrocortisone 0.5 % rectal kit	NP	PA
lidocaine 3 %-hydrocortisone 1 % (7 gram) rectal kit	NP	PA
lidocaine-hydrocortisone-aloe vera 2.8 %-0.55 % rectal gel	NP	PA
lidocaine-hydrocortisone-aloe vera 3 %-2.5 % (7 gram) rectal kit	NP	PA

Drug Name	Tier	Drug Restriction
Proctofoam HC 1 %-1 %	NP	PA
ANTIDOTES AND OTHER REVERSAL AGENTS		
CHELATING AGENTS - COPPER		
Clovique 250 mg capsule	P	SP
Cuprimine 250 mg capsule	NP	PA
Depen Titratabs 250 mg tablet	P	
penicillamine 250 mg capsule	P	
penicillamine 250 mg tablet	P	
Syprine 250 mg capsule	NP	PA; SP
trientine 250 mg capsule	P	SP
CHELATING AGENTS - IRON		
deferasirox 125 mg dispersible tablet	NP	PA; SP
deferasirox 180 mg oral granules in packet	NP	PA; SP
deferasirox 180 mg tablet	NP	PA; SP
deferasirox 250 mg dispersible tablet	NP	PA; SP
deferasirox 360 mg oral granules in packet	NP	PA; SP

Drug Name	Tier	Drug Restriction
deferasirox 360 mg tablet	NP	PA; SP
deferasirox 500 mg dispersible tablet	NP	PA; SP
deferasirox 90 mg oral granules in packet	NP	PA; SP
deferasirox 90 mg tablet	NP	PA; SP
deferiprone 500 mg tablet	NP	PA; SP
Exjade 125 mg dispersible tablet	NP	PA; SP
Exjade 250 mg dispersible tablet	NP	PA; SP
Exjade 500 mg dispersible tablet	NP	PA; SP
Ferriprox (2 times a day) 1,000 mg tablet	NP	PA; SP
Ferriprox 1,000 mg tablet	NP	PA; SP
Ferriprox 100 mg/mL oral solution	NP	PA; SP
Ferriprox 500 mg tablet	NP	PA; SP
Jadenu 180 mg tablet	NP	PA; SP
Jadenu 360 mg tablet	NP	PA; SP
Jadenu 90 mg tablet	NP	PA; SP
Jadenu Sprinkle 180 mg oral granules in packet	NP	PA; SP
Jadenu Sprinkle 360 mg oral granules in packet	NP	PA; SP
Jadenu Sprinkle 90 mg oral granules in packet	NP	PA; SP
CHELATING AGENTS - LEAD POISONING		
Chemet 100 mg capsule	P	
MU-OPIOID RECEPTOR ANTAGONISTS, PERIPHERALLY-ACTING		
alvimopan 12 mg capsule	NP	PA
Entereg 12 mg capsule	NP	PA
Movantik 12.5 mg tablet	NP	PA
Movantik 25 mg tablet	NP	PA
Relistor 12 mg/0.6 mL subcutaneous solution	NP	PA
Relistor 12 mg/0.6 mL subcutaneous syringe	NP	PA
Relistor 150 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Relistor 8 mg/0.4 mL subcutaneous syringe	NP	PA
Symproic 0.2 mg tablet	NP	PA
OPIOID REVERSAL AGENTS - OPIOID ANTAGONISTS		
naloxone 0.4 mg/mL injection solution	P	
naloxone 0.4 mg/mL injection syringe	P	
naloxone 1 mg/mL injection syringe	P	
naltrexone 50 mg tablet	P	
Narcan 4 mg/actuation nasal spray	P	
ANTI-INFECTIVE AGENTS		
AMEBICIDES		
paromomycin 250 mg capsule	P	
AMINOGLYCOSIDE ANTIBIOTIC		
amikacin 1,000 mg/4 mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
amikacin 500 mg/2 mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Arikayce 590 mg/8.4 mL suspension for inhalation via nebulization	NP	PA; SP
gentamicin 100 mg/100 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 100 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 120 mg/100 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 20 mg/2 mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 40 mg/mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 60 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
gentamicin 80 mg/100 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin 80 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin sulfate (pediatric) (PF) 20 mg/2 mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin sulfate (PF) 100 mg/10 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
gentamicin sulfate (PF) 60 mg/6 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
neomycin 500 mg tablet	P	
tobramycin 1.2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
tobramycin 10 mg/mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
tobramycin 40 mg/mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
AMINOPENICILLIN ANTIBIOTIC		

Drug Name	Tier	Drug Restriction
amoxicillin 125 mg chewable tablet	P	
amoxicillin 125 mg/5 mL oral suspension	P	
amoxicillin 200 mg/5 mL oral suspension	P	
amoxicillin 250 mg capsule	P	
amoxicillin 250 mg chewable tablet	P	
amoxicillin 250 mg/5 mL oral suspension	P	
amoxicillin 400 mg/5 mL oral suspension	P	
amoxicillin 500 mg capsule	P	
amoxicillin 500 mg tablet	P	
amoxicillin 875 mg tablet	P	
ampicillin 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 10 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
ampicillin 125 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 2 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 250 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin 500 mg capsule	P	
ampicillin 500 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
AMINOPENICILLIN ANTIBIOTIC - BETA-LACTAMASE INHIBITOR COMBINATIONS		
amoxicillin 200 mg-potassium clavulanate 28.5 mg chewable tablet	P	QL(Allowed 20 per Rx)
amoxicillin 200 mg-potassium clavulanate 28.5 mg/5 mL oral suspension	P	QL(Allowed 100 per Rx)
amoxicillin 250 mg-potassium clavulanate 125 mg tablet	P	QL(Allowed 30 per Rx)

Drug Name	Tier	Drug Restriction
amoxicillin 250 mg-potassium clavulanate 62.5 mg/5 mL oral suspension	P	QL(Allowed 150 per Rx)
amoxicillin 400 mg-potassium clavulanate 57 mg chewable tablet	P	QL(Allowed 20 per Rx)
amoxicillin 400 mg-potassium clavulanate 57 mg/5 mL oral suspension	P	QL(Allowed 200 per Rx)
amoxicillin 500 mg-potassium clavulanate 125 mg tablet	P	QL(Allowed 20 per Rx)
amoxicillin 600 mg-potassium clavulanate 42.9 mg/5 mL oral suspension	P	QL(Allowed 400 per Rx)
amoxicillin 875 mg-potassium clavulanate 125 mg tablet	P	QL(Allowed 20 per Rx)
amoxicillin-potassium clavulanate 1,000 mg-62.5 mg tablet,ext.rel 12hr	NP	PA; QL(QL Overtime: Allowed 40 over 30 days)
ampicillin-sulbactam 1.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
ampicillin-sulbactam 1.5 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin-sulbactam 15 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin-sulbactam 3 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ampicillin-sulbactam 3 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
Unasyn 1.5 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Unasyn 15 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Unasyn 3 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
ANTHELMINTIC AGENTS - BENZIMIDAZOLE DERIVATIVES		
albendazole 200 mg tablet	NP	PA
Albenza 200 mg tablet	NP	PA
Egaten 250 mg tablet	NP	PA
Emverm 100 mg chewable tablet	NP	PA; QL(QL Overtime: Allowed 1 over 20 days)

Drug Name	Tier	Drug Restriction
ANTHELMINTIC AGENTS - MACROCYCLIC LACTONES		
ivermectin 3 mg tablet	NP	PA
Stromectol 3 mg tablet	NP	PA
ANTHELMINTIC AGENTS OTHER		
Biltricide 600 mg tablet	NP	PA
praziquantel 600 mg tablet	P	
ANTIBACTERIAL FOLATE ANTAGONIST - OTHER COMBINATIONS		
Bactrim 400 mg-80 mg tablet	NP	PA
Bactrim DS 800 mg-160 mg tablet	NP	PA
sulfamethoxazole 200 mg-trimethoprim 40 mg/5 mL oral suspension	P	
sulfamethoxazole 400 mg-trimethoprim 80 mg tablet	P	
sulfamethoxazole 800 mg-trimethoprim 160 mg tablet	P	
Sulfatrim 200 mg-40 mg/5 mL oral suspension	P	
ANTIBACTERIAL FOLATE ANTAGONIST OTHERS		

Drug Name	Tier	Drug Restriction
trimethoprim 100 mg tablet	P	
ANTIFUNGAL - ALLYLAMINES		
terbinafine HCl 250 mg tablet	P	QL(Allowed 1 per 1 day, QL Overtime: Allowed 90 over 120 days)
ANTIFUNGAL - AMPHOTERIC POLYENE MACROLIDES		
nystatin 500,000 unit tablet	P	QL(Allowed 6 per 1 day)
ANTIFUNGAL - FLUORINATED PYRIMIDINE-TYPE AGENTS		
Ancobon 250 mg capsule	NP	PA
Ancobon 500 mg capsule	NP	PA
flucytosine 250 mg capsule	NP	PA
flucytosine 500 mg capsule	NP	PA
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
micafungin 100 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
micafungin 50 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Mycamine 100 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Mycamine 50 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ANTIFUNGAL - IMIDAZOLES		
ketoconazole 200 mg tablet	P	
Oravig 50 mg buccal tablet	NP	PA
ANTIFUNGAL - TRIAZOLES		
Cresemba 186 mg capsule	NP	PA
Diflucan 10 mg/mL oral suspension	NP	PA; QL(Allowed 70 per Rx)
Diflucan 100 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Diflucan 150 mg tablet	NP	PA; QL(Allowed 2 per Rx)
Diflucan 200 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Diflucan 40 mg/mL oral suspension	NP	PA; QL(Allowed 70 per Rx)
Diflucan 50 mg tablet	NP	PA; QL(Allowed 7 per Rx)
fluconazole 10 mg/mL oral suspension	P	QL(Allowed 70 per Rx)
fluconazole 100 mg tablet	P	QL(Allowed 1 per 1 day)
fluconazole 100 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
fluconazole 150 mg tablet	P	QL(Allowed 2 per Rx)

Drug Name	Tier	Drug Restriction
fluconazole 200 mg tablet	P	QL(Allowed 2 per 1 day)
fluconazole 200 mg/100 mL in dextrose (iso-osm) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
fluconazole 200 mg/100 mL in sod. chloride (iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
fluconazole 40 mg/mL oral suspension	P	QL(Allowed 70 per Rx)
fluconazole 400 mg/200 mL in dextrose (iso-osm) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
fluconazole 400 mg/200 mL in sod. chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
fluconazole 50 mg tablet	P	QL(Allowed 7 per Rx)
itraconazole 10 mg/mL oral solution	NP	PA
itraconazole 100 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Noxafil 100 mg tablet,delayed release	NP	PA
Noxafil 200 mg/5 mL (40 mg/mL) oral suspension	NP	PA
posaconazole 100 mg tablet,delayed release	NP	PA
Sporanox 10 mg/mL oral solution	NP	PA
Sporanox 100 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Sporanox Pulsepak 100 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Tolsura 65 mg oral solid dispersion capsule	NP	PA
Vfend 200 mg tablet	NP	PA
Vfend 200 mg/5 mL (40 mg/mL) oral suspension	NP	PA
Vfend 50 mg tablet	NP	PA
voriconazole 200 mg tablet	NP	PA
voriconazole 200 mg/5 mL (40 mg/mL) oral suspension	NP	PA
voriconazole 50 mg tablet	NP	PA
ANTIFUNGAL OTHER		

Drug Name	Tier	Drug Restriction
griseofulvin microsize 125 mg/5 mL oral suspension	P	
griseofulvin microsize 500 mg tablet	P	
griseofulvin ultramicrosize 125 mg tablet	P	
griseofulvin ultramicrosize 250 mg tablet	P	
ANTILEPROTIC - IMMUNOMODULATORS		
Thalomid 100 mg capsule	NP	PA; SP
Thalomid 150 mg capsule	NP	PA; SP
Thalomid 200 mg capsule	NP	PA; SP
Thalomid 50 mg capsule	NP	PA; SP
ANTILEPROTIC - SULFONE AGENTS		
dapsone 100 mg tablet	P	
dapsone 25 mg tablet	P	
ANTIMALARIAL COMBINATIONS		
atovaquone 250 mg-proguanil 100 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
atovaquone-proguanil (pediatric) 62.5 mg-25 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Coartem 20 mg-120 mg tablet	NP	PA; QL(Allowed 24 per Rx)
Malarone 250 mg-100 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Malarone Pediatric 62.5 mg-25 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
ANTIMALARIALS		
chloroquine 250 mg tablet	P	QL(Allowed 2 per 1 day)
chloroquine 500 mg tablet	P	QL(QL Overtime: Allowed 8 over 56 days)
Daraprim 25 mg tablet	NP	PA; SP
hydroxychloroquine 200 mg tablet	P	MT
Krintafel 150 mg tablet	NP	PA; QL(QL Overtime: Allowed 2 over 30 days)
mefloquine 250 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
primaquine 26.3 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
pyrimethamine 25 mg tablet	NP	PA; SP
Qualaquin 324 mg capsule	NP	PA

P Preferred Drug | NP Non-Preferred | AL Age Limit | PA Prior Authorization | APA Advanced Prior Authorization | QL Quantity Limit | SP Specialty Drug | ST Step Therapy | RX/OTC Both RX and OTC NDCs | MT Maintenance Therapy

Drug Name	Tier	Drug Restriction
quinine 324 mg capsule	NP	PA
ANTIPROTOZOAL AGENTS - NITROFURAN DERIVATIVES		
Lampit 120 mg tablet	NP	PA
Lampit 30 mg tablet	NP	PA
ANTIPROTOZOAL AGENTS - NITROIMIDAZOLE DERIVATIVES		
benznidazole 100 mg tablet	NP	PA; SP
benznidazole 12.5 mg tablet	NP	PA; SP
ANTIPROTOZOAL AGENTS - OTHER		
atovaquone 750 mg/5 mL oral suspension	P	
Mepron 750 mg/5 mL oral suspension	NP	PA
ANTIPROTOZOAL AGENTS (ANTIPARASITIC) - 5-NITROTHIAZOLYL DERIVATIVES		
nitazoxanide 500 mg tablet	NP	PA
ANTIPROTOZOAL-ANTIBACTERIAL 1ST GENERATION 2-METHYL-5-NITROIMIDAZOLE		
Flagyl 250 mg tablet	NP	PA
Flagyl 375 mg capsule	NP	PA
Flagyl 500 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Metro I.V. 500 mg/100 mL intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
metronidazole 250 mg tablet	P	
metronidazole 375 mg capsule	NP	PA
metronidazole 500 mg tablet	P	
metronidazole 500 mg/100 mL-sodium chloride(iso) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ANTIPROTOZOAL-ANTIBACTERIAL 2ND GENERATION 2-METHYL-5-NITROIMIDAZOLE		
Solosec 2 gram oral DR granules in packet	NP	PA
tinidazole 250 mg tablet	NP	PA
tinidazole 500 mg tablet	NP	PA
ANTIRETROVIRAL - ANTI-CD4 DOMAIN 2 MONOCLONAL ANTIBODY		
Trogarzo 200 mg/1.33 mL (150 mg/mL) intravenous solution	P	PA; SP; MT
ANTIRETROVIRAL - CCR5 CO-RECEPTOR ANTAGONIST		
Selzentry 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Selzentry 20 mg/mL oral solution	NP	PA; QL(Allowed 35 per 1 day); MT
Selzentry 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Selzentry 300 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Selzentry 75 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
ANTIRETROVIRAL - CD4 ATTACHMENT INHIBITORS		
Rukobia 600 mg tablet,extended release	NP	PA; MT
ANTIRETROVIRAL - HIV-1 FUSION INHIBITORS		
Fuzeon 90 mg subcutaneous solution	NP	PA; SP; MT
ANTIRETROVIRAL - HIV-1 INTEGRASE STRAND TRANSFER INHIBITORS		
Isentress 100 mg chewable tablet	P	QL(Allowed 6 per 1 day); MT
Isentress 100 mg oral powder packet	P	QL(Allowed 2 per 1 day); MT
Isentress 25 mg chewable tablet	P	QL(Allowed 12 per 1 day); MT
Isentress 400 mg tablet	P	QL(Allowed 2 per 1 day); MT
Isentress HD 600 mg tablet	P	QL(Allowed 2 per 1 day); MT
Tivicay 10 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
Tivicay 25 mg tablet	P	MT
Tivicay 50 mg tablet	P	MT
Tivicay PD 5 mg tablet for oral suspension	P	MT
Vocabria 30 mg tablet	NP	PA
ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NNRTI COMBINATIONS		
Juluca 50 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NRTI COMBINATIONS		
Dovato 50 mg-300 mg tablet	P	MT
ANTIRETROVIRAL - NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIB (NNRTI)		
Edurant 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
efavirenz 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
efavirenz 50 mg capsule	P	QL(Allowed 2 per 1 day); MT
efavirenz 600 mg tablet	P	QL(Allowed 1 per 1 day); MT
Intelence 100 mg tablet	P	QL(Allowed 4 per 1 day); MT
Intelence 200 mg tablet	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Intelence 25 mg tablet	P	QL(Allowed 4 per 1 day); MT
nevirapine 200 mg tablet	P	QL(Allowed 2 per 1 day); MT
nevirapine 50 mg/5 mL oral suspension	P	QL(Allowed 40 per 1 day); MT
nevirapine ER 100 mg tablet,extended release 24 hr	P	QL(Allowed 3 per 1 day); MT
nevirapine ER 400 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
Pifeltro 100 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Sustiva 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
Sustiva 50 mg capsule	P	QL(Allowed 2 per 1 day); MT
Sustiva 600 mg tablet	P	QL(Allowed 1 per 1 day); MT
Viramune 200 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Viramune 50 mg/5 mL oral suspension	P	MT
Viramune XR 400 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIRETROVIRAL - NUCLEOSIDE AND NUCLEOTIDE ANALOG RTIS COMBINATIONS		
Cimduo 300 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Descovy 200 mg-25 mg tablet	P	QL(Allowed 1 per 1 day); MT
emtricitabine 100 mg-tenofovir disoproxil fumarate 150 mg tablet	P	MT
emtricitabine 133 mg-tenofovir disoproxil fumarate 200 mg tablet	P	MT
emtricitabine 167 mg-tenofovir disoproxil fumarate 250 mg tablet	P	MT
emtricitabine 200 mg-tenofovir disoproxil fumarate 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Temixys 300 mg-300 mg tablet	NP	PA; MT
Truvada 100 mg-150 mg tablet	P	MT
Truvada 133 mg-200 mg tablet	P	MT
Truvada 167 mg-250 mg tablet	P	MT
Truvada 200 mg-300 mg tablet	P	QL(Allowed 1 per 1 day); MT
ANTIRETROVIRAL - NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI)		
abacavir 20 mg/mL oral solution	P	QL(Allowed 30 per 1 day); MT
abacavir 300 mg tablet	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
didanosine 250 mg capsule,delayed release	P	QL(Allowed 1 per 1 day); MT
didanosine 400 mg capsule,delayed release	P	QL(Allowed 1 per 1 day); MT
emtricitabine 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
Emtriva 10 mg/mL oral solution	P	QL(Allowed 24 per 1 day); MT
Emtriva 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
Epivir 10 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day); MT
Epivir 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Epivir 300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
lamivudine 10 mg/mL oral solution	P	QL(Allowed 30 per 1 day); MT
lamivudine 150 mg tablet	P	QL(Allowed 2 per 1 day); MT
lamivudine 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Retrovir 10 mg/mL oral syrup	NP	PA; QL(Allowed 60 per 1 day); MT
Retrovir 100 mg capsule	NP	PA; QL(Allowed 6 per 1 day); MT
stavudine 15 mg capsule	P	QL(Allowed 2 per 1 day); MT
stavudine 20 mg capsule	P	QL(Allowed 2 per 1 day); MT
stavudine 30 mg capsule	P	QL(Allowed 2 per 1 day); MT
stavudine 40 mg capsule	P	QL(Allowed 2 per 1 day); MT
Videx EC 125 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Videx EC 200 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Videx EC 250 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Videx EC 400 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Ziagen 20 mg/mL oral solution	P	QL(Allowed 30 per 1 day); MT
Ziagen 300 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
zidovudine 10 mg/mL oral syrup	P	QL(Allowed 60 per 1 day); MT
zidovudine 100 mg capsule	P	QL(Allowed 6 per 1 day); MT
zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day); MT
ANTIRETROVIRAL - NUCLEOTIDE ANALOG REVERSE TRANSCRIPTASE INHIBITORS		
tenofovir disoproxil fumarate 300 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Viread 150 mg tablet	P	QL(Allowed 1 per 1 day); MT
Viread 200 mg tablet	P	QL(Allowed 1 per 1 day); MT
Viread 250 mg tablet	P	QL(Allowed 1 per 1 day); MT
Viread 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Viread 40 mg/scoop (40 mg/gram) oral powder	P	QL(Allowed 8 per 1 day); MT
ANTIRETROVIRAL COMBINATIONS - PROTEASE INHIBITORS		
Kaletra 100 mg-25 mg tablet	P	QL(Allowed 4 per 1 day); MT
Kaletra 200 mg-50 mg tablet	P	QL(Allowed 6 per 1 day); MT
Kaletra 400 mg-100 mg/5 mL oral solution	NP	PA; QL(Allowed 10.67 per 1 day); MT
lopinavir-ritonavir 400 mg-100 mg/5 mL oral solution	P	QL(Allowed 10.67 per 1 day); MT
ANTIRETROVIRAL- NUCLEOSIDE AND NUCLEOTIDE ANALOGS,PROTEASE INHIBITORS		
Symtuza 800 mg-150 mg-200 mg-10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIRETROVIRAL-INTEGRASE INHIBITOR,NUCLEOSIDE AND NUCLEOTIDE RTIS COMB		
Biktarvy 50 mg-200 mg-25 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Genvoya 150 mg-150 mg-200 mg-10 mg tablet	P	QL(Allowed 1 per 1 day); MT
Stribild 150 mg-150 mg-200 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIRETROVIRAL-NUCLEOSIDE ANALOGS AND INTEGRASE INHIBITOR COMBINATIONS		
Triumeq 600 mg-50 mg-300 mg tablet	P	MT
ANTIRETROVIRAL-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI) COMB		
abacavir 300 mg-lamivudine 150 mg-zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day); MT
abacavir 600 mg-lamivudine 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Combivir 150 mg-300 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Epzicom 600 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
lamivudine 150 mg-zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day); MT
Trizivir 300 mg-150 mg-300 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
ANTIRETROVIRAL-NUCLEOSIDE, NUCLEOTIDE ANALOGS AND NON-NUCLEOSIDE RTI		
Atripla 600 mg-200 mg-300 mg tablet	P	QL(Allowed 1 per 1 day); MT

P Preferred Drug | NP Non-Preferred | AL Age Limit | PA Prior Authorization | APA Advanced Prior Authorization | QL Quantity Limit | SP Specialty Drug | ST Step Therapy | RX/OTC Both RX and OTC NDCs | MT Maintenance Therapy

Drug Name	Tier	Drug Restriction
Complera 200 mg-25 mg-300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Delstrigo 100 mg-300 mg-300 mg tablet	P	QL(Allowed 1 per 1 day); MT
efavirenz 400 mg-lamivudine 300 mg-tenofovir disoproxil 300 mg tablet	NP	PA; MT
efavirenz 600 mg-emtricitabine 200 mg-tenofovir disoprox 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
efavirenz 600 mg-lamivudine 300 mg-tenofovir disoproxil 300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Odefsey 200 mg-25 mg-25 mg tablet	P	QL(Allowed 1 per 1 day); MT
Symfi 600 mg-300 mg-300 mg tablet	P	QL(Allowed 1 per 1 day); MT
Symfi Lo 400 mg-300 mg-300 mg tablet	P	MT
ANTITUBERCULAR - AMINOBENZOIC ACID ANALOGS		
Paser 4 gram granules delayed-release packet	NP	PA
ANTITUBERCULAR - D-ALANINE ANALOGS		
cycloserine 250 mg capsule	P	
ANTITUBERCULAR - DIARYLQUINOLINE ANTIBIOTICS		
Sirturo 100 mg tablet	NP	PA
Sirturo 20 mg tablet	NP	PA
ANTITUBERCULAR - ISONICOTINIC ACID DERIVATIVES		
isoniazid 100 mg tablet	P	
isoniazid 300 mg tablet	P	
isoniazid 50 mg/5 mL oral solution	P	MT
ANTITUBERCULAR - NIACINAMIDE DERIVATIVES		
pyrazinamide 500 mg tablet	P	
ANTITUBERCULAR - NITROIMIDAZOLE DERIVATIVES		
pretomanid 200 mg tablet	NP	PA
ANTITUBERCULAR - RIFAMYCIN AND DERIVATIVES		
Mycobutin 150 mg capsule	NP	PA
Priftin 150 mg tablet	NP	PA
rifabutin 150 mg capsule	P	
rifampin 150 mg capsule	P	
rifampin 300 mg capsule	P	
ANTITUBERCULAR AGENTS OTHER		

Drug Name	Tier	Drug Restriction
ethambutol 100 mg tablet	P	
ethambutol 400 mg tablet	P	
Myambutol 400 mg tablet	NP	PA
Trecator 250 mg tablet	P	
CARBAPENEM ANTIBIOTIC COMBINATIONS		
imipenem-cilastatin 250 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
imipenem-cilastatin 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Primaxin 250 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Primaxin 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
CARBAPENEM ANTIBIOTICS (THIENAMYCINS)		
Doribax 250 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Doribax 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
doripenem 250 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
doripenem 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ertapenem 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); SP
Invanz 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Invanz 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); SP; Use Generic Products
meropenem 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
meropenem 1 gram/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
meropenem 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
meropenem 500 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Merrem 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Merrem 500 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products

Drug Name	Tier	Drug Restriction
CEPHALOSPORIN ANTIBIOTIC AND BETA-LACTAMASE INHIBITOR COMBINATIONS		
Avycaz 2.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
CEPHALOSPORIN ANTIBIOTICS - 1ST GENERATION		
cefadroxil 1 gram tablet	P	
cefadroxil 250 mg/5 mL oral suspension	P	
cefadroxil 500 mg capsule	P	
cefadroxil 500 mg/5 mL oral suspension	P	
cefazolin 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 1 gram/10 mL in 0.9 % sodium chloride intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 1 gram/10 mL in sterile water intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 1 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 10 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 100 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/10 mL in 0.9 % sodium chloride intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/100 mL in 0.9 % sodium chloride intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/100 mL in dextrose(iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/20 mL in sterile water intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/50 mL in 0.9 % sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 2 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
cefazolin 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 20 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 3 gram/100 mL in 0.9 % sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 300 g solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefazolin 500 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cephalexin 125 mg/5 mL oral suspension	P	
cephalexin 250 mg capsule	P	
cephalexin 250 mg tablet	P	
cephalexin 250 mg/5 mL oral suspension	P	
cephalexin 500 mg capsule	P	
cephalexin 500 mg tablet	P	
cephalexin 750 mg capsule	P	
Keflex 750 mg capsule	NP	PA
CEPHALOSPORIN ANTIBIOTICS - 2ND GENERATION		
cefaclor 125 mg/5 mL oral suspension	P	
cefaclor 250 mg capsule	P	
cefaclor 250 mg/5 mL oral suspension	P	
cefaclor 375 mg/5 mL oral suspension	P	
cefaclor 500 mg capsule	P	
cefaclor ER 500 mg tablet,extended release,12 hr	NP	PA
cefoxitin 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
cefoxitin 1 gram/50 mL in dextrose, iso-osmotic intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefoxitin 10 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
cefoxitin 2 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
cefoxitin 2 gram/50 mL in dextrose(iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefprozil 125 mg/5 mL oral suspension	P	QL(Allowed 200 per Rx)
cefprozil 250 mg tablet	NP	PA; QL(Allowed 20 per Rx)
cefprozil 250 mg/5 mL oral suspension	P	QL(Allowed 100 per Rx)
cefprozil 500 mg tablet	NP	PA; QL(Allowed 20 per Rx)
cefuroxime axetil 250 mg tablet	P	QL(Allowed 20 per Rx)
cefuroxime axetil 500 mg tablet	P	QL(Allowed 20 per Rx)
CEPHALOSPORIN ANTIBIOTICS - 3RD GENERATION		
cefdinir 125 mg/5 mL oral suspension	P	QL(Allowed 100 per Rx)
cefdinir 250 mg/5 mL oral suspension	P	QL(Allowed 100 per Rx)
cefdinir 300 mg capsule	P	QL(Allowed 20 per Rx)
cefixime 100 mg/5 mL oral suspension	NP	PA
cefixime 200 mg/5 mL oral suspension	NP	PA
cefixime 400 mg capsule	P	

Drug Name	Tier	Drug Restriction
cefpodoxime 100 mg tablet	NP	PA
cefpodoxime 100 mg/5 mL oral suspension	NP	PA
cefpodoxime 200 mg tablet	NP	PA
cefpodoxime 50 mg/5 mL oral suspension	NP	PA
ceftazidime 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftazidime 1 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftazidime 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftazidime 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftazidime 6 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
ceftriaxone 1 gram/50 mL in dextrose (iso-osmot) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 10 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 100 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 2 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 2 gram/50 mL in dextrose (iso-osm) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 250 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
ceftriaxone 500 mg solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
Fortaz 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Fortaz 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Fortaz 1 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Fortaz 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Fortaz 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Suprax 100 mg chewable tablet	NP	PA
Suprax 100 mg/5 mL oral suspension	NP	PA
Suprax 200 mg chewable tablet	NP	PA
Suprax 200 mg/5 mL oral suspension	NP	PA
Suprax 400 mg capsule	P	
Suprax 500 mg/5 mL oral suspension	NP	PA
Tazicef 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Tazicef 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Tazicef 2 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Tazicef 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Tazicef 6 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
CEPHALOSPORIN ANTIBIOTICS - 4TH GENERATION		
cefepime 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefepime 1 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefepime 1 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefepime 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
cefepime 2 gram/100 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
cefepime 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Maxipime 1 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Maxipime 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Maxipime 2 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Maxipime 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
CMV ANTIVIRAL AGENT - NUCLEOSIDE ANALOGS		
Valcyte 450 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Valcyte 50 mg/mL oral solution	NP	PA
valganciclovir 450 mg tablet	P	QL(Allowed 2 per 1 day)
valganciclovir 50 mg/mL oral solution	NP	PA
CMV ANTIVIRAL AGENT - TERMINASE COMPLEX INHIBITORS		
Prevymis 240 mg tablet	NP	PA; SP
Prevymis 480 mg tablet	NP	PA; SP
FLUOROQUINOLONE ANTIBIOTICS		
Avelox 400 mg tablet	NP	PA
Baxdela 450 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Cipro 250 mg tablet	NP	PA
Cipro 250 mg/5 mL oral suspension	NP	PA
Cipro 400 mg/200 mL in dextrose 5 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Cipro 500 mg tablet	NP	PA
Cipro 500 mg/5 mL oral suspension	NP	PA
ciprofloxacin 100 mg tablet	P	QL(Allowed 6 per Rx)
ciprofloxacin 200 mg/100 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ciprofloxacin 200 mg/20 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ciprofloxacin 250 mg tablet	P	
ciprofloxacin 250 mg/5 mL oral suspension	P	
ciprofloxacin 400 mg/200 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
ciprofloxacin 400 mg/40 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
ciprofloxacin 500 mg tablet	P	
ciprofloxacin 500 mg/5 mL oral suspension	P	
ciprofloxacin 750 mg tablet	P	
levofloxacin 25 mg/mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
levofloxacin 250 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 14 days supply(ies) per claim))
levofloxacin 250 mg/10 mL oral solution	P	
levofloxacin 250 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
levofloxacin 500 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 14 days supply(ies) per claim))
levofloxacin 500 mg/100 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
levofloxacin 750 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 14 days supply(ies) per claim))
levofloxacin 750 mg/150 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
moxifloxacin 400 mg tablet	NP	PA
ofloxacin 300 mg tablet	NP	PA
ofloxacin 400 mg tablet	NP	PA; QL(Allowed 56 per Rx)
GLYCOPEPTIDE ANTIBIOTICS		
Firvanq 25 mg/mL oral solution	NP	PA; QL(Allowed 300 per Rx)
Firvanq 50 mg/mL oral solution	NP	PA
Vancocin 125 mg capsule	NP	PA; QL(Allowed 4 per 1 day)
Vancocin 250 mg capsule	NP	PA; QL(Allowed 8 per 1 day)
vancomycin 125 mg capsule	P	QL(Allowed 4 per 1 day)
vancomycin 250 mg capsule	P	QL(Allowed 8 per 1 day)
vancomycin 50 mg/mL oral solution	P	
HEPATITIS B TREATMENT- NUCLEOSIDE ANALOGS (ANTIVIRAL)		

Drug Name	Tier	Drug Restriction
Baraclude 0.05 mg/mL oral solution	NP	PA
Baraclude 0.5 mg tablet	NP	PA
Baraclude 1 mg tablet	NP	PA
entecavir 0.5 mg tablet	P	
entecavir 1 mg tablet	P	
Epivir HBV 100 mg tablet	NP	PA
Epivir HBV 25 mg/5 mL (5 mg/mL) oral solution	NP	PA
lamivudine 100 mg tablet	NP	PA
HEPATITIS B TREATMENT- NUCLEOTIDE ANALOGS (ANTIVIRAL)		
adefovir 10 mg tablet	NP	PA
Hepsera 10 mg tablet	NP	PA
Vemlidy 25 mg tablet	NP	PA; SP
HEPATITIS C - INTERFERONS		
Pegasys 180 mcg/0.5 mL subcutaneous syringe	NP	PA; SP

Drug Name	Tier	Drug Restriction
Pegasys 180 mcg/mL subcutaneous solution	NP	PA; SP
PegIntron 50 mcg/0.5 mL subcutaneous kit	P	PA; SP
HEPATITIS C - NS5A INHIBITOR AND NS3/4A PROTEASE INHIBITOR COMBINATION		
Mavyret 100 mg-40 mg tablet	P	PA; QL(Allowed 3 per 1 day); SP
Zepatier 50 mg-100 mg tablet	NP	PA; SP
HEPATITIS C - NS5A, NS3/4A PROTEASE, NUCLEO.NS5B POLYMERASE INHIB COMB		
Vosevi 400 mg-100 mg-100 mg tablet	NP	PA; SP
HEPATITIS C - NS5B POLYMERASE AND NS5A INHIBITOR COMBINATIONS		
Epclusa 200 mg-50 mg tablet	NP	PA; SP
Epclusa 400 mg-100 mg tablet	NP	PA; SP
Harvoni 33.75 mg-150 mg oral pellets in packet	NP	PA; SP
Harvoni 45 mg-200 mg oral pellets in packet	NP	PA; SP
Harvoni 45 mg-200 mg tablet	NP	PA; SP
Harvoni 90 mg-400 mg tablet	NP	PA; SP
ledipasvir 90 mg-sofosbuvir 400 mg tablet	NP	PA; SP
sofosbuvir 400 mg-velpatasvir 100 mg tablet	P	PA; SP
HEPATITIS C - NUCLEOS(T)IDE ANALOG NS5B POLYMERASE INHIBITORS		
Sovaldi 150 mg oral pellets in packet	NP	PA; SP
Sovaldi 200 mg oral pellets in packet	NP	PA; SP
Sovaldi 200 mg tablet	NP	PA; SP
Sovaldi 400 mg tablet	NP	PA; SP
HEPATITIS C - NUCLEOSIDE ANALOGS		
Moderiba Dose Pack 400 mg (7)-400 mg (7) tablets	NP	PA
Moderiba Dose Pack 600 mg (7)-600 mg (7) tablets	NP	PA
ribavirin 200 mg capsule	P	SP
ribavirin 200 mg tablet	P	SP
HEPATITIS C- NS5A, NS3/4A PROTEASE AND NON-NUCLEO.NS5B POLY INH. COMB		
Viekira Pak 12.5 mg-75 mg-50 mg/250 mg tablets in a dose pack	NP	PA; SP

Drug Name	Tier	Drug Restriction
HERPES ANTIVIRAL AGENT - PURINE ANALOGS		
acyclovir 200 mg capsule	P	QL(QL Overtime: Allowed 50 over 30 days)
acyclovir 200 mg/5 mL oral suspension	P	QL(QL Overtime: Allowed 400 over 30 days)
acyclovir 400 mg tablet	P	QL(Allowed 3 per 1 day)
acyclovir 800 mg tablet	P	QL(QL Overtime: Allowed 50 over 30 days)
Sitavig 50 mg buccal tablet	NP	PA
valacyclovir 1 gram tablet	P	QL(QL Overtime: Allowed 42 over 21 days)
valacyclovir 500 mg tablet	P	QL(Allowed 2 per 1 day)
Valtrex 1 gram tablet	NP	PA; QL(QL Overtime: Allowed 42 over 21 days)
Valtrex 500 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Zovirax 200 mg/5 mL oral suspension	NP	PA; QL(QL Overtime: Allowed 400 over 30 days)
HERPES ANTIVIRAL AGENT - THYMIDINE ANALOGS		
famciclovir 125 mg tablet	NP	PA
famciclovir 250 mg tablet	NP	PA
famciclovir 500 mg tablet	NP	PA
INFLUENZA ANTIVIRAL AGENTS - NEURAMINIDASE INHIBITORS		
oseltamivir 30 mg capsule	P	QL(QL Overtime: Allowed 20 over 30 days)
oseltamivir 45 mg capsule	P	QL(QL Overtime: Allowed 10 over 30 days)
oseltamivir 6 mg/mL oral suspension	P	QL(QL Overtime: Allowed 120 over 30 days)
oseltamivir 75 mg capsule	P	QL(QL Overtime: Allowed 10 over 30 days); QL(Limit 1 fill(s) per 180 days)
Relenza Diskhaler 5 mg/actuation powder for inhalation	P	QL(Allowed 20 per Rx)
Tamiflu 30 mg capsule	NP	PA; QL(QL Overtime: Allowed 20 over 30 days)
Tamiflu 45 mg capsule	NP	PA; QL(QL Overtime: Allowed 10 over 30 days)
Tamiflu 6 mg/mL oral suspension	NP	PA; QL(QL Overtime: Allowed 120 over 30 days)
Tamiflu 75 mg capsule	NP	PA; QL(QL Overtime: Allowed 10 over 30 days); QL(Limit 1 fill(s) per 180 days)
INFLUENZA ANTIVIRAL AGENTS - PA ENDONUCLEASE INHIBITOR		
Xofluza 20 mg tablet	NP	PA
Xofluza 40 mg tablet	NP	PA
INFLUENZA-A ANTIVIRAL AGENTS		
Flumadine 100 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
rimantadine 100 mg tablet	NP	PA
LINCOSAMIDE ANTIBIOTICS		
	P	QL(Allowed 300 per Rx)
Cleocin 150 mg/mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Cleocin 300 mg/2 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Cleocin 300 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Cleocin 600 mg/4 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Cleocin 600 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Cleocin 900 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Cleocin 900 mg/6 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Cleocin HCl 150 mg capsule	NP	PA
Cleocin HCl 300 mg capsule	NP	PA
Cleocin HCl 75 mg capsule	NP	PA
Cleocin Pediatric 75 mg/5 mL oral solution	NP	PA; QL(Allowed 300 per Rx)
Clin Single Use 150 mg/mL injection kit	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 150 mg/mL injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 300 mg/2 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 300 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 300 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 600 mg/4 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 600 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
clindamycin 600 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 900 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 900 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin 900 mg/6 mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
clindamycin HCl 150 mg capsule	P	
clindamycin HCl 300 mg capsule	P	
clindamycin HCl 75 mg capsule	P	
Clindamycin Pediatric 75 mg/5 mL oral solution	P	QL(Allowed 300 per Rx)
MACROLIDE ANTIBIOTICS		
azithromycin 1 gram oral packet	P	QL(Allowed 2 per Rx)
azithromycin 100 mg/5 mL oral suspension	P	QL(Allowed 15 per Rx)
azithromycin 200 mg/5 mL oral suspension	P	QL(Allowed 60 per Rx)
azithromycin 250 mg tablet	P	QL(Allowed 6 per Rx)
azithromycin 500 mg tablet	P	QL(Allowed 4 per 1 day)
azithromycin 600 mg tablet	P	QL(QL Overtime: Allowed 8 over 28 days)
clarithromycin 125 mg/5 mL oral suspension	P	QL(Allowed 100 per Rx)
clarithromycin 250 mg tablet	P	QL(Allowed 28 per Rx)
clarithromycin 250 mg/5 mL oral suspension	P	QL(Allowed 200 per Rx)
clarithromycin 500 mg tablet	P	QL(Allowed 28 per Rx)
clarithromycin ER 500 mg tablet,extended release 24 hr	P	QL(Allowed 14 per Rx)
Dificid 200 mg tablet	NP	PA
Dificid 40 mg/mL oral suspension	NP	PA
E.E.S. 400 mg tablet	P	
E.E.S. Granules 200 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
EryPed 200 200 mg/5 mL oral suspension	P	
EryPed 400 mg/5 mL oral suspension	P	
Ery-Tab 250 mg tablet,delayed release	P	
Ery-Tab 333 mg tablet,delayed release	P	
Ery-Tab 500 mg tablet,delayed release	P	
Erythrocin (as stearate) 250 mg tablet	P	
erythromycin 250 mg capsule,delayed release	P	
erythromycin 250 mg tablet	P	
erythromycin 250 mg tablet,delayed release	P	
erythromycin 333 mg tablet,delayed release	P	
erythromycin 500 mg tablet	P	
erythromycin 500 mg tablet,delayed release	P	
erythromycin ethylsuccinate 200 mg/5 mL oral powder for suspension	P	
erythromycin ethylsuccinate 400 mg tablet	P	
erythromycin ethylsuccinate 400 mg/5 mL oral powder for suspension	P	
PCE 333 mg particles in tablet	P	
PCE 500 mg particles in tablet	P	
Zithromax 1 gram oral packet	P	
Zithromax 100 mg/5 mL oral suspension	NP	PA; QL(Allowed 15 per Rx)
Zithromax 200 mg/5 mL oral suspension	NP	PA; QL(Allowed 60 per Rx)
Zithromax 250 mg tablet	NP	PA; QL(Allowed 6 per Rx)
Zithromax 500 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Zithromax TRI-PAK 500 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Zithromax Z-Pak 250 mg tablet	NP	PA; QL(Allowed 6 per Rx)

Drug Name	Tier	Drug Restriction
MISC ANTI-INFECTIVE		
Nebupent 300 mg solution for inhalation	P	
pentamidine 300 mg solution for inhalation	P	
MONOBACTAM ANTIBIOTICS		
Azactam 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Azactam 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
aztreonam 1 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
aztreonam 2 gram solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
OXAZOLIDINONE ANTIBIOTICS		
linezolid 100 mg/5 mL oral suspension	NP	PA
linezolid 600 mg tablet	NP	PA
Sivextro 200 mg tablet	NP	PA; QL(Allowed 6 per Rx)
Zyvox 100 mg/5 mL oral suspension	NP	PA
Zyvox 600 mg tablet	NP	PA
PENICILLIN ANTIBIOTIC - NATURAL		

Drug Name	Tier	Drug Restriction
Bicillin L-A 1,200,000 unit/2 mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Bicillin L-A 2,400,000 unit/4 mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Bicillin L-A 600,000 unit/mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G benzathine 600,000 unit/mL intramuscular syringe	P	
penicillin G pot 1 million unit/50 mL-dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G pot 2 million unit/50 mL-dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G pot 3 million unit/50 mL-dextrose intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G potassium 20 million unit solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
penicillin G potassium 5 million unit solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G procaine 1.2 million unit/2 mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G procaine 600,000 unit/mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin G sodium 5 million unit solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim))
penicillin V potassium 125 mg/5 mL oral solution	P	
penicillin V potassium 250 mg tablet	P	
penicillin V potassium 250 mg/5 mL oral solution	P	
penicillin V potassium 500 mg tablet	P	
Pfizerpen-G 20 million unit solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Pfizerpen-G 5 million unit solution for injection	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
PENICILLIN ANTIBIOTIC - PENICILLINASE-RESISTANT		
dicloxacillin 250 mg capsule	P	
dicloxacillin 500 mg capsule	P	
PENICILLIN ANTIBIOTIC, EXTENDED-SPECTRUM AND BETA-LACTAMASE INHIB COMB		
piperacillin-tazobactam 13.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
piperacillin-tazobactam 2.25 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
piperacillin-tazobactam 3.375 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
piperacillin-tazobactam 4.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
piperacillin-tazobactam 40.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Zosyn 2.25 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products

Drug Name	Tier	Drug Restriction
Zosyn 2.25 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Zosyn 3.375 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Zosyn 3.375 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Zosyn 4.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
Zosyn 4.5 gram/100 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
Zosyn 40.5 gram intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
PENICILLIN NATURAL ANTIBIOTIC COMBINATIONS - EXTENDED RELEASE		
Bicillin C-R 1,200,000 unit/2 mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Bicillin C-R 900,000 unit-300k unit/2 mL intramuscular syringe	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
PLEUROMUTILIN ANTIBIOTICS		
Xenleta 600 mg tablet	NP	PA; SP
PROTEASE INHIBITORS (NON-PEPTIDIC) ANTIRETROVIRAL		
Aptivus (with vitamin E) 100 mg/mL oral solution	P	ST; QL(Allowed 10 per 1 day); MT
Aptivus 250 mg capsule	P	ST; QL(Allowed 4 per 1 day); MT
Prezcobix 800 mg-150 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Prezista 100 mg/mL oral suspension	P	ST; QL(Allowed 12 per 1 day); MT
Prezista 150 mg tablet	P	ST; QL(Allowed 3 per 1 day); MT
Prezista 600 mg tablet	P	ST; QL(Allowed 2 per 1 day); MT
Prezista 75 mg tablet	P	ST; QL(Allowed 2 per 1 day); MT
Prezista 800 mg tablet	P	ST; QL(Allowed 1 per 1 day); MT
PROTEASE INHIBITORS (PEPTIDIC) ANTIRETROVIRAL		
atazanavir 150 mg capsule	P	QL(Allowed 2 per 1 day); MT
atazanavir 200 mg capsule	P	QL(Allowed 2 per 1 day); MT
atazanavir 300 mg capsule	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Crixivan 400 mg capsule	P	QL(Allowed 6 per 1 day); MT
Evotaz 300 mg-150 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
fosamprenavir 700 mg tablet	P	QL(Allowed 4 per 1 day); MT
Invirase 500 mg tablet	P	ST; QL(Allowed 4 per 1 day); MT
Lexiva 50 mg/mL oral suspension	P	QL(Allowed 56 per 1 day); MT
Lexiva 700 mg tablet	P	QL(Allowed 4 per 1 day); MT
Norvir 100 mg oral powder packet	P	MT
Norvir 100 mg tablet	P	QL(Allowed 12 per 1 day); MT
Norvir 80 mg/mL oral solution	P	QL(Allowed 15 per 1 day); MT
Reyataz 150 mg capsule	P	QL(Allowed 2 per 1 day); MT
Reyataz 200 mg capsule	P	QL(Allowed 2 per 1 day); MT
Reyataz 300 mg capsule	P	QL(Allowed 2 per 1 day); MT
Reyataz 50 mg oral powder packet	P	QL(Allowed 6 per 1 day); MT
ritonavir 100 mg tablet	P	QL(Allowed 12 per 1 day); MT
Viracept 250 mg tablet	P	QL(Allowed 9 per 1 day); MT
Viracept 625 mg tablet	P	QL(Allowed 4 per 1 day); MT
RESPIRATORY SYNCYTIAL VIRUS (RSV) ANTIVIRAL AGENTS		
ribavirin 6 gram solution for inhalation	P	
Virazole 6 gram solution for inhalation	NP	PA
RIFAMYCINS AND RELATED DERIVATIVE ANTIBIOTICS		
Xifaxan 200 mg tablet	NP	PA
Xifaxan 550 mg tablet	NP	PA
SULFONAMIDE ANTIBIOTIC		
sulfadiazine 500 mg tablet	P	
TETRACYCLINE ANTIBIOTICS		
demeclocycline 150 mg tablet	P	
demeclocycline 300 mg tablet	P	
Doryx 200 mg tablet,delayed release	NP	PA
Doryx 50 mg tablet,delayed release	NP	PA
Doryx 80 mg tablet,delayed release	NP	PA

Drug Name	Tier	Drug Restriction
Doryx MPC 120 mg tablet, delayed release	NP	PA
Doxy-100 100 mg intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim)); Use Generic Products
doxycycline hyclate 100 mg capsule	P	
doxycycline hyclate 100 mg intravenous powder for solution	P	QL(QL (Limit 14 days supply(ies) per claim))
doxycycline hyclate 100 mg tablet	P	
doxycycline hyclate 100 mg tablet,delayed release	NP	PA
doxycycline hyclate 150 mg tablet	P	
doxycycline hyclate 150 mg tablet,delayed release	NP	PA
doxycycline hyclate 200 mg tablet,delayed release	NP	PA
doxycycline hyclate 50 mg capsule	P	
doxycycline hyclate 50 mg tablet,delayed release	NP	PA
doxycycline hyclate 75 mg tablet	P	
doxycycline hyclate 75 mg tablet,delayed release	NP	PA
doxycycline hyclate 80 mg tablet,delayed release	NP	PA
doxycycline monohydrate 100 mg capsule	P	
doxycycline monohydrate 100 mg tablet	P	
doxycycline monohydrate 150 mg capsule	P	
doxycycline monohydrate 150 mg tablet	P	
doxycycline monohydrate 25 mg/5 mL oral suspension	P	
doxycycline monohydrate 50 mg capsule	P	

Drug Name	Tier	Drug Restriction
doxycycline monohydrate 50 mg tablet	P	
doxycycline monohydrate 75 mg capsule	P	
doxycycline monohydrate 75 mg tablet	P	
Minocin 75 mg capsule	NP	PA
minocycline 100 mg capsule	P	
minocycline 100 mg tablet	P	
minocycline 50 mg capsule	P	
minocycline 50 mg tablet	P	
minocycline 75 mg capsule	P	
minocycline 75 mg tablet	P	
minocycline ER 105 mg tablet,extended release 24 hr	NP	PA
minocycline ER 115 mg tablet,extended release 24 hr	NP	PA
minocycline ER 135 mg tablet,extended release 24 hr	NP	PA
minocycline ER 45 mg tablet,extended release 24 hr	NP	PA
minocycline ER 55 mg tablet,extended release 24 hr	NP	PA
minocycline ER 65 mg tablet,extended release 24 hr	NP	PA
minocycline ER 80 mg tablet,extended release 24 hr	NP	PA
minocycline ER 90 mg tablet,extended release 24 hr	NP	PA
Minolira ER 105 mg tablet, extended release	NP	PA
Minolira ER 135 mg tablet, extended release	NP	PA
Morgidox 100 mg capsule	P	
Morgidox 1x 50 50 mg kit	NP	PA
Morgidox 1x100 100 mg kit	NP	PA
Morgidox 2x100 100 mg kit	NP	PA

Drug Name	Tier	Drug Restriction
Morgidox 50 mg capsule	P	
Nuzyra 150 mg tablet	NP	PA
Solodyn 105 mg tablet,extended release	NP	PA
Solodyn 115 mg tablet,extended release	NP	PA
Solodyn 55 mg tablet,extended release	NP	PA
Solodyn 65 mg tablet,extended release	NP	PA
Solodyn 80 mg tablet,extended release	NP	PA
tetracycline 250 mg capsule	P	
tetracycline 500 mg capsule	P	
Vibramycin 100 mg capsule	NP	PA
Vibramycin 25 mg/5 mL oral suspension	NP	PA
Vibramycin 50 mg/5 mL oral syrup	P	
Ximino 135 mg capsule, extended release	NP	PA
Ximino 45 mg capsule, extended release	NP	PA
Ximino 90 mg capsule, extended release	NP	PA
ANTINEOPLASTICS		
ANTINEOPLASIC-EPIDERM.GROWTH FACTOR-EGFR (ERBB1),HER-2 (ERBB2)R.INHIB		
lapatinib 250 mg tablet	NP	PA; SP
Tykerb 250 mg tablet	NP	PA; SP
ANTINEOPLASTIC - 1ST GENERATION EGFR TYROSINE KINASE INHIBITOR		
erlotinib 100 mg tablet	P	SP
erlotinib 150 mg tablet	P	SP
erlotinib 25 mg tablet	P	SP
Iressa 250 mg tablet	P	SP
Tarceva 100 mg tablet	NP	PA; SP
Tarceva 150 mg tablet	NP	PA; SP
Tarceva 25 mg tablet	NP	PA; SP
ANTINEOPLASTIC - 2ND GENERATION EGFR TYROSINE KINASE INHIBITOR		
Gilotrif 20 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Gilotrif 30 mg tablet	NP	PA; SP
Gilotrif 40 mg tablet	NP	PA; SP
Nerlynx 40 mg tablet	NP	PA; SP
Vizimpro 15 mg tablet	NP	PA; SP
Vizimpro 30 mg tablet	NP	PA; SP
Vizimpro 45 mg tablet	NP	PA; SP
ANTINEOPLASTIC - 3RD GENERATION EGFR TYROSINE KINASE INHIBITOR		
Tagrisso 40 mg tablet	NP	PA; SP
Tagrisso 80 mg tablet	NP	PA; SP
ANTINEOPLASTIC - ALKYLATING AGENT - ALKYL SULFONATES		
Myleran 2 mg tablet	P	
ANTINEOPLASTIC - ALKYLATING AGENT - METHYLHYDRAZINES		
Matulane 50 mg capsule	P	SP
ANTINEOPLASTIC - ALKYLATING AGENT - NITROGEN MUSTARDS		
Alkeran 2 mg tablet	NP	PA
cyclophosphamide 25 mg capsule	P	

Drug Name	Tier	Drug Restriction
cyclophosphamide 25 mg tablet	P	
cyclophosphamide 50 mg capsule	P	
cyclophosphamide 50 mg tablet	P	
Leukeran 2 mg tablet	P	
melphalan 2 mg tablet	P	
ANTINEOPLASTIC - ALKYLATING AGENT - NITROSOUREAS		
Gleostine 10 mg capsule	P	
Gleostine 100 mg capsule	P	
Gleostine 40 mg capsule	P	
Gleostine 5 mg capsule	P	
ANTINEOPLASTIC - ALKYLATING AGENT - TRIAZENES		
Temodar 100 mg capsule	NP	PA; SP
Temodar 140 mg capsule	NP	PA; SP
Temodar 180 mg capsule	NP	PA; QL(Allowed 2 per 1 day); SP
Temodar 250 mg capsule	NP	PA; QL(Allowed 2 per 1 day); SP
temozolomide 100 mg capsule	P	SP

Drug Name	Tier	Drug Restriction
temozolomide 140 mg capsule	P	SP
temozolomide 180 mg capsule	P	QL(Allowed 2 per 1 day); SP
temozolomide 20 mg capsule	P	SP
temozolomide 250 mg capsule	P	QL(Allowed 2 per 1 day); SP
temozolomide 5 mg capsule	P	SP
ANTINEOPLASTIC - ANAPLASTIC LYMPHOMA KINASE (ALK) INHIBITORS		
Alecensa 150 mg capsule	NP	PA; SP
Alunbrig 180 mg tablet	NP	PA; SP
Alunbrig 30 mg tablet	NP	PA; SP
Alunbrig 90 mg (7)-180 mg (23) tablets in a dose pack	NP	PA; SP
Alunbrig 90 mg tablet	NP	PA; SP
Lorbrena 100 mg tablet	NP	PA; SP
Lorbrena 25 mg tablet	NP	PA; SP
Xalkori 200 mg capsule	NP	PA; SP
Xalkori 250 mg capsule	NP	PA; SP
Zykadia 150 mg tablet	NP	PA; SP
ANTINEOPLASTIC - ANTIADRENALS		
Lysodren 500 mg tablet	P	SP
ANTINEOPLASTIC - ANTIANDROGENS		
abiraterone 250 mg tablet	P	SP
abiraterone 500 mg tablet	P	SP
bicalutamide 50 mg tablet	P	QL(Allowed 1 per 1 day)
Casodex 50 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Erleada 60 mg tablet	NP	PA; SP
flutamide 125 mg capsule	P	
nilutamide 150 mg tablet	P	
Nubeqa 300 mg tablet	NP	PA; SP
Xtandi 40 mg capsule	NP	PA; SP
Xtandi 40 mg tablet	NP	PA; SP
Xtandi 80 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Yonsa 125 mg tablet	NP	PA; SP
Zytiga 250 mg tablet	NP	PA; SP
Zytiga 500 mg tablet	NP	PA; SP
ANTINEOPLASTIC - ANTIMETABOLITE - FOLIC ACID ANALOGS		
methotrexate sodium 2.5 mg tablet	P	
Trexall 10 mg tablet	P	
Trexall 15 mg tablet	P	
Trexall 5 mg tablet	P	
Trexall 7.5 mg tablet	P	
Xatmep 2.5 mg/mL oral solution	NP	PA
ANTINEOPLASTIC - ANTIMETABOLITE - PURINE ANALOGS		
mercaptopurine 50 mg tablet	P	
Purixan 20 mg/mL oral suspension	NP	PA
Tabloid 40 mg tablet	P	SP
ANTINEOPLASTIC - ANTIMETABOLITE - PYRIMIDINE ANALOGS		
capecitabine 150 mg tablet	NP	PA; SP
capecitabine 500 mg tablet	NP	PA; SP
Onureg 200 mg tablet	NP	PA; SP
Onureg 300 mg tablet	NP	PA; SP
Xeloda 150 mg tablet	NP	PA; SP
Xeloda 500 mg tablet	NP	PA; SP
ANTINEOPLASTIC - ANTIMETABOLITE - UREA DERIVATIVES		
Hydrea 500 mg capsule	NP	PA
hydroxyurea 500 mg capsule	P	
ANTINEOPLASTIC - ANTIMETABOLITES - PYRIMIDINE ANALOG COMBINATIONS		
Lonsurf 15 mg-6.14 mg tablet	NP	PA; SP
Lonsurf 20 mg-8.19 mg tablet	NP	PA; SP
ANTINEOPLASTIC - AROMATASE INHIBITORS		
anastrozole 1 mg tablet	P	
Arimidex 1 mg tablet	NP	PA
Aromasin 25 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
exemestane 25 mg tablet	P	
Femara 2.5 mg tablet	NP	PA
letrozole 2.5 mg tablet	P	
ANTINEOPLASTIC - B-CELL LYMPHOMA-2 (BCL-2) INHIBITORS		
Venclexta 10 mg tablet	NP	PA; SP
Venclexta 100 mg tablet	NP	PA; SP
Venclexta 50 mg tablet	NP	PA; SP
Venclexta Starting Pack 10 mg-50 mg-100 mg tablets in a dose pack	NP	PA; SP
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
Braftovi 75 mg capsule	NP	PA; SP
Tafinlar 50 mg capsule	NP	PA; SP
Tafinlar 75 mg capsule	NP	PA; SP
Zelboraf 240 mg tablet	NP	PA; SP
ANTINEOPLASTIC - BRUTON'S TYROSINE KINASE (BTK) INHIBITOR		
Brukinsa 80 mg capsule	NP	PA; SP

Drug Name	Tier	Drug Restriction
Calquence 100 mg capsule	NP	PA; SP
Imbruvica 140 mg capsule	NP	PA; SP
Imbruvica 140 mg tablet	NP	PA; SP
Imbruvica 280 mg tablet	NP	PA; SP
Imbruvica 420 mg tablet	NP	PA; SP
Imbruvica 560 mg tablet	NP	PA; SP
Imbruvica 70 mg capsule	NP	PA; SP
ANTINEOPLASTIC - CYCLIN-DEPENDENT KINASE (CDK) 4/6 INHIBITORS		
Ibrance 100 mg capsule	NP	PA; SP
Ibrance 100 mg tablet	NP	PA; SP
Ibrance 125 mg capsule	NP	PA; SP
Ibrance 125 mg tablet	NP	PA; SP
Ibrance 75 mg capsule	NP	PA; SP
Ibrance 75 mg tablet	NP	PA; SP
Kisqali 200 mg/day (200 mg x 1) tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Kisqali 400 mg/day (200 mg x 2) tablet	NP	PA; SP
Kisqali 600 mg/day (200 mg x 3) tablet	NP	PA; SP
Verzenio 100 mg tablet	NP	PA; SP
Verzenio 150 mg tablet	NP	PA; SP
Verzenio 200 mg tablet	NP	PA; SP
Verzenio 50 mg tablet	NP	PA; SP
ANTINEOPLASTIC - EPIDERMAL GROWTH FACTOR RECEPTOR-2 (HER2) INHIBITOR		
Tukysa 150 mg tablet	NP	PA; SP
Tukysa 50 mg tablet	NP	PA; SP
ANTINEOPLASTIC - EPIPODOPHYLLOTOXINS		
etoposide 50 mg capsule	P	SP
ANTINEOPLASTIC - ESTROGENS		
Emcyt 140 mg capsule	P	SP
ANTINEOPLASTIC - EXPORTIN-1 (XPO1) INHIBITORS		
Xpovio 100 mg/week (20 mg x 5) tablet	NP	PA; SP
Xpovio 100 mg/week (50 mg x 2) tablet	NP	PA; SP
Xpovio 40 mg twice week (40 mg x 2) tablet	NP	PA; SP
Xpovio 40 mg twice weekly (80 mg/week) (20 mg x 4) tablet	NP	PA; SP
Xpovio 40 mg/week (20 mg x 2) tablet	NP	PA; SP
Xpovio 40 mg/week (40 mg x 1) tablet	NP	PA; SP
Xpovio 60 mg twice weekly (120 mg/week) (20 mg x 6) tablet	NP	PA; SP
Xpovio 60 mg/week (20 mg x 3) tablet	NP	PA; SP
Xpovio 60 mg/week (60 mg x 1) tablet	NP	PA; SP
Xpovio 80 mg twice weekly (160 mg/week) (20 mg x 8) tablet	NP	PA; SP
Xpovio 80 mg/week (20 mg x 4) tablet	NP	PA; SP
Xpovio 80 mg/week (40 mg x 2) tablet	NP	PA; SP
ANTINEOPLASTIC - EZH2 HISTONE METHYLTRANSFERASE (HMT) INHIBITOR		

Drug Name	Tier	Drug Restriction
Tazverik 200 mg tablet	NP	PA; SP
ANTINEOPLASTIC - FIBROBLAST GROWTH FACTOR RECEPTOR (FGFR) KINASE INHIB		
Balversa 3 mg tablet	NP	PA; SP
Balversa 4 mg tablet	NP	PA; SP
Balversa 5 mg tablet	NP	PA; SP
Pemazyre 13.5 mg tablet	NP	PA; SP
Pemazyre 4.5 mg tablet	NP	PA; SP
Pemazyre 9 mg tablet	NP	PA; SP
ANTINEOPLASTIC - FMS-LIKE TYROSINE KINASE 3 (FLT3) INHIBITORS		
Xospata 40 mg tablet	NP	PA; SP
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITOR		
Daurismo 100 mg tablet	NP	PA; SP
Daurismo 25 mg tablet	NP	PA; SP
Erivedge 150 mg capsule	P	SP
Odomzo 200 mg capsule	NP	PA; SP
ANTINEOPLASTIC - HISTONE DEACETYLASE (HDAC) INHIBITORS		

Drug Name	Tier	Drug Restriction
Farydak 10 mg capsule	NP	PA; SP
Farydak 15 mg capsule	NP	PA; SP
Farydak 20 mg capsule	NP	PA; SP
Zolinza 100 mg capsule	NP	PA; SP
ANTINEOPLASTIC - JANUS KINASE (JAK) INHIBITORS		
Jakafi 10 mg tablet	P	SP
Jakafi 15 mg tablet	P	SP
Jakafi 20 mg tablet	P	SP
Jakafi 25 mg tablet	P	SP
Jakafi 5 mg tablet	P	SP
ANTINEOPLASTIC - JANUS KINASE(JAK),FMS-LIKE TYROSINE KINASE(FLT) INHIB		
Inrebic 100 mg capsule	NP	PA; SP
ANTINEOPLASTIC - KINASE INHIBITOR AND AROMATASE INHIBITOR COMBINATION		
Kisqali Femara Co-Pack 200 mg/day(200 mg x 1)-2.5 mg tablet	NP	PA; SP
Kisqali Femara Co-Pack 400 mg/day(200 mg x 2)-2.5 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Kisqali Femara Co-Pack 600 mg/day(200 mg x 3)-2.5 mg tablet	NP	PA; SP
ANTINEOPLASTIC - LHRH (GNRH) ANTAGONIST PITUITARY SUPPRESSANTS		
Orgovyx 120 mg tablet	NP	PA; SP
ANTINEOPLASTIC - MAST CELL STABILIZERS		
cromolyn 100 mg/5 mL oral concentrate	P	
Gastrocrom 100 mg/5 mL oral concentrate	NP	PA
ANTINEOPLASTIC - MEK1 AND MEK2 KINASE INHIBITORS		
Cotellic 20 mg tablet	NP	PA; SP
Koselugo 10 mg capsule	NP	PA; SP
Koselugo 25 mg capsule	NP	PA; SP
Mekinist 0.5 mg tablet	NP	PA; SP
Mekinist 2 mg tablet	NP	PA; SP
Mektovi 15 mg tablet	NP	PA; SP
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
Afinitor 10 mg tablet	NP	PA; SP
Afinitor 2.5 mg tablet	NP	PA; SP
Afinitor 5 mg tablet	NP	PA; SP
Afinitor 7.5 mg tablet	NP	PA; SP
Afinitor Disperz 2 mg tablet for oral suspension	NP	PA; SP
Afinitor Disperz 3 mg tablet for oral suspension	NP	PA; SP
Afinitor Disperz 5 mg tablet for oral suspension	NP	PA; SP
everolimus (antineoplastic) 2.5 mg tablet	NP	PA; SP
everolimus (antineoplastic) 5 mg tablet	NP	PA; SP
everolimus (antineoplastic) 7.5 mg tablet	NP	PA; SP
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
Cabometyx 20 mg tablet	NP	PA; SP
Cabometyx 40 mg tablet	NP	PA; SP
Cabometyx 60 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Cometriq 100 mg/day (80 mg x 1-20 mg x 1) capsules	NP	PA; SP
Cometriq 140 mg/day (80 mg x 1-20 mg x 3) capsules	NP	PA; SP
Cometriq 60 mg/day (20 mg x 3/day) capsules	NP	PA; SP
Iclusig 10 mg tablet	NP	PA; SP
Iclusig 15 mg tablet	NP	PA; SP
Iclusig 30 mg tablet	NP	PA; SP
Iclusig 45 mg tablet	NP	PA; SP
Nexavar 200 mg tablet	P	SP
Stivarga 40 mg tablet	NP	PA; SP
Ukoniq 200 mg tablet	NP	PA; SP
ANTINEOPLASTIC - MUTANT ISOCITRATE DEHYDROGENASE 1 (MIDH1) INHIBITORS		
Tibsovo 250 mg tablet	NP	PA; SP
ANTINEOPLASTIC - MUTANT ISOCITRATE DEHYDROGENASE 2 (MIDH2) INHIBITORS		
Idhifa 100 mg tablet	NP	PA; SP
Idhifa 50 mg tablet	NP	PA; SP
ANTINEOPLASTIC - PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
Copiktra 15 mg capsule	NP	PA; SP
Copiktra 25 mg capsule	NP	PA; SP
Zydelig 100 mg tablet	NP	PA; SP
Zydelig 150 mg tablet	NP	PA; SP
ANTINEOPLASTIC - PI3K-ALPHA INHIBITORS		
Piqray 200 mg/day (200 mg x 1) tablet	NP	PA; SP
Piqray 250 mg/day (200 mg x 1-50 mg x 1) tablet	NP	PA; SP
Piqray 300 mg/day (150 mg x 2) tablet	NP	PA; SP
ANTINEOPLASTIC - POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
Lynparza 100 mg tablet	NP	PA; SP
Lynparza 150 mg tablet	NP	PA; SP
Rubraca 200 mg tablet	NP	PA; SP
Rubraca 250 mg tablet	NP	PA; SP
Rubraca 300 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Talzenna 0.25 mg capsule	NP	PA; SP
Talzenna 1 mg capsule	NP	PA; SP
Zejula 100 mg capsule	NP	PA; SP
ANTINEOPLASTIC - PROGESTINS		
megestrol 20 mg tablet	P	
megestrol 40 mg tablet	P	
ANTINEOPLASTIC - PROTEASOME ENZYME INHIBITORS		
Ninlaro 2.3 mg capsule	NP	PA; SP
Ninlaro 3 mg capsule	NP	PA; SP
Ninlaro 4 mg capsule	NP	PA; SP
ANTINEOPLASTIC - PROTEIN-TYROSINE KINASE INHIBITORS		
Ayvakit 100 mg tablet	NP	PA; SP
Ayvakit 200 mg tablet	NP	PA; SP
Ayvakit 300 mg tablet	NP	PA; SP
Bosulif 100 mg tablet	NP	PA; SP
Bosulif 400 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Bosulif 500 mg tablet	NP	PA; SP
Caprelsa 100 mg tablet	P	SP
Caprelsa 300 mg tablet	P	SP
Fotivda 0.89 mg capsule	NP	PA; SP
Fotivda 1.34 mg capsule	NP	PA; SP
Gleevec 100 mg tablet	NP	PA; SP
Gleevec 400 mg tablet	NP	PA; SP
imatinib 100 mg tablet	NP	PA; SP
imatinib 400 mg tablet	NP	PA; SP
Inlyta 1 mg tablet	NP	PA; SP
Inlyta 5 mg tablet	NP	PA; SP
Lenvima 10 mg/day (10 mg x 1) capsule	NP	PA; SP
Lenvima 12 mg/day (4 mg x 3) capsule	NP	PA; SP
Lenvima 14 mg/day(10 mg x 1-4 mg x 1) capsule	NP	PA; SP

Drug Name	Tier	Drug Restriction
Lenvima 18 mg/day (10 mg x 1 and 4 mg x 2) capsule	NP	PA; SP
Lenvima 20 mg/day (10 mg x 2) capsule	NP	PA; SP
Lenvima 24 mg per day (10 mg x 2 and 4 mg x 1) capsule	NP	PA; SP
Lenvima 4 mg capsule	NP	PA; SP
Lenvima 8 mg/day (4 mg x 2) capsule	NP	PA; SP
Qinlock 50 mg tablet	NP	PA; SP
Rozlytrek 100 mg capsule	NP	PA; SP
Rozlytrek 200 mg capsule	NP	PA; SP
Rydapt 25 mg capsule	NP	PA; SP
Sprycel 100 mg tablet	NP	PA; SP
Sprycel 140 mg tablet	NP	PA; SP
Sprycel 20 mg tablet	NP	PA; SP
Sprycel 50 mg tablet	NP	PA; SP
Sprycel 70 mg tablet	NP	PA; SP
Sprycel 80 mg tablet	NP	PA; SP
Sutent 12.5 mg capsule	P	SP
Sutent 25 mg capsule	P	SP
Sutent 37.5 mg capsule	P	SP
Sutent 50 mg capsule	P	SP
Tabrecta 150 mg tablet	NP	PA; SP
Tabrecta 200 mg tablet	NP	PA; SP
Tasigna 150 mg capsule	NP	PA; SP
Tasigna 200 mg capsule	NP	PA; SP
Tasigna 50 mg capsule	NP	PA; SP
Tepmetko 225 mg tablet	NP	PA; SP
Turalio 200 mg capsule	NP	PA; SP
Votrient 200 mg tablet	P	SP
ANTINEOPLASTIC - RETINOIDS		

Drug Name	Tier	Drug Restriction
tretinoin (antineoplastic) 10 mg capsule	P	SP
ANTINEOPLASTIC - SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
Fareston 60 mg tablet	NP	PA
Soltamox 20 mg/10 mL oral solution	P	
tamoxifen 10 mg tablet	P	
tamoxifen 20 mg tablet	P	
toremifene 60 mg tablet	P	
ANTINEOPLASTIC - SELECTIVE RET KINASE INHIBITOR		
Gavreto 100 mg capsule	NP	PA; SP
Retevmo 40 mg capsule	NP	PA; SP
Retevmo 80 mg capsule	NP	PA; SP
ANTINEOPLASTIC - SELECTIVE RETINOID X RECEPTOR AGONISTS		
bexarotene 75 mg capsule	P	SP
Targretin 75 mg capsule	NP	PA; SP
ANTINEOPLASTIC - THALIDOMIDE ANALOGS		
Pomalyst 1 mg capsule	NP	PA; SP
Pomalyst 2 mg capsule	NP	PA; SP
Pomalyst 3 mg capsule	NP	PA; SP
Pomalyst 4 mg capsule	NP	PA; SP
Revlimid 10 mg capsule	NP	PA; SP
Revlimid 15 mg capsule	NP	PA; SP
Revlimid 2.5 mg capsule	NP	PA; SP
Revlimid 20 mg capsule	NP	PA; SP
Revlimid 25 mg capsule	NP	PA; SP
Revlimid 5 mg capsule	NP	PA; SP
ANTINEOPLASTIC - TOPOISOMERASE I INHIBITORS		
Hycamtin 0.25 mg capsule	P	SP
Hycamtin 1 mg capsule	P	SP
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE (TRK) INHIBITOR		
Vitrakvi 100 mg capsule	NP	PA; SP
Vitrakvi 20 mg/mL oral solution	NP	PA; SP
Vitrakvi 25 mg capsule	NP	PA; SP

Drug Name	Tier	Drug Restriction
ANTINEOPLASTIC-PYRIMIDINE ANALOG AND CYTIDINE DEAMINASE INHIBITOR COMB		
Inqovi 35 mg-100 mg tablet	NP	PA; SP
FLUOROURACIL AND RELATED RESCUE AGENTS		
Vistogard 10 gram oral granules in packet	P	
METHOTREXATE RESCUE AGENTS		
leucovorin calcium 10 mg tablet	P	
leucovorin calcium 15 mg tablet	P	
leucovorin calcium 25 mg tablet	P	
leucovorin calcium 5 mg tablet	P	
URINARY TRACT PROTECTIVE AGENTS USED IN CONJUNCTION WITH CHEMOTHERAPY		
Mesnex 400 mg tablet	P	SP
ANTISEPTICS AND DISINFECTANTS		
ANTISEPTIC - ALCOHOLS		
Alcohol Prep Pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
alcohol swabs	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
BD Alcohol Swabs	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
CareTouch Alcohol Prep Pad topical pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Curity Alcohol Swabs	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Comfort Alcohol Pad topical pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Alcohol Prep Pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
inControl Alcohol Pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Pure Comfort Alcohol Pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultilet Alcohol Swab	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Webcol topical pads	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
ANTISEPTIC - BIGUANIDES		
Betasept Surgical Scrub 4 % topical liquid	P	
chlorhexidine gluconate 4 % topical liquid	P	
Hibiclens 4 % topical liquid	P	
ANTISEPTIC - CHLORINE RELEASING		
Hyclodex 0.012 %-0.002 %-0.046 % topical spray	NP	PA
ANTISEPTIC - OTHERS		
Formadon 10 % topical solution with applicator	P	QL(Allowed 90 per Rx)

Drug Name	Tier	Drug Restriction
formaldehyde 10 % topical solution with applicator	P	QL(Allowed 90 per Rx)
DISINFECTANTS - ALDEHYDES		
Formadon 10 % topical solution	P	QL(Allowed 90 per Rx)
BIOLOGICALS		
HEPATITIS A VACCINE - SINGLE AGENTS		
Havrix (PF) 1,440 ELISA unit/mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Havrix (PF) 1,440 ELISA unit/mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Havrix (PF) 720 ELISA unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Havrix (PF) 720 ELISA unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Vaqta (PF) 25 unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Vaqta (PF) 25 unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Vaqta (PF) 50 unit/mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Vaqta (PF) 50 unit/mL intramuscular syringe	P	AL(Minimum Age 19 Years)
HEPATITIS B VACCINES - SINGLE AGENTS		
Engerix-B (PF) 20 mcg/mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Engerix-B (PF) 20 mcg/mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Engerix-B Pediatric (PF) 10 mcg/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Engerix-B Pediatric (PF) 10 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Recombivax HB (PF) 10 mcg/mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Recombivax HB (PF) 10 mcg/mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Recombivax HB (PF) 40 mcg/mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)

Drug Name	Tier	Drug Restriction
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
IMMUNE GLOBULIN - RHO(D)		
HyperRHO S/D 1,500 unit (300 mcg) intramuscular syringe	P	SP
RhoGAM Ultra-Filtered PLUS 1,500 unit (300 mcg) intramuscular syringe	P	SP
TOXOID VACCINE COMBINATIONS		
Adacel (Tdap Adolesn/Adult)(PF)2 Lf-(2.5-5-3-5)-5 Lf/0.5 mL IM syringe	P	AL(Minimum Age 19 Years)
Adacel (Tdap Adolesn/Adult)(PF)2Lf-(2.5-5-3-5mcg)-5 Lf/0.5 mL IM susp	P	AL(Minimum Age 19 Years)
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)

Drug Name	Tier	Drug Restriction
Infanrix (DTaP) (PF) 25 Lf unit-58 mcg-10 Lf/0.5mL intramuscular susp	P	AL(Minimum Age 19 Years)
Infanrix (DTaP)(PF) 25 Lf unit-58mcg-10 Lf/0.5mL intramuscular syringe	P	AL(Minimum Age 19 Years)
TDVAX 2 Lf unit-2 Lf unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19 Years)
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
tetanus,diphtheria toxoid ped (PF) 5 Lf unit-25 Lf unit/0.5 mL IM susp	P	AL(Minimum Age 19 Years)
tetanus-diphtheria toxoids-Td 2 Lf unit-2 Lf unit/0.5 mL IM suspension	P	AL(Minimum Age 19 Years)
VACCINE BACTERIAL - GRAM NEGATIVE COCCI		
Menactra (PF) 4 mcg/0.5 mL intramuscular solution	P	AL(Minimum Age 19 Years)

Drug Name	Tier	Drug Restriction
Menomune - A/C/Y/W-135 (PF) 50 mcg subcutaneous solution	P	AL(Minimum Age 19 Years)
Menomune - A/C/Y/W-135 50 mcg subcutaneous solution	P	AL(Minimum Age 19 Years)
Menveo A-C-Y-W-135-Dip (PF) 10 mcg-5 mcg/0.5 mL intramuscular kit	P	AL(Minimum Age 19 Years)
VACCINE BACTERIAL - GRAM POSITIVE COCCI		
Pneumovax-23 25 mcg/0.5 mL injection solution	P	AL(Minimum Age 19 Years)
Pneumovax-23 25 mcg/0.5 mL injection syringe	P	AL(Minimum Age 19 Years)
Prevnar 13 (PF) 0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
VACCINE BACTERIAL - MENINGOCOCCAL GROUP B VACCINES		
Bexsero 50 mcg-50 mcg-50 mcg-25 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Trumenba 120 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
VACCINE VIRAL - COVID-19 (SARS-COV-2)		
Janssen COVID-19 Vaccine (PF) 0.5 mL intramuscular suspension (EUA)	P	AL(Minimum Age 18 Years); QL(Allowed 0.5 per Rx); QL(QL (Limit 1 days supply(ies) per claim))
Moderna COVID-19 Vaccine (PF) 100 mcg/0.5 mL intramuscular susp. (EUA)	P	AL(Minimum Age 18 Years); QL(QL Overtime: Allowed .5 over 28 days); QL(QL (Limit 1 days supply(ies) per claim))
Pfizer-BioNTech COVID-19 Vaccine (PF) 30 mcg/0.3 mL IM suspension(EUA)	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed .3 over 21 days); QL(QL (Limit 1 days supply(ies) per claim))
VACCINE VIRAL - HUMAN PAPILLOMAVIRUS (HPV) VACCINES		
Cervarix Vaccine (PF) 20 mcg-20 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19 Years)
Gardasil (PF) 20mcg-40mcg-40mcg-20mcg/0.5mL intramuscular suspension	P	AL(Minimum Age 9 Years)
Gardasil (PF) 20mcg-40mcg-40mcg-20mcg/0.5mL intramuscular syringe	P	AL(Minimum Age 9 Years)
Gardasil 9 (PF) 0.5 mL intramuscular suspension	P	AL(Minimum Age 9 Years)
Gardasil 9 (PF) 0.5 mL intramuscular syringe	P	AL(Minimum Age 9 Years)

Drug Name	Tier	Drug Restriction
VACCINE VIRAL - INFLUENZA A AND B		
Afluria Qd 2020-21 (36 mos up)(PF)60 mcg (15 mcg x4)/0.5 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Afluria Qd 2020-21 (6-35 mos)(PF) 30 mcg(7.5 mcgx4)/0.25 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.25 per Rx); QL(Limit 1 fill(s) per 180 days)
Afluria Quad 2020-2021 60 mcg (15 mcg x 4)/0.5 mL intramuscular susp.	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluad 2020-21 65yr up(PF)45 mcg(15 mcgx3)/0.5 mL intramuscular syringe	P	AL(Minimum Age 65 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluad Quad 2020-2021(65yr up)(PF) 60 mcg (15 mcg x 4)/0.5mL IM syringe	P	AL(Minimum Age 65 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluarix Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Flublok Quad 2020-2021 (PF) 180 mcg (45 mcg x 4)/0.5 mL IM syringe	P	AL(Minimum Age 18 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Flucelvax Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Flucelvax Quad 2020-2021 60 mcg (15 mcg x 4)/0.5 mL intramuscular susp	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Flulaval Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Flumist Quad 2020-2021 10exp6.5-7.5 FF unit/0.2 mL nasal spray syringe	P	AL(Between 10 Years And 49 Years); QL(Allowed 1 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluzone High-Dose Quad 2020-21 (PF) 240 mcg/0.7 mL IM syringe	P	AL(Minimum Age 65 Years); QL(Allowed 0.7 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluzone Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM suspension	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluzone Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
Fluzone Quad 2020-2021 60 mcg (15 mcg x 4)/0.5 mL intramuscular susp.	P	AL(Minimum Age 10 Years); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)

Drug Name	Tier	Drug Restriction
VACCINE VIRAL - VARICELLA		
Shingrix (PF) 50 mcg/0.5 mL intramuscular suspension, kit	P	AL(Minimum Age 50 Years)
Varivax (PF) 1,350 unit/0.5 mL subcutaneous suspension	P	AL(Minimum Age 19 Years)
Zostavax (PF) 19,400 unit/0.65 mL subcutaneous suspension	P	AL(Minimum Age 19 Years)
VACCINE VIRAL COMBINATIONS		
M-M-R II (PF) 1,000-12,500 TCID50/0.5 mL subcutaneous solution	P	AL(Minimum Age 19 Years)
CARDIOVASCULAR THERAPY AGENTS		
ACE INHIBITOR AND CALCIUM CHANNEL BLOCKER COMBINATIONS		
amlodipine 10 mg-benazepril 20 mg capsule	P	QL(Allowed 1 per 1 day); MT
amlodipine 10 mg-benazepril 40 mg capsule	P	QL(Allowed 1 per 1 day); MT
amlodipine 2.5 mg-benazepril 10 mg capsule	P	QL(Allowed 1 per 1 day); MT
amlodipine 5 mg-benazepril 10 mg capsule	P	QL(Allowed 1 per 1 day); MT
amlodipine 5 mg-benazepril 20 mg capsule	P	QL(Allowed 1 per 1 day); MT
amlodipine 5 mg-benazepril 40 mg capsule	P	QL(Allowed 1 per 1 day); MT
Lotrel 10 mg-20 mg capsule	NP	PA; QL(Allowed 1 per 1 day); MT
Lotrel 10 mg-40 mg capsule	NP	PA; QL(Allowed 1 per 1 day); MT
Lotrel 5 mg-10 mg capsule	NP	PA; QL(Allowed 1 per 1 day); MT
Lotrel 5 mg-20 mg capsule	NP	PA; QL(Allowed 1 per 1 day); MT
Tarka 2 mg-180 mg tablet, extended release	NP	PA; MT
Tarka 2 mg-240 mg tablet, extended release	NP	PA; MT
Tarka 4 mg-240 mg tablet, extended release	NP	PA; MT
trandolapril 1 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	MT
trandolapril 2 mg-verapamil ER 180 mg tablet,immed-exten release 24 hr	P	MT

Drug Name	Tier	Drug Restriction
trandolapril 2 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	MT
trandolapril 4 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	MT
ACE INHIBITOR AND DIURETIC COMBINATIONS		
Accuretic 10 mg-12.5 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Accuretic 20 mg-12.5 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Accuretic 20 mg-25 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
benazepril 10 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
benazepril 20 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
benazepril 20 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
benazepril 5 mg-hydrochlorothiazide 6.25 mg tablet	P	QL(Allowed 1 per 1 day); MT
captopril 25 mg-hydrochlorothiazide 15 mg tablet	P	QL(Allowed 2 per 1 day); MT
captopril 25 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
captopril 50 mg-hydrochlorothiazide 15 mg tablet	P	QL(Allowed 2 per 1 day); MT
captopril 50 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
enalapril 10 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
enalapril 5 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 2 per 1 day); MT
fosinopril 10 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
fosinopril 20 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
lisinopril 10 mg-hydrochlorothiazide 12.5 mg tablet	P	MT
lisinopril 20 mg-hydrochlorothiazide 12.5 mg tablet	P	MT
lisinopril 20 mg-hydrochlorothiazide 25 mg tablet	P	MT
Lotensin HCT 10 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lotensin HCT 20 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lotensin HCT 20 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
quinapril 10 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
quinapril 20 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 4 per 1 day); MT
quinapril 20 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
Vaseretic 10 mg-25 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Zestoretic 10 mg-12.5 mg tablet	NP	PA; MT
Zestoretic 20 mg-12.5 mg tablet	NP	PA; MT
Zestoretic 20 mg-25 mg tablet	NP	PA; MT
ACE INHIBITORS		
Accupril 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Accupril 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Accupril 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Accupril 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Altace 1.25 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Altace 10 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Altace 2.5 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Altace 5 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
benazepril 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
benazepril 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
benazepril 40 mg tablet	P	QL(Allowed 2 per 1 day); MT
benazepril 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
captopril 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
captopril 12.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
captopril 25 mg tablet	P	QL(Allowed 3 per 1 day); MT
captopril 50 mg tablet	P	QL(Allowed 3 per 1 day); MT
enalapril maleate 10 mg tablet	P	QL(Allowed 2 per 1 day); MT
enalapril maleate 2.5 mg tablet	P	QL(Allowed 2 per 1 day); MT
enalapril maleate 20 mg tablet	P	QL(Allowed 2 per 1 day); MT
enalapril maleate 5 mg tablet	P	QL(Allowed 2 per 1 day); MT
Epaned 1 mg/mL oral solution	NP	PA; MT

Drug Name	Tier	Drug Restriction
fosinopril 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
fosinopril 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
fosinopril 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
lisinopril 10 mg tablet	P	MT
lisinopril 2.5 mg tablet	P	MT
lisinopril 20 mg tablet	P	MT
lisinopril 30 mg tablet	P	MT
lisinopril 40 mg tablet	P	MT
lisinopril 5 mg tablet	P	MT
Lotensin 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lotensin 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lotensin 40 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
moexipril 15 mg tablet	P	MT
moexipril 7.5 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
perindopril erbumine 2 mg tablet	NP	PA; MT
perindopril erbumine 4 mg tablet	NP	PA; MT
perindopril erbumine 8 mg tablet	NP	PA; MT
Prinivil 20 mg tablet	NP	PA; MT
Qbrelis 1 mg/mL oral solution	NP	PA; MT
quinapril 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
quinapril 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
quinapril 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
quinapril 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
ramipril 1.25 mg capsule	P	QL(Allowed 2 per 1 day); MT
ramipril 10 mg capsule	P	QL(Allowed 2 per 1 day); MT
ramipril 2.5 mg capsule	P	QL(Allowed 2 per 1 day); MT
ramipril 5 mg capsule	P	QL(Allowed 2 per 1 day); MT
trandolapril 1 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
trandolapril 2 mg tablet	P	QL(Allowed 1 per 1 day); MT
trandolapril 4 mg tablet	P	QL(Allowed 2 per 1 day); MT
Vasotec 10 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Vasotec 2.5 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Vasotec 20 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Vasotec 5 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Zestril 10 mg tablet	NP	PA; MT
Zestril 2.5 mg tablet	NP	PA; MT
Zestril 20 mg tablet	NP	PA; MT
Zestril 30 mg tablet	NP	PA; MT
Zestril 40 mg tablet	NP	PA; MT
Zestril 5 mg tablet	NP	PA; MT
ALPHA-BETA BLOCKERS		
carvedilol 12.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
carvedilol 25 mg tablet	P	QL(Allowed 4 per 1 day); MT
carvedilol 3.125 mg tablet	P	QL(Allowed 3 per 1 day); MT
carvedilol 6.25 mg tablet	P	QL(Allowed 3 per 1 day); MT
carvedilol phosphate ER 10 mg capsule,ext.release2 4hr multiphase	NP	PA; QL(Allowed 1 per 1 day); MT
carvedilol phosphate ER 20 mg capsule,ext.release2 4hr multiphase	NP	PA; QL(Allowed 1 per 1 day); MT
carvedilol phosphate ER 40 mg capsule,ext.release2 4hr multiphase	NP	PA; QL(Allowed 1 per 1 day); MT
carvedilol phosphate ER 80 mg capsule,ext.release2 4hr multiphase	NP	PA; QL(Allowed 1 per 1 day); MT
Coreg 12.5 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Coreg 25 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Coreg 3.125 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Coreg 6.25 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Coreg CR 10 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Coreg CR 20 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Coreg CR 40 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Coreg CR 80 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
labetalol 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
labetalol 200 mg tablet	P	QL(Allowed 6 per 1 day); MT
labetalol 300 mg tablet	P	QL(Allowed 8 per 1 day); MT
ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-CALCIUM CHANNEL BLOCKER COMB.		
amlodipine 10 mg-olmesartan 20 mg tablet	NP	ST; MT
amlodipine 10 mg-olmesartan 40 mg tablet	NP	ST; MT
amlodipine 10 mg-valsartan 160 mg tablet	NP	ST; MT
amlodipine 10 mg-valsartan 320 mg tablet	NP	ST; MT
amlodipine 5 mg-olmesartan 20 mg tablet	NP	ST; MT

Drug Name	Tier	Drug Restriction
amlodipine 5 mg-olmesartan 40 mg tablet	NP	ST; MT
amlodipine 5 mg-valsartan 160 mg tablet	NP	ST; MT
amlodipine 5 mg-valsartan 320 mg tablet	NP	ST; MT
Azor 10 mg-20 mg tablet	NP	ST; MT
Azor 10 mg-40 mg tablet	NP	ST; MT
Azor 5 mg-20 mg tablet	NP	ST; MT
Azor 5 mg-40 mg tablet	NP	ST; MT
Exforge 10 mg-160 mg tablet	NP	ST; MT
Exforge 10 mg-320 mg tablet	NP	ST; MT
Exforge 5 mg-160 mg tablet	NP	ST; MT
Exforge 5 mg-320 mg tablet	NP	ST; MT
telmisartan 40 mg-amlodipine 10 mg tablet	NP	PA; MT
telmisartan 40 mg-amlodipine 5 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
telmisartan 80 mg-amlodipine 10 mg tablet	NP	PA; MT
telmisartan 80 mg-amlodipine 5 mg tablet	NP	PA; MT
ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-CALCIUM CHANNEL BLOCKER-DIURETIC		
amlodipine 10 mg-valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
amlodipine 10 mg-valsartan 160 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
amlodipine 10 mg-valsartan 320 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
amlodipine 5 mg-valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
amlodipine 5 mg-valsartan 160 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
Exforge HCT 10 mg-160 mg-12.5 mg tablet	NP	ST; MT
Exforge HCT 10 mg-160 mg-25 mg tablet	NP	ST; MT
Exforge HCT 10 mg-320 mg-25 mg tablet	NP	ST; MT
Exforge HCT 5 mg-160 mg-12.5 mg tablet	NP	ST; MT
Exforge HCT 5 mg-160 mg-25 mg tablet	NP	ST; MT
olmesartan 20 mg-amlodipine 5 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
olmesartan 40 mg-amlodipine 10 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
olmesartan 40 mg-amlodipine 10 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
olmesartan 40 mg-amlodipine 5 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
olmesartan 40 mg-amlodipine 5 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
Tribenzor 20 mg-5 mg-12.5 mg tablet	NP	ST; MT
Tribenzor 40 mg-10 mg-12.5 mg tablet	NP	ST; MT

Drug Name	Tier	Drug Restriction
Tribenzor 40 mg-10 mg-25 mg tablet	NP	ST; MT
Tribenzor 40 mg-5 mg-12.5 mg tablet	NP	ST; MT
Tribenzor 40 mg-5 mg-25 mg tablet	NP	ST; MT
ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-DIURETIC COMBINATIONS		
Atacand HCT 16 mg-12.5 mg tablet	NP	PA; MT
Atacand HCT 32 mg-12.5 mg tablet	NP	PA; MT
Atacand HCT 32 mg-25 mg tablet	NP	PA; MT
Avalide 150 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Avalide 300 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Benicar HCT 20 mg-12.5 mg tablet	NP	ST; MT
Benicar HCT 40 mg-12.5 mg tablet	NP	ST; MT
Benicar HCT 40 mg-25 mg tablet	NP	ST; MT
candesartan 16 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; MT
candesartan 32 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; MT
candesartan 32 mg-hydrochlorothiazide 25 mg tablet	NP	PA; MT
Diovan HCT 160 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan HCT 160 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan HCT 320 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan HCT 320 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan HCT 80 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Edarbyclor 40 mg-12.5 mg tablet	NP	PA
Edarbyclor 40 mg-25 mg tablet	NP	PA
Hyzaar 100 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Hyzaar 100 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Hyzaar 50 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
irbesartan 150 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
irbesartan 300 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
losartan 100 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
losartan 100 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
losartan 50 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
Micardis HCT 40 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Micardis HCT 80 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Micardis HCT 80 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
olmesartan 20 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
olmesartan 40 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST; MT
olmesartan 40 mg-hydrochlorothiazide 25 mg tablet	NP	ST; MT
telmisartan 40 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
telmisartan 80 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
telmisartan 80 mg-hydrochlorothiazide 25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 160 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 320 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 320 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 80 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
ANGIOTENSIN II RECEPTOR BLOCKER-NEPRILYSIN INHIBITOR COMB. (ARNI)		
Entresto 24 mg-26 mg tablet	NP	PA
Entresto 49 mg-51 mg tablet	NP	PA
Entresto 97 mg-103 mg tablet	NP	PA
ANGIOTENSIN II RECEPTOR BLOCKERS (ARBS)		
Atacand 16 mg tablet	NP	PA; MT
Atacand 32 mg tablet	NP	PA; MT
Atacand 4 mg tablet	NP	PA; MT
Atacand 8 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
Avapro 150 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Avapro 300 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Avapro 75 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Benicar 20 mg tablet	NP	ST; MT
Benicar 40 mg tablet	NP	ST; MT
Benicar 5 mg tablet	NP	ST; MT
candesartan 16 mg tablet	NP	PA; MT
candesartan 32 mg tablet	NP	PA; MT
candesartan 4 mg tablet	NP	PA; MT
candesartan 8 mg tablet	NP	PA; MT
Cozaar 100 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Cozaar 25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Cozaar 50 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan 160 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan 320 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Diovan 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Diovan 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Edarbi 40 mg tablet	NP	PA
Edarbi 80 mg tablet	NP	PA
irbesartan 150 mg tablet	P	QL(Allowed 1 per 1 day); MT
irbesartan 300 mg tablet	P	QL(Allowed 1 per 1 day); MT
irbesartan 75 mg tablet	P	QL(Allowed 1 per 1 day); MT
losartan 100 mg tablet	P	QL(Allowed 1 per 1 day); MT
losartan 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
losartan 50 mg tablet	P	QL(Allowed 1 per 1 day); MT
Micardis 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Micardis 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Micardis 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
olmesartan 20 mg tablet	NP	ST; MT
olmesartan 40 mg tablet	NP	ST; MT

Drug Name	Tier	Drug Restriction
olmesartan 5 mg tablet	NP	ST; MT
telmisartan 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
telmisartan 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
telmisartan 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
valsartan 160 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 320 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
valsartan 80 mg tablet	P	QL(Allowed 1 per 1 day); MT
ANTIANGINAL - CORONARY VASODILATORS (NITRATES)		
Dilatrate-SR 40 mg capsule,extended release	P	
GoNitro 400 mcg sublingual powder in a packet	NP	PA
Isordil 40 mg tablet	NP	PA; MT
Isordil Titradose 5 mg tablet	NP	PA; MT
isosorbide dinitrate 10 mg tablet	P	MT
isosorbide dinitrate 20 mg tablet	P	MT
isosorbide dinitrate 30 mg tablet	P	MT
isosorbide dinitrate 40 mg tablet	P	MT
isosorbide dinitrate 5 mg tablet	P	MT
isosorbide mononitrate 10 mg tablet	P	QL(Allowed 2 per 1 day); MT
isosorbide mononitrate 20 mg tablet	P	QL(Allowed 2 per 1 day); MT
isosorbide mononitrate ER 120 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
isosorbide mononitrate ER 30 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
isosorbide mononitrate ER 60 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
Minitran 0.1 mg/hr transdermal 24 hour patch	P	
Minitran 0.2 mg/hr transdermal 24 hour patch	P	

Drug Name	Tier	Drug Restriction
Minitran 0.4 mg/hr transdermal 24 hour patch	P	
Minitran 0.6 mg/hr transdermal 24 hour patch	P	
Nitro-Bid 2 % transdermal ointment	P	
Nitro-Dur 0.1 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.2 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.3 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.4 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.6 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.8 mg/hr transdermal 24 hour patch	NP	PA
nitroglycerin 0.1 mg/hr transdermal 24 hour patch	P	
nitroglycerin 0.2 mg/hr transdermal 24 hour patch	P	
nitroglycerin 0.3 mg sublingual tablet	P	MT
nitroglycerin 0.4 mg sublingual tablet	P	MT
nitroglycerin 0.4 mg/hr transdermal 24 hour patch	P	
nitroglycerin 0.6 mg sublingual tablet	P	MT
nitroglycerin 0.6 mg/hr transdermal 24 hour patch	P	
nitroglycerin 400 mcg/spray translingual	NP	PA; MT
Nitrolingual 400 mcg/spray	NP	PA; MT
Nitromist 400 mcg/spray translingual aerosol	NP	PA; MT
Nitrostat 0.3 mg sublingual tablet	NP	PA; MT
Nitrostat 0.4 mg sublingual tablet	NP	PA; MT
Nitrostat 0.6 mg sublingual tablet	NP	PA; MT
ANTIANGINAL AND ANTI-ISCHEMIC AGENTS, NON-HEMODYNAMIC		
Ranexa 1,000 mg tablet,extended release	NP	PA; MT

Drug Name	Tier	Drug Restriction
Ranexa 500 mg tablet,extended release	NP	PA; MT
ranolazine ER 1,000 mg tablet,extended release,12 hr	NP	PA; MT
ranolazine ER 500 mg tablet,extended release,12 hr	NP	PA; MT
ANTIARRHYTHMIC - CLASS IA		
disopyramide phosphate 100 mg capsule	P	MT
disopyramide phosphate 150 mg capsule	P	MT
Norpace 100 mg capsule	NP	PA; MT
Norpace 150 mg capsule	NP	PA; MT
Norpace CR 100 mg capsule,extended release	P	
Norpace CR 150 mg capsule,extended release	P	
quinidine gluconate ER 324 mg tablet,extended release	P	MT
quinidine sulfate 200 mg tablet	P	MT
quinidine sulfate 300 mg tablet	P	MT
ANTIARRHYTHMIC - CLASS IB		
mexiletine 150 mg capsule	P	MT
mexiletine 200 mg capsule	P	MT
mexiletine 250 mg capsule	P	MT
ANTIARRHYTHMIC - CLASS IC		
flecainide 100 mg tablet	P	MT
flecainide 150 mg tablet	P	MT
flecainide 50 mg tablet	P	MT
propafenone 150 mg tablet	P	MT
propafenone 225 mg tablet	P	MT
propafenone 300 mg tablet	P	MT
propafenone ER 225 mg capsule,extended release 12 hr	NP	PA; MT
propafenone ER 325 mg capsule,extended release 12 hr	NP	PA; MT

Drug Name	Tier	Drug Restriction
propafenone ER 425 mg capsule,extended release 12 hr	NP	PA; MT
Rythmol SR 225 mg capsule,extended release	NP	PA; MT
Rythmol SR 325 mg capsule,extended release	NP	PA; MT
Rythmol SR 425 mg capsule,extended release	NP	PA; MT
ANTIARRHYTHMIC - CLASS II		
Betapace 120 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Betapace 160 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Betapace 80 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Betapace AF 120 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Betapace AF 160 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Betapace AF 80 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Sorine 120 mg tablet	P	QL(Allowed 2 per 1 day); MT
Sorine 160 mg tablet	P	QL(Allowed 2 per 1 day); MT
Sorine 240 mg tablet	P	MT
Sorine 80 mg tablet	P	QL(Allowed 2 per 1 day); MT
sotalol 120 mg tablet	P	QL(Allowed 2 per 1 day); MT
sotalol 160 mg tablet	P	QL(Allowed 2 per 1 day); MT
sotalol 240 mg tablet	P	MT
sotalol 80 mg tablet	P	QL(Allowed 2 per 1 day); MT
Sotalol AF 120 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Sotalol AF 160 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Sotalol AF 80 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Sotylize 5 mg/mL oral solution	NP	PA; MT
ANTIARRHYTHMIC - CLASS III		
amiodarone 100 mg tablet	P	MT
amiodarone 200 mg tablet	P	MT
amiodarone 400 mg tablet	P	MT
dofetilide 125 mcg capsule	P	MT

Drug Name	Tier	Drug Restriction
dofetilide 250 mcg capsule	P	MT
dofetilide 500 mcg capsule	P	MT
Multaq 400 mg tablet	NP	PA
Pacerone 100 mg tablet	P	MT
Pacerone 200 mg tablet	P	MT
Pacerone 400 mg tablet	P	MT
Tikosyn 125 mcg capsule	NP	PA; MT
Tikosyn 250 mcg capsule	NP	PA; MT
Tikosyn 500 mcg capsule	NP	PA; MT
ANTIHYPERLIPIDEMIC - ATP-CITRATE LYASE (ACLY) INHIBITOR		
Nexletol 180 mg tablet	NP	PA
ANTIHYPERLIPIDEMIC - BILE ACID SEQUESTRANTS		
cholestyramine (with sugar) 4 gram oral powder	P	MT
cholestyramine (with sugar) 4 gram powder for susp in a packet	P	MT

Drug Name	Tier	Drug Restriction
Cholestyramine Light 4 gram oral powder	P	MT
Cholestyramine Light 4 gram powder for susp in a packet	P	MT
colesevelam 3.75 gram oral powder packet	NP	PA; MT
colesevelam 625 mg tablet	NP	PA; MT
Colestid 1 gram tablet	NP	PA; MT
Colestid 5 gram oral granules	NP	PA; MT
Colestid 5 gram oral packet	NP	PA; MT
Colestid Flavored 5 gram oral granules	NP	PA; MT
Colestid Flavored 7.5 gram packet	NP	PA
colestipol 1 gram tablet	NP	PA; MT
colestipol 5 gram oral granules	NP	PA; MT
colestipol 5 gram oral packet	NP	PA; MT
Prevalite 4 gram oral powder	P	MT

Drug Name	Tier	Drug Restriction
Prevalite 4 gram powder for susp in a packet	P	MT
Questran 4 gram oral powder	NP	PA; MT
Questran 4 gram powder for susp in a packet	NP	PA; MT
Questran Light 4 gram oral powder	NP	PA; MT
WelChol 3.75 gram oral powder packet	NP	PA; MT
WelChol 625 mg tablet	NP	PA; MT
ANTIHYPERLIPIDEMIC - FIBRIC ACID DERIVATIVES		
Antara 30 mg capsule	NP	PA
Antara 90 mg capsule	NP	PA
fenofibrate 120 mg tablet	P	MT
fenofibrate 150 mg capsule	P	MT
fenofibrate 160 mg tablet	P	QL(Allowed 1 per 1 day); MT
fenofibrate 40 mg tablet	P	MT
fenofibrate 50 mg capsule	P	MT
fenofibrate 54 mg tablet	P	QL(Allowed 3 per 1 day); MT
fenofibrate micronized 130 mg capsule	P	MT
fenofibrate micronized 134 mg capsule	P	QL(Allowed 1 per 1 day); MT
fenofibrate micronized 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
fenofibrate micronized 43 mg capsule	P	MT
fenofibrate micronized 67 mg capsule	P	QL(Allowed 2 per 1 day); MT
fenofibrate nanocrystallized 145 mg tablet	P	MT
fenofibrate nanocrystallized 48 mg tablet	P	MT
fenofibric acid (choline) 135 mg capsule,delayed release	P	MT
fenofibric acid (choline) 45 mg capsule,delayed release	P	MT
fenofibric acid 105 mg tablet	NP	PA
fenofibric acid 35 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Fenoglide 120 mg tablet	NP	PA; MT
Fenoglide 40 mg tablet	NP	PA; MT
Fibricor 105 mg tablet	NP	PA
Fibricor 35 mg tablet	NP	PA
gemfibrozil 600 mg tablet	P	QL(Allowed 2 per 1 day); MT
Lipofen 150 mg capsule	NP	PA; MT
Lipofen 50 mg capsule	NP	PA; MT
Lopid 600 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Tricor 145 mg tablet	NP	PA; MT
Tricor 48 mg tablet	NP	PA; MT
Trilipix 135 mg capsule,delayed release	NP	PA; MT
Trilipix 45 mg capsule,delayed release	NP	PA; MT
ANTIHYPERLIPIDEMIC - HMG COA REDUCTASE INHIBITORS (STATINS)		
Altoprev 20 mg tablet,extended release	NP	PA
Altoprev 40 mg tablet,extended release	NP	PA
Altoprev 60 mg tablet,extended release	NP	PA
atorvastatin 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
atorvastatin 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
atorvastatin 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
atorvastatin 80 mg tablet	P	QL(Allowed 1 per 1 day); MT
Crestor 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Crestor 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Crestor 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Crestor 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Ezallor Sprinkle 10 mg capsule	NP	PA
Ezallor Sprinkle 20 mg capsule	NP	PA
Ezallor Sprinkle 40 mg capsule	NP	PA
Ezallor Sprinkle 5 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
fluvastatin 20 mg capsule	NP	PA; MT
fluvastatin 40 mg capsule	NP	PA; MT
fluvastatin ER 80 mg tablet,extended release 24 hr	NP	PA; MT
Lescol XL 80 mg tablet,extended release	NP	PA; MT
Lipitor 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lipitor 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lipitor 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lipitor 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Livalo 1 mg tablet	NP	PA
Livalo 2 mg tablet	NP	PA
Livalo 4 mg tablet	NP	PA
lovastatin 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
lovastatin 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
lovastatin 40 mg tablet	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Pravachol 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Pravachol 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
pravastatin 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
pravastatin 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
pravastatin 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
pravastatin 80 mg tablet	P	QL(Allowed 1 per 1 day); MT
rosuvastatin 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
rosuvastatin 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
rosuvastatin 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
rosuvastatin 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
simvastatin 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
simvastatin 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
simvastatin 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
simvastatin 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
simvastatin 80 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Zocor 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Zocor 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Zocor 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Zocor 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Zypitamag 1 mg tablet	NP	PA
Zypitamag 2 mg tablet	NP	PA
Zypitamag 4 mg tablet	NP	PA
ANTIHYPERLIPIDEMIC - NICOTINIC ACID DERIVATIVES		
niacin ER 1,000 mg tablet,extended release 24 hr	NP	PA; MT
niacin ER 500 mg tablet,extended release 24 hr	NP	PA; MT
niacin ER 750 mg tablet,extended release 24 hr	NP	PA; MT
Niaspan 1,000 mg tablet,extended release	NP	PA; MT
Niaspan 500 mg tablet,extended release	NP	PA; MT
Niaspan 750 mg tablet,extended release	NP	PA; MT
ANTIHYPERLIPIDEMIC - OMEGA-3 FATTY ACID TYPE		
icosapent ethyl 1 gram capsule	NP	PA
Lovaza 1 gram capsule	NP	PA; MT
omega-3 acid ethyl esters 1 gram capsule	NP	PA; MT
Vascepa 0.5 gram capsule	NP	PA
Vascepa 1 gram capsule	NP	PA
ANTIHYPERLIPIDEMIC - PSCK9 INHIBITORS		
Praluent Pen 150 mg/mL subcutaneous pen injector	NP	PA; SP
Praluent Pen 75 mg/mL subcutaneous pen injector	NP	PA; SP
Repatha Pushtronex 420 mg/3.5 mL subcutaneous wearable injector	NP	PA; SP
Repatha SureClick 140 mg/mL subcutaneous pen injector	NP	PA; SP

Drug Name	Tier	Drug Restriction
Repatha Syringe 140 mg/mL subcutaneous syringe	NP	PA; SP
ANTIHYPERLIPIDEMIC - SELECTIVE CHOLESTEROL ABSORPTION INHIBITOR		
ezetimibe 10 mg tablet	P	MT
Zetia 10 mg tablet	NP	PA; MT
ANTIHYPERLIPIDEMIC- ATP-CITRATE LYASE AND CHOLESTEROL ABSORPTION INHIB		
Nexlizet 180 mg-10 mg tablet	NP	PA
ANTIHYPERLIPIDEMIC HMG COA REDUCT INHIB AND CALCIUM CHANNEL BLOCKER		
amlodipine 10 mg-atorvastatin 10 mg tablet	NP	PA; MT
amlodipine 10 mg-atorvastatin 20 mg tablet	NP	PA; MT
amlodipine 10 mg-atorvastatin 40 mg tablet	NP	PA; MT
amlodipine 10 mg-atorvastatin 80 mg tablet	NP	PA; MT
amlodipine 2.5 mg-atorvastatin 10 mg tablet	NP	PA; MT
amlodipine 2.5 mg-atorvastatin 20 mg tablet	NP	PA; MT
amlodipine 2.5 mg-atorvastatin 40 mg tablet	NP	PA; MT
amlodipine 5 mg-atorvastatin 10 mg tablet	NP	PA; MT
amlodipine 5 mg-atorvastatin 20 mg tablet	NP	PA; MT
amlodipine 5 mg-atorvastatin 40 mg tablet	NP	PA; MT
amlodipine 5 mg-atorvastatin 80 mg tablet	NP	PA; MT
Caduet 10 mg-10 mg tablet	NP	PA; MT
Caduet 10 mg-20 mg tablet	NP	PA; MT
Caduet 10 mg-40 mg tablet	NP	PA; MT
Caduet 10 mg-80 mg tablet	NP	PA; MT
Caduet 5 mg-10 mg tablet	NP	PA; MT
Caduet 5 mg-20 mg tablet	NP	PA; MT
Caduet 5 mg-40 mg tablet	NP	PA; MT
Caduet 5 mg-80 mg tablet	NP	PA; MT
ANTIHYPERLIPIDEMIC-HMG COA REDUCT INHIB AND CHOLESTEROL ABSORP INHIBIT		

Drug Name	Tier	Drug Restriction
ezetimibe 10 mg-simvastatin 10 mg tablet	NP	ST; MT
ezetimibe 10 mg-simvastatin 20 mg tablet	NP	ST; MT
ezetimibe 10 mg-simvastatin 40 mg tablet	NP	ST; MT
ezetimibe 10 mg-simvastatin 80 mg tablet	NP	ST; MT
Vytorin 10 mg-10 mg tablet	NP	ST; MT
Vytorin 10 mg-20 mg tablet	NP	ST; MT
Vytorin 10 mg-40 mg tablet	NP	ST; MT
Vytorin 10 mg-80 mg tablet	NP	ST; MT
ANTIHYPERLIPIDEMIC-MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP)INHIB		
Juxtapid 10 mg capsule	NP	PA; SP
Juxtapid 20 mg capsule	NP	PA; SP
Juxtapid 30 mg capsule	NP	PA; SP
Juxtapid 40 mg capsule	NP	PA; SP
Juxtapid 5 mg capsule	NP	PA; SP
Juxtapid 60 mg capsule	NP	PA; SP
BETA BLOCKERS CARDIAC SELECTIVE		
atenolol 100 mg tablet	P	QL(Allowed 2 per 1 day); MT
atenolol 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
atenolol 50 mg tablet	P	QL(Allowed 2 per 1 day); MT
betaxolol 10 mg tablet	P	MT
betaxolol 20 mg tablet	P	MT
bisoprolol fumarate 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
bisoprolol fumarate 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
Bystolic 10 mg tablet	NP	PA
Bystolic 2.5 mg tablet	NP	PA
Bystolic 20 mg tablet	NP	PA
Bystolic 5 mg tablet	NP	PA
Kapspargo Sprinkle 100 mg capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Kapspargo Sprinkle 200 mg capsule,extended release	NP	PA
Kapspargo Sprinkle 25 mg capsule,extended release	NP	PA
Kapspargo Sprinkle 50 mg capsule,extended release	NP	PA
Lopressor 100 mg tablet	NP	PA; QL(Allowed 4.5 per 1 day); MT
Lopressor 50 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
metoprolol succinate ER 100 mg tablet,extended release 24 hr	P	QL(Allowed 4 per 1 day); MT
metoprolol succinate ER 200 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
metoprolol succinate ER 25 mg tablet,extended release 24 hr	P	QL(Allowed 4 per 1 day); MT
metoprolol succinate ER 50 mg tablet,extended release 24 hr	P	QL(Allowed 4 per 1 day); MT
metoprolol tartrate 100 mg tablet	P	QL(Allowed 4.5 per 1 day); MT
metoprolol tartrate 25 mg tablet	P	QL(Allowed 4 per 1 day); MT
metoprolol tartrate 37.5 mg tablet	P	MT
metoprolol tartrate 50 mg tablet	P	QL(Allowed 4 per 1 day); MT
metoprolol tartrate 75 mg tablet	P	MT
Tenormin 100 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Tenormin 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Tenormin 50 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Toprol XL 100 mg tablet,extended release	NP	PA; QL(Allowed 4 per 1 day); MT
Toprol XL 200 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Toprol XL 25 mg tablet,extended release	NP	PA; QL(Allowed 4 per 1 day); MT
Toprol XL 50 mg tablet,extended release	NP	PA; QL(Allowed 4 per 1 day); MT
BETA BLOCKERS CARDIAC SELECTIVE, INTRINSIC SYMPATHOMIMETIC ACTIVITY		
acebutolol 200 mg capsule	P	MT
acebutolol 400 mg capsule	P	MT

Drug Name	Tier	Drug Restriction
BETA BLOCKERS NON-CARDIAC SELECT., INTRINSIC SYMPATHOMIMETIC ACTIVITY		
pindolol 10 mg tablet	P	MT
pindolol 5 mg tablet	P	MT
BETA BLOCKERS NON-CARDIAC SELECTIVE		
Corgard 20 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Corgard 40 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Corgard 80 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Hemangeol 4.28 mg/mL oral solution	P	PA; SP; MT
Inderal LA 120 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Inderal LA 160 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Inderal LA 60 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Inderal LA 80 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Inderal XL 120 mg capsule,extended release	NP	PA
Inderal XL 80 mg capsule,extended release	NP	PA
InnoPran XL 120 mg capsule,extended release	NP	PA
InnoPran XL 80 mg capsule,extended release	NP	PA
nadolol 20 mg tablet	P	QL(Allowed 2 per 1 day); MT
nadolol 40 mg tablet	P	QL(Allowed 2 per 1 day); MT
nadolol 80 mg tablet	P	QL(Allowed 2 per 1 day); MT
propranolol 10 mg tablet	P	MT
propranolol 20 mg tablet	P	MT
propranolol 20 mg/5 mL (4 mg/mL) oral solution	P	MT
propranolol 40 mg tablet	P	MT
propranolol 40 mg/5 mL (8 mg/mL) oral solution	P	MT
propranolol 60 mg tablet	P	MT
propranolol 80 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
propranolol ER 120 mg capsule,24 hr,extended release	P	QL(Allowed 2 per 1 day); MT
propranolol ER 160 mg capsule,24 hr,extended release	P	QL(Allowed 2 per 1 day); MT
propranolol ER 60 mg capsule,24 hr,extended release	P	QL(Allowed 2 per 1 day); MT
propranolol ER 80 mg capsule,24 hr,extended release	P	QL(Allowed 2 per 1 day); MT
timolol 10 mg tablet	P	MT
timolol 20 mg tablet	P	MT
timolol 5 mg tablet	P	MT
BRADYKININ B2 RECEPTOR ANTAGONISTS		
Firazyr 30 mg/3 mL subcutaneous syringe	NP	PA; SP
icatibant 30 mg/3 mL subcutaneous syringe	NP	PA; SP
CALCIUM CHANNEL BLOCKERS - BENZOTHIAZEPINES		
Cardizem 120 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Cardizem 30 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Cardizem 60 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT

Drug Name	Tier	Drug Restriction
Cardizem CD 120 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Cardizem CD 180 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Cardizem CD 240 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Cardizem CD 300 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Cardizem CD 360 mg capsule,extended release	NP	PA; MT
Cardizem LA 120 mg tablet,extended release	NP	PA
Cardizem LA 180 mg tablet,extended release	NP	PA; MT
Cardizem LA 240 mg tablet,extended release	NP	PA; MT
Cardizem LA 300 mg tablet,extended release	NP	PA; MT
Cardizem LA 360 mg tablet,extended release	NP	PA; MT

Drug Name	Tier	Drug Restriction
Cardizem LA 420 mg tablet,extended release	NP	PA; MT
Cartia XT 120 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Cartia XT 180 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Cartia XT 240 mg capsule,extended release	P	QL(Allowed 2 per 1 day); MT
Cartia XT 300 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem 120 mg tablet	P	QL(Allowed 3 per 1 day); MT
diltiazem 30 mg tablet	P	QL(Allowed 3 per 1 day); MT
diltiazem 60 mg tablet	P	QL(Allowed 3 per 1 day); MT
diltiazem 90 mg tablet	P	QL(Allowed 3 per 1 day); MT
diltiazem CD 120 mg capsule,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
diltiazem CD 180 mg capsule,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
diltiazem CD 240 mg capsule,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
diltiazem CD 300 mg capsule,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
diltiazem CD 360 mg capsule,extended release 24 hr	P	MT
diltiazem ER (XR/XT) 120 mg capsule,extended release 24 hr, controlled	P	QL(Allowed 1 per 1 day); MT
diltiazem ER (XR/XT) 180 mg capsule,extended release 24 hr, controlled	P	QL(Allowed 1 per 1 day); MT
diltiazem ER (XR/XT) 240 mg capsule,extended release 24 hr, controlled	P	QL(Allowed 2 per 1 day); MT
diltiazem ER 120 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem ER 120 mg capsule,extended release 12 hr	P	QL(Allowed 2 per 1 day); MT
diltiazem ER 180 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
diltiazem ER 180 mg tablet,extended release 24 hr	P	MT
diltiazem ER 240 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem ER 240 mg tablet,extended release 24 hr	P	MT
diltiazem ER 300 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem ER 300 mg tablet,extended release 24 hr	P	MT
diltiazem ER 360 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem ER 360 mg tablet,extended release 24 hr	P	MT
diltiazem ER 420 mg capsule,24 hr,extended release	P	QL(Allowed 1 per 1 day); MT
diltiazem ER 420 mg tablet,extended release 24 hr	P	MT
diltiazem ER 60 mg capsule,extended release 12 hr	P	QL(Allowed 2 per 1 day); MT
diltiazem ER 90 mg capsule,extended release 12 hr	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
DILT-XR 120 mg capsule, extended release	P	QL(Allowed 1 per 1 day); MT
DILT-XR 180 mg capsule, extended release	P	QL(Allowed 1 per 1 day); MT
DILT-XR 240 mg capsule, extended release	P	QL(Allowed 2 per 1 day); MT
Matzim LA 180 mg tablet,extended release	P	MT
Matzim LA 240 mg tablet,extended release	P	MT
Matzim LA 300 mg tablet,extended release	P	MT
Matzim LA 360 mg tablet,extended release	P	MT
Matzim LA 420 mg tablet,extended release	P	MT
Taztia XT 120 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Taztia XT 180 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Taztia XT 240 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Taztia XT 300 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Taztia XT 360 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 120 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 180 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 240 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 300 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 360 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiadylt ER 420 mg capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Tiazac 120 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Tiazac 180 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Tiazac 240 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Tiazac 300 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Tiazac 360 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Tiazac 420 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
CALCIUM CHANNEL BLOCKERS - DIHYDROPYRIDINES		
Adalat CC 90 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
amlodipine 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
amlodipine 2.5 mg tablet	P	QL(Allowed 1 per 1 day); MT
amlodipine 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
felodipine ER 10 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
felodipine ER 2.5 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
felodipine ER 5 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
isradipine 2.5 mg capsule	NP	PA; MT
isradipine 5 mg capsule	NP	PA; MT

Drug Name	Tier	Drug Restriction
Katerzia 1 mg/mL oral suspension	NP	PA; MT
nicardipine 20 mg capsule	NP	PA; MT
nicardipine 30 mg capsule	NP	PA; MT
nifedipine 10 mg capsule	P	QL(Allowed 4 per 1 day); MT
nifedipine 20 mg capsule	P	QL(Allowed 4 per 1 day); MT
nifedipine ER 30 mg tablet,extended release	P	QL(Allowed 1 per 1 day); MT
nifedipine ER 30 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
nifedipine ER 60 mg tablet,extended release	P	QL(Allowed 2 per 1 day); MT
nifedipine ER 60 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
nifedipine ER 90 mg tablet,extended release	P	QL(Allowed 1 per 1 day); MT
nifedipine ER 90 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day); MT
nisoldipine ER 17 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 20 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 25.5 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 30 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 34 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 40 mg tablet,extended release 24 hr	NP	PA; MT
nisoldipine ER 8.5 mg tablet,extended release 24 hr	NP	PA; MT
Norvasc 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Norvasc 2.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Norvasc 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Procardia 10 mg capsule	NP	PA; QL(Allowed 4 per 1 day); MT
Procardia XL 30 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Procardia XL 60 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Procardia XL 90 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Sular 17 mg tablet,extended release	NP	PA; MT
Sular 34 mg tablet,extended release	NP	PA; MT
Sular 8.5 mg tablet,extended release	NP	PA; MT
CALCIUM CHANNEL BLOCKERS - DIHYDROPYRIDINES - CEREBROVASCULAR SPECIFIC		
nimodipine 30 mg capsule	P	MT
Nymalize 30 mg/10 mL oral solution	NP	PA
Nymalize 30 mg/5 mL oral syringe (FOR ORAL USE ONLY)	NP	PA
Nymalize 60 mg/10 mL oral syringe (FOR ORAL USE ONLY)	NP	PA
Nymalize 60 mg/20 mL oral solution	NP	PA; MT
CALCIUM CHANNEL BLOCKERS - PHENYLAKYLAMINES		
Calan SR 120 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Calan SR 180 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Calan SR 240 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
verapamil 120 mg tablet	P	QL(Allowed 3 per 1 day); MT
verapamil 40 mg tablet	P	QL(Allowed 3 per 1 day); MT
verapamil 80 mg tablet	P	QL(Allowed 3 per 1 day); MT
verapamil ER (PM) 100 mg capsule 24hr pellet CT,ext.release	P	QL(Allowed 2 per 1 day); MT
verapamil ER (PM) 200 mg capsule 24hr pellet CT,ext.release	P	QL(Allowed 2 per 1 day); MT
verapamil ER (PM) 300 mg capsule 24hr pellet CT,ext.release	P	QL(Allowed 1 per 1 day); MT
verapamil ER (SR) 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day); MT
verapamil ER (SR) 180 mg tablet,extended release	P	QL(Allowed 2 per 1 day); MT
verapamil ER (SR) 240 mg tablet,extended release	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
verapamil ER 120 mg 24 hr capsule,extended release	P	QL(Allowed 2 per 1 day); MT
verapamil ER 180 mg 24 hr capsule,extended release	P	QL(Allowed 2 per 1 day); MT
verapamil ER 240 mg 24 hr capsule,extended release	P	QL(Allowed 2 per 1 day); MT
verapamil ER 360 mg 24 hr capsule,extended release	P	QL(Allowed 1 per 1 day); MT
Verelan 120 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Verelan 180 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Verelan 240 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Verelan 360 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Verelan PM 100 mg capsule, extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Verelan PM 200 mg capsule, extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Verelan PM 300 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
CARDIAC SELECTIVE BETA BLOCKER-THIAZIDE DIURETIC AND RELATED COMB.		
atenolol 100 mg-chlorthalidone 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
atenolol 50 mg-chlorthalidone 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
bisoprolol 10 mg-hydrochlorothiazide 6.25 mg tablet	P	QL(Allowed 1 per 1 day); MT
bisoprolol 2.5 mg-hydrochlorothiazide 6.25 mg tablet	P	QL(Allowed 1 per 1 day); MT
bisoprolol 5 mg-hydrochlorothiazide 6.25 mg tablet	P	QL(Allowed 1 per 1 day); MT
metoprolol tartrate 100 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
metoprolol tartrate 100 mg-hydrochlorothiazide 50 mg tablet	P	QL(Allowed 2 per 1 day); MT
metoprolol tartrate 50 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
Tenoretic 100 100 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Tenoretic 50 50 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Ziac 10 mg-6.25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Ziac 2.5 mg-6.25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Ziac 5 mg-6.25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
CARDIOVASCULAR SYMPATHOMIMETIC - ANAPHYLAXIS THERAPY SINGLE AGENTS		
epinephrine (Jr) 0.15 mg/0.3 mL injection,auto-injector	P	QL(QL Overtime: Allowed 4 over 365 days)
epinephrine 0.15 mg/0.15 mL auto-injector (for 33 to 66 lb patients)	P	QL(QL Overtime: Allowed 4 over 365 days)
epinephrine 0.3 mg/0.3 mL injection, auto-injector	P	QL(QL Overtime: Allowed 4 over 365 days)
EpiPen 2-Pak 0.3 mg/0.3 mL injection, auto-injector	NP	PA; QL(QL Overtime: Allowed 4 over 365 days)
EpiPen Jr 2-Pak 0.15 mg/0.3 mL injection,auto-injector	NP	PA; QL(QL Overtime: Allowed 4 over 365 days)
Symjepi 0.15 mg/0.3 mL injection syringe (for 33 lb to 66 lb patients)	NP	PA
Symjepi 0.3 mg/0.3 mL injection syringe	NP	PA
CARDIOVASCULAR SYMPATHOMIMETICS		
droxidopa 100 mg capsule	NP	PA; SP
droxidopa 200 mg capsule	NP	PA; SP
droxidopa 300 mg capsule	NP	PA; SP
midodrine 10 mg tablet	P	MT
midodrine 2.5 mg tablet	P	MT
midodrine 5 mg tablet	P	MT
Northera 100 mg capsule	NP	PA; SP
Northera 200 mg capsule	NP	PA; SP
Northera 300 mg capsule	NP	PA; SP
CENTRAL ALPHA-2 AGONISTS-THIAZIDE DIURETIC AND RELATED COMB.		
methyldopa 250 mg-hydrochlorothiazide 15 mg tablet	P	MT
methyldopa 250 mg-hydrochlorothiazide 25 mg tablet	P	MT
CENTRAL ALPHA-2 RECEPTOR AGONISTS		

Drug Name	Tier	Drug Restriction
Catapres 0.1 mg tablet	NP	PA; MT
Catapres 0.2 mg tablet	NP	PA; MT
Catapres 0.3 mg tablet	NP	PA; MT
Catapres-TTS-1 0.1 mg/24 hr transdermal patch	NP	PA
Catapres-TTS-2 0.2 mg/24 hr transdermal patch	NP	PA
Catapres-TTS-3 0.3 mg/24 hr transdermal patch	NP	PA
clonidine 0.1 mg/24 hr weekly transdermal patch	P	
clonidine 0.2 mg/24 hr weekly transdermal patch	P	
clonidine 0.3 mg/24 hr weekly transdermal patch	P	
clonidine HCl 0.1 mg tablet	P	MT
clonidine HCl 0.2 mg tablet	P	MT
clonidine HCl 0.3 mg tablet	P	MT
guanfacine 1 mg tablet	P	MT
guanfacine 2 mg tablet	P	MT
methyldopa 250 mg tablet	P	MT
methyldopa 500 mg tablet	P	MT
DIGITALIS GLYCOSIDES		
Digitek 125 mcg (0.125 mg) tablet	P	MT
Digitek 250 mcg (0.25 mg) tablet	P	MT
Digox 125 mcg (0.125 mg) tablet	P	MT
Digox 250 mcg (0.25 mg) tablet	P	MT
digoxin 125 mcg (0.125 mg) tablet	P	MT
digoxin 250 mcg (0.25 mg) tablet	P	MT
digoxin 50 mcg/mL (0.05 mg/mL) oral solution	P	MT
DIRECT ACTING VASODILATORS		
hydralazine 10 mg tablet	P	MT
hydralazine 100 mg tablet	P	MT
hydralazine 25 mg tablet	P	MT
hydralazine 50 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
minoxidil 10 mg tablet	P	MT
minoxidil 2.5 mg tablet	P	MT
DIURETIC - ALDOSTERONE RECEPTOR ANTAGONIST, NON-SELECTIVE		
Aldactone 100 mg tablet	NP	PA; MT
Aldactone 25 mg tablet	NP	PA; MT
Aldactone 50 mg tablet	NP	PA; MT
CaroSpir 25 mg/5 mL oral suspension	NP	PA; MT
spironolactone 100 mg tablet	P	MT
spironolactone 25 mg tablet	P	MT
spironolactone 50 mg tablet	P	MT
DIURETIC - ALDOSTERONE RECEPTOR ANTAGONIST, SELECTIVE		
eplerenone 25 mg tablet	NP	PA; MT
eplerenone 50 mg tablet	NP	PA; MT
Inspra 25 mg tablet	NP	PA; MT
Inspra 50 mg tablet	NP	PA; MT
DIURETIC - CARBONIC ANHYDRASE INHIBITORS		
acetazolamide 125 mg tablet	P	MT
acetazolamide 250 mg tablet	P	MT
acetazolamide ER 500 mg capsule,extended release	P	MT
methazolamide 25 mg tablet	P	MT
methazolamide 50 mg tablet	P	MT
DIURETIC - LOOP		
bumetanide 0.5 mg tablet	P	MT
bumetanide 1 mg tablet	P	MT
bumetanide 2 mg tablet	P	MT
Edecrin 25 mg tablet	NP	PA; MT
ethacrynic acid 25 mg tablet	P	MT
furosemide 10 mg/mL oral solution	P	MT
furosemide 20 mg tablet	P	MT
furosemide 40 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
furosemide 40 mg/4 mL oral solution	P	MT
furosemide 40 mg/5 mL (8 mg/mL) oral solution	P	MT
furosemide 80 mg tablet	P	MT
Lasix 20 mg tablet	NP	PA; MT
Lasix 40 mg tablet	NP	PA; MT
Lasix 80 mg tablet	NP	PA; MT
torsemide 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
torsemide 100 mg tablet	P	QL(Allowed 1 per 1 day); MT
torsemide 20 mg tablet	P	MT
torsemide 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
DIURETIC - POTASSIUM SPARING		
amiloride 5 mg tablet	P	QL(Allowed 4 per 1 day); MT
triamterene 100 mg capsule	P	MT
triamterene 50 mg capsule	P	MT
DIURETIC - POTASSIUM SPARING-THIAZIDE AND RELATED COMBINATIONS		

Drug Name	Tier	Drug Restriction
Aldactazide 25 mg-25 mg tablet	NP	PA; MT
Aldactazide 50 mg-50 mg tablet	NP	PA
amiloride 5 mg-hydrochlorothiazide 50 mg tablet	P	QL(Allowed 1 per 1 day); MT
Dyazide 37.5 mg-25 mg capsule	NP	PA; QL(Allowed 1 per 1 day); MT
Maxzide 75 mg-50 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Maxzide-25mg 37.5 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
spironolactone 25 mg-hydrochlorothiazide 25 mg tablet	P	MT
triamterene 37.5 mg-hydrochlorothiazide 25 mg capsule	P	QL(Allowed 1 per 1 day); MT
triamterene 37.5 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 1 per 1 day); MT
triamterene 75 mg-hydrochlorothiazide 50 mg tablet	P	QL(Allowed 1 per 1 day); MT
DIURETIC - SELECTIVE ARGININE VASOPRESSIN V2 RECEPTOR ANTAGONISTS		
Samsca 15 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Samsca 30 mg tablet	NP	PA; SP
tolvaptan 15 mg tablet	NP	PA; SP
tolvaptan 30 mg tablet	NP	PA; SP
DIURETIC - THIAZIDES AND RELATED		
chlorthalidone 25 mg tablet	P	MT
chlorthalidone 50 mg tablet	P	MT
Diuril 250 mg/5 mL oral suspension	P	MT
hydrochlorothiazide 12.5 mg capsule	P	MT
hydrochlorothiazide 12.5 mg tablet	P	MT
hydrochlorothiazide 25 mg tablet	P	MT
hydrochlorothiazide 50 mg tablet	P	MT
indapamide 1.25 mg tablet	P	MT
indapamide 2.5 mg tablet	P	MT
metolazone 10 mg tablet	P	MT
metolazone 2.5 mg tablet	P	MT
metolazone 5 mg tablet	P	MT
GANGLIONIC BLOCKING, NON-DEPOLARIZING		
Vecamyl 2.5 mg tablet	NP	PA; SP
HYPERPOLARIZATION-ACTIVATED CYCLIC NUCLEOTIDE-GATED CHANNEL INHIBITORS		
Corlanor 5 mg tablet	NP	PA
Corlanor 5 mg/5 mL oral solution	NP	PA
Corlanor 7.5 mg tablet	NP	PA
NON-CARDIAC SELECTIVE BETA BLOCKER-THIAZIDE DIURETIC AND RELATED COMB.		
nadolol 80 mg-bendroflumethiazide 5 mg tablet	P	MT
propranolol 40 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
propranolol 80 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
PAH AGENTS - SELECTIVE PROSTACYCLIN RECEPTOR (IP) AGONISTS		
Uptravi 1,000 mcg tablet	NP	PA; SP
Uptravi 1,200 mcg tablet	NP	PA; SP
Uptravi 1,400 mcg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Uptravi 1,600 mcg tablet	NP	PA; SP
Uptravi 200 mcg (140)-800 mcg (60) tablets in a dose pack	NP	PA; SP
Uptravi 200 mcg tablet	NP	PA; SP
Uptravi 400 mcg tablet	NP	PA; SP
Uptravi 600 mcg tablet	NP	PA; SP
Uptravi 800 mcg tablet	NP	PA; SP
PERIPHERAL ALPHA-1 RECEPTOR BLOCKERS		
Cardura 1 mg tablet	NP	PA; MT
Cardura 2 mg tablet	NP	PA; MT
Cardura 4 mg tablet	NP	PA; MT
Cardura 8 mg tablet	NP	PA; MT
Cardura XL 4 mg tablet,extended release	NP	PA
Cardura XL 8 mg tablet,extended release	NP	PA
doxazosin 1 mg tablet	P	MT
doxazosin 2 mg tablet	P	MT
doxazosin 4 mg tablet	P	MT
doxazosin 8 mg tablet	P	MT
Minipress 1 mg capsule	NP	PA; MT
Minipress 2 mg capsule	NP	PA; MT
Minipress 5 mg capsule	NP	PA; MT
phenoxybenzamine 10 mg capsule	NP	PA; MT
prazosin 1 mg capsule	P	MT
prazosin 2 mg capsule	P	MT
prazosin 5 mg capsule	P	MT
terazosin 1 mg capsule	P	MT
terazosin 10 mg capsule	P	MT
terazosin 2 mg capsule	P	MT
terazosin 5 mg capsule	P	MT
PHEOCHROMOCYTOMA, AGENTS TO TREAT		

Drug Name	Tier	Drug Restriction
Demser 250 mg capsule	P	SP; MT
metyrosine 250 mg capsule	P	SP; MT
PLASMA KALLIKREIN INHIBITOR AGENTS, RECOMBINANT MONOCLONAL ANTIBODY		
Takhzyro 300 mg/2 mL (150 mg/mL) subcutaneous solution	NP	PA; SP
PLASMA KALLIKREIN INHIBITOR AGENTS, RECOMBINANT PROTEIN		
Kalbitor 10 mg/mL (1 mL) subcutaneous solution	NP	PA; SP
PLASMA KALLIKREIN INHIBITOR AGENTS, SMALL MOLECULE		
Orladeyo 110 mg capsule	NP	PA; SP
Orladeyo 150 mg capsule	NP	PA; SP
PULMONARY ANTIHYPERTENSIVE AGENTS - PROSTACYCLIN-TYPE		
epoprostenol (glycine) 0.5 mg intravenous solution	P	PA; SP
epoprostenol (glycine) 1.5 mg intravenous solution	P	PA; SP
epoprostenol 0.5 mg intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
epoprostenol 1.5 mg intravenous solution	P	PA; SP
Flolan 0.5 mg intravenous solution	P	PA; SP
Flolan 1.5 mg intravenous solution	P	PA; SP
Orenitram 0.125 mg tablet,extended release	NP	PA; SP
Orenitram 0.25 mg tablet,extended release	NP	PA; SP
Orenitram 1 mg tablet,extended release	NP	PA; SP
Orenitram 2.5 mg tablet,extended release	NP	PA; SP
Orenitram 5 mg tablet, extended release	NP	PA; SP
Remodulin 1 mg/mL injection solution	NP	PA; SP
Remodulin 10 mg/mL injection solution	NP	PA; SP
Remodulin 2.5 mg/mL injection solution	NP	PA; SP

Drug Name	Tier	Drug Restriction
Remodulin 5 mg/mL injection solution	NP	PA; SP
treprostinil sodium 1 mg/mL injection solution	NP	PA; SP
treprostinil sodium 10 mg/mL injection solution	NP	PA; SP
treprostinil sodium 2.5 mg/mL injection solution	NP	PA; SP
treprostinil sodium 5 mg/mL injection solution	NP	PA; SP
Tyvaso 1.74 mg/2.9 mL (0.6 mg/mL) solution for nebulization	NP	PA; SP
Tyvaso Institutional Starter Kit 1.74 mg/2.9 mL soln for nebulization	NP	PA; SP
Tyvaso Refill Kit 1.74 mg/2.9 mL (0.6 mg/mL) solution for nebulization	NP	PA; SP
Tyvaso Starter Kit 1.74 mg/2.9 mL solution for nebulization	NP	PA; SP
Veletri 0.5 mg intravenous solution	NP	PA; SP
Veletri 1.5 mg intravenous solution	NP	PA; SP
Ventavis 10 mcg/mL solution for nebulization	NP	PA; SP
Ventavis 20 mcg/mL solution for nebulization	NP	PA; SP
PULMONARY ANTIHYPERTENSIVE AGENTS-SOLUBLE GUANYLATE CYCLASE STIMULATOR		
Adempas 0.5 mg tablet	NP	PA; SP
Adempas 1 mg tablet	NP	PA; SP
Adempas 1.5 mg tablet	NP	PA; SP
Adempas 2 mg tablet	NP	PA; SP
Adempas 2.5 mg tablet	NP	PA; SP
PULMONARY ARTERIAL HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
ambrisentan 10 mg tablet	NP	PA; SP
ambrisentan 5 mg tablet	NP	PA; SP
bosentan 125 mg tablet	NP	PA; SP
bosentan 62.5 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Letairis 10 mg tablet	P	PA; SP
Letairis 5 mg tablet	P	PA; SP
Opsumit 10 mg tablet	NP	PA; SP
Tracleer 125 mg tablet	P	PA; SP
Tracleer 32 mg tablet for oral suspension	P	PA; SP
Tracleer 62.5 mg tablet	P	PA; SP
PULMONARY ARTERIAL HYPERTENSION AGENTS-SELECTIVE CGMP-PDE5 INHIBITORS		
Adcirca 20 mg tablet	P	PA; SP
Alyq 20 mg tablet	P	PA; SP
Revatio 10 mg/12.5 mL intravenous solution	NP	PA; SP
Revatio 10 mg/mL oral suspension	P	PA; SP
Revatio 20 mg tablet	NP	PA; SP
sildenafil (pulmonary hypertension) 10 mg/12.5 mL intravenous solution	NP	PA; SP
sildenafil (pulmonary hypertension) 10 mg/mL oral suspension	NP	PA; SP
sildenafil (pulmonary hypertension) 20 mg tablet	P	PA; SP
tadalafil 20 mg tablet (pulmonary hypertension)	P	PA; SP
RENIN INHIBITOR, DIRECT		
aliskiren 150 mg tablet	NP	PA; MT
aliskiren 300 mg tablet	NP	PA; MT
Tekturna 150 mg tablet	NP	PA; MT
Tekturna 300 mg tablet	NP	PA; MT
RENIN INHIBITOR, DIRECT AND DIURETIC COMBINATIONS		
Tekturna HCT 150 mg-12.5 mg tablet	NP	PA
Tekturna HCT 150 mg-25 mg tablet	NP	PA
Tekturna HCT 300 mg-12.5 mg tablet	NP	PA
Tekturna HCT 300 mg-25 mg tablet	NP	PA
VASODILATOR COMBINATIONS		

Drug Name	Tier	Drug Restriction
BiDil 20 mg-37.5 mg tablet	P	
CENTRAL NERVOUS SYSTEM AGENTS		
AGENTS TO TREAT EPISODIC CLUSTER HEADACHES		
Emgality 300 mg/3 mL (100 mg/mL x 3) subcutaneous syringe	NP	PA; SP
ANTIANXIETY AGENT - ANTIHISTAMINE TYPE		
hydroxyzine HCl 10 mg tablet	P	MT
hydroxyzine HCl 10 mg/5 mL oral solution	P	MT
hydroxyzine HCl 25 mg tablet	P	MT
hydroxyzine HCl 50 mg tablet	P	MT
hydroxyzine pamoate 100 mg capsule	P	MT
hydroxyzine pamoate 25 mg capsule	P	MT
hydroxyzine pamoate 50 mg capsule	P	MT
Vistaril 25 mg capsule	NP	PA; MT
Vistaril 50 mg capsule	NP	PA; MT
ANTIANXIETY AGENT - BENZODIAZEPINES		
alprazolam 0.25 mg disintegrating tablet	NP	PA
alprazolam 0.25 mg tablet	P	QL(Allowed 4 per 1 day)
alprazolam 0.5 mg disintegrating tablet	NP	PA
alprazolam 0.5 mg tablet	P	QL(Allowed 4 per 1 day)
alprazolam 1 mg disintegrating tablet	NP	PA
alprazolam 1 mg tablet	P	QL(Allowed 4 per 1 day)
alprazolam 2 mg disintegrating tablet	NP	PA
alprazolam 2 mg tablet	P	QL(Allowed 4 per 1 day)
alprazolam ER 0.5 mg tablet,extended release 24 hr	NP	PA
alprazolam ER 1 mg tablet,extended release 24 hr	NP	PA
alprazolam ER 2 mg tablet,extended release 24 hr	NP	PA
alprazolam ER 3 mg tablet,extended release 24 hr	NP	PA
Alprazolam Intensol 1 mg/mL oral concentrate	P	

Drug Name	Tier	Drug Restriction
Ativan 0.5 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
Ativan 1 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Ativan 2 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
chlordiazepoxide 10 mg capsule	P	QL(Allowed 4 per 1 day)
chlordiazepoxide 25 mg capsule	P	QL(Allowed 4 per 1 day)
chlordiazepoxide 5 mg capsule	P	QL(Allowed 4 per 1 day)
clorazepate dipotassium 15 mg tablet	P	QL(Allowed 3 per 1 day)
clorazepate dipotassium 3.75 mg tablet	P	QL(Allowed 3 per 1 day)
clorazepate dipotassium 7.5 mg tablet	P	QL(Allowed 3 per 1 day)
diazepam 10 mg tablet	P	QL(Allowed 4 per 1 day)
diazepam 2 mg tablet	P	QL(Allowed 4 per 1 day)
diazepam 5 mg tablet	P	QL(Allowed 4 per 1 day)
diazepam 5 mg/5 mL (1 mg/mL) oral solution	P	QL(Allowed 500 per Rx)
diazepam 5 mg/5 mL (1 mg/mL, 5 mL) oral solution	P	
diazepam 5 mg/mL oral concentrate	P	
Diazepam Intensol 5 mg/mL oral concentrate	P	
lorazepam 0.5 mg tablet	P	QL(Allowed 3 per 1 day)
lorazepam 1 mg tablet	P	QL(Allowed 4 per 1 day)
lorazepam 2 mg tablet	P	QL(Allowed 3 per 1 day)
lorazepam 2 mg/mL oral concentrate	P	
Lorazepam Intensol 2 mg/mL oral concentrate	P	
oxazepam 10 mg capsule	P	QL(Allowed 4 per 1 day)
oxazepam 15 mg capsule	P	QL(Allowed 4 per 1 day)
oxazepam 30 mg capsule	P	QL(Allowed 4 per 1 day)
Tranxene T-Tab 7.5 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
Xanax 0.25 mg tablet	NP	PA; QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
Xanax 0.5 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Xanax 1 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Xanax 2 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Xanax XR 0.5 mg tablet,extended release	NP	PA
Xanax XR 1 mg tablet,extended release	NP	PA
Xanax XR 2 mg tablet,extended release	NP	PA
Xanax XR 3 mg tablet,extended release	NP	PA
ANTIANXIETY AGENT - DICARBAMATE TYPE		
meprobamate 200 mg tablet	NP	PA; MT
meprobamate 400 mg tablet	NP	PA; MT
ANTIANXIETY AGENT - NON-BENZODIAZEPINE		
buspirone 10 mg tablet	P	QL(Allowed 6 per 1 day); MT
buspirone 15 mg tablet	P	QL(Allowed 4 per 1 day); MT
buspirone 30 mg tablet	P	QL(Allowed 3 per 1 day); MT
buspirone 5 mg tablet	P	QL(Allowed 6 per 1 day); MT
buspirone 7.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
ANTICONVULSANT - AMPA-TYPE GLUTAMATE RECEPTOR ANTAGONISTS		
Fycompa 0.5 mg/mL oral suspension	NP	APA
Fycompa 10 mg tablet	NP	APA
Fycompa 12 mg tablet	NP	APA
Fycompa 2 mg tablet	NP	APA
Fycompa 4 mg tablet	NP	APA
Fycompa 6 mg tablet	NP	APA
Fycompa 8 mg tablet	NP	APA
ANTICONVULSANT - BARBITURATES AND DERIVATIVES		
Mysoline 250 mg tablet	NP	MT; APA
Mysoline 50 mg tablet	NP	MT; APA
phenobarbital 100 mg tablet	P	
phenobarbital 15 mg tablet	P	
phenobarbital 16.2 mg tablet	P	

Drug Name	Tier	Drug Restriction
phenobarbital 20 mg/5 mL (4 mg/mL) oral elixir	P	
phenobarbital 30 mg tablet	P	
phenobarbital 32.4 mg tablet	P	
phenobarbital 60 mg tablet	P	
phenobarbital 64.8 mg tablet	P	
phenobarbital 97.2 mg tablet	P	
primidone 250 mg tablet	P	MT; APA
primidone 50 mg tablet	P	MT; APA
ANTICONVULSANT - BENZODIAZEPINES		
clobazam 10 mg tablet	NP	APA
clobazam 2.5 mg/mL oral suspension	NP	APA
clobazam 20 mg tablet	NP	APA
clonazepam 0.125 mg disintegrating tablet	NP	APA
clonazepam 0.25 mg disintegrating tablet	NP	APA
clonazepam 0.5 mg disintegrating tablet	NP	APA
clonazepam 0.5 mg tablet	P	QL(Allowed 4 per 1 day); APA
clonazepam 1 mg disintegrating tablet	NP	APA
clonazepam 1 mg tablet	P	QL(Allowed 4 per 1 day); APA
clonazepam 2 mg disintegrating tablet	NP	APA
clonazepam 2 mg tablet	P	QL(Allowed 4 per 1 day); APA
Diastat 2.5 mg rectal kit	P	APA
Diastat AcuDial 12.5 mg-15 mg-17.5 mg-20 mg rectal kit	P	QL(Allowed 1 per Rx); APA
Diastat AcuDial 5 mg-7.5 mg-10 mg rectal kit	P	QL(Allowed 1 per Rx); APA
diazepam 12.5 mg-15 mg-17.5 mg-20 mg rectal kit	P	QL(Allowed 1 per Rx); APA
diazepam 2.5 mg rectal kit	P	QL(Allowed 1 per Rx); APA
diazepam 5 mg-7.5 mg-10 mg rectal kit	P	QL(Allowed 1 per Rx); APA
Klonopin 0.5 mg tablet	NP	QL(Allowed 4 per 1 day); APA

Drug Name	Tier	Drug Restriction
Klonopin 1 mg tablet	NP	QL(Allowed 4 per 1 day); APA
Klonopin 2 mg tablet	NP	QL(Allowed 4 per 1 day); APA
Nayzilam 5 mg/spray (0.1 mL) nasal spray	NP	APA
Onfi 10 mg tablet	NP	APA
Onfi 2.5 mg/mL oral suspension	NP	APA
Onfi 20 mg tablet	NP	APA
Sympazan 10 mg oral film	NP	APA
Sympazan 20 mg oral film	NP	APA
Sympazan 5 mg oral film	NP	APA
Valtoco 10 mg/spray (0.1 mL) nasal spray	NP	PA
Valtoco 15 mg/2 spray(7.5mg/0.1mL x2) nasal spray	NP	PA
Valtoco 20 mg/2 spray (10mg/0.1mL x2) nasal spray	NP	PA
Valtoco 5 mg/spray (0.1 mL) nasal spray	NP	PA
ANTICONVULSANT - CANNABINOID TYPE		
Epidiolex 100 mg/mL oral solution	NP	SP; APA
ANTICONVULSANT - CARBAMATES		
felbamate 400 mg tablet	NP	MT; APA
felbamate 600 mg tablet	NP	MT; APA
felbamate 600 mg/5 mL oral suspension	NP	MT; APA
Felbatol 400 mg tablet	NP	MT; APA
Felbatol 600 mg tablet	NP	MT; APA
Felbatol 600 mg/5 mL oral suspension	NP	MT; APA
ANTICONVULSANT - CARBOXYLIC ACID DERIVATIVES		
Depakote 125 mg tablet,delayed release	NP	MT; APA
Depakote 250 mg tablet,delayed release	NP	MT; APA
Depakote 500 mg tablet,delayed release	NP	MT; APA
Depakote ER 250 mg tablet,extended release	NP	MT; APA
Depakote ER 500 mg tablet,extended release	NP	MT; APA

Drug Name	Tier	Drug Restriction
Depakote Sprinkles 125 mg capsule,delayed release	NP	MT; APA
divalproex 125 mg capsule,delayed release sprinkle	P	MT; APA
divalproex 125 mg tablet,delayed release	P	MT; APA
divalproex 250 mg tablet,delayed release	P	MT; APA
divalproex 500 mg tablet,delayed release	P	MT; APA
divalproex ER 250 mg tablet,extended release 24 hr	P	MT; APA
divalproex ER 500 mg tablet,extended release 24 hr	P	MT; APA
valproic acid (as sodium salt) 250 mg/5 mL (5 mL) oral solution	P	MT; APA
valproic acid (as sodium salt) 250 mg/5 mL oral solution	P	MT; APA
valproic acid (as sodium salt) 500 mg/10 mL (10 mL) oral solution	P	MT; APA
valproic acid 250 mg capsule	P	MT; APA
ANTICONVULSANT - FUNCTIONALIZED AMINO ACID		
Vimpat 10 mg/mL oral solution	NP	APA
Vimpat 100 mg tablet	NP	APA
Vimpat 150 mg tablet	NP	APA
Vimpat 200 mg tablet	NP	APA
Vimpat 50 mg tablet	NP	APA
ANTICONVULSANT - GABA ANALOGS		
Gabapal 100 mg-3.88 %-4" X 4" kit, topical cream and oral capsule	NP	PA
gabapentin 100 mg capsule	P	QL(Allowed 9 per 1 day); MT; APA
gabapentin 250 mg/5 mL (5 mL) oral solution	P	MT; APA
gabapentin 250 mg/5 mL oral solution	P	MT; APA
gabapentin 300 mg capsule	P	QL(Allowed 9 per 1 day); MT; APA
gabapentin 300 mg/6 mL (6 mL) oral solution	P	MT; APA

Drug Name	Tier	Drug Restriction
gabapentin 400 mg capsule	P	QL(Allowed 9 per 1 day); MT; APA
gabapentin 600 mg tablet	P	QL(Allowed 6 per 1 day); MT; APA
gabapentin 800 mg tablet	P	QL(Allowed 4 per 1 day); MT; APA
Lidotin 100 mg-3.88 % kit, cream and capsule	NP	PA
Lipritin 100 mg capsule-2.5 %-2.5 % cream-6 cm X 7 cm dressing kit	NP	PA
Lipritin II 100 mg capsule-2.5 %-2.5 % cream-6 cm X 7 cm dressing kit	NP	PA
Lyrica 100 mg capsule	NP	MT; APA
Lyrica 150 mg capsule	NP	MT; APA
Lyrica 20 mg/mL oral solution	NP	MT; APA
Lyrica 200 mg capsule	NP	MT; APA
Lyrica 225 mg capsule	NP	MT; APA
Lyrica 25 mg capsule	NP	MT; APA
Lyrica 300 mg capsule	NP	MT; APA

Drug Name	Tier	Drug Restriction
Lyrica 50 mg capsule	NP	MT; APA
Lyrica 75 mg capsule	NP	MT; APA
Neurontin 100 mg capsule	NP	QL(Allowed 9 per 1 day); MT; APA
Neurontin 250 mg/5 mL oral solution	NP	MT; APA
Neurontin 300 mg capsule	NP	QL(Allowed 9 per 1 day); MT; APA
Neurontin 400 mg capsule	NP	QL(Allowed 9 per 1 day); MT; APA
Neurontin 600 mg tablet	NP	QL(Allowed 6 per 1 day); MT; APA
Neurontin 800 mg tablet	NP	QL(Allowed 4 per 1 day); MT; APA
Pentican 100 mg capsule and 5 % topical patch kit	NP	PA
pregabalin 100 mg capsule	P	MT; APA
pregabalin 150 mg capsule	P	MT; APA
pregabalin 20 mg/mL oral solution	P	MT; APA
pregabalin 200 mg capsule	P	MT; APA
pregabalin 225 mg capsule	P	MT

Drug Name	Tier	Drug Restriction
pregabalin 25 mg capsule	P	MT; APA
pregabalin 300 mg capsule	P	MT; APA
pregabalin 50 mg capsule	P	MT; APA
pregabalin 75 mg capsule	P	MT; APA
ANTICONVULSANT - GABA RE-UPTAKE INHIBITOR, NIPECOTIC ACID DERIVATIVES		
Gabitril 12 mg tablet	NP	MT; APA
Gabitril 16 mg tablet	NP	MT; APA
Gabitril 2 mg tablet	NP	MT; APA
Gabitril 4 mg tablet	NP	MT; APA
tiagabine 12 mg tablet	NP	MT; APA
tiagabine 16 mg tablet	NP	MT; APA
tiagabine 2 mg tablet	NP	MT; APA
tiagabine 4 mg tablet	NP	MT; APA
ANTICONVULSANT - GABA TRANSAMINASE (GABA-T) INHIBITOR		
Sabril 500 mg oral powder packet	NP	SP; MT; APA
Sabril 500 mg tablet	NP	SP; MT; APA
vigabatrin 500 mg oral powder packet	NP	SP; MT; APA
vigabatrin 500 mg tablet	NP	SP; MT; APA
Vigadrone 500 mg oral powder packet	NP	SP; MT; APA
ANTICONVULSANT - HYDANTOINS		
Dilantin 30 mg capsule	NP	APA
Dilantin Extended 100 mg capsule	NP	MT; APA
Dilantin Infatabs 50 mg chewable tablet	NP	MT; APA
Dilantin-125 125 mg/5 mL oral suspension	NP	MT; APA
Peganone 250 mg tablet	NP	APA
Phenytek 200 mg capsule	NP	MT; APA
Phenytek 300 mg capsule	NP	MT; APA
phenytoin 100 mg/4 mL oral suspension	P	MT; APA
phenytoin 125 mg/5 mL oral suspension	P	MT; APA

Drug Name	Tier	Drug Restriction
phenytoin 50 mg chewable tablet	P	MT; APA
phenytoin sodium extended 100 mg capsule	P	MT; APA
phenytoin sodium extended 200 mg capsule	P	MT; APA
phenytoin sodium extended 300 mg capsule	P	MT; APA
ANTICONVULSANT - IMINOSTILBENE DERIVATIVES		
Aptiom 200 mg tablet	NP	APA
Aptiom 400 mg tablet	NP	APA
Aptiom 600 mg tablet	NP	APA
Aptiom 800 mg tablet	NP	APA
carbamazepine 100 mg chewable tablet	P	MT; APA
carbamazepine 100 mg/5 mL (5 mL) oral suspension	P	MT
carbamazepine 100 mg/5 mL oral suspension	P	MT; APA
carbamazepine 200 mg tablet	P	MT; APA
carbamazepine 200 mg/10 mL oral suspension	P	MT
carbamazepine ER 100 mg capsule,extended release mphase12hr	NP	MT; APA
carbamazepine ER 100 mg tablet,extended release,12 hr	P	MT; APA
carbamazepine ER 200 mg capsule,extended release mphase12hr	NP	MT; APA
carbamazepine ER 200 mg tablet,extended release,12 hr	P	MT; APA
carbamazepine ER 300 mg capsule,extended release mphase12hr	NP	MT; APA
carbamazepine ER 400 mg tablet,extended release,12 hr	P	MT; APA
Carbatrol 100 mg capsule, extended release	NP	MT; APA
Carbatrol 200 mg capsule, extended release	NP	MT; APA
Carbatrol 300 mg capsule, extended release	NP	MT; APA

Drug Name	Tier	Drug Restriction
Epitol 200 mg tablet	P	MT; APA
oxcarbazepine 150 mg tablet	P	MT; APA
oxcarbazepine 300 mg tablet	P	MT; APA
oxcarbazepine 300 mg/5 mL (60 mg/mL) oral suspension	P	MT; APA
oxcarbazepine 600 mg tablet	P	MT; APA
Oxtellar XR 150 mg tablet,extended release	NP	APA
Oxtellar XR 300 mg tablet,extended release	NP	APA
Oxtellar XR 600 mg tablet,extended release	NP	APA
Tegretol 100 mg/5 mL oral suspension	NP	MT; APA
Tegretol 200 mg tablet	NP	MT; APA
Tegretol XR 100 mg tablet,extended release	NP	MT; APA
Tegretol XR 200 mg tablet,extended release	NP	MT; APA
Tegretol XR 400 mg tablet,extended release	NP	MT; APA
Trileptal 150 mg tablet	NP	MT; APA
Trileptal 300 mg tablet	NP	MT; APA
Trileptal 300 mg/5 mL (60 mg/mL) oral suspension	NP	MT; APA
Trileptal 600 mg tablet	NP	MT; APA
ANTICONVULSANT - MONOSACCHARIDE DERIVATIVES		
Qudexy XR 100 mg capsule sprinkle,extended release	NP	MT; APA
Qudexy XR 150 mg capsule sprinkle,extended release	NP	MT; APA
Qudexy XR 200 mg capsule sprinkle,extended release	NP	MT; APA
Qudexy XR 25 mg capsule sprinkle,extended release	NP	MT; APA
Qudexy XR 50 mg capsule sprinkle,extended release	NP	MT; APA

Drug Name	Tier	Drug Restriction
Topamax 100 mg tablet	NP	QL(Allowed 4 per 1 day); MT; APA
Topamax 15 mg sprinkle capsule	NP	QL(Allowed 6 per 1 day); MT; APA
Topamax 200 mg tablet	NP	QL(Allowed 2 per 1 day); MT; APA
Topamax 25 mg sprinkle capsule	NP	QL(Allowed 8 per 1 day); MT; APA
Topamax 25 mg tablet	NP	QL(Allowed 6 per 1 day); MT; APA
Topamax 50 mg tablet	NP	QL(Allowed 6 per 1 day); MT; APA
topiramate 100 mg tablet	P	QL(Allowed 4 per 1 day); MT; APA
topiramate 15 mg sprinkle capsule	P	QL(Allowed 6 per 1 day); MT; APA
topiramate 200 mg tablet	P	QL(Allowed 2 per 1 day); MT; APA
topiramate 25 mg sprinkle capsule	P	QL(Allowed 8 per 1 day); MT; APA
topiramate 25 mg tablet	P	QL(Allowed 6 per 1 day); MT; APA
topiramate 50 mg tablet	P	QL(Allowed 6 per 1 day); MT; APA
topiramate XR 100 mg capsule sprinkle,extended release 24 hr	NP	MT; APA
topiramate XR 150 mg capsule sprinkle,extended release 24 hr	NP	MT; APA
topiramate XR 200 mg capsule sprinkle,extended release 24 hr	NP	MT; APA
topiramate XR 25 mg capsule sprinkle,extended release 24 hr	NP	MT; APA
topiramate XR 50 mg capsule sprinkle,extended release 24 hr	NP	MT; APA
Trokendi XR 100 mg capsule, extended release	NP	APA
Trokendi XR 200 mg capsule, extended release	NP	APA
Trokendi XR 25 mg capsule,extended release	NP	APA
Trokendi XR 50 mg capsule, extended release	NP	APA
ANTICONVULSANT - PHENYLTRIAZINE DERIVATIVES		
Lamictal 100 mg tablet	NP	MT; APA
Lamictal 150 mg tablet	NP	MT; APA

Drug Name	Tier	Drug Restriction
Lamictal 200 mg tablet	NP	MT; APA
Lamictal 25 mg chewable dispersible tablet	NP	MT; APA
Lamictal 25 mg tablet	NP	MT; APA
Lamictal 5 mg chewable dispersible tablet	NP	MT; APA
Lamictal ODT 100 mg disintegrating tablet	NP	MT; APA
Lamictal ODT 200 mg disintegrating tablet	NP	MT; APA
Lamictal ODT 25 mg disintegrating tablet	NP	MT; APA
Lamictal ODT 50 mg disintegrating tablet	NP	MT; APA
Lamictal ODT Starter (Blue) 25 mg (21)-50 mg (7) tablet,disintegrating	NP	MT; APA
Lamictal ODT Starter (Green) 50 mg (42)-100 mg (14) tablet,disintegrat	NP	MT; APA
Lamictal ODT Starter(Orange) 25 mg(14)-50 mg(14)-100 mg(7) tab,disint	NP	MT; APA
Lamictal Starter (Blue) Kit 25 mg (35) tablets in a dose pack	NP	MT; APA
Lamictal Starter (Green) Kit 25 mg (84)-100 mg (14) tablets, dose pack	NP	MT; APA
Lamictal Starter (Orange) Kit 25 mg (42)-100 mg (7) tablets, dose pack	NP	MT; APA
Lamictal XR 100 mg tablet,extended release	NP	ST; MT; APA
Lamictal XR 200 mg tablet,extended release	NP	ST; MT; APA
Lamictal XR 25 mg tablet,extended release	NP	ST; MT; APA
Lamictal XR 250 mg tablet,extended release	NP	ST; MT; APA
Lamictal XR 300 mg tablet,extended release	NP	ST; MT; APA
Lamictal XR 50 mg tablet,extended release	NP	ST; MT; APA

Drug Name	Tier	Drug Restriction
Lamictal XR Starter (Blue) 25 mg (21)-50 mg (7) tablet,extend release	NP	APA
Lamictal XR Starter (Green) 50 mg(14)-100 mg(14)-200 mg(7) tab,ext.rel	NP	APA
Lamictal XR Starter (Orange) 25 mg(14)-50 mg(14)-100 mg(7) tab,ext.rel	NP	APA
lamotrigine 100 mg disintegrating tablet	NP	MT; APA
lamotrigine 100 mg tablet	P	MT; APA
lamotrigine 150 mg tablet	P	MT; APA
lamotrigine 200 mg disintegrating tablet	NP	MT; APA
lamotrigine 200 mg tablet	P	MT; APA
lamotrigine 25 mg (21)-50 mg (7) tablet,disintegrating , pack	NP	PA; MT
lamotrigine 25 mg (35) tablets in a dose pack	NP	MT; APA
lamotrigine 25 mg (42)-100 mg (7) tablets in a dose pack	NP	MT; APA
lamotrigine 25 mg (84)-100 mg (14) tablets in a dose pack	NP	MT; APA
lamotrigine 25 mg chewable dispersible tablet	P	MT; APA
lamotrigine 25 mg disintegrating tablet	NP	MT; APA
lamotrigine 25 mg tablet	P	MT; APA
lamotrigine 25 mg(14)-50 mg(14)-100 mg(7) tablet,disintegrating , pack	NP	PA; MT
lamotrigine 5 mg chewable dispersible tablet	P	MT; APA
lamotrigine 50 mg (42)-100 mg (14) tablet,disintegrating , pack	NP	PA; MT
lamotrigine 50 mg disintegrating tablet	NP	MT; APA
lamotrigine ER 100 mg tablet,extended release 24 hr	NP	ST; MT; APA
lamotrigine ER 200 mg tablet,extended release 24 hr	NP	ST; MT; APA

Drug Name	Tier	Drug Restriction
lamotrigine ER 25 mg tablet,extended release 24 hr	NP	ST; MT; APA
lamotrigine ER 250 mg tablet,extended release 24 hr	NP	ST; MT; APA
lamotrigine ER 300 mg tablet,extended release 24 hr	NP	ST; MT; APA
lamotrigine ER 50 mg tablet,extended release 24 hr	NP	ST; MT; APA
Subvenite 100 mg tablet	P	MT; APA
Subvenite 150 mg tablet	P	MT; APA
Subvenite 200 mg tablet	P	MT; APA
Subvenite 25 mg tablet	P	MT; APA
Subvenite Starter (Blue) Kit 25 mg (35) tablets in a dose pack	NP	MT; APA
Subvenite Starter (Green) Kit 25 mg (84)-100 mg (14) tablet, dose pack	NP	MT; APA
Subvenite Starter (Orange) Kit 25 mg (42)-100 mg (7) tablet, dose pack	NP	MT; APA
ANTICONVULSANT - PYRROLIDINE DERIVATIVES		
Briviact 10 mg tablet	NP	APA
Briviact 10 mg/mL oral solution	NP	APA
Briviact 100 mg tablet	NP	APA
Briviact 25 mg tablet	NP	APA
Briviact 50 mg tablet	NP	APA
Briviact 75 mg tablet	NP	APA
Elepsia XR 1,000 mg tablet,extended release	NP	PA
Elepsia XR 1,500 mg tablet,extended release	NP	PA
Keppra 1,000 mg tablet	NP	MT; APA
Keppra 100 mg/mL oral solution	NP	QL(Allowed 30 per 1 day); MT; APA
Keppra 250 mg tablet	NP	QL(Allowed 4 per 1 day); MT; APA
Keppra 500 mg tablet	NP	QL(Allowed 6 per 1 day); MT; APA
Keppra 750 mg tablet	NP	QL(Allowed 4 per 1 day); MT; APA
Keppra XR 500 mg tablet,extended release	NP	MT; APA

Drug Name	Tier	Drug Restriction
Keppra XR 750 mg tablet,extended release	NP	MT; APA
levetiracetam 1,000 mg tablet	P	MT; APA
levetiracetam 100 mg/mL oral solution	P	QL(Allowed 30 per 1 day); MT; APA
levetiracetam 250 mg tablet	P	QL(Allowed 4 per 1 day); MT; APA
levetiracetam 500 mg tablet	P	QL(Allowed 6 per 1 day); MT; APA
levetiracetam 500 mg/5 mL (5 mL) oral solution	P	QL(Allowed 30 per 1 day); MT; APA
levetiracetam 750 mg tablet	P	QL(Allowed 4 per 1 day); MT; APA
levetiracetam ER 500 mg tablet,extended release 24 hr	P	MT; APA
levetiracetam ER 750 mg tablet,extended release 24 hr	P	MT; APA
Roweepra 500 mg tablet	P	QL(Allowed 6 per 1 day); MT; APA
Spritam 1,000 mg tablet for oral suspension	NP	PA
Spritam 250 mg tablet for oral suspension	NP	PA
Spritam 500 mg tablet for oral suspension	NP	PA
Spritam 750 mg tablet for oral suspension	NP	PA
ANTICONVULSANT - SUCCINIMIDES		
Celontin 300 mg capsule	NP	APA
ethosuximide 250 mg capsule	P	MT; APA
ethosuximide 250 mg/5 mL oral solution	P	MT; APA
Zarontin 250 mg capsule	NP	MT; APA
Zarontin 250 mg/5 mL oral solution	NP	MT; APA
ANTICONVULSANT - SULFONAMIDE DERIVATIVES		
zonisamide 100 mg capsule	P	MT; APA
zonisamide 25 mg capsule	P	MT; APA
zonisamide 50 mg capsule	P	MT; APA
ANTICONVULSANT - TRIAZOLE DERIVATIVES		
Banzel 200 mg tablet	NP	SP; APA
Banzel 40 mg/mL oral suspension	NP	SP; APA

Drug Name	Tier	Drug Restriction
Banzel 400 mg tablet	NP	SP; APA
rufinamide 40 mg/mL oral suspension	NP	PA; SP
ANTICONVULSANT OTHERS		
Diacomit 250 mg capsule	NP	PA
Diacomit 250 mg oral powder packet	NP	PA
Diacomit 500 mg capsule	NP	PA
Diacomit 500 mg oral powder packet	NP	PA
Fintepla 2.2 mg/mL oral solution	NP	PA; SP
Xcopri 100 mg tablet	NP	PA
Xcopri 150 mg tablet	NP	PA
Xcopri 200 mg tablet	NP	PA
Xcopri 50 mg tablet	NP	PA
Xcopri Maintenance Pack 250 mg/day (200 mg x 1 and 50 mg x 1) tablets	NP	PA
Xcopri Maintenance Pack 350 mg/day (200 mg x 1 and 150 mg x 1) tablets	NP	PA
Xcopri Titration Pack 12.5 mg (14)-25 mg (14) tablets in a dose pack	NP	PA
Xcopri Titration Pack 150 mg (14)-200 mg (14) tablets in a dose pack	NP	PA
Xcopri Titration Pack 50 mg (14)-100 mg (14) tablets in a dose pack	NP	PA
ANTIDEPRESSANT - ALPHA-2 RECEPTOR ANTAGONISTS (NASSA)		
mirtazapine 15 mg disintegrating tablet	P	QL(Allowed 3 per 1 day); MT
mirtazapine 15 mg tablet	P	QL(Allowed 3 per 1 day); MT
mirtazapine 30 mg disintegrating tablet	P	QL(Allowed 1.5 per 1 day); MT
mirtazapine 30 mg tablet	P	QL(Allowed 1.5 per 1 day); MT
mirtazapine 45 mg disintegrating tablet	P	QL(Allowed 1 per 1 day); MT
mirtazapine 45 mg tablet	P	QL(Allowed 1 per 1 day); MT
mirtazapine 7.5 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Remeron 15 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Remeron 30 mg tablet	NP	PA; QL(Allowed 1.5 per 1 day); MT
Remeron SolTab 15 mg disintegrating tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Remeron SolTab 30 mg disintegrating tablet	NP	PA; QL(Allowed 1.5 per 1 day); MT
Remeron SolTab 45 mg disintegrating tablet	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIDEPRESSANT - MAO INHIBITOR NONSELECTIVE AND IRREVERSIBLE-TYPES A,B		
Emsam 12 mg/24 hr transdermal 24 hour patch	NP	PA
Emsam 6 mg/24 hr transdermal 24 hour patch	NP	PA
Emsam 9 mg/24 hr transdermal 24 hour patch	NP	PA
Marplan 10 mg tablet	NP	PA
Nardil 15 mg tablet	NP	PA; MT
phenelzine 15 mg tablet	P	MT
tranylcypromine 10 mg tablet	P	MT
ANTIDEPRESSANT - N-METHYL D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST		
Spravato 56 mg (28 mg x 2) nasal spray	NP	PA; SP
Spravato 84 mg (28 mg x 3) nasal spray	NP	PA; SP
ANTIDEPRESSANT - SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
Celexa 10 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Celexa 20 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Celexa 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
citalopram 10 mg tablet	P	QL(Allowed 4 per 1 day); MT
citalopram 10 mg/5 mL oral solution	P	QL(QL Overtime: Allowed 240 over 30 days); MT
citalopram 20 mg tablet	P	QL(Allowed 2 per 1 day); MT
citalopram 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
escitalopram 10 mg tablet	P	QL(Allowed 2 per 1 day); MT
escitalopram 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
escitalopram 5 mg tablet	P	QL(Allowed 4 per 1 day); MT
escitalopram 5 mg/5 mL oral solution	P	MT
fluoxetine 10 mg capsule	P	QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
fluoxetine 10 mg tablet	P	PA; MT
fluoxetine 20 mg capsule	P	QL(Allowed 4 per 1 day); MT
fluoxetine 20 mg tablet	P	PA; MT
fluoxetine 20 mg/5 mL (4 mg/mL) oral solution	P	QL(QL Overtime: Allowed 600 over 30 days); MT
fluoxetine 40 mg capsule	P	QL(Allowed 4 per 1 day); MT
fluoxetine 60 mg tablet	P	MT
fluoxetine 90 mg capsule,delayed release	NP	PA; MT
fluvoxamine 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
fluvoxamine 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
fluvoxamine 50 mg tablet	P	QL(Allowed 2 per 1 day); MT
fluvoxamine ER 100 mg capsule,extended release 24 hr	NP	PA; MT
fluvoxamine ER 150 mg capsule,extended release 24 hr	NP	PA; MT
Lexapro 10 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Lexapro 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Lexapro 5 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
paroxetine 10 mg tablet	P	QL(Allowed 6 per 1 day); MT
paroxetine 20 mg tablet	P	QL(Allowed 3 per 1 day); MT
paroxetine 30 mg tablet	P	QL(Allowed 2 per 1 day); MT
paroxetine 40 mg tablet	P	QL(Allowed 2 per 1 day); MT
paroxetine ER 12.5 mg tablet,extended release 24 hr	NP	PA; MT
paroxetine ER 25 mg tablet,extended release 24 hr	NP	PA; MT
paroxetine ER 37.5 mg tablet,extended release 24 hr	NP	PA; MT
Paxil 10 mg tablet	NP	PA; QL(Allowed 6 per 1 day); MT
Paxil 10 mg/5 mL oral suspension	NP	PA; QL(Allowed 40 per 1 day)
Paxil 20 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Paxil 30 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Paxil 40 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Paxil CR 12.5 mg tablet,extended release	NP	PA; MT
Paxil CR 25 mg tablet,extended release	NP	PA; MT
Paxil CR 37.5 mg tablet,extended release	NP	PA; MT
Pexeva 10 mg tablet	NP	PA
Pexeva 20 mg tablet	NP	PA
Pexeva 30 mg tablet	NP	PA
Pexeva 40 mg tablet	NP	PA
Prozac 10 mg capsule	NP	PA; QL(Allowed 4 per 1 day); MT
Prozac 20 mg capsule	NP	PA; QL(Allowed 4 per 1 day); MT
Prozac 40 mg capsule	NP	PA; QL(Allowed 4 per 1 day); MT
Sarafem 10 mg tablet	NP	PA; MT
sertraline 100 mg tablet	P	QL(Allowed 2 per 1 day); MT
sertraline 20 mg/mL oral concentrate	P	QL(Allowed 10 per 1 day); MT
sertraline 25 mg tablet	P	QL(Allowed 4 per 1 day); MT
sertraline 50 mg tablet	P	QL(Allowed 4 per 1 day); MT
Zoloft 100 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Zoloft 20 mg/mL oral concentrate	NP	PA; QL(Allowed 10 per 1 day); MT
Zoloft 25 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Zoloft 50 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
ANTIDEPRESSANT - SEROTONIN-2 ANTAGONIST-REUPTAKE INHIBITORS (SARIS)		
nefazodone 100 mg tablet	NP	PA; MT
nefazodone 150 mg tablet	NP	PA; MT
nefazodone 200 mg tablet	NP	PA; MT
nefazodone 250 mg tablet	NP	PA; MT
nefazodone 50 mg tablet	NP	PA; MT
trazodone 100 mg tablet	P	MT
trazodone 150 mg tablet	P	MT
trazodone 300 mg tablet	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
trazodone 50 mg tablet	P	MT
ANTIDEPRESSANT - SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
Cymbalta 20 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Cymbalta 30 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
Cymbalta 60 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day); MT
desvenlafaxine ER 100 mg tablet,extended release 24 hr	NP	PA; MT
desvenlafaxine ER 50 mg tablet,extended release 24 hr	NP	PA; MT
desvenlafaxine succinate ER 100 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 4 per 1 day); MT
desvenlafaxine succinate ER 25 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 1 per 1 day); MT
desvenlafaxine succinate ER 50 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Drizalma Sprinkle 20 mg capsule,delayed release	NP	PA
Drizalma Sprinkle 30 mg capsule,delayed release	NP	PA
Drizalma Sprinkle 40 mg capsule,delayed release	NP	PA
Drizalma Sprinkle 60 mg capsule,delayed release	NP	PA
duloxetine 20 mg capsule,delayed release	P	QL(Allowed 1 per 1 day); MT
duloxetine 30 mg capsule,delayed release	P	QL(Allowed 1 per 1 day); MT
duloxetine 40 mg capsule,delayed release	P	MT
duloxetine 60 mg capsule,delayed release	P	QL(Allowed 1 per 1 day); MT
Effexor XR 150 mg capsule,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Effexor XR 37.5 mg capsule,extended release	NP	PA; QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
Effexor XR 75 mg capsule,extended release	NP	PA; QL(Allowed 5 per 1 day); MT
Fetzima 120 mg capsule,extended release	NP	PA
Fetzima 20 mg (2)-40 mg (26) capsule,extended release,24 hr,dose pack	NP	PA
Fetzima 20 mg capsule,extended release	NP	PA
Fetzima 40 mg capsule,extended release	NP	PA
Fetzima 80 mg capsule,extended release	NP	PA
Pristiq 100 mg tablet,extended release	NP	ST; QL(Allowed 4 per 1 day); MT
Pristiq 25 mg tablet,extended release	NP	ST; QL(Allowed 1 per 1 day); MT
Pristiq 50 mg tablet,extended release	NP	ST; QL(Allowed 1 per 1 day); MT
venlafaxine 100 mg tablet	P	MT
venlafaxine 25 mg tablet	P	MT
venlafaxine 37.5 mg tablet	P	MT
venlafaxine 50 mg tablet	P	MT
venlafaxine 75 mg tablet	P	MT
venlafaxine ER 150 mg capsule,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
venlafaxine ER 150 mg tablet,extended release 24 hr	NP	PA; MT
venlafaxine ER 225 mg tablet,extended release 24 hr	NP	PA; MT
venlafaxine ER 37.5 mg capsule,extended release 24 hr	P	QL(Allowed 4 per 1 day); MT
venlafaxine ER 37.5 mg tablet,extended release 24 hr	NP	PA; MT
venlafaxine ER 75 mg capsule,extended release 24 hr	P	QL(Allowed 5 per 1 day); MT
venlafaxine ER 75 mg tablet,extended release 24 hr	NP	PA; MT
ANTIDEPRESSANT - SSRI AND 5HT1A PARTIAL AGONIST		

Drug Name	Tier	Drug Restriction
Viibryd 10 mg (7)-20 mg (23) tablets in a dose pack	NP	PA
Viibryd 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Viibryd 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Viibryd 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
ANTIDEPRESSANT - SSRI AND SEROTONIN (5-HT) RECEPTOR MODULATOR		
Trintellix 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Trintellix 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Trintellix 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
ANTIDEPRESSANT - TRICYCLIC AND ANTIPSYCHOTIC, PHENOTHIAZINE COMB		
perphenazine-amitriptyline 2 mg-10 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine-amitriptyline 2 mg-25 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine-amitriptyline 4 mg-10 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine-amitriptyline 4 mg-25 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine-amitriptyline 4 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
ANTIDEPRESSANT - TRICYCLIC-BENZODIAZEPINE COMBINATIONS		
amitriptyline-chlordiazepoxide 12.5 mg-5 mg tablet	P	
amitriptyline-chlordiazepoxide 25 mg-10 mg tablet	P	
ANTIDEPRESSANT- SSRI AND ATYPICAL ANTIPSYCH,DOPAMINE,SEROTONIN ANTAGON		
olanzapine-fluoxetine 12 mg-25 mg capsule	NP	PA
olanzapine-fluoxetine 12 mg-50 mg capsule	NP	PA
olanzapine-fluoxetine 3 mg-25 mg capsule	NP	PA
olanzapine-fluoxetine 6 mg-25 mg capsule	NP	PA
olanzapine-fluoxetine 6 mg-50 mg capsule	NP	PA
Symbyax 3 mg-25 mg capsule	NP	PA
Symbyax 6 mg-25 mg capsule	NP	PA
ANTIDEPRESSANT-NOREPINEPHRINE AND DOPAMINE REUPTAKE INHIBITORS (NDRIS)		
Aplenzin 174 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Aplenzin 348 mg tablet,extended release	NP	PA
Aplenzin 522 mg tablet,extended release	NP	PA
bupropion HCl 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
bupropion HCl 75 mg tablet	P	QL(Allowed 3 per 1 day); MT
bupropion HCl SR 100 mg tablet,12 hr sustained-release	P	QL(Allowed 4 per 1 day); MT
bupropion HCl SR 150 mg tablet,12 hr sustained-release	P	QL(Allowed 3 per 1 day); MT
bupropion HCl SR 200 mg tablet,12 hr sustained-release	P	QL(Allowed 2 per 1 day); MT
bupropion HCl XL 150 mg 24 hr tablet, extended release	P	QL(Allowed 3 per 1 day); MT
bupropion HCl XL 300 mg 24 hr tablet, extended release	P	QL(Allowed 1 per 1 day); MT
bupropion HCl XL 450 mg 24 hr tablet, extended release	P	MT
Forfivo XL 450 mg tablet,extended release	NP	PA; MT
Wellbutrin SR 100 mg tablet, 12 hr sustained-release	NP	PA; QL(Allowed 4 per 1 day); MT
Wellbutrin SR 150 mg tablet, 12 hr sustained-release	NP	PA; QL(Allowed 3 per 1 day); MT
Wellbutrin SR 200 mg tablet, 12 hr sustained-release	NP	PA; QL(Allowed 2 per 1 day); MT
Wellbutrin XL 150 mg 24 hr tablet, extended release	NP	PA; QL(Allowed 3 per 1 day); MT
Wellbutrin XL 300 mg 24 hr tablet, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
ANTIDEPRESSANT-TRICYCLICS AND RELATED (NON-SELECT REUPTAKE INHIBITORS)		
amitriptyline 10 mg tablet	P	MT
amitriptyline 100 mg tablet	P	MT
amitriptyline 150 mg tablet	P	MT
amitriptyline 25 mg tablet	P	MT
amitriptyline 50 mg tablet	P	MT
amitriptyline 75 mg tablet	P	MT
amoxapine 100 mg tablet	NP	PA; MT
amoxapine 150 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
amoxapine 25 mg tablet	NP	PA; MT
amoxapine 50 mg tablet	NP	PA; MT
Anafranil 25 mg capsule	NP	PA; MT
Anafranil 50 mg capsule	NP	PA; MT
Anafranil 75 mg capsule	NP	PA; MT
clomipramine 25 mg capsule	P	MT
clomipramine 50 mg capsule	P	MT
clomipramine 75 mg capsule	P	MT
desipramine 10 mg tablet	P	MT
desipramine 100 mg tablet	P	MT
desipramine 150 mg tablet	P	MT
desipramine 25 mg tablet	P	QL(Allowed 2 per 1 day); MT
desipramine 50 mg tablet	P	MT
desipramine 75 mg tablet	P	MT
doxepin 10 mg capsule	P	MT
doxepin 10 mg/mL oral concentrate	P	MT
doxepin 100 mg capsule	P	MT
doxepin 150 mg capsule	P	MT
doxepin 25 mg capsule	P	MT
doxepin 50 mg capsule	P	MT
doxepin 75 mg capsule	P	MT
imipramine 10 mg tablet	P	MT
imipramine 25 mg tablet	P	MT
imipramine 50 mg tablet	P	MT
imipramine pamoate 100 mg capsule	NP	PA; MT
imipramine pamoate 125 mg capsule	NP	PA; MT
imipramine pamoate 150 mg capsule	NP	PA; MT
imipramine pamoate 75 mg capsule	NP	PA; MT

Drug Name	Tier	Drug Restriction
maprotiline 25 mg tablet	P	MT
maprotiline 50 mg tablet	P	MT
maprotiline 75 mg tablet	P	MT
Norpramin 10 mg tablet	NP	PA; MT
Norpramin 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
nortriptyline 10 mg capsule	P	MT
nortriptyline 10 mg/5 mL oral solution	P	QL(Allowed 20 per 1 day); MT
nortriptyline 25 mg capsule	P	MT
nortriptyline 50 mg capsule	P	MT
nortriptyline 75 mg capsule	P	MT
Pamelor 10 mg capsule	NP	PA; MT
Pamelor 25 mg capsule	NP	PA; MT
Pamelor 50 mg capsule	NP	PA; MT
Pamelor 75 mg capsule	NP	PA; MT

Drug Name	Tier	Drug Restriction
protriptyline 10 mg tablet	P	MT
protriptyline 5 mg tablet	P	MT
Tofranil 10 mg tablet	NP	PA; MT
Tofranil 25 mg tablet	NP	PA; MT
Tofranil 50 mg tablet	NP	PA; MT
trimipramine 100 mg capsule	NP	PA; MT
trimipramine 25 mg capsule	NP	PA; MT
trimipramine 50 mg capsule	NP	PA; MT
ANTIPARKINSON - DOPAMINERGIC-PERIPH COMT-DOPA-DECARBOXYLASE INHIB COMB		
carbidopa 12.5 mg-levodopa 50 mg-entacapone 200 mg tablet	NP	PA; MT
carbidopa 18.75 mg-levodopa 75 mg-entacapone 200 mg tablet	NP	PA; MT
carbidopa 25 mg-levodopa 100 mg-entacapone 200 mg tablet	NP	PA; MT
carbidopa 31.25 mg-levodopa 125 mg-entacapone 200 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
carbidopa 37.5 mg-levodopa 150 mg-entacapone 200 mg tablet	NP	PA; MT
carbidopa 50 mg-levodopa 200 mg-entacapone 200 mg tablet	NP	PA; MT
Stalevo 100 25 mg-100 mg-200 mg tablet	NP	PA; MT
Stalevo 125 31.25 mg-125 mg-200 mg tablet	NP	PA; MT
Stalevo 150 37.5 mg-150 mg-200 mg tablet	NP	PA; MT
Stalevo 200 50 mg-200 mg-200 mg tablet	NP	PA; MT
Stalevo 50 12.5 mg-50 mg-200 mg tablet	NP	PA; MT
Stalevo 75 18.75 mg-75 mg-200 mg tablet	NP	PA; MT
ANTIPARKINSON - DOPAMINERG-PERIPHERAL DOPA-DECARBOXYLASE INHIBIT COMB		
carbidopa 10 mg-levodopa 100 mg disintegrating tablet	NP	PA; MT
carbidopa 10 mg-levodopa 100 mg tablet	P	MT
carbidopa 25 mg-levodopa 100 mg disintegrating tablet	NP	PA; MT
carbidopa 25 mg-levodopa 100 mg tablet	P	MT
carbidopa 25 mg-levodopa 250 mg disintegrating tablet	NP	PA; MT
carbidopa 25 mg-levodopa 250 mg tablet	P	MT
carbidopa ER 25 mg-levodopa 100 mg tablet,extended release	P	MT
carbidopa ER 50 mg-levodopa 200 mg tablet,extended release	P	MT
Rytary 23.75 mg-95 mg capsule,extended release	NP	PA
Rytary 36.25 mg-145 mg capsule,extended release	NP	PA
Rytary 48.75 mg-195 mg capsule,extended release	NP	PA
Rytary 61.25 mg-245 mg capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Sinemet 10 mg-100 mg tablet	NP	PA; MT
Sinemet 25 mg-100 mg tablet	NP	PA; MT
ANTIPARKINSON ADJUVANT - ADENOSINE RECEPTOR ANTAGONIST		
Nourianz 20 mg tablet	NP	PA
Nourianz 40 mg tablet	NP	PA
ANTIPARKINSON ADJUVANT - CENTRAL/PERIPHERAL COMT INHIBITORS		
Tasmar 100 mg tablet	NP	PA; MT
tolcapone 100 mg tablet	NP	PA; MT
ANTIPARKINSON ADJUVANT - PERIPHERAL COMT INHIBITORS		
Comtan 200 mg tablet	NP	PA; MT
entacapone 200 mg tablet	P	MT
Ongentys 50 mg capsule	NP	PA
ANTIPARKINSON ADJUVANT - PERIPHERAL DOPA-DECARBOXYLASE INHIBITORS		
carbidopa 25 mg tablet	P	MT
Lodosyn 25 mg tablet	NP	PA; MT
ANTIPARKINSON THERAPY - ANTICHOLINERGIC AGENTS		
benztropine 0.5 mg tablet	P	MT
benztropine 1 mg tablet	P	MT
benztropine 2 mg tablet	P	MT
trihexyphenidyl 0.4 mg/mL oral elixir	P	MT
trihexyphenidyl 2 mg tablet	P	MT
trihexyphenidyl 5 mg tablet	P	MT
ANTIPARKINSON THERAPY - DOPAMINE PRECURSORS		
Inbrija 42 mg capsule with inhalation device	NP	PA
ANTIPARKINSON THERAPY - ERGOT ALKALOIDS AND DERIVATIVES		
bromocriptine 2.5 mg tablet	P	MT
bromocriptine 5 mg capsule	P	MT
Parlodel 2.5 mg tablet	NP	PA; MT
Parlodel 5 mg capsule	NP	PA; MT
ANTIPARKINSON THERAPY - MONOAMINE OXIDASE INHIBITOR(MAO-B)		
Azilect 0.5 mg tablet	NP	PA; MT
Azilect 1 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
rasagiline 0.5 mg tablet	NP	PA; MT
rasagiline 1 mg tablet	NP	PA; MT
selegiline 5 mg capsule	P	MT
selegiline 5 mg tablet	P	MT
Xadago 100 mg tablet	NP	PA
Xadago 50 mg tablet	NP	PA
Zelapar 1.25 mg disintegrating tablet	NP	PA
ANTIPARKINSON THERAPY - NON-ERGOT DOPAMINE AGONIST AGENTS		
amantadine HCl 100 mg capsule	P	MT
amantadine HCl 100 mg tablet	P	MT
amantadine HCl 50 mg/5 mL oral solution	P	MT
APOKYN 10 mg/mL subcutaneous cartridge	NP	PA; SP
Gocovri 137 mg capsule,extended release	NP	PA; SP
Gocovri 68.5 mg capsule,extended release	NP	PA; SP

Drug Name	Tier	Drug Restriction
Kynmobi 10 mg sublingual film	NP	PA
Kynmobi 10 mg-15 mg-20 mg-25 mg-30 mg sublingual film	NP	PA
Kynmobi 15 mg sublingual film	NP	PA
Kynmobi 20 mg sublingual film	NP	PA
Kynmobi 25 mg sublingual film	NP	PA
Kynmobi 30 mg sublingual film	NP	PA
Mirapex ER 0.375 mg tablet,extended release	NP	PA; MT
Mirapex ER 0.75 mg tablet,extended release	NP	PA; MT
Mirapex ER 1.5 mg tablet,extended release	NP	PA; MT
Mirapex ER 2.25 mg tablet,extended release	NP	PA; MT
Mirapex ER 3 mg tablet,extended release	NP	PA; MT
Mirapex ER 3.75 mg tablet,extended release	NP	PA; MT

Drug Name	Tier	Drug Restriction
Mirapex ER 4.5 mg tablet,extended release	NP	PA; MT
Neupro 1 mg/24 hour transdermal 24 hour patch	NP	PA
Neupro 2 mg/24 hour transdermal 24 hour patch	NP	PA
Neupro 3 mg/24 hour transdermal 24 hour patch	NP	PA
Neupro 4 mg/24 hour transdermal 24 hour patch	NP	PA
Neupro 6 mg/24 hour transdermal 24 hour patch	NP	PA
Neupro 8 mg/24 hour transdermal 24 hour patch	NP	PA
Osmolex ER 129 mg tablet, extended release	NP	PA
Osmolex ER 193 mg tablet, extended release	NP	PA
Osmolex ER 258 mg tablet, extended release	NP	PA
Osmolex ER 322 mg/day (129 mg and 193 mg) tablet, extended release	NP	PA

Drug Name	Tier	Drug Restriction
pramipexole 0.125 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole 0.25 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole 0.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole 0.75 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole 1 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole 1.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
pramipexole ER 0.375 mg tablet,extended release 24 hr	NP	PA; MT
pramipexole ER 0.75 mg tablet,extended release 24 hr	NP	PA; MT
pramipexole ER 1.5 mg tablet,extended release 24 hr	NP	PA; MT
pramipexole ER 2.25 mg tablet,extended release 24 hr	NP	PA; MT
pramipexole ER 3 mg tablet,extended release 24 hr	NP	PA; MT

Drug Name	Tier	Drug Restriction
pramipexole ER 3.75 mg tablet,extended release 24 hr	NP	PA; MT
pramipexole ER 4.5 mg tablet,extended release 24 hr	NP	PA; MT
ropinirole 0.25 mg tablet	P	QL(Allowed 6 per 1 day); MT
ropinirole 0.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
ropinirole 1 mg tablet	P	QL(Allowed 3 per 1 day); MT
ropinirole 2 mg tablet	P	QL(Allowed 3 per 1 day); MT
ropinirole 3 mg tablet	P	QL(Allowed 6 per 1 day); MT
ropinirole 4 mg tablet	P	QL(Allowed 6 per 1 day); MT
ropinirole 5 mg tablet	P	QL(Allowed 3 per 1 day); MT
ropinirole ER 12 mg tablet,extended release 24 hr	NP	PA; MT
ropinirole ER 2 mg tablet,extended release 24 hr	NP	PA; MT
ropinirole ER 4 mg tablet,extended release 24 hr	NP	PA; MT
ropinirole ER 6 mg tablet,extended release 24 hr	NP	PA; MT
ropinirole ER 8 mg tablet,extended release 24 hr	NP	PA; MT
ANTIPSYCHOTIC - ATYP DOPAMINE-SEROTONIN ANTAG DIBENZO-OXEPINO PYRROLES		
asenapine 10 mg sublingual tablet	NP	PA
asenapine 2.5 mg sublingual tablet	NP	PA
asenapine 5 mg sublingual tablet	NP	PA
Saphris 10 mg sublingual tablet	NP	PA
Saphris 2.5 mg sublingual tablet	NP	PA
Saphris 5 mg sublingual tablet	NP	PA
Secuado 3.8 mg/24 hour transdermal 24 hour patch	NP	PA
Secuado 5.7 mg/24 hour transdermal 24 hour patch	NP	PA
Secuado 7.6 mg/24 hour transdermal 24 hour patch	NP	PA
ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG- BENZISOTHIAZOLONES		
Geodon 20 mg capsule	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Geodon 20 mg/mL (final concentration) intramuscular solution	NP	PA
Geodon 40 mg capsule	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Geodon 60 mg capsule	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Geodon 80 mg capsule	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Latuda 120 mg tablet	NP	PA
Latuda 20 mg tablet	NP	PA
Latuda 40 mg tablet	NP	PA
Latuda 60 mg tablet	NP	PA
Latuda 80 mg tablet	NP	PA
ziprasidone 20 mg capsule	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
ziprasidone 20 mg/mL (final concentration) intramuscular solution	NP	PA
ziprasidone 40 mg capsule	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
ziprasidone 60 mg capsule	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
ziprasidone 80 mg capsule	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG- BENZISOXAZOLE DERIV		
Fanapt 1 mg tablet	NP	PA
Fanapt 10 mg tablet	NP	PA
Fanapt 12 mg tablet	NP	PA
Fanapt 1mg(2)-2 mg(2)-4mg(2)-6 mg(2) tablets in a dose pack	NP	PA
Fanapt 2 mg tablet	NP	PA
Fanapt 4 mg tablet	NP	PA
Fanapt 6 mg tablet	NP	PA
Fanapt 8 mg tablet	NP	PA
Invega 1.5 mg tablet,extended release	NP	PA; MT
Invega 3 mg tablet,extended release	NP	PA; MT
Invega 6 mg tablet,extended release	NP	PA; MT

Drug Name	Tier	Drug Restriction
Invega 9 mg tablet,extended release	NP	PA; MT
Invega Sustenna 117 mg/0.75 mL intramuscular syringe	P	SP
Invega Sustenna 156 mg/mL intramuscular syringe	P	SP
Invega Sustenna 234 mg/1.5 mL intramuscular syringe	P	SP
Invega Sustenna 39 mg/0.25 mL intramuscular syringe	P	SP
Invega Sustenna 78 mg/0.5 mL intramuscular syringe	P	SP
Invega Trinza 273 mg/0.875 mL intramuscular syringe	P	SP
Invega Trinza 410 mg/1.315 mL intramuscular syringe	P	SP
Invega Trinza 546 mg/1.75 mL intramuscular syringe	P	SP
Invega Trinza 819 mg/2.625 mL intramuscular syringe	P	SP
paliperidone ER 1.5 mg tablet,extended release 24 hr	NP	PA; MT
paliperidone ER 3 mg tablet,extended release 24 hr	NP	PA; MT
paliperidone ER 6 mg tablet,extended release 24 hr	NP	PA; MT
paliperidone ER 9 mg tablet,extended release 24 hr	NP	PA; MT
Perseris 120 mg abdominal subcutaneous ext. release suspension syringe	NP	PA; SP
Perseris 90 mg abdominal subcutaneous ext. release suspension syringe	NP	PA; SP
Risperdal 0.5 mg tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT
Risperdal 1 mg tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT
Risperdal 1 mg/mL oral solution	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT
Risperdal 2 mg tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
Risperdal 3 mg tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT
Risperdal 4 mg tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 4 per 1 day); MT
Risperdal Consta 12.5 mg/2 mL intramuscular susp,extended release	NP	PA; SP
Risperdal Consta 25 mg/2 mL intramuscular susp,extended release	NP	PA; SP
Risperdal Consta 37.5 mg/2 mL intramuscular susp,extended release	NP	PA; SP
Risperdal Consta 50 mg/2 mL intramuscular susp,extended release	NP	PA; SP
risperidone 0.25 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 0.25 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 0.5 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 0.5 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 1 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 1 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 1 mg/mL oral solution	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 2 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 2 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 3 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 3 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
risperidone 4 mg disintegrating tablet	NP	AL(Minimum Age 5 Years); PA; QL(Allowed 2 per 1 day); MT
risperidone 4 mg tablet	P	AL(Minimum Age 5 Years); QL(Allowed 4 per 1 day); MT
ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-BUTYROPHENONE DERIV		
Caplyta 42 mg capsule	NP	PA
ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG-DIBENZODIAZEPINE DER		
clozapine 100 mg disintegrating tablet	NP	PA; MT
clozapine 100 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 9 per 1 day); MT
clozapine 12.5 mg disintegrating tablet	NP	PA; MT
clozapine 150 mg disintegrating tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
clozapine 200 mg disintegrating tablet	NP	PA; MT
clozapine 200 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 3 per 1 day); MT
clozapine 25 mg disintegrating tablet	NP	PA; MT
clozapine 25 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 3 per 1 day); MT
clozapine 50 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 3 per 1 day); MT
Clozaril 100 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 9 per 1 day); MT
Clozaril 200 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 3 per 1 day); MT
Clozaril 25 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 3 per 1 day); MT
Clozaril 50 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 3 per 1 day); MT
Versacloz 50 mg/mL oral suspension	NP	PA
ANTIPSYCHOTIC - BUTYROPHENONE DERIVATIVES		
Haldol Decanoate 100 mg/mL intramuscular solution	P	Use Generic Products
Haldol Decanoate 50 mg/mL intramuscular solution	P	Use Generic Products
haloperidol 0.5 mg tablet	P	QL(Allowed 3 per 1 day); MT
haloperidol 1 mg tablet	P	QL(Allowed 3 per 1 day); MT
haloperidol 10 mg tablet	P	QL(Allowed 3 per 1 day); MT
haloperidol 2 mg tablet	P	MT
haloperidol 20 mg tablet	P	MT
haloperidol 5 mg tablet	P	MT
haloperidol decanoate 100 mg/mL intramuscular solution	P	
haloperidol decanoate 50 mg/mL intramuscular solution	P	
haloperidol lactate 2 mg/mL oral concentrate	P	MT
ANTIPSYCHOTIC - DIBENZOXAZEPINE DERIVATIVES		
Adasuve 10 mg breath activated	NP	PA
loxapine succinate 10 mg capsule	P	QL(Allowed 4 per 1 day); MT
loxapine succinate 25 mg capsule	P	QL(Allowed 4 per 1 day); MT
loxapine succinate 5 mg capsule	P	QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
loxapine succinate 50 mg capsule	P	QL(Allowed 4 per 1 day); MT
ANTIPSYCHOTIC - DIHYDROINDOLONES		
molindone 10 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
molindone 25 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
molindone 5 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
ANTIPSYCHOTIC - DIPHENYLBUTYLPIPERIDINE DERIVATIVES		
pimozide 1 mg tablet	P	
pimozide 2 mg tablet	P	
ANTIPSYCHOTIC - PHENOTHIAZINES, ALIPHATIC		
chlorpromazine 10 mg tablet	P	QL(Allowed 10 per 1 day); MT
chlorpromazine 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
chlorpromazine 200 mg tablet	P	QL(Allowed 3 per 1 day); MT
chlorpromazine 25 mg tablet	P	QL(Allowed 3 per 1 day); MT
chlorpromazine 50 mg tablet	P	QL(Allowed 3 per 1 day); MT
ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERAZINE		
fluphenazine 1 mg tablet	P	MT
fluphenazine 10 mg tablet	P	MT
fluphenazine 2.5 mg tablet	P	MT
fluphenazine 2.5 mg/5 mL oral elixir	P	MT
fluphenazine 5 mg tablet	P	MT
fluphenazine 5 mg/mL oral concentrate	P	MT
fluphenazine decanoate 25 mg/mL injection solution	P	
perphenazine 16 mg tablet	P	QL(Allowed 4 per 1 day); MT
perphenazine 2 mg tablet	P	QL(Allowed 4 per 1 day); MT
perphenazine 4 mg tablet	P	QL(Allowed 4 per 1 day); MT
perphenazine 8 mg tablet	P	QL(Allowed 4 per 1 day); MT
trifluoperazine 1 mg tablet	P	QL(Allowed 3 per 1 day); MT
trifluoperazine 10 mg tablet	P	QL(Allowed 3 per 1 day); MT
trifluoperazine 2 mg tablet	P	QL(Allowed 3 per 1 day); MT
trifluoperazine 5 mg tablet	P	QL(Allowed 3 per 1 day); MT
ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERIDINE		

Drug Name	Tier	Drug Restriction
thioridazine 10 mg tablet	P	QL(Allowed 3 per 1 day); MT
thioridazine 100 mg tablet	P	QL(Allowed 3 per 1 day); MT
thioridazine 25 mg tablet	P	QL(Allowed 3 per 1 day); MT
thioridazine 50 mg tablet	P	QL(Allowed 3 per 1 day); MT
ANTIPSYCHOTIC - THIOXANTHENES		
thiothixene 1 mg capsule	P	QL(Allowed 3 per 1 day); MT
thiothixene 10 mg capsule	P	QL(Allowed 3 per 1 day); MT
thiothixene 2 mg capsule	P	QL(Allowed 3 per 1 day); MT
thiothixene 5 mg capsule	P	QL(Allowed 3 per 1 day); MT
ANTIPSYCHOTIC -ATYPICAL DOPAMINE-SEROTONIN ANTAG-DIBENZOTHIAZEPINE DER		
quetiapine 100 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT
quetiapine 200 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT
quetiapine 25 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT
quetiapine 300 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
quetiapine 400 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
quetiapine 50 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
quetiapine ER 150 mg tablet,extended release 24 hr	P	MT
quetiapine ER 200 mg tablet,extended release 24 hr	P	MT
quetiapine ER 300 mg tablet,extended release 24 hr	P	MT
quetiapine ER 400 mg tablet,extended release 24 hr	P	MT
quetiapine ER 50 mg tablet,extended release 24 hr	P	MT
Seroquel 100 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Seroquel 200 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Seroquel 25 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Seroquel 300 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Seroquel 400 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Seroquel 50 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Seroquel XR 150 mg tablet,extended release	NP	PA; MT
Seroquel XR 200 mg tablet,extended release	NP	PA; MT

Drug Name	Tier	Drug Restriction
Seroquel XR 300 mg tablet,extended release	NP	PA; MT
Seroquel XR 400 mg tablet,extended release	NP	PA; MT
Seroquel XR 50 mg tablet,extended release	NP	PA; MT
ANTIPSYCHOTIC -ATYPICAL DOPAMINE-SEROTONIN ANTAG-THIENOBENZODIAZEPINES		
olanzapine 10 mg disintegrating tablet	P	MT
olanzapine 10 mg intramuscular solution	NP	PA
olanzapine 10 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
olanzapine 15 mg disintegrating tablet	P	MT
olanzapine 15 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 1 per 1 day); MT
olanzapine 2.5 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT
olanzapine 20 mg disintegrating tablet	P	MT
olanzapine 20 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 1 per 1 day); MT
olanzapine 5 mg disintegrating tablet	P	MT
olanzapine 5 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
olanzapine 7.5 mg tablet	P	AL(Minimum Age 8 Years); QL(Allowed 2 per 1 day); MT
Zyprexa 10 mg intramuscular solution	NP	PA
Zyprexa 10 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Zyprexa 15 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 1 per 1 day); MT
Zyprexa 2.5 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Zyprexa 20 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 1 per 1 day); MT
Zyprexa 5 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 4 per 1 day); MT
Zyprexa 7.5 mg tablet	NP	AL(Minimum Age 8 Years); PA; QL(Allowed 2 per 1 day); MT
Zyprexa Relprevv 210 mg intramuscular suspension	NP	PA; SP
Zyprexa Relprevv 300 mg intramuscular suspension	NP	PA; SP
Zyprexa Relprevv 405 mg intramuscular suspension	NP	PA; SP
Zyprexa Zydis 10 mg disintegrating tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
Zyprexa Zydis 15 mg disintegrating tablet	NP	PA; MT
Zyprexa Zydis 20 mg disintegrating tablet	NP	PA; MT
Zyprexa Zydis 5 mg disintegrating tablet	NP	PA; MT
ANTIPSYCHOTIC-ATYP SELECTIVE SEROTONIN 5-HT2A INVERSE AGONISTS (SSIA)		
Nuplazid 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Nuplazid 17 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Nuplazid 34 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
ANTIPSYCHOTIC-ATYPICAL,D2 RECEPTOR PARTIAL AGONIST-5HT SEROTONIN MIXED		
Abilify 10 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Abilify 15 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Abilify 2 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Abilify 20 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Abilify 30 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Abilify 5 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Abilify Maintena 300 mg intramuscular suspension,extended release	P	SP
Abilify Maintena 300 mg suspension,extended rel. intramuscular syringe	P	SP
Abilify Maintena 400 mg intramuscular suspension,extended release	P	SP
Abilify Maintena 400 mg suspension,extended rel. intramuscular syringe	P	SP
Abilify MyCite 10 mg tablet with sensor and patch	NP	PA; SP
Abilify MyCite 15 mg tablet with sensor and patch	NP	PA; SP
Abilify MyCite 2 mg tablet with sensor and patch	NP	PA; SP
Abilify MyCite 20 mg tablet with sensor and patch	NP	PA; SP
Abilify MyCite 30 mg tablet with sensor and patch	NP	PA; SP

Drug Name	Tier	Drug Restriction
Abilify MyCite 5 mg tablet with sensor and patch	NP	PA; SP
Abilify MyCite Maintenance Kit 10 mg tablet with sensor and strip	NP	PA
Abilify MyCite Maintenance Kit 15 mg tablet with sensor and strip	NP	PA
Abilify MyCite Maintenance Kit 2 mg tablet with sensor and strip	NP	PA
Abilify MyCite Maintenance Kit 20 mg tablet with sensor and strip	NP	PA
Abilify MyCite Maintenance Kit 30 mg tablet with sensor and strip	NP	PA
Abilify MyCite Maintenance Kit 5 mg tablet with sensor and strip	NP	PA
Abilify MyCite Starter Kit 10 mg oral tablet with sensor, strip, pod	NP	PA
Abilify MyCite Starter Kit 15 mg oral tablet with sensor, strip, pod	NP	PA
Abilify MyCite Starter Kit 2 mg oral tablet with sensor, strip, pod	NP	PA
Abilify MyCite Starter Kit 20 mg oral tablet with sensor, strip, pod	NP	PA
Abilify MyCite Starter Kit 30 mg oral tablet with sensor, strip, pod	NP	PA
Abilify MyCite Starter Kit 5 mg oral tablet with sensor, strip, pod	NP	PA
aripiprazole 1 mg/mL oral solution	NP	AL(Minimum Age 6 Years); PA; QL(QL Overtime: Allowed 750 over 30 days); MT
aripiprazole 10 mg disintegrating tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
aripiprazole 10 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
aripiprazole 15 mg disintegrating tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
aripiprazole 15 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
aripiprazole 2 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
aripiprazole 20 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
aripiprazole 30 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
aripiprazole 5 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
Aristada 1,064 mg/3.9 mL suspension, extend.rel. IM syringe	P	SP
Aristada 441 mg/1.6 mL suspension, extend.rel. IM syringe	P	SP
Aristada 662 mg/2.4 mL suspension, extend.rel. IM syringe	P	SP
Aristada 882 mg/3.2 mL suspension, extend.rel. IM syringe	P	SP
Aristada Initio 675 mg/2.4 mL suspension, extend.rel. IM syringe	P	SP
Rexulti 0.25 mg tablet	NP	PA
Rexulti 0.5 mg tablet	NP	PA
Rexulti 1 mg tablet	NP	PA
Rexulti 2 mg tablet	NP	PA
Rexulti 3 mg tablet	NP	PA
Rexulti 4 mg tablet	NP	PA
ANTIPSYCHOTIC-ATYPICAL,D3/D2 RECEPTOR PARTIAL AGONIST-SEROTONIN MIXED		
Vraylar 1.5 mg (1)-3 mg (6) capsules in a dose pack	NP	PA
Vraylar 1.5 mg capsule	NP	PA
Vraylar 3 mg capsule	NP	PA
Vraylar 4.5 mg capsule	NP	PA
Vraylar 6 mg capsule	NP	PA
ATTENTION DEFICIT-HYPERACT. DISORDER (ADHD)-ALPHA-2 RECEPTOR AGONIST		
clonidine HCl ER 0.1 mg tablet,extended release,12 hr	P	MT
guanfacine ER 1 mg tablet,extended release 24 hr	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
guanfacine ER 2 mg tablet,extended release 24 hr	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
guanfacine ER 3 mg tablet,extended release 24 hr	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
guanfacine ER 4 mg tablet,extended release 24 hr	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day); MT
Intuniv ER 1 mg tablet,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Intuniv ER 2 mg tablet,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Intuniv ER 3 mg tablet,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
Intuniv ER 4 mg tablet,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day); MT
ATTENTION DEFICIT-HYPERACTIVITY (ADHD) THERAPY, STIMULANT-TYPE		
Adderall 10 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 12.5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 15 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 20 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 30 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)
Adderall 7.5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Adderall XR 10 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adderall XR 15 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adderall XR 20 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adderall XR 25 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adderall XR 30 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adderall XR 5 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Adhansia XR 25 mg capsule,extended release	NP	PA
Adhansia XR 35 mg capsule,extended release	NP	PA
Adhansia XR 45 mg capsule,extended release	NP	PA
Adhansia XR 55 mg capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Adhansia XR 70 mg capsule,extended release	NP	PA
Adhansia XR 85 mg capsule,extended release	NP	PA
Adzenys ER 1.25 mg/mL suspension, extended release 24hr	NP	PA
Adzenys XR-ODT 12.5 mg extended release disintegrating tablet	NP	PA
Adzenys XR-ODT 15.7 mg extended release disintegrating tablet	NP	PA
Adzenys XR-ODT 18.8 mg extended release disintegrating tablet	NP	PA
Adzenys XR-ODT 3.1 mg extended release disintegrating tablet	NP	PA
Adzenys XR-ODT 6.3 mg extended release disintegrating tablet	NP	PA
Adzenys XR-ODT 9.4 mg extended release disintegrating tablet	NP	PA

Drug Name	Tier	Drug Restriction
amphetamine ER 1.25 mg/mL oral 24 hr extended-release suspension	NP	PA
Aptensio XR 10 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 15 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 20 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 30 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 40 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 50 mg capsule,extended release sprinkle	NP	PA
Aptensio XR 60 mg capsule,extended release sprinkle	NP	PA
Concerta 18 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Concerta 27 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
Concerta 36 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 2 per 1 day)
Concerta 54 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
Cotempla XR-ODT 17.3 mg extended release disintegrating tablet	NP	PA
Cotempla XR-ODT 25.9 mg extended release disintegrating tablet	NP	PA
Cotempla XR-ODT 8.6 mg extended release disintegrating tablet	NP	PA
Daytrana 10 mg/9 hr daily patch	NP	PA
Daytrana 15 mg/9 hr daily patch	NP	PA
Daytrana 20 mg/9 hr daily patch	NP	PA
Daytrana 30 mg/9 hr daily patch	NP	PA
dexmethylphenidate 10 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 2 per 1 day)
dexmethylphenidate 2.5 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 2 per 1 day)
dexmethylphenidate 5 mg tablet	P	AL(Minimum Age 6 Years); QL(Allowed 2 per 1 day)
dexmethylphenidate ER 10 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 15 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 20 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 25 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 30 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 35 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 40 mg capsule,extended release biphasic50-50	NP	PA

Drug Name	Tier	Drug Restriction
dexmethylphenidate ER 5 mg capsule,extended release biphasic50-50	NP	PA
dextroamphetamine-amphetamine 10 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 12.5 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 15 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 20 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 30 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 5 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 7.5 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine ER 10 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
dextroamphetamine-amphetamine ER 15 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
dextroamphetamine-amphetamine ER 20 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
dextroamphetamine-amphetamine ER 25 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
dextroamphetamine-amphetamine ER 30 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
dextroamphetamine-amphetamine ER 5 mg 24hr capsule,extend release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
Dyanavel XR 2.5 mg/mL oral 24 hr extended release suspension	NP	PA
Focalin 10 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
Focalin 2.5 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
Focalin 5 mg tablet	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
Focalin XR 10 mg capsule,extended release	P	
Focalin XR 15 mg capsule,extended release	P	

Drug Name	Tier	Drug Restriction
Focalin XR 20 mg capsule,extended release	P	
Focalin XR 25 mg capsule,extended release	P	
Focalin XR 30 mg capsule,extended release	P	
Focalin XR 35 mg capsule,extended release	P	
Focalin XR 40 mg capsule,extended release	P	
Focalin XR 5 mg capsule,extended release	P	
Jornay PM 100 mg capsule,delayed release,extended release sprinkle	NP	PA
Jornay PM 20 mg capsule,delayed release,extended release sprinkle	NP	PA
Jornay PM 40 mg capsule,delayed release,extended release sprinkle	NP	PA
Jornay PM 60 mg capsule,delayed release,extended release sprinkle	NP	PA
Jornay PM 80 mg capsule,delayed release,extended release sprinkle	NP	PA
Methylin 10 mg/5 mL oral solution	NP	PA
Methylin 5 mg/5 mL oral solution	NP	PA
methylphenidate 10 mg chewable tablet	NP	PA
methylphenidate 10 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 3 per 1 day)
methylphenidate 10 mg/5 mL oral solution	NP	PA
methylphenidate 2.5 mg chewable tablet	NP	PA
methylphenidate 20 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 3 per 1 day)
methylphenidate 5 mg chewable tablet	NP	PA
methylphenidate 5 mg tablet	P	AL(Minimum Age 3 Years); QL(Allowed 6 per 1 day)
methylphenidate 5 mg/5 mL oral solution	NP	PA
methylphenidate CD 10 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
methylphenidate CD 20 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 30 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 40 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 50 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 60 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate ER 10 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 10 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 2 per 1 day)
methylphenidate ER 15 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 18 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate ER 20 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 20 mg tablet,extended release	P	AL(Minimum Age 6 Years); QL(Allowed 1 per 1 day)
methylphenidate ER 27 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate ER 30 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 36 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
methylphenidate ER 40 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 50 mg capsule,extended release (40-60) sprinkle	NP	PA

Drug Name	Tier	Drug Restriction
methylphenidate ER 54 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
methylphenidate ER 60 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 72 mg tablet,extended release 24 hr	NP	PA
methylphenidate LA 10 mg biphasic 50-50 capsule,extended release	NP	PA
methylphenidate LA 20 mg biphasic 50-50 capsule,extended release	NP	PA
methylphenidate LA 30 mg biphasic 50-50 capsule,extended release	NP	PA
methylphenidate LA 40 mg biphasic 50-50 capsule,extended release	NP	PA
methylphenidate LA 60 mg biphasic 50-50 capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Mydayis 12.5 mg capsule extended release 24 hr	NP	PA
Mydayis 25 mg capsule extended release 24 hr	NP	PA
Mydayis 37.5 mg capsule extended release 24 hr	NP	PA
Mydayis 50 mg capsule extended release 24 hr	NP	PA
QuilliChew ER 20 mg chewable tablet, extended release	NP	PA
QuilliChew ER 30 mg chewable tablet, extended release	NP	PA
QuilliChew ER 40 mg chewable, extended release tablet	NP	PA
Quillivant XR 5 mg/mL (25 mg/5 mL) oral suspension,extend release 24hr	NP	PA
Relexxii 72 mg tablet,extended release	NP	PA
Ritalin 10 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
Ritalin 20 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)
Ritalin 5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 6 per 1 day)
Ritalin LA 10 mg capsule,extended release	NP	PA
Ritalin LA 20 mg capsule,extended release	NP	PA
Ritalin LA 30 mg capsule,extended release	NP	PA
Ritalin LA 40 mg capsule,extended release	NP	PA
Vyvanse 10 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 10 mg chewable tablet	P	
Vyvanse 20 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 20 mg chewable tablet	P	
Vyvanse 30 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 30 mg chewable tablet	P	
Vyvanse 40 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 40 mg chewable tablet	P	
Vyvanse 50 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 50 mg chewable tablet	P	
Vyvanse 60 mg capsule	P	QL(Allowed 1 per 1 day)
Vyvanse 60 mg chewable tablet	P	
Vyvanse 70 mg capsule	P	QL(Allowed 1 per 1 day)
ATTENTION DEFICIT-HYPERACTIVITY DISORDER (ADHD) THERAPY, NRI-TYPE		
atomoxetine 10 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 100 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 18 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 25 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 40 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 60 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
atomoxetine 80 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Qelbree 100 mg capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Qelbree 150 mg capsule,extended release	NP	PA
Qelbree 200 mg capsule,extended release	NP	PA
Strattera 10 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 100 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 18 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 25 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 40 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 60 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
Strattera 80 mg capsule	NP	AL(Minimum Age 6 Years); ST; MT
BIPOLAR THERAPY AGENTS - ANTICONVULSANT TYPE		
Equetro 100 mg capsule, extended release	NP	PA
Equetro 200 mg capsule, extended release	NP	PA
Equetro 300 mg capsule, extended release	NP	PA
BIPOLAR THERAPY AGENTS - LITHIUM		
lithium carbonate 150 mg capsule	P	MT
lithium carbonate 300 mg capsule	P	MT
lithium carbonate 300 mg tablet	P	MT
lithium carbonate 600 mg capsule	P	MT
lithium carbonate ER 300 mg tablet,extended release	P	MT
lithium carbonate ER 450 mg tablet,extended release	P	MT
lithium citrate 8 mEq/5 mL oral solution	P	MT
Lithobid 300 mg tablet,extended release	NP	PA; MT
CNS STIMULANT - AMPHETAMINES		
amphetamine sulfate 10 mg tablet	NP	PA
amphetamine sulfate 5 mg tablet	NP	PA
Desoxyn 5 mg tablet	NP	PA
Dexedrine 5 mg tablet	NP	AL(Minimum Age 3 Years); PA

Drug Name	Tier	Drug Restriction
Dexedrine Spansule 10 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
Dexedrine Spansule 15 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
Dexedrine Spansule 5 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
dextroamphetamine 10 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)
dextroamphetamine 5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)
dextroamphetamine 5 mg/5 mL oral solution	NP	PA
dextroamphetamine ER 10 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
dextroamphetamine ER 15 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 2 per 1 day)
dextroamphetamine ER 5 mg capsule,extended release	NP	AL(Minimum Age 6 Years); PA; QL(Allowed 1 per 1 day)
Evekeo 10 mg tablet	NP	PA
Evekeo 5 mg tablet	NP	PA
Evekeo ODT 10 mg disintegrating tablet	NP	PA
Evekeo ODT 15 mg disintegrating tablet	NP	PA
Evekeo ODT 20 mg disintegrating tablet	NP	PA
Evekeo ODT 5 mg disintegrating tablet	NP	PA
methamphetamine 5 mg tablet	NP	PA
ProCentra 5 mg/5 mL oral solution	NP	PA
Zenzedi 10 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)
Zenzedi 15 mg tablet	NP	PA
Zenzedi 2.5 mg tablet	NP	PA
Zenzedi 20 mg tablet	NP	PA
Zenzedi 30 mg tablet	NP	PA
Zenzedi 5 mg tablet	NP	AL(Minimum Age 3 Years); PA; QL(Allowed 3 per 1 day)
Zenzedi 7.5 mg tablet	NP	PA
CNS STIMULANT - ANALEPTICS, METHYLXANTHINE-TYPE		

Drug Name	Tier	Drug Restriction
caffeine citrate 60 mg/3 mL (20 mg/mL) oral solution	P	AL(Maximum Age 18 Years); QL(Allowed 45 per Rx)
FIBROMYALGIA AGENTS - SEROTONIN-NOREPINEPHRINE REUPTAKE-INHIB (SNRIS)		
Savella 100 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Savella 12.5 mg (5)-25 mg(8)-50mg(42) tablets in a dose pack	NP	PA; QL(QL Overtime: Allowed 55 over 365 days)
Savella 12.5 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Savella 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Savella 50 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
HYPNOTICS - MELATONIN M1/M2 RECEPTOR AGONISTS		
Hetlioz 20 mg capsule	NP	PA; SP
Hetlioz LQ 4 mg/mL oral suspension	NP	PA; SP
ramelteon 8 mg tablet	NP	PA
Rozerem 8 mg tablet	NP	PA
MIGRAINE THERAPY - CGRP LIGAND BLOCKER, MONOCLONAL ANTIBODY		
Ajovy 225 mg/1.5 mL subcutaneous auto-injector	NP	PA; SP
Ajovy Syringe 225 mg/1.5 mL subcutaneous	NP	PA; SP
Emgality 120 mg/mL subcutaneous syringe	NP	PA; SP
Emgality Pen 120 mg/mL subcutaneous pen injector	NP	PA; SP
Vyepti 100 mg/mL intravenous solution	NP	PA; SP
MIGRAINE THERAPY - CGRP RECEPTOR BLOCKERS (GEPANTS)		
Nurtec ODT 75 mg disintegrating tablet	NP	PA
Ubrelvy 100 mg tablet	NP	PA
Ubrelvy 50 mg tablet	NP	PA
MIGRAINE THERAPY - CGRP RECEPTOR BLOCKERS, MONOCLONAL ANTIBODY		
Aimovig Autoinjector 140 mg/mL subcutaneous auto-injector	P	PA; SP
Aimovig Autoinjector 70 mg/mL subcutaneous auto-injector	P	PA; SP
MIGRAINE THERAPY - ERGOT ALKALOIDS AND DERIVATIVES		

Drug Name	Tier	Drug Restriction
dihydroergotamine 0.5 mg/pump act. (4 mg/mL) nasal spray	NP	PA
Ergomar 2 mg sublingual tablet	NP	PA
Migranal 0.5 mg/pump act. (4 mg/mL) nasal spray	NP	PA
MIGRAINE THERAPY - ERGOT COMBINATIONS		
Cafergot 1 mg-100 mg tablet	NP	PA
Migergot 2 mg-100 mg rectal suppository	P	
MIGRAINE THERAPY - NSAID ANALGESICS(CYCLOOXYGENASE INHIB-NON-SELECTIV)		
Cambia 50 mg oral powder packet	NP	PA
MIGRAINE THERAPY - SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
almotriptan malate 12.5 mg tablet	NP	PA
almotriptan malate 6.25 mg tablet	NP	PA
Amerge 1 mg tablet	NP	PA; QL(QL Overtime: Allowed 9 over 30 days)
Amerge 2.5 mg tablet	NP	PA; QL(QL Overtime: Allowed 9 over 30 days)
eletriptan 20 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
eletriptan 40 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Frova 2.5 mg tablet	NP	PA
frovatriptan 2.5 mg tablet	NP	PA
Imitrex 100 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Imitrex 20 mg/actuation nasal spray	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Imitrex 25 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Imitrex 5 mg/actuation nasal spray	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Imitrex 50 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Imitrex STATdose Pen 4 mg/0.5 mL subcutaneous pen injector	NP	PA; QL(QL Overtime: Allowed 3 over 30 days)
Imitrex STATdose Pen 6 mg/0.5 mL subcutaneous pen injector	NP	PA; QL(QL Overtime: Allowed 2 over 30 days)
Imitrex STATdose Refill 4 mg/0.5 mL subcutaneous cartridge	NP	PA; QL(QL Overtime: Allowed 3 over 30 days)
Imitrex STATdose Refill 6 mg/0.5 mL subcutaneous cartridge	NP	PA; QL(QL Overtime: Allowed 2 over 30 days)

Drug Name	Tier	Drug Restriction
Maxalt 10 mg tablet	NP	PA; QL(QL Overtime: Allowed 12 over 30 days)
Maxalt-MLT 10 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 12 over 30 days)
naratriptan 1 mg tablet	NP	PA; QL(QL Overtime: Allowed 9 over 30 days)
naratriptan 2.5 mg tablet	NP	PA; QL(QL Overtime: Allowed 9 over 30 days)
Onzetra Xsail 11 mg powder for nasal inhalation	NP	PA
Relpax 20 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Relpax 40 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
rizatriptan 10 mg disintegrating tablet	P	QL(QL Overtime: Allowed 12 over 30 days)
rizatriptan 10 mg tablet	P	QL(QL Overtime: Allowed 12 over 30 days)
rizatriptan 5 mg disintegrating tablet	P	QL(QL Overtime: Allowed 12 over 30 days)
rizatriptan 5 mg tablet	P	QL(QL Overtime: Allowed 12 over 30 days)
sumatriptan 100 mg tablet	P	QL(QL Overtime: Allowed 6 over 30 days)
sumatriptan 20 mg/actuation nasal spray	P	QL(QL Overtime: Allowed 6 over 30 days)
sumatriptan 25 mg tablet	P	QL(QL Overtime: Allowed 6 over 30 days)
sumatriptan 4 mg/0.5 mL subcutaneous cartridge (refill)	P	QL(QL Overtime: Allowed 3 over 30 days)
sumatriptan 4 mg/0.5 mL subcutaneous pen injector	P	QL(QL Overtime: Allowed 3 over 30 days)
sumatriptan 5 mg/actuation nasal spray	P	QL(QL Overtime: Allowed 6 over 30 days)
sumatriptan 50 mg tablet	P	QL(QL Overtime: Allowed 6 over 30 days)
sumatriptan 6 mg/0.5 mL subcutaneous cartridge (refill)	P	QL(QL Overtime: Allowed 2 over 30 days)
sumatriptan 6 mg/0.5 mL subcutaneous pen injector	P	QL(QL Overtime: Allowed 2 over 30 days)
sumatriptan 6 mg/0.5 mL subcutaneous solution	P	QL(QL Overtime: Allowed 2.5 over 30 days); QL(Limit 1 fill(s) per 30 days)
sumatriptan 6 mg/0.5 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 2 over 30 days)
Tosymra 10 mg/actuation nasal spray	NP	PA
Zembrace Symtouch 3 mg/0.5 mL subcutaneous pen injector	NP	PA

Drug Name	Tier	Drug Restriction
zolmitriptan 2.5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
zolmitriptan 2.5 mg nasal spray	NP	PA
zolmitriptan 2.5 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
zolmitriptan 5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
zolmitriptan 5 mg nasal spray	NP	PA
zolmitriptan 5 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Zomig 2.5 mg nasal spray	NP	PA
Zomig 2.5 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Zomig 5 mg nasal spray	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Zomig 5 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Zomig ZMT 2.5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
Zomig ZMT 5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
MIGRAINE THERAPY - SELECTIVE SEROTONIN AGONISTS 5-HT(1F)		
Reyvow 100 mg tablet	NP	PA
Reyvow 50 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
MIGRAINE THERAPY - SEROTONIN AGONIST 5-HT(1) AND NSAID COMB.		
sumatriptan 85 mg-naproxen 500 mg tablet	NP	PA
Treximet 85 mg-500 mg tablet	NP	PA
MOVEMENT DISORDER DRUG THERAPY		
Austedo 12 mg tablet	NP	PA; SP
Austedo 6 mg tablet	NP	PA; SP
Austedo 9 mg tablet	NP	PA; SP
Ingrezza 40 mg capsule	NP	PA; SP
Ingrezza 80 mg capsule	NP	PA; SP
Ingrezza Initiation Pack 40 mg (7)-80 mg (21) capsules in a dose pack	NP	PA; SP
tetrabenazine 12.5 mg tablet	NP	PA; SP
tetrabenazine 25 mg tablet	NP	PA; SP
Xenazine 12.5 mg tablet	NP	PA; SP
Xenazine 25 mg tablet	NP	PA; SP
MOVEMENT DISORDER THERAPY - RESTLESS LEGS SYNDROME		

Drug Name	Tier	Drug Restriction
Horizant ER 300 mg tablet,extended release	NP	PA
Horizant ER 600 mg tablet,extended release	NP	PA
NARCOLEPSY AND CATAPLEXY THERAPY AGENTS - SEDATIVE-TYPE		
Xyrem 500 mg/mL oral solution	NP	PA; SP
Xywav 0.5 gram/mL oral solution	NP	PA; SP
NARCOLEPSY THERAPY AGENTS - DOPAMINE AND NE REUPTAKE INHIBITOR (DNRI)		
Sunosi 150 mg tablet	NP	PA
Sunosi 75 mg tablet	NP	PA
NARCOLEPSY THERAPY AGENTS - H3-RECEPTOR ANTAGONIST/INVERSE AGONIST		
Wakix 17.8 mg tablet	NP	PA; SP
Wakix 4.45 mg tablet	NP	PA; SP
NARCOLEPSY THERAPY AGENTS - NON-SYMPATHOMIMETIC		
armodafinil 150 mg tablet	NP	PA
armodafinil 200 mg tablet	NP	PA
armodafinil 250 mg tablet	NP	PA
armodafinil 50 mg tablet	NP	PA
modafinil 100 mg tablet	NP	PA
modafinil 200 mg tablet	NP	PA
Nuvigil 150 mg tablet	NP	PA
Nuvigil 200 mg tablet	NP	PA
Nuvigil 250 mg tablet	NP	PA
Nuvigil 50 mg tablet	NP	PA
Provigil 100 mg tablet	NP	PA
Provigil 200 mg tablet	NP	PA
NEUROPATHIC PAIN THERAPY		
Lyrica CR 165 mg tablet,extended release	NP	PA
Lyrica CR 330 mg tablet,extended release	NP	PA
Lyrica CR 82.5 mg tablet,extended release	NP	PA
pregabalin ER 165 mg tablet, extended release 24 hr	NP	PA

Drug Name	Tier	Drug Restriction
pregabalin ER 330 mg tablet, extended release 24 hr	NP	PA
pregabalin ER 82.5 mg tablet, extended release 24 hr	NP	PA
POSTHERPETIC NEURALGIA AGENTS		
Gralise 300 mg tablet,extended release	NP	PA
Gralise 600 mg tablet,extended release	NP	PA
PSEUDOBULBAR AFFECT (PBA) AGENTS, NMDA ANTAGONISTS TYPE		
Nuedexta 20 mg-10 mg capsule	NP	PA
SEDATIVE-HYPNOTIC - ANTIHISTAMINES		
Alka-Seltzer Plus Allergy 25 mg tablet	P	QL(Allowed 4 per 1 day)
Compoz 25 mg tablet	P	
Nightime Sleep 50 mg capsule	P	
NightTime Sleep Aid (diphenhydramine) 25 mg tablet	P	QL(Allowed 1 per 1 day)
NightTime Sleep Aid (diphenhydramine) 50 mg capsule	P	
Nighttime Sleep-Aid (doxylamine) 25 mg tablet	P	
Nytol 25 mg tablet	P	QL(Allowed 1 per 1 day)
Ormir 50 mg capsule	P	
Restfully Sleep 25 mg tablet	P	QL(Allowed 1 per 1 day)
Simply Sleep 25 mg tablet	P	QL(Allowed 1 per 1 day)
Sleep 25 mg tablet	P	QL(Allowed 1 per 1 day)
Sleep Aid (diphenhydramine) 25 mg tablet	P	QL(Allowed 1 per 1 day)
Sleep Aid (diphenhydramine) 50 mg capsule	P	
Sleep Aid (doxylamine) 25 mg tablet	P	
Sleep Aid Max Strength (diphenhydramine) 50 mg capsule	P	
Sleep II 25 mg tablet	P	QL(Allowed 1 per 1 day)
Sleep Tablet (diphenhydramine) 25 mg tablet	P	QL(Allowed 1 per 1 day)
Sleep-Tabs 25 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Ultra Sleep (doxylamine succinate) 25 mg tablet	P	
Unisom (doxylamine) 25 mg tablet	P	
Unisom SleepGels 50 mg capsule	P	
Wal-Som (diphenhydramine) 50 mg capsule	P	
Wal-Som (doxylamine) 25 mg tablet	P	
SEDATIVE-HYPNOTIC - BARBITURATES		
Seconal Sodium 100 mg capsule	NP	PA
SEDATIVE-HYPNOTIC - BENZODIAZEPINES		
estazolam 1 mg tablet	P	
estazolam 2 mg tablet	P	
flurazepam 15 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
flurazepam 30 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Halcion 0.25 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
midazolam 10 mg/5 mL (2 mg/mL) oral syrup	NP	PA
midazolam 2 mg/mL oral syrup	NP	PA
Restoril 15 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Restoril 22.5 mg capsule	NP	PA
Restoril 30 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Restoril 7.5 mg capsule	NP	PA
temazepam 15 mg capsule	P	QL(Allowed 1 per 1 day)
temazepam 22.5 mg capsule	P	
temazepam 30 mg capsule	P	QL(Allowed 1 per 1 day)
temazepam 7.5 mg capsule	P	
triazolam 0.125 mg tablet	P	QL(Allowed 1 per 1 day)
triazolam 0.25 mg tablet	P	QL(Allowed 1 per 1 day)
SEDATIVE-HYPNOTIC - GABA-RECEPTOR MODULATORS		
Ambien 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Ambien 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Ambien CR 12.5 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Ambien CR 6.25 mg tablet,extended release	NP	PA
Edluar 10 mg sublingual tablet	NP	PA
Edluar 5 mg sublingual tablet	NP	PA
eszopiclone 1 mg tablet	NP	PA
eszopiclone 2 mg tablet	NP	PA
eszopiclone 3 mg tablet	NP	PA
Lunesta 1 mg tablet	NP	PA
Lunesta 2 mg tablet	NP	PA
Lunesta 3 mg tablet	NP	PA
zaleplon 10 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
zaleplon 5 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
zolpidem 1.75 mg sublingual tablet	NP	PA
zolpidem 10 mg tablet	P	QL(Allowed 1 per 1 day)
zolpidem 3.5 mg sublingual tablet	NP	PA
zolpidem 5 mg tablet	P	QL(Allowed 1 per 1 day)
zolpidem ER 12.5 mg tablet,extended release,multiphase	NP	PA
zolpidem ER 6.25 mg tablet,extended release,multiphase	NP	PA
Zolpimist 5 mg/spray (0.1 mL) oral spray	NP	PA
SEDATIVE-HYPNOTIC - OREXIN RECEPTOR ANTAGONIST		
Belsomra 10 mg tablet	NP	PA
Belsomra 15 mg tablet	NP	PA
Belsomra 20 mg tablet	NP	PA
Belsomra 5 mg tablet	NP	PA
Dayvigo 10 mg tablet	NP	PA
Dayvigo 5 mg tablet	NP	PA
SEDATIVE-HYPNOTIC - TRICYCLIC ANTIDEPRESSANT TYPE		
doxepin 3 mg tablet	NP	PA
doxepin 6 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Silenor 3 mg tablet	NP	PA
Silenor 6 mg tablet	NP	PA
CHEMICAL DEPENDENCY, AGENTS TO TREAT		
AGENTS FOR OPIOID WITHDRAWAL, CENTRAL ALPHA-2 ADRENERGIC AGONIST-TYPE		
Lucemyra 0.18 mg tablet	P	
AGENTS FOR OPIOID WITHDRAWAL, OPIOID-TYPE		
Bunavail 4.2 mg-0.7 mg buccal film	P	QL(QL (Limit 31 days supply(ies) per claim))
Bunavail 6.3 mg-1 mg buccal film	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 12 mg-naloxone 3 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 2 mg-naloxone 0.5 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 2 mg-naloxone 0.5 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 4 mg-naloxone 1 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 8 mg-naloxone 2 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine 8 mg-naloxone 2 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine HCl 2 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
buprenorphine HCl 8 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Sublocade 100 mg/0.5 mL solution,extended release subcutaneous syringe	P	QL(QL (Limit 31 days supply(ies) per claim)); SP
Sublocade 300 mg/1.5 mL solution,extended release subcutaneous syringe	P	QL(QL (Limit 31 days supply(ies) per claim)); SP
Suboxone 12 mg-3 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
Suboxone 2 mg-0.5 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
Suboxone 4 mg-1 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
Suboxone 8 mg-2 mg sublingual film	P	QL(QL (Limit 31 days supply(ies) per claim))
Zubsolv 0.7 mg-0.18 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Zubsolv 1.4 mg-0.36 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Zubsolv 11.4 mg-2.9 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Zubsolv 2.9 mg-0.71 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Zubsolv 5.7 mg-1.4 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
Zubsolv 8.6 mg-2.1 mg sublingual tablet	P	QL(QL (Limit 31 days supply(ies) per claim))
ALCOHOL ABSTINENCE THERAPY - GLUTAMATE AND GABA SYSTEM TYPE		
acamprosate 333 mg tablet,delayed release	P	
ALCOHOL ABSTINENCE THERAPY - OPIOID RECEPTOR ANTAGONIST-TYPE		
Vivitrol 380 mg intramuscular suspension,extended release	P	SP
ALCOHOL DETERRENTS		
Antabuse 250 mg tablet	P	
Antabuse 500 mg tablet	P	
disulfiram 250 mg tablet	P	
disulfiram 500 mg tablet	P	
SMOKING DETERRENTS - NE AND DOPAMINE REUPTAKE INHIBITOR (NDRI)-TYPE		
bupropion HCl 150 mg tablet,12 hr sustained-release(smoking deterrent)	P	QL(Allowed 2 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))

Drug Name	Tier	Drug Restriction
SMOKING DETERRENTS - NICOTINE-TYPE		
nicotine (polacrilex) 2 mg buccal lozenge	P	QL(Allowed 20 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine (polacrilex) 2 mg buccal mini lozenge	P	QL(Allowed 20 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine (polacrilex) 2 mg gum	P	QL(Allowed 24 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine (polacrilex) 4 mg buccal lozenge	P	QL(Allowed 20 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine (polacrilex) 4 mg buccal mini lozenge	P	QL(Allowed 20 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine (polacrilex) 4 mg gum	P	QL(Allowed 24 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine 14 mg/24 hr daily transdermal patch	P	QL(Allowed 1 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine 21 mg/24 hr daily transdermal patch	P	QL(Allowed 1 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine 21mg/24hr-14mg/24hr-7mg/24hr daily transderm patches,sequentl	P	QL(Allowed 56 per Rx); QL(QL (Limit 180 days supply(ies) per 365 days))
nicotine 7 mg/24 hr daily transdermal patch	P	QL(QL (Limit 180 days supply(ies) per 365 days))

Drug Name	Tier	Drug Restriction
Nicotrol 10 mg inhalation cartridge	P	QL(QL Overtime: Allowed 504 over 30 days); QL(QL (Limit 180 days supply(ies) per 365 days))
Nicotrol NS 10 mg/mL nasal spray	P	QL(QL Overtime: Allowed 120 over 30 days); QL(QL (Limit 180 days supply(ies) per 365 days))
SMOKING DETERRENTS - NICOTINIC RECEPTOR PARTIAL AGONIST, ALPHA4BETA2		
Chantix 0.5 mg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
Chantix 1 mg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
Chantix Continuing Month Box 1 mg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 180 days supply(ies) per 365 days))
Chantix Starting Month Box 0.5 mg (11)-1 mg (42) tablets in dose pack	P	QL(Allowed 53 per Rx); QL(QL (Limit 180 days supply(ies) per 365 days))
CHEMICALS-PHARMACEUTICAL ADJUVANTS		
BULK CHEMICALS		
formaldehyde (bulk) 10 % solution	P	QL(Allowed 90 per Rx)
PHARMACEUTICAL ADJUVANT - INHALATION VEHICLES		
sodium chloride 0.9 % for nebulization	P	
sodium chloride 3 % for nebulization	P	
COGNITIVE DISORDER THERAPY		

Drug Name	Tier	Drug Restriction
ALZHEIMER'S DISEASE THERAPY - CHOLINESTERASE INHIBITORS		
Aricept 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Aricept 23 mg tablet	NP	PA; MT
Aricept 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
donepezil 10 mg disintegrating tablet	P	MT
donepezil 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
donepezil 23 mg tablet	P	MT
donepezil 5 mg disintegrating tablet	P	MT
donepezil 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
Exelon Patch 13.3 mg/24 hour transdermal	NP	PA
Exelon Patch 4.6 mg/24 hour transdermal	NP	PA; QL(Allowed 1 per 1 day)
Exelon Patch 9.5 mg/24 hour transdermal	NP	PA; QL(Allowed 1 per 1 day)
galantamine 12 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
galantamine 4 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
galantamine 4 mg/mL oral solution	NP	PA; QL(Allowed 6 per 1 day); MT
galantamine 8 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
galantamine ER 16 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
galantamine ER 24 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
galantamine ER 8 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Razadyne ER 16 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Razadyne ER 24 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Razadyne ER 8 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
rivastigmine 1.5 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
rivastigmine 13.3 mg/24 hour transdermal patch	NP	PA
rivastigmine 3 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
rivastigmine 4.5 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
rivastigmine 4.6 mg/24 hour transdermal patch	NP	PA; QL(Allowed 1 per 1 day)
rivastigmine 6 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
rivastigmine 9.5 mg/24 hour transdermal patch	NP	PA; QL(Allowed 1 per 1 day)
ALZHEIMER'S DISEASE THERAPY - NMDA RECEPTOR ANTAGONISTS		
memantine 10 mg tablet	P	QL(Allowed 2 per 1 day); MT
memantine 14 mg capsule sprinkle,extended release 24hr	NP	PA; MT
memantine 2 mg/mL oral solution	NP	PA; MT
memantine 21 mg capsule sprinkle,extended release 24hr	NP	PA; MT
memantine 28 mg capsule sprinkle,extended release 24hr	NP	PA; MT
memantine 5 mg tablet	P	QL(Allowed 2 per 1 day); MT
memantine 5 mg-10 mg tablets in a dose pack	NP	PA; QL(Allowed 49 per Rx); MT

Drug Name	Tier	Drug Restriction
memantine 7 mg capsule sprinkle,extended release 24hr	NP	PA; MT
Namenda 10 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Namenda 5 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Namenda Titration Pak 5 mg-10 mg tablets in a dose pack	NP	PA; QL(Allowed 49 per Rx); MT
Namenda XR 14 mg capsule sprinkle,extended release	NP	PA; MT
Namenda XR 21 mg capsule sprinkle,extended release	NP	PA; MT
Namenda XR 28 mg capsule sprinkle,extended release	NP	PA; MT
Namenda XR 7 mg capsule sprinkle,extended release	NP	PA; MT
Namenda XR 7 mg-14 mg-21 mg-28 mg capsule,sprinkle,extrel, dose pack	NP	PA
ALZHEIMER'S THX - NMDA RECEPTOR ANTAG. AND CHOLINESTERASE INHIB. COMB		
Namzaric 14 mg-10 mg capsule sprinkle,extended release	NP	PA
Namzaric 21 mg-10 mg capsule sprinkle,extended release	NP	PA
Namzaric 28 mg-10 mg capsule sprinkle,extended release	NP	PA
Namzaric 7 mg-10 mg capsule sprinkle,extended release	NP	PA
Namzaric 7/14/21/28 mg-10 mg capsule,sprinkle,extend release,dose pack	NP	PA
COGNITIVE DISORDER THERAPY - CEREBRAL VASODILATORS		
ergoloid 1 mg tablet	P	
CONTRACEPTIVES		
CONTRACEPTIVE - VAGINAL PH MODULATOR		
Phexxi 1.8 %-1 %-0.4 % vaginal gel	P	
CONTRACEPTIVE INJECTABLE - PROGESTIN		
Depo-Provera 150 mg/mL intramuscular suspension	P	QL(Allowed 1 per Rx); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Depo-Provera 150 mg/mL intramuscular syringe	P	
Depo-SubQ provera 104 104 mg/0.65 mL subcutaneous syringe	P	
medroxyprogesterone 150 mg/mL intramuscular suspension	P	QL(Allowed 1 per Rx); QL(QL (Limit 100 days supply(ies) per claim))
medroxyprogesterone 150 mg/mL intramuscular syringe	P	
CONTRACEPTIVE ORAL - BIPHASIC		
Amethia 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Amethia Lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
Ashlyna 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Bekyree (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Camrese 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Camrese Lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
Daysee 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
desogestrel-e.estradiol 0.15 mg-0.02 mg(21)/e.estrad 0.01 mg(5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Jaimiess 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Kariva (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
L norgest/E estradiol-E estrad 0.10 mg-20 mcg (84)/10 mcg(7) tabs,3mos	P	QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
L norgest/E estradiol-E estrad 0.15 mg-30 mcg (84)/10 mcg(7) tabs,3mos	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Lo Loestrin Fe 1 mg-10 mcg (24)/10 mcg (2) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
LoJaimiess 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
LoSeasonique 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
Mircette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Pimtrea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Seasonique 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Simliya (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Simpesse 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Viorele (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Volnea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVE ORAL - MONOPHASIC		
Afirmelle 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Altavera (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Alyacen 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Amethyst (28) 90 mcg-20 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Apri 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aubra 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aubra EQ 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aurovela 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aurovela 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Aurovela 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Aurovela Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aurovela Fe 1-20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aviane 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Ayuna 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Balcoltra 0.1 mg-0.02 mg(21)/36.5 mg(7) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Balziva (28) 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Beyaz (28) 3 mg-0.02 mg-0.451 mg (24)/0.451 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Blisovi 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Blisovi Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Blisovi Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Briellyn 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Charlotte 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Chateal (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Chateal EQ (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cryselle (28) 0.3 mg-30 mcg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cyclafem 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cyred 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cyred EQ 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Dasetta 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
desogestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Dolishale 90 mcg-20 mcg (28) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
drospiren-e.estrad-l.mefol 3 mg-0.02 mg-0.451 mg(24)/0.451 mg(4)tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
drospiren-e.estrad-l.mefol 3 mg-0.03 mg-0.451 mg(21)/0.451 mg(7)tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
drospirenone 3 mg-ethinyl estradiol 0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
drospirenone 3 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Elinest 0.3 mg-30 mcg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Emoquette 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Enskyce 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Estarylla 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
ethynodiol diacetate-ethinyl estradiol 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
ethynodiol diacetate-ethinyl estradiol 1 mg-50 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Falmina (28) 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Femynor 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Gemmily 1 mg-20 mcg (24)/75 mg (4) capsule	P	QL(QL (Limit 100 days supply(ies) per claim))
Generess Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Gianvi (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Hailey 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Hailey 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Hailey Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Hailey Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Iclevia 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
Introvale 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Isibloom 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Jasmiel (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Jolessa 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Juleber 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Junel 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Junel 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Junel FE 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Junel FE 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Junel Fe 24 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Kaitlib Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Kalliga 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Kelnor 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Kelnor 1-50 (28) 1 mg-50 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Kurvelo (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Larin 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Larin 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Larin 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Larin Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Larin Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Larissia 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Layolis Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Lessina 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
levonorgestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
levonorgestrel 0.15 mg-ethinyl estradiol 30 mcg tablets,3 mos pack(91)	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
levonorgestrel-ethinyl estradiol 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
levonorgestrel-ethinyl estradiol 90 mcg-20 mcg (28) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Levora-28 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Lillow (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Loestrin 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Loestrin 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Loestrin Fe 1.5/30 (28-Day) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Loestrin Fe 1/20 (28-Day) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Loryna (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Low-Ogestrel (28) 0.3 mg-30 mcg tablet	P	QL(Allowed 2 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Lo-Zumandimine (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Lutera (28) 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Marlissa (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Melodetta 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Merzee 1 mg-20 mcg (24)/75 mg (4) capsule	P	QL(QL (Limit 100 days supply(ies) per claim))
Mibelas 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Microgestin 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Microgestin 1/20 (21) 1 mg-20 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Microgestin 24 FE 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Microgestin Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Microgestin FE 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Mili 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Minastrin 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Mono-Linyah 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Necon 0.5/35 (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nextstellis 3 mg-14.2 mg (28) tablet	P	
Nikki (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norethindrone 1 mg-e. estradiol 20 mcg (24)-iron 75 mg (4) chew tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
norethindrone 1 mg-ethin. estradiol 20 mcg (24)-iron 75 mg (4) capsule	P	QL(QL (Limit 100 days supply(ies) per claim))
norethindrone 1 mg-ethinyl estradiol 20 mcg (21)-iron 75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norethindrone 1.5 mg-ethinyl estradiol 30 mcg(21)/iron 75 mg(7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norethindrone acetate 1 mg-ethinyl estradiol 20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norethindrone acetate 1.5 mg-ethinyl estradiol 30 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
norethin-ethinyl estradiol-iron 0.4 mg-35 mcg(21)/75 mg(7) chew tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
norethin-ethinyl estradiol-iron 0.8 mg-25 mcg(24)/75 mg(4) chew tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
norgestimate 0.25 mg-ethinyl estradiol 35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nortrel 0.5/35 (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nortrel 1/35 (21) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nortrel 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nymyo 0.25 mg-35 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Ocella 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Orsythia 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Philith 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Pirmella 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Portia 28 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Previfem 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Reclipsen (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Safyral 3 mg-0.03 mg-0.451 mg (21)/0.451 mg (7) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Setlakin 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Sprintec (28) 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Sronyx 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Syeda 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tarina 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tarina Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Tarina Fe 1-20 EQ (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Taytulla 1 mg-20 mcg (24)/75 mg (4) capsule	P	QL(QL (Limit 100 days supply(ies) per claim))
Tyblume 0.1 mg-20 mcg chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tydemy 3 mg-0.03 mg-0.451 mg (21)(7) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Vestura (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Vienva 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Vyfemla (28) 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
VyLibra 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Wera (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Wymzya Fe 0.4 mg-35 mcg (21)/75 mg (7) chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Yasmin (28) 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
YAZ (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Zarah 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Zovia 1/35E (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Zovia 1-35 (28) 1 mg-35 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Zumandimine (28) 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVE ORAL - PROGESTIN		
Camila 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Deblitane 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Errin 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Heather 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Incassia 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Jencycla 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Lyleq 0.35 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Lyza 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nora-BE 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norethindrone (contraceptive) 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Norlyda 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Sharobel 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Slynd 4 mg (28) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tulana 0.35 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVE ORAL - QUADRAPHASIC		
Fayosim 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
L norgest/E estradiol-E estrad 0.15 mg-20 mcg/0.15 mg-25 mcg tabs,3mos	P	QL(QL (Limit 100 days supply(ies) per claim))
Natazia 3 mg/2 mg-2 mg/2 mg-3 mg/1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Quartette 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
Rivelsa 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVE ORAL - TRIPHASIC		
Alyacen 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Aranelle (28) 0.5 mg/1 mg/0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Caziant (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cyclafem 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Cyclessa (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Dasetta 7/7/7 (28) 0.5 mg(7)/0.75 mg(7)/1 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Enpresse 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Estrostep Fe-28 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
l.norgest-eth.estradiol triphasic 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Leena 28 0.5 mg/1 mg/0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Levonest (28) 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
norgestimate 0.18 mg/0.215 mg/0.25 mg-ethinyl estradiol 25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
norgestimate-ethinyl estradiol 0.18 mg/0.215mg/0.25mg-35 mcg(28)tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nortrel 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Nylia 7/7/7 (28) 0.5/0.75/1 mg-35 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Pirmella 0.5/0.75/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tilia Fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri Femynor (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-Estarylla (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-Legest Fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Linyah (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-Lo-Estarylla 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Lo-Marzia 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Lo-Mili 0.18/0.215/0.25 mg-25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Lo-Sprintec 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Mili (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Tri-Nymyo 0.18/0.215/0.25 mg-35 mcg(28) tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tri-Previfem (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-Sprintec (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Trivora (28) 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-VyLibra (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Tri-VyLibra Lo 0.18/0.215/0.25 mg-25 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Velivet Triphasic Regimen (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVE TRANSDERMAL COMBINATIONS - ESTROGEN AND PROGESTIN COMB.		
Twirla 120 mcg-30 mcg/24 hr transdermal patch	P	
Xulane 150 mcg-35 mcg/24 hr transdermal patch	P	QL(QL Overtime: Allowed 3 over 28 days); QL(QL (Limit 100 days supply(ies) per claim))
Zafemy 150 mcg-35 mcg/24 hr transdermal patch	P	QL(QL (Limit 100 days supply(ies) per claim))
CONTRACEPTIVES - INTRAVAGINAL, SYSTEMIC - ESTROGEN AND PROGESTIN COMB.		
Annovera 0.15 mg-0.013 mg/24 hr vaginal ring	P	QL(QL (Limit 100 days supply(ies) per claim))
EluRyng 0.12 mg-0.015 mg/24 hr vaginal ring	P	QL(QL (Limit 100 days supply(ies) per claim))
etonogestrel 0.12 mg-ethinyl estradiol 0.015 mg/24 hr vaginal ring	P	QL(QL (Limit 100 days supply(ies) per claim))
NuvaRing 0.12 mg-0.015 mg/24 hr vaginal	P	QL(QL (Limit 100 days supply(ies) per claim))
EMERGENCY CONTRACEPTIVES		
EContra EZ 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
Econtra One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
Ella 30 mg tablet	P	QL(QL Overtime: Allowed 3 over 63 days); QL(QL (Limit 100 days supply(ies) per claim))
Fallback Solo 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
levonorgestrel 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
My Choice 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
My Way 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
New Day 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
Opcicon One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
Option-2 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
Plan B One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 3 over 30 days); QL(QL (Limit 100 days supply(ies) per claim))
DERMATOLOGICAL		
ACNE THERAPY SYSTEMIC - RETINOIDS AND DERIVATIVES		
Absorica 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Absorica 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Absorica 25 mg capsule	NP	PA
Absorica 30 mg capsule	NP	PA
Absorica 35 mg capsule	NP	PA
Absorica 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Absorica LD 16 mg capsule	NP	PA
Absorica LD 24 mg capsule	NP	PA
Absorica LD 32 mg capsule	NP	PA
Absorica LD 8 mg capsule	NP	PA
Amnesteem 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Amnesteem 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Amnesteem 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Claravis 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Claravis 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Claravis 30 mg capsule	NP	PA
Claravis 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
isotretinoin 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
isotretinoin 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
isotretinoin 25 mg capsule	NP	PA
isotretinoin 30 mg capsule	NP	PA
isotretinoin 35 mg capsule	NP	PA
isotretinoin 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Myorisan 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Myorisan 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Myorisan 30 mg capsule	NP	PA
Myorisan 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Zenatane 10 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Zenatane 20 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
Zenatane 30 mg capsule	NP	PA
Zenatane 40 mg capsule	NP	AL(Minimum Age 12 Years); PA; QL(Allowed 2 per 1 day)
ACNE THERAPY TOPICAL - ANTI-INFECTIVE		

Drug Name	Tier	Drug Restriction
Aczone 5 % topical gel	NP	PA
Aczone 7.5 % topical gel with pump	NP	PA
Amzeeq 4 % topical foam	NP	PA
Azelex 20 % topical cream	NP	PA
Cleocin T 1 % lotion	NP	PA; QL(Allowed 60 per Rx)
Cleocin T 1 % topical gel	NP	PA; QL(Allowed 75 per Rx)
Clindacin ETZ 1 % topical swab	P	
Clindacin P 1 % topical swab	P	
Clindagel 1 % topical gel, once daily	NP	PA; QL(Allowed 75 per Rx)
clindamycin 1 % lotion	P	QL(Allowed 60 per Rx)
clindamycin 1 % topical foam	NP	PA
clindamycin 1 % topical gel	P	QL(Allowed 75 per Rx)
clindamycin 1 % topical gel, once daily	P	QL(Allowed 75 per Rx)

Drug Name	Tier	Drug Restriction
clindamycin phosphate 1 % topical solution	P	
clindamycin phosphate 1 % topical swab	P	
dapsone 5 % topical gel	NP	PA
dapsone 7.5 % topical gel with pump	NP	PA
Ery Pads 2 % topical swab	NP	PA
Erygel 2 % topical	NP	PA; QL(Allowed 60 per Rx)
erythromycin with ethanol 2 % topical gel	P	QL(Allowed 60 per Rx)
erythromycin with ethanol 2 % topical solution	P	
erythromycin with ethanol 2 % topical swab	NP	PA
Evoclin 1 % topical foam	NP	PA
Klaron 10 % lotion (suspension)	NP	PA; QL(Allowed 120 per Rx)
sulfacetamide sodium (acne) 10 % lotion (suspension)	NP	PA; QL(Allowed 120 per Rx)
ACNE THERAPY TOPICAL - ANTI-INFECTIVE COMBINATIONS OTHER		
Clindacin ETZ 1 % topical kit	NP	PA
Clindacin Pac 1 % topical kit	NP	PA
ACNE THERAPY TOPICAL - ANTI-INFECTIVE-KERATOLYTIC COMBINATIONS		
Acanya 1.2 %-2.5 % topical gel with pump	NP	PA
Aktipak 3 %-5 % topical gel	P	
Benzaclin 1 %-5 % topical gel	NP	PA
Benzaclin Pump 1 %-5 % topical gel	NP	PA
Benzamycin 3 %-5 % topical gel	NP	PA
BP 10-1 10 %-1 % topical cleanser	NP	PA
Cleansing Wash 10 %-4 %-10 % topical cleanser	NP	PA
clindamycin 1 %-benzoyl peroxide 5 % topical gel	NP	PA
clindamycin 1 %-benzoyl peroxide 5 % topical gel with pump	NP	PA
clindamycin 1.2 % (1 % base)-benzoyl peroxide 5 % topical gel	NP	PA

Drug Name	Tier	Drug Restriction
clindamycin 1.2 %-benzoyl peroxide 2.5 % topical gel with pump	NP	PA
erythromycin-benzoyl peroxide 3 %-5 % topical gel	P	
Neuac 1.2 % (1 % base)-5 % topical gel	NP	PA
Neuac Kit 1.2 %-5 % topical pack,cream and gel	NP	PA
Onexton 1.2 % (1 % base)-3.75 % topical gel	NP	PA
Onexton 1.2 % (1 % base)-3.75 % topical gel with pump	NP	PA
SSS 10-5 10 %-5 % (w/w) topical cream	NP	PA
SSS 10-5 10 %-5 % topical foam	NP	PA
sulfacetamide sodium 9.8 %-sulfur 4.8 % topical cleanser	NP	PA
sulfacetamide sodium-sulfur 10 %-2 % topical cleanser	NP	PA
sulfacetamide sodium-sulfur 10 %-2 % topical cream	NP	PA
sulfacetamide sodium-sulfur 10 %-4 % topical pads	NP	PA
sulfacetamide sodium-sulfur 10 %-5 % (w/w) topical cleanser	NP	PA
sulfacetamide sodium-sulfur 10 %-5 % (w/w) topical cream	NP	PA
sulfacetamide sodium-sulfur 8 %-4 % topical suspension	NP	PA
sulfacetamide sodium-sulfur 9 %-4 % topical cleanser	NP	PA
sulfacetamide sodium-sulfur 9 %-4.5 % topical cleanser	NP	PA
sulfacetamide sodium-sulfur-urea 10 %-5 %-10 % topical cleanser	NP	PA
Sumadan 9 %-4.5 % topical cleanser	NP	PA
Sumadan 9 %-4.5 % topical kit	NP	PA

Drug Name	Tier	Drug Restriction
Sumadan XLT 9 %-4.5 %-SPF 25 topical pack,cleanser and cream	NP	PA
Sumaxin 10 %-4 % topical pads	NP	PA
Sumaxin 9 %-4 % topical cleanser	NP	PA
Sumaxin CP 10 %-4 % topical kit	NP	PA
Sumaxin TS 8 %-4 % topical suspension	NP	PA
ACNE THERAPY TOPICAL - ANTI-INFECTIVE-RETINOID COMBINATIONS		
clindamycin-tretinoin 1.2 %-0.025 % topical gel	NP	PA
Ziana 1.2 %-0.025 % topical gel	NP	PA
ACNE THERAPY TOPICAL - RETINOID COMBINATIONS OTHER		
adapalene 0.1 %-benzoyl peroxide 2.5 % topical gel with pump	NP	PA
Epiduo Forte 0.3 %-2.5 % topical gel with pump	NP	PA
ACNE THERAPY TOPICAL - RETINOIDS AND DERIVATIVES		
adapalene 0.1 % topical cream	NP	PA

Drug Name	Tier	Drug Restriction
adapalene 0.1 % topical gel	NP	PA
adapalene 0.1 % topical solution	NP	PA
adapalene 0.3 % topical gel	NP	PA
adapalene 0.3 % topical gel with pump	NP	PA
Aklief 0.005 % topical cream	NP	PA
Altreno 0.05 % lotion	NP	PA
Arazlo 0.045 % lotion	NP	PA
Atralin 0.05 % topical gel	NP	PA
Avita 0.025 % topical cream	P	AL(Maximum Age 35 Years); QL(Allowed 20 per Rx)
Avita 0.025 % topical gel	P	AL(Maximum Age 35 Years); QL(Allowed 45 per Rx)
Differin 0.1 % lotion	NP	PA
Differin 0.1 % topical cream	NP	PA
Differin 0.3 % topical gel with pump	NP	PA
Fabior 0.1 % topical foam	NP	PA

Drug Name	Tier	Drug Restriction
Retin-A 0.01 % topical gel	NP	AL(Maximum Age 35 Years); PA; QL(Allowed 45 per Rx)
Retin-A 0.025 % topical cream	NP	AL(Maximum Age 35 Years); PA; QL(Allowed 20 per Rx)
Retin-A 0.025 % topical gel	NP	AL(Maximum Age 35 Years); PA; QL(Allowed 45 per Rx)
Retin-A 0.05 % topical cream	NP	AL(Maximum Age 35 Years); PA; QL(QL Overtime: Allowed 20 over 30 days)
Retin-A 0.1 % topical cream	NP	AL(Maximum Age 35 Years); PA; QL(QL Overtime: Allowed 20 over 30 days)
Retin-A Micro 0.04 % topical gel	NP	PA
Retin-A Micro 0.1 % topical gel	NP	PA
Retin-A Micro Pump 0.04 % topical gel	NP	PA
Retin-A Micro Pump 0.06 % topical gel	NP	PA
Retin-A Micro Pump 0.08 % topical gel	NP	PA
Retin-A Micro Pump 0.1 % topical gel	NP	PA
tazarotene 0.1 % topical foam	NP	PA
tretinoin 0.01 % topical gel	P	AL(Maximum Age 35 Years); QL(Allowed 45 per Rx)
tretinoin 0.025 % topical cream	P	AL(Maximum Age 35 Years); QL(Allowed 20 per Rx)
tretinoin 0.025 % topical gel	P	AL(Maximum Age 35 Years); QL(Allowed 45 per Rx)
tretinoin 0.05 % topical cream	P	AL(Maximum Age 35 Years); QL(QL Overtime: Allowed 20 over 30 days)
tretinoin 0.05 % topical gel	P	
tretinoin 0.1 % topical cream	P	AL(Maximum Age 35 Years); QL(QL Overtime: Allowed 20 over 30 days)
tretinoin microspheres 0.04 % topical gel	NP	PA
tretinoin microspheres 0.04 % topical gel with pump	NP	PA
tretinoin microspheres 0.1 % topical gel	NP	PA
tretinoin microspheres 0.1 % topical gel with pump	NP	PA
TRETIN-X 0.075 % topical cream	NP	PA
ANTIPSORIATIC - RETINOID (VITAMIN A DERIVATIVE) - GLUCOCORTICOID		
Duobrii 0.01 %-0.045 % lotion	NP	PA
ANTIPSORIATIC - VITAMIN D ANALOG - GLUCOCORTICOID COMBINATIONS		

Drug Name	Tier	Drug Restriction
calcipotriene-betamethasone 0.005 %-0.064 % topical ointment	NP	PA
calcipotriene-betamethasone 0.005 %-0.064 % topical suspension	NP	PA
Enstilar 0.005 %-0.064 % topical foam	NP	PA
Taclonex 0.005 %-0.064 % topical ointment	NP	PA
Taclonex 0.005 %-0.064 % topical suspension	NP	PA
ANTIPSORIATIC AGENTS - INTERLEUKIN 12 AND IL-23 INHIBITORS,MC ANTIBODY		
Stelara 45 mg/0.5 mL subcutaneous solution	NP	PA; SP
Stelara 45 mg/0.5 mL subcutaneous syringe	NP	PA; SP
Stelara 90 mg/mL subcutaneous syringe	NP	PA; SP
ANTIPSORIATIC AGENTS - INTERLEUKIN-23 (IL-23) ANTAGONIST, MC ANTIBODY		
Ilumya 100 mg/mL subcutaneous syringe	NP	PA; SP
Skyrizi 150 mg/1.66 mL(75 mg/0.83 mL x 2) subcutaneous syringe kit	NP	PA; SP
Tremfya 100 mg/mL subcutaneous auto-injector	NP	PA; SP
Tremfya 100 mg/mL subcutaneous syringe	NP	PA; SP
ANTIPSORIATIC AGENTS-INTERLEUKIN-17 (IL-17) ANTAGONIST, MC ANTIBODY		
Cosentyx 150 mg/mL subcutaneous syringe	NP	PA; SP
Cosentyx 300 mg/2 Syringes (150 mg/mL) subcutaneous	NP	PA; SP
Cosentyx Pen 150 mg/mL subcutaneous	NP	PA; SP
Cosentyx Pen 300 mg/2 Pens (150 mg/mL) subcutaneous	NP	PA; SP
Siliq 210 mg/1.5 mL subcutaneous syringe	NP	PA; SP
Taltz Autoinjector (2 Pack) 80 mg/mL subcutaneous	NP	PA; SP

Drug Name	Tier	Drug Restriction
Taltz Autoinjector (3 Pack) 80 mg/mL subcutaneous	NP	PA; SP
Taltz Autoinjector 80 mg/mL subcutaneous	NP	PA; SP
Taltz Syringe 80 mg/mL subcutaneous	NP	PA; SP
DERMATITIS OR ECZEMA AGENTS, SYSTEMIC-INTERLEUKIN-4 (IL-4RA) ANTAG.MAB		
Dupixent 200 mg/1.14 mL subcutaneous syringe	P	PA; SP
Dupixent 300 mg/2 mL subcutaneous pen injector	NP	PA; SP
Dupixent 300 mg/2 mL subcutaneous syringe	NP	PA; SP
DERMATITIS OR ECZEMA AGENTS, TOPICAL - PHOSPHODIESTERASE-4 INHIBITORS		
Eucrisa 2 % topical ointment	P	PA
DERMATOLOGICAL - ANTIBACTERIAL AMINOGLYCOSIDES		
gentamicin 0.1 % topical cream	P	QL(Allowed 30 per Rx)
gentamicin 0.1 % topical ointment	P	QL(Allowed 30 per Rx)
DERMATOLOGICAL - ANTIBACTERIAL MIXTURES		
Antibiotic(neomy-bacit-polym) 3.5 mg-400 unit-5,000 unit/gram top oint	P	QL(Allowed 454 per Rx)
First Aid Antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment	P	QL(Allowed 454 per Rx)
First Aid Antibiotic 3.5 mg-500 unit-10,000 unit topical ointment	P	QL(Allowed 454 per Rx)
Neosporin (neo-bac-polym) 3.5 mg-400 unit-5,000 unit/gram top ointment	P	QL(Allowed 454 per Rx)
Neosporin(neo-bac-polym) 3.5 mg-400 unit-5,000 unit top ointment packt	P	QL(Allowed 454 per Rx)
Triple Antibiotic 3.5 mg-400 unit-5,000 unit topical ointment packet	P	QL(Allowed 454 per Rx)
Triple Antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment	P	QL(Allowed 454 per Rx)
DERMATOLOGICAL - ANTIBACTERIAL OTHER		
Centany 2 % topical ointment	NP	PA; QL(Allowed 2160 per Rx)
Centany AT 2 % ointment topical kit	NP	PA
mupirocin 2 % topical ointment	P	QL(Allowed 2160 per Rx)
mupirocin calcium 2 % topical cream	NP	PA; QL(Allowed 30 per Rx)

Drug Name	Tier	Drug Restriction
silver nitrate 0.5 % topical solution	NP	PA
DERMATOLOGICAL - ANTIBACTERIAL QUINOLONES		
Xepi 1 % topical cream	NP	PA
DERMATOLOGICAL - ANTIBACTERIAL-GLUCOCORTICOID COMBINATIONS		
Cortisporin 1 % topical ointment	P	
Cortisporin 3.5 mg/g-10,000 unit/g-0.5 % topical cream	NP	PA
Neo-Synalar 0.5 % (0.35 % base)-0.025 % topical cream	NP	PA
Neo-Synalar Kit 0.5 % (0.35 % base)-0.025 % topical cream	NP	PA
DERMATOLOGICAL - ANTIBACTERIAL-LOCAL ANESTHETIC COMBINATIONS		
Antibiotic Plus (pramoxine) 3.5 mg-10,000 unit-10 mg/gram top cream	P	QL(Allowed 28.3 per Rx)
Antibiotic Plus Pain Relief 3.5 mg-10,000 unit-10 mg/gram top cream	P	QL(Allowed 28.3 per Rx)
First Aid ABX Pain Relief 3.5 mg-10,000 unit-10 mg/gram topical cream	P	QL(Allowed 28.3 per Rx)
Multi Antibiotic Plus 3.5 mg-10,000 unit-10 mg/gram topical cream	P	QL(Allowed 28.3 per Rx)
Neosporin Plus Pain Relief 3.5 mg-10,000 unit-10 mg/gram topical cream	P	QL(Allowed 28.3 per Rx)
DERMATOLOGICAL - ANTICHOLINERGIC HYPERHIDROSIS TREATMENT AGENTS		
Qbrexza 2.4 % towelette	NP	PA
DERMATOLOGICAL - ANTIFUNGAL ALLYLAMINES		
naftifine 1 % topical cream	NP	PA
naftifine 1 % topical gel	NP	PA
naftifine 2 % topical cream	NP	PA
Naftin 1 % topical gel	NP	PA
Naftin 2 % topical gel	NP	PA
DERMATOLOGICAL - ANTIFUNGAL AMPHOTERIC POLYENE MACROLIDES		
Nyamyc 100,000 unit/gram topical powder	P	QL(Allowed 60 per Rx)
nystatin 100,000 unit/gram topical cream	P	QL(Allowed 30 per Rx)
nystatin 100,000 unit/gram topical ointment	P	QL(Allowed 30 per Rx)

Drug Name	Tier	Drug Restriction
nystatin 100,000 unit/gram topical powder	P	QL(Allowed 60 per Rx)
Nystop 100,000 unit/gram topical powder	P	QL(Allowed 60 per Rx)
DERMATOLOGICAL - ANTIFUNGAL BENZYLAMINES		
Mentax 1 % topical cream	NP	PA
DERMATOLOGICAL - ANTIFUNGAL HYDROXYPYRIDINONE		
Ciclodan 0.77 % topical cream	NP	PA
Ciclodan 8 % topical solution	NP	PA
Ciclodan Kit 0.77 % topical combo pack	NP	PA
Ciclodan Kit 8 % topical solution	NP	PA
ciclopirox 0.77 % topical cream	NP	PA
ciclopirox 0.77 % topical gel	NP	PA
ciclopirox 0.77 % topical suspension	NP	PA
ciclopirox 1 % shampoo	NP	PA
ciclopirox 8 % topical solution	NP	PA

Drug Name	Tier	Drug Restriction
ciclopirox 8 %-urea-camphor-menthol-eucalyptol topical solution	NP	PA
Loprox (as olamine) 0.77 % topical cream	NP	PA
Loprox (as olamine) 0.77 % topical suspension	NP	PA
Loprox 1 % shampoo	NP	PA
Loprox Kit 0.77 % topical combo pack	NP	PA
Loprox Kit 0.77 %, suspension and cleanser	NP	PA
DERMATOLOGICAL - ANTIFUNGAL IMIDAZOLE AND RELATED AGENTS		
Antifungal (clotrimazole) 1 % topical cream	P	
Athlete's Foot (clotrimazole) 1 % topical cream	P	
clotrimazole 1 % topical cream	P	QL(Allowed 113 per Rx)
clotrimazole 1 % topical solution	NP	PA; QL(Allowed 60 per Rx)
Econasil 1 %-4" X 4" topical kit	NP	PA
econazole 1 % topical cream	P	QL(Allowed 30 per Rx)

Drug Name	Tier	Drug Restriction
Ertaczo 2 % topical cream	NP	PA
Exelderm 1 % topical cream	NP	PA
Exelderm 1 % topical solution	NP	PA
Extina 2 % topical foam	NP	PA
ketoconazole 2 % shampoo	P	QL(Allowed 120 per Rx)
ketoconazole 2 % topical cream	P	QL(Allowed 60 per Rx)
ketoconazole 2 % topical foam	NP	PA
Ketodan 2 % topical foam	NP	PA
Ketodan Kit 2 % topical combo pack	NP	PA
luliconazole 1 % topical cream	NP	PA
Luzu 1 % topical cream	NP	PA
miconazole nit 0.25 %-zinc ox 15 %-petrolatum 81.35 % topical ointment	NP	PA
oxiconazole 1 % topical cream	NP	PA
Oxistat 1 % lotion	NP	PA
Oxistat 1 % topical cream	NP	PA
Vusion 0.25 %-15 %-81.35 % topical ointment	NP	PA
Zolpak 1 %-6 cm X 7 cm topical kit	NP	PA
DERMATOLOGICAL - ANTIFUNGAL OXABOROLE		
Kerydin 5 % topical solution with applicator	NP	PA
tavaborole 5 % topical solution with applicator	NP	PA
DERMATOLOGICAL - ANTIFUNGAL TRIAZOLE		
Jublia 10 % topical solution with applicator	NP	PA
DERMATOLOGICAL - ANTIFUNGAL-GLUCOCORTICOID COMBINATIONS		
clotrimazole-betamethasone 1 %-0.05 % lotion	NP	PA; QL(Allowed 30 per Rx)
clotrimazole-betamethasone 1 %-0.05 % topical cream	NP	PA; QL(Allowed 45 per Rx)
nystatin-triamcinolone 100,000 unit/g-0.1 % topical cream	NP	PA; QL(Allowed 60 per Rx)
nystatin-triamcinolone 100,000 unit/gram-0.1 % topical ointment	NP	PA; QL(Allowed 60 per Rx)

Drug Name	Tier	Drug Restriction
Trilociclo 8 %-0.1 % topical kit,ointment and liquid	NP	PA
DERMATOLOGICAL - ANTINEOPLASTIC ALKYLATING AGENTS		
Valchlor 0.016 % topical gel	NP	PA; SP
DERMATOLOGICAL - ANTINEOPLASTIC ANTIMETABOLITES		
Carac 0.5 % topical cream	NP	PA
Efudex 5 % topical cream	NP	PA; QL(Allowed 40 per Rx)
fluorouracil 0.5 % topical cream	NP	PA; QL(Allowed 30 per Rx)
fluorouracil 2 % topical solution	NP	PA; QL(Allowed 10 per Rx)
fluorouracil 5 % topical cream	NP	PA; QL(Allowed 40 per Rx)
fluorouracil 5 % topical solution	NP	PA; QL(Allowed 10 per Rx)
DERMATOLOGICAL - ANTINEOPLASTIC OR PREMALIG. LESIONS -DITERPENE ESTERS		
Picato 0.015 % topical gel	NP	PA
Picato 0.05 % topical gel	NP	PA
DERMATOLOGICAL - ANTINEOPLASTIC OR PREMALIGNANT LESIONS - NSAID'S		
diclofenac 3 % topical gel	NP	PA
DERMATOLOGICAL - ANTINEOPLASTIC RETINOIDS		
Panretin 0.1 % topical gel	P	
DERMATOLOGICAL - ANTINEOPLASTIC SELECTIVE RETINOID X RECEPTOR AGONIST		
Targretin 1 % topical gel	P	SP
DERMATOLOGICAL - ANTIPERSPIRANTS		
Xerac AC 6.25 % topical solution	NP	PA
DERMATOLOGICAL - ANTIPRURITICS COMBINATIONS		
Anti-Itch (menthol-camphor) 0.5 %-0.5 % lotion	P	QL(Allowed 222 per Rx)
DermaSarra Anti-Itch (menthol-camphor) 0.5 %-0.5 % lotion	P	QL(Allowed 222 per Rx)
Men-Phor 0.5 %-0.5 % lotion	P	QL(Allowed 222 per Rx)
Sarna Original 0.5 %-0.5 % lotion	P	QL(Allowed 222 per Rx)
DERMATOLOGICAL - ANTIPSORIATIC AGENTS SYSTEMIC, PHOTOSENSITIZING		
methoxsalen 10 mg liquid-filled,rapid release capsule	NP	PA
Oxsoralen Ultra 10 mg liquid-filled,rapid release capsule	NP	PA
DERMATOLOGICAL - ANTIPSORIATIC AGENTS SYSTEMIC, VITAMIN A DERIVATIVES		
acitretin 10 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
acitretin 17.5 mg capsule	NP	PA
acitretin 25 mg capsule	NP	PA
Soriatane 10 mg capsule	NP	PA
Soriatane 25 mg capsule	NP	PA
DERMATOLOGICAL - ANTIPSORIATIC AGENTS TOPICAL		
calcipotriene 0.005 % scalp solution	P	QL(Allowed 60 per Rx)
calcipotriene 0.005 % topical cream	P	QL(Allowed 60 per Rx)
calcipotriene 0.005 % topical foam	NP	PA
calcipotriene 0.005 % topical ointment	P	
calcitriol 3 mcg/gram topical ointment	NP	PA
Dovonex 0.005 % topical cream	NP	PA; QL(Allowed 60 per Rx)
Sorilux 0.005 % topical foam	NP	PA
Tazorac 0.05 % topical cream	NP	PA; QL(Allowed 100 per Rx)
Tazorac 0.05 % topical gel	NP	PA; QL(Allowed 100 per Rx)
Tazorac 0.1 % topical cream	NP	PA; QL(Allowed 60 per Rx)
Tazorac 0.1 % topical gel	NP	PA; QL(Allowed 100 per Rx)
Vectical 3 mcg/gram topical ointment	NP	PA
DERMATOLOGICAL - ANTISEBORRHEIC		
Ovace Plus 9.8 % lotion	NP	PA
selenium sulfide 2.25 % shampoo	NP	PA
selenium sulfide 2.3 % shampoo	NP	PA
selenium sulfide 2.5 % lotion	P	QL(Allowed 120 per Rx)
sulfacetamide sodium 10 % topical cleanser	NP	PA; QL(Allowed 480 per Rx)
sulfacetamide sodium 10 % topical cleanser, gel	NP	PA
DERMATOLOGICAL - ANTIVIRAL, HERPES		
acyclovir 5 % topical cream	NP	PA; QL(Allowed 5 per Rx)
acyclovir 5 % topical ointment	NP	PA; QL(QL Overtime: Allowed 30 over 30 days)
Denavir 1 % topical cream	NP	PA
Zovirax 5 % topical cream	NP	PA; QL(Allowed 5 per Rx)
Zovirax 5 % topical ointment	NP	PA; QL(QL Overtime: Allowed 30 over 30 days)

Drug Name	Tier	Drug Restriction
DERMATOLOGICAL - ANTIVIRAL-GLUCOCORTICOID COMBINATIONS		
Xerese 5 %-1 % topical cream	NP	PA
DERMATOLOGICAL - BURN PRODUCTS ANTI-INFECTIVE		
mafenide 50 gram topical packet	P	
Silvadene 1 % topical cream	NP	PA; QL(Allowed 1000 per Rx)
silver sulfadiazine 1 % topical cream	P	QL(Allowed 1000 per Rx)
SSD 1 % topical cream	P	QL(Allowed 1000 per Rx)
Sulfamylon 50 gram topical packet	NP	PA
Sulfamylon 85 mg/g topical cream	P	
DERMATOLOGICAL - CALCINEURIN INHIBITORS		
Elidel 1 % topical cream	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
pimecrolimus 1 % topical cream	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
Protopic 0.03 % topical ointment	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
Protopic 0.1 % topical ointment	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
tacrolimus 0.03 % topical ointment	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
tacrolimus 0.1 % topical ointment	P	PA; QL(QL Overtime: Allowed 30 over 30 days)
DERMATOLOGICAL - DEPIGMENTING AGENTS		
Blanche 4 % topical cream	P	QL(Allowed 56.8 per Rx)
hydroquinone 4 % topical cream	P	QL(Allowed 56.8 per Rx)
DERMATOLOGICAL - EMOLLIENT MIXTURES		
HylatopicPlus lotion	NP	PA
HylatopicPlus topical cream	NP	PA
DERMATOLOGICAL - EMOLLIENTS		
ammonium lactate 12 % lotion	P	QL(Allowed 1368 per Rx)
ammonium lactate 12 % topical cream	NP	PA; QL(Allowed 385 per Rx)
DERMATOLOGICAL - EYELID CLEANSERS		
HypoCyn 0.01 % topical spray	NP	PA
DERMATOLOGICAL - GLUCOCORTICOID		
alclometasone 0.05 % topical cream	P	
alclometasone 0.05 % topical ointment	P	
amcinonide 0.1 % lotion	NP	PA
amcinonide 0.1 % topical cream	NP	PA
Anti-Itch (hydrocortisone) 1 % topical cream	P	
ApexiCon E 0.05 % topical cream	NP	PA; QL(Allowed 60 per Rx)

Drug Name	Tier	Drug Restriction
Beser 0.05 % lotion	NP	PA
betamethasone dipropionate 0.05 % lotion	NP	PA
betamethasone dipropionate 0.05 % topical cream	NP	PA; QL(Limit 1 package(s) per fill)
betamethasone dipropionate 0.05 % topical ointment	NP	PA
betamethasone valerate 0.1 % lotion	P	QL(Allowed 60 per Rx)
betamethasone valerate 0.1 % topical cream	P	QL(Allowed 45 per Rx)
betamethasone valerate 0.1 % topical ointment	P	QL(Allowed 45 per Rx)
betamethasone valerate 0.12 % topical foam	NP	PA
betamethasone, augmented 0.05 % lotion	NP	PA
betamethasone, augmented 0.05 % topical cream	NP	PA; QL(Allowed 45 per Rx)
betamethasone, augmented 0.05 % topical gel	NP	PA
betamethasone, augmented 0.05 % topical ointment	NP	PA
Bryhali 0.01 % lotion	NP	PA
Capex 0.01 % shampoo	NP	PA
clobetasol 0.05 % lotion	NP	PA
clobetasol 0.05 % scalp solution	P	QL(Allowed 50 per Rx)
clobetasol 0.05 % shampoo	NP	PA
clobetasol 0.05 % topical cream	P	QL(Allowed 60 per Rx)
clobetasol 0.05 % topical foam	NP	PA
clobetasol 0.05 % topical gel	P	QL(Allowed 60 per Rx)
clobetasol 0.05 % topical ointment	P	QL(Allowed 60 per Rx)
clobetasol 0.05 % topical spray	NP	PA
clobetasol-emollient 0.05 % topical cream	P	QL(Allowed 60 per Rx)
clobetasol-emollient 0.05 % topical foam	NP	PA
Clobex 0.05 % shampoo	NP	PA

Drug Name	Tier	Drug Restriction
Clobex 0.05 % topical spray	NP	PA
clocortolone pivalate 0.1 % topical cream	NP	PA
Clodan 0.05 % shampoo	NP	PA
Cloderm 0.1 % topical cream	NP	PA
Cordran Tape Large Roll 4 mcg/cm2	NP	PA
Cutivate 0.05 % lotion	NP	PA
Derma-Smoothe/FS Body Oil 0.01 %	NP	PA
Derma-Smoothe/FS Scalp Oil 0.01 %	NP	PA
Desonate 0.05 % topical gel	NP	PA
desonide 0.05 % lotion	NP	PA
desonide 0.05 % topical cream	P	QL(Limit 1 package(s) per fill)
desonide 0.05 % topical ointment	P	QL(Limit 1 package(s) per fill)
desoximetasone 0.05 % topical cream	NP	PA; QL(Allowed 300 per Rx)
desoximetasone 0.05 % topical gel	NP	PA; QL(Allowed 2 per 1 day)
desoximetasone 0.05 % topical ointment	NP	PA
desoximetasone 0.25 % topical cream	NP	PA; QL(Allowed 2 per 1 day)
desoximetasone 0.25 % topical ointment	NP	PA; QL(Allowed 2 per 1 day)
desoximetasone 0.25 % topical spray	NP	PA
diflorasone 0.05 % topical cream	P	QL(Allowed 60 per Rx)
diflorasone 0.05 % topical ointment	P	QL(Allowed 100 per Rx)
Diprolene (augmented) 0.05 % topical ointment	NP	PA
fluocinolone 0.01 % scalp oil and shower cap	P	
fluocinolone 0.01 % topical body oil	P	
fluocinolone 0.01 % topical cream	P	
fluocinolone 0.01 % topical solution	P	
fluocinolone 0.025 % topical cream	P	

Drug Name	Tier	Drug Restriction
fluocinolone 0.025 % topical ointment	P	
fluocinonide 0.05 % topical cream	P	QL(Allowed 60 per Rx)
fluocinonide 0.05 % topical gel	P	QL(Allowed 60 per Rx)
fluocinonide 0.05 % topical ointment	P	QL(Allowed 60 per Rx)
fluocinonide 0.05 % topical solution	P	QL(Allowed 60 per Rx)
fluocinonide 0.1 % topical cream	P	
Fluocinonide-E 0.05 % topical cream	P	QL(Allowed 60 per Rx)
fluocinonide-emollient 0.05 % topical cream	P	QL(Allowed 60 per Rx)
flurandrenolide 0.05 % lotion	NP	PA
flurandrenolide 0.05 % topical cream	NP	PA
flurandrenolide 0.05 % topical ointment	NP	PA
fluticasone propionate 0.005 % topical ointment	P	QL(Allowed 60 per Rx)
fluticasone propionate 0.05 % lotion	NP	PA
fluticasone propionate 0.05 % topical cream	P	QL(Allowed 60 per Rx)
halcinonide 0.1 % topical cream	NP	PA
halobetasol propionate 0.05 % topical cream	P	
halobetasol propionate 0.05 % topical foam	NP	PA
halobetasol propionate 0.05 % topical ointment	P	
Halog 0.1 % topical cream	NP	PA
Halog 0.1 % topical ointment	NP	PA
Halog 0.1 % topical solution	NP	PA
hydrocortisone 0.5 % topical cream	P	
hydrocortisone 1 % topical cream	P	QL(Allowed 454 per Rx)
hydrocortisone 1 % topical ointment	P	QL(Allowed 454 per Rx)
hydrocortisone 2.5 % lotion	P	QL(Allowed 118 per Rx)
hydrocortisone 2.5 % topical cream	P	QL(Allowed 454 per Rx)

Drug Name	Tier	Drug Restriction
hydrocortisone 2.5 % topical ointment	P	QL(Allowed 454 per Rx)
hydrocortisone acetate 0.5 % topical cream	P	
hydrocortisone butyrate 0.1 % lotion	NP	PA
hydrocortisone butyrate 0.1 % topical cream	NP	PA
hydrocortisone butyrate 0.1 % topical ointment	NP	PA
hydrocortisone butyrate 0.1 % topical solution	NP	PA; QL(Allowed 60 per Rx)
hydrocortisone butyrate-emollient 0.1 % topical cream	NP	PA
hydrocortisone valerate 0.2 % topical cream	P	
hydrocortisone valerate 0.2 % topical ointment	P	
Impeklo 0.05 % topical lotion in pump	NP	PA
Kenalog 0.147 mg/gram topical aerosol	NP	PA
Lexette 0.05 % topical foam	NP	PA
Locoid 0.1 % lotion	NP	PA
Locoid Lipocream 0.1 % topical	NP	PA
Luxiq 0.12 % topical foam	NP	PA
mometasone 0.1 % topical cream	P	QL(Allowed 50 per Rx)
mometasone 0.1 % topical ointment	P	QL(Allowed 45 per Rx)
mometasone 0.1 % topical solution	P	QL(Allowed 60 per Rx)
Olux 0.05 % topical foam	NP	PA
Olux-E 0.05 % topical foam	NP	PA
Pandel 0.1 % topical cream	NP	PA
prednicarbate 0.1 % topical cream	NP	PA; QL(Allowed 60 per Rx)
prednicarbate 0.1 % topical ointment	NP	PA; QL(Allowed 60 per Rx)
Psorcon 0.05 % topical cream	NP	PA; QL(Allowed 60 per Rx)
Synalar 0.01 % topical solution	NP	PA
Synalar 0.025 % topical cream	NP	PA

Drug Name	Tier	Drug Restriction
Synalar 0.025 % topical ointment	NP	PA
Tasoprol 0.05 %-4" X 4" topical kit	NP	PA
Temovate 0.05 % topical cream	NP	PA; QL(Allowed 60 per Rx)
Temovate 0.05 % topical ointment	NP	PA; QL(Allowed 60 per Rx)
Texacort 2.5 % topical solution	NP	PA
Topicort 0.05 % topical cream	NP	PA; QL(Allowed 300 per Rx)
Topicort 0.05 % topical gel	NP	PA; QL(Allowed 2 per 1 day)
Topicort 0.05 % topical ointment	NP	PA
Topicort 0.25 % topical cream	NP	PA; QL(Allowed 2 per 1 day)
Topicort 0.25 % topical ointment	NP	PA; QL(Allowed 2 per 1 day)
Topicort 0.25 % topical spray	NP	PA
Tovet Emollient 0.05 % topical foam	NP	PA
triamcinolone acetonide 0.025 % lotion	P	QL(Allowed 60 per Rx)
triamcinolone acetonide 0.025 % topical cream	P	QL(Allowed 908 per Rx)
triamcinolone acetonide 0.025 % topical ointment	P	QL(Allowed 454 per Rx)
triamcinolone acetonide 0.05 % topical ointment	NP	PA
triamcinolone acetonide 0.1 % lotion	P	QL(Allowed 60 per Rx)
triamcinolone acetonide 0.1 % topical cream	P	QL(Allowed 454 per Rx)
triamcinolone acetonide 0.1 % topical ointment	P	QL(Allowed 60 per Rx)
triamcinolone acetonide 0.147 mg/gram topical aerosol	NP	PA
triamcinolone acetonide 0.5 % topical cream	P	QL(Allowed 15 per Rx)
triamcinolone acetonide 0.5 % topical ointment	P	QL(Allowed 15 per Rx)
Trianex 0.05 % topical ointment	NP	PA
Ultravate 0.05 % lotion	NP	PA
Ultravate 0.05 % topical cream	NP	PA
Ultravate 0.05 % topical ointment	NP	PA

Drug Name	Tier	Drug Restriction
Vanos 0.1 % topical cream	NP	PA
DERMATOLOGICAL - GLUCOCORTICOID-EMOLLIENT COMBINATIONS		
Beser Kit 0.05 % kit,top lotion and cream,emollient	NP	PA
Fluopar 0.1 %-5 % topical kit	NP	PA
hydrocortisone-aloe vera 1 % topical cream	P	QL(Limit 1 package(s) per fill)
hydrocortisone-mineral oil-white petrolatum 1 % topical ointment	P	QL(Allowed 454 per Rx)
Synalar Cream Kit 0.025 % topical	NP	PA
Synalar Ointment Kit 0.025 % topical pack,ointment and cream	NP	PA
Tovet Kit 0.05 % foam and cream, topical pack	NP	PA
Ultravate X 0.05 %-10 % topical pack, cream and cream	NP	PA
Ultravate X 0.05 %-10 % topical pack,ointment and cream	NP	PA
DERMATOLOGICAL - GLUCOCORTICOID-LOCAL ANESTHETIC COMBINATIONS		
Epifoam 1 %-1 % topical	NP	PA
lidocaine 3 %-hydrocortisone 0.5 % topical cream	NP	PA
Lidocort 3 %-0.5 % topical cream	NP	PA
DERMATOLOGICAL - GLUCOCORTICOID-SKIN CLEANSER COMBINATIONS		
Clodan Kit 0.05 % topical kit, shampoo and cleanser	NP	PA
Synalar TS 0.01 % topical kit	NP	PA
DERMATOLOGICAL - IMMUNOMODULATOR - CATECHINS - GENITAL WART/HPV TX		
Veregen 15 % topical ointment	NP	PA
DERMATOLOGICAL - IMMUNOMODULATOR - IMIDAZOQUINOLINAMINES		
Aldara 5 % topical cream packet	NP	PA; QL(QL Overtime: Allowed 48 over 180 days)
imiquimod 3.75 % topical cream in a pump	NP	PA
imiquimod 3.75 % topical cream packet	NP	PA
imiquimod 5 % topical cream packet	P	QL(QL Overtime: Allowed 48 over 180 days)
Zyclara 2.5 % topical cream in a pump	NP	PA

Drug Name	Tier	Drug Restriction
Zyclara 3.75 % topical cream in a pump	NP	PA
Zyclara 3.75 % topical cream packet	NP	PA
DERMATOLOGICAL - INSECT REPELLENTS		
Off Deep Woods 25 % topical spray	P	QL(Allowed 170 per Rx, QL Overtime: Allowed 340 over 30 days)
Off Deep Woods Dry 25 % topical spray powder	P	QL(Allowed 113 per Rx, QL Overtime: Allowed 226 over 30 days)
Ultrathon 25 % topical spray	P	QL(Allowed 170 per Rx, QL Overtime: Allowed 340 over 30 days)
Ultrathon 34.34 % lotion	P	QL(Allowed 57 per Rx, QL Overtime: Allowed 114 over 30 days)
DERMATOLOGICAL - KERATOLYTIC-ANTIMITOTIC COMBINATIONS		
silver nitrate applicators 75 %-25 % topical stick	NP	PA
DERMATOLOGICAL - KERATOLYTIC-ANTIMITOTIC SINGLE AGENTS		
Bensal HP 3 % topical ointment	NP	PA
Condylox 0.5 % topical gel	P	
Podocon 25 % topical liquid	NP	PA
podofilox 0.5 % topical solution	P	QL(Allowed 4 per Rx)
Salex 6 % shampoo	NP	PA
salicylic acid 27.5 % topical film-forming liquid	P	
salicylic acid 6 % topical foam	NP	PA
salicylic acid 6 % topical gel	P	
urea 35 % topical foam	NP	PA
urea 39 % topical cream	P	
urea 40 % lotion	P	QL(Allowed 325 per Rx)
urea 40 % topical cream	P	QL(Allowed 200 per Rx)
urea 41 % topical cream	P	
DERMATOLOGICAL - KERATOPLASTIC TAR PRODUCTS		
Anti-Dandruff (coal tar) 0.5 % shampoo	P	
DHS Tar 0.5 % shampoo	P	
DHS Tar Gel 0.5 % shampoo	P	
Neutrogena T-Gel 0.5 % shampoo	P	
Tera-Gel Tar Shampoo 0.5 %	P	
Thera-Gel 0.5 % shampoo	P	

Drug Name	Tier	Drug Restriction
Therapeutic Shampoo 0.5 %	P	
Therapeutic Shampoo 1 %	P	
Therapeutic Shampoo 2 %	P	
T-Plus 0.5 % shampoo	P	
DERMATOLOGICAL - LOCAL ANESTHETIC COMBINATIONS		
Aprizio Pak II 2.5 %-2.5 % topical kit	NP	PA
Empricaine-II 2.5 %-2.5 % topical kit	NP	PA
lidocaine-prilocaine 2.5 %-2.5 % topical cream	NP	PA; QL(Allowed 30 per Rx)
lidocaine-prilocaine 2.5 %-2.5 % topical kit	NP	PA
Nuvakaan-II 2.5 %-2.5 % topical kit	NP	PA
Prizopak II 2.5 %-2.5 % topical kit	NP	PA
Prizotral-II 2.5 %-2.5 %-3.88 % topical cream	NP	PA
DERMATOLOGICAL - NSAID COMBINATIONS		
Diclofex DC 1.5 %-0.025 % topical, solution and cream	NP	PA
Diclotrex 1.5 %-10 %-4 % topical kit	NP	PA
DERMATOLOGICAL - NSAID SINGLE AGENTS		
diclofenac 1 % topical gel	NP	PA; QL(Limit 2 package(s) per 30 days)
diclofenac 1.5 % topical drops	NP	PA
diclofenac epolamine 1.3 % transdermal 12 hour patch	NP	PA
Flector 1.3 % transdermal 12 hour patch	NP	PA
Licart 1.3 % transdermal 24 hour patch	NP	PA
Pennsaid 2 % topical solution in packet	NP	PA
Pennsaid 20 mg/gram/actuation (2 %) topical soln in metered-dose pump	NP	PA
VennGel One 1 % topical kit	NP	PA
Voltaren 1 % topical gel	NP	PA; QL(Limit 2 package(s) per 30 days)
Vopac MDS 1.5 % topical kit	NP	PA
DERMATOLOGICAL - PHOTODYNAMIC THERAPY AGENTS TOPICAL		

Drug Name	Tier	Drug Restriction
Ameluz 10 % topical gel	NP	PA
Levulan 20 % topical solution	P	SP
DERMATOLOGICAL - PROTECTANTS		
Nuvail 16 % nail film solution	NP	PA
Tetrix topical cream	NP	PA
DERMATOLOGICAL - RETINOIDS (VITAMIN A DERIVATIVES) - TOPICAL COSMETIC		
tazarotene 0.1 % topical cream	NP	PA; QL(Allowed 60 per Rx)
DERMATOLOGICAL - ROSACEA THERAPY, SYSTEMIC		
doxycycline monohydrate 40 mg capsule,immediate - delay release	NP	PA
Oracea 40 mg capsule,immediate - delay release	NP	PA
DERMATOLOGICAL - ROSACEA THERAPY, TOPICAL		
azelaic acid 15 % topical gel	NP	PA
Finacea 15 % topical foam	NP	PA
Finacea 15 % topical gel	NP	PA
ivermectin 1 % topical cream	NP	PA
MetroCream 0.75 % topical	NP	PA; QL(Allowed 45 per Rx)

Drug Name	Tier	Drug Restriction
Metrogel 1 % topical	NP	PA
metronidazole 0.75 % lotion	P	
metronidazole 0.75 % topical cream	P	QL(Allowed 45 per Rx)
metronidazole 0.75 % topical gel	P	QL(Allowed 45 per Rx)
metronidazole 1 % topical gel	P	
metronidazole 1 % topical gel with pump	P	
Mirvaso 0.33 % topical gel with pump	NP	PA
Noritate 1 % topical cream	NP	PA
Rhofade 1 % topical cream	NP	PA
Rosadan 0.75 % top,cleanser and cream kit	NP	PA
Rosadan 0.75 % topical cleanser and gel kit	NP	PA
Rosadan 0.75 % topical cream	P	QL(Allowed 45 per Rx)
Rosadan 0.75 % topical gel	P	QL(Allowed 45 per Rx)

Drug Name	Tier	Drug Restriction
Soolantra 1 % topical cream	NP	PA
Zilxi 1.5 % topical foam	NP	PA
DERMATOLOGICAL - TOPICAL LOCAL ANESTHETIC AMIDES		
Glydo 2 % mucosal jelly in applicator	P	QL(Allowed 30 per Rx)
lidocaine 2 % mucosal jelly in applicator	P	QL(Allowed 30 per Rx)
lidocaine 5 % topical ointment	P	
lidocaine 5 % topical patch	P	
lidocaine HCl 3 % topical cream	P	
Lidoderm 5 % topical patch	NP	PA
Lidozion 3 % lotion	NP	PA
Pliaglis 7 %-7 % topical cream	NP	PA
Synera 70 mg-70 mg patch	NP	PA
ZTlido 1.8 % topical patch	NP	PA
DERMATOLOGICAL - TOPICAL LOCAL ANESTHETIC OTHERS		
pramoxine 1 % topical foam	P	QL(Allowed 15 per Rx)
Proctofoam 1 % topical	P	QL(Allowed 15 per Rx)
DERMATOLOGICAL - TOPICAL LOCAL ANESTHETICS AND COMBINATIONS		
Prilo Patch II 5 %-2.5 %-2.5 % kit, patch, medicated and cream	NP	PA
DERMATOLOGICAL ANTIPRURITICS - ANTIHISTAMINES		
doxepin 5 % topical cream	NP	PA
Prudoxin 5 % topical cream	NP	PA
Zonalon 5 % topical cream	NP	PA
DERMATOLOGICAL IRRITANTS-COUNTER-IRRITANT SINGLE AGENTS		
Qutenza 8 % topical kit	NP	PA
SCABICIDE AND PEDICULICIDE COMBINATIONS		
Lice Killing 0.33 %-4 % shampoo	P	
Lice Treatment 0.33 %-4 % shampoo	P	
SCABICIDE AND PEDICULICIDE SINGLE AGENTS		
Crotan 10 % lotion	NP	PA; QL(Allowed 454 per Rx)
Elimite 5 % topical cream	NP	PA; QL(Allowed 60 per Rx)
Eurax 10 % lotion	NP	PA; QL(Allowed 454 per Rx)

Drug Name	Tier	Drug Restriction
Eurax 10 % topical cream	P	QL(Allowed 60 per Rx)
ivermectin 0.5 % lotion	NP	PA
Lice Treatment (permethrin) 1 % topical liquid	P	QL(Limit 2 package(s) per fill)
Lice Treatment 1 % topical liquid	P	QL(Limit 2 package(s) per fill)
lindane 1 % shampoo	NP	PA
malathion 0.5 % lotion	NP	PA; QL(Allowed 59 per Rx)
Natroba 0.9 % topical suspension	P	
Ovide 0.5 % lotion	NP	PA; QL(Allowed 59 per Rx)
permethrin 5 % topical cream	P	QL(Allowed 60 per Rx)
Sklice 0.5 % lotion	NP	PA
spinosad 0.9 % topical suspension	NP	PA
WOUND CARE - DRESSINGS		
Biatain 4" X 4" bandage	P	
Bioguard gauze 0.3 %-2" X 2" bandage	P	
Bioguard gauze 0.3 %-4" X 4" bandage	P	
Bioguard gauze 0.3 %-4.5" X 4.1 yard bandage	P	
Copa Hydrophilic Foam 4" X 4" bandage	P	
Curity AMD (with polyhexamethylene) 0.2 %-2" X 2" sponge	P	
Dermalevin 4" X 4" bandage	P	
DryMax Extra 4" X 4" bandage	P	
Excilon AMD (with polyhexamethylene) 0.2 %-4" X 4" sponge	P	
Flexzan Wound Dressing 4" X 4"	P	
Optifoam Non-Adhesive 4" X 4" bandage	P	
Restore 4" X 4" bandage	P	
Tegaderm Foam 4" X 4" bandage	P	
DRUGS TO TREAT ERECTILE DYSFUNCTION		
ERECTILE DYSFUNCTION (ED) DRUGS-SEL.CGMP PHOSPHODIESTERASE TYPE5 INHIB		
Cialis 5 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
tadalafil 5 mg tablet	NP	PA
EATING DISORDER THERAPY		
APPETITE STIMULANTS - PROGESTIN HORMONE TYPE		
megestrol 400 mg/10 mL (10 mL) oral suspension	P	
megestrol 400 mg/10 mL (40 mg/mL) oral suspension	P	
megestrol 625 mg/5 mL (125 mg/mL) oral suspension	NP	PA
megestrol 800 mg/20 mL (20 mL) oral suspension	P	
ELECTROLYTE BALANCE-NUTRITIONAL PRODUCTS		
AMINO ACID - CARNITINE DERIVATIVES		
levocarnitine 330 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
B-COMPLEX VITAMIN COMBINATIONS		
Activite 1 mg tablet	P	QL(Allowed 1 per 1 day)
Dialyvite 100 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)
Dialyvite 800-Ultra D 0.8 mg-2,000 unit tablet	P	QL(Allowed 1 per 1 day)
Folika-T 1 mg-100 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Genicin Vita-S 1 mg-100 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Lorid 1 mg-200 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Lysiplex Plus tablet	P	QL(Allowed 1 per 1 day)
Mynephrocaps 1 mg capsule	P	QL(Allowed 1 per 1 day)
Mynephron 1 mg capsule	P	QL(Allowed 1 per 1 day)
Nephrocaps 1 mg capsule	P	QL(Allowed 1 per 1 day)
Nephronex-SL 800 mcg-2,000 unit disintegrating tablet	P	QL(Allowed 1 per 1 day)
ProRenal 8 mg iron-800 mcg-1,000 unit tablet	P	QL(Allowed 1 per 1 day)
Quin B Strong 500 mg-400 mcg-15 mg tablet	P	QL(Allowed 1 per 1 day)
Renal Caps 1 mg capsule	P	QL(Allowed 1 per 1 day)
RenaPlex 800 mcg-12.5 mg tablet	P	QL(Allowed 1 per 1 day)
RenaPlex-D 800 mcg-12.5 mg-2,000 unit tablet	P	QL(Allowed 1 per 1 day)
Reno Caps 1 mg capsule	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Triphrocaps 1 mg capsule	P	QL(Allowed 1 per 1 day)
TRONVite 1 mg-100 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Virt-Caps 1 mg capsule	P	QL(Allowed 1 per 1 day)
Vitasure 1 mg-100 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Xvite 1 mg-100 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
B-COMPLEX VITAMINS AND COMBINATIONS		
Nephro-Vite Rx 1 mg-60 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Rena-Vite Rx 1 mg-60 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Vol-Care Rx 1 mg-60 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
VP-Vite Rx 1 mg-60 mg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
DEXTROSE SOLUTIONS		
dextrose 5 % in water (D5W) intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
dextrose 5 % in water (D5W) intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
DIETARY PRODUCT - DIETARY SUPPLEMENTS		
Diabetic Support Formula 167 mcg-100 mcg-83 mcg tablet	P	QL(Allowed 1 per 1 day)
Hair, Skin and Nails Advanced 3.3 mg iron-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Megavite 18 mg iron-800 mcg-150 mg tablet	P	QL(Allowed 1 per 1 day)
Megavite Golden Years 55+ 800 mcg-150 mg-25 mg tablet	P	QL(Allowed 1 per 1 day)
Niacin-Azelaic AC-Turmer-FA-B6-ZN-CU 700 mg-500 mcg-8 mg-12 mg tablet	P	QL(Allowed 1 per 1 day)
Nicadan 800 mg-10 mg-100 mg-500 mcg tablet	P	QL(Allowed 1 per 1 day)
Nicadan ZX 400 mg-5 mg-250 mcg-10 mg tablet	P	QL(Allowed 1 per 1 day)
Nicazel 600 mg-5 mg-10 mg-5 mg-1.5 mg tablet	P	QL(Allowed 1 per 1 day)
NicAzel Forte 700 mg-500 mcg-8 mg-12 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily 300 mg-18 mg-400 mcg-50 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
One Daily Women's Metabolism 300 mg-18 mg-400 mcg-50 mg tablet	P	QL(Allowed 1 per 1 day)
Vitamin D3 Complete 18 mg iron-800 mcg-150 mg tablet	P	QL(Allowed 1 per 1 day)
VP-Zel 600 mg-5 mg-10 mg-5 mg-1.5 mg tablet	P	QL(Allowed 1 per 1 day)
DILUENTS - SODIUM CHLORIDE		
sodium chloride 0.9 % injection solution	P	QL(QL (Limit 14 days supply(ies) per claim))
sodium chloride 0.9 % injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
ELECTROLYTE DEPLETERS - ION EXCHANGE RESIN		
Kionex (with sorbitol) 15 gram-19.3 gram/60 mL oral suspension	P	
Lokelma 10 gram oral powder packet	NP	PA
Lokelma 5 gram oral powder packet	NP	PA
sodium polystyrene sulfonate (sorbitol free) 15 gram/60 mL oral susp	P	
sodium polystyrene sulfonate oral powder	P	QL(Allowed 454 per Rx)
SPS (with sorbitol) 15 gram-20 gram/60 mL oral suspension	NP	PA
SPS (with sorbitol) 30 gram-40 gram/120 mL enema	NP	PA
Veltassa 16.8 gram oral powder packet	NP	PA
Veltassa 25.2 gram oral powder packet	NP	PA
Veltassa 8.4 gram oral powder packet	NP	PA
GERIATRIC VITAMINS		
A Thru Z High Potency tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Select tablet	P	QL(Allowed 1 per 1 day)
Centravites 50 Plus tablet	P	QL(Allowed 1 per 1 day)
Cerovite Senior tablet	P	QL(Allowed 1 per 1 day)
Complete Senior tablet	P	QL(Allowed 1 per 1 day)
Milltrium Senior tablet	P	QL(Allowed 1 per 1 day)
Multivitamin 50 Plus tablet	P	QL(Allowed 1 per 1 day)
multivitamin with minerals tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Spectravite Senior tablet	P	QL(Allowed 1 per 1 day)
Theratrum Complete 50 Plus with Lutein tablet	P	QL(Allowed 1 per 1 day)
Vision Plus Lutein tablet	P	QL(Allowed 1 per 1 day)
Vitrum Senior tablet	P	QL(Allowed 1 per 1 day)
IRRIGATION SOLUTIONS		
Aqua Care Sodium Chloride 0.9 % irrigation solution	P	Use Generic Products
sodium chloride 0.9 % irrigation solution	P	
Sterile Saline 0.9 % irrigation solution	P	Use Generic Products
MINERALS AND ELECTROLYTES - CALCIUM REPLACEMENT		
calcium carbonate 500 mg calcium (1,250 mg) chewable tablet	P	
calcium carbonate 500 mg/5 mL calcium (1,250 mg/5 mL) oral suspension	P	QL(QL Overtime: Allowed 500 over 30 days)
MINERALS AND ELECTROLYTES - CALCIUM REPLACEMENT COMBINATIONS		
Ortho-Tabs 500 mg calcium-400 unit-15 mcg tablet	P	QL(Allowed 1 per 1 day)
Pro-Cal 187.5 mg-40 mg-7.5 mg tablet	P	QL(Allowed 1 per 1 day)
MINERALS AND ELECTROLYTES - IRON		
FeroSul 220 mg (44 mg iron)/5 mL oral elixir	P	QL(Allowed 16 per 1 day)
FeroSul 325 mg (65 mg iron) tablet	P	
Ferretts 325 mg (106 mg iron) tablet	P	QL(Allowed 2 per 1 day)
Ferrex 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
Ferric x-150 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
Ferrocite 324 mg (106 mg iron) tablet	P	QL(Allowed 2 per 1 day)
Ferro-Time 325 mg (65 mg iron) tablet	P	
ferrous fumarate 324 mg (106 mg iron) tablet	P	QL(Allowed 2 per 1 day)
ferrous sulfate 15 mg iron (75 mg)/mL oral drops	P	QL(Allowed 10 per 1 day)
ferrous sulfate 220 mg (44 mg iron)/5 mL oral elixir	P	QL(Allowed 16 per 1 day)
ferrous sulfate 220 mg (44 mg iron)/5 mL oral solution	P	QL(Allowed 16 per 1 day)

Drug Name	Tier	Drug Restriction
ferrous sulfate 325 mg (65 mg iron) tablet	P	
ferrous sulfate 325 mg (65 mg iron) tablet,delayed release	P	
FerrouSul 325 mg (65 mg iron) tablet	P	
Hemocyte 324 mg (106 mg iron) tablet	P	QL(Allowed 2 per 1 day)
iFerex 150 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
Iron (ferrous sulfate) 325 mg (65 mg iron) tablet	P	
iron 325 mg (65 mg iron) tablet	P	
Myferon 150 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
Nu-Iron 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
Poly-Iron 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
polysaccharide iron complex 150 mg iron capsule	P	QL(Allowed 1 per 1 day)
MINERALS AND ELECTROLYTES - IRON COMBINATIONS		
Parvlex 29 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Siderol tablet	P	QL(Allowed 1 per 1 day)
Stress Formula tablet	P	QL(Allowed 1 per 1 day)
MINERALS AND ELECTROLYTES - MAGNESIUM		
magnesium 400 mg (as magnesium oxide) tablet	P	
magnesium oxide 400 mg (241.3 mg magnesium) tablet	P	
MagOx 400 mg (241.3 mg magnesium) tablet	P	
MgO 400 mg (241.3 mg magnesium) tablet	P	
MINERALS AND ELECTROLYTES - ORAL ELECTROLYTES		
CeraLyte-70 70 mEq-60 mEq-20 mEq-30 mEq/L oral solution	P	
CeraSport 115 mg-40 mg-40 kcal/250 mL oral liquid	P	
CeraSport EX1 200 mg-100 mg-20 kcal/250mL oral liquid	P	
electrolytes-dextrose oral solution	P	
Enfamil Enfalyte oral solution	P	

Drug Name	Tier	Drug Restriction
Oralyte oral solution	P	
Pedialyte Advanced Care oral solution	P	
Pedialyte Freezer Pops oral solution	P	
Pedialyte oral solution	P	
Pedialyte Singles oral solution	P	
Pediatric Electrolyte oral solution	P	
Pediatric Freezer Pops oral solution	P	
PediaVance 5.3 mEq-2.35 mEq-4.15 mEq oral concentrate in packet	P	
MINERALS AND ELECTROLYTES - POTASSIUM, ORAL		
Effer-K 25 mEq effervescent tablet	P	
K-Effervescent 25 mEq tablet	P	
Klor-Con 10 mEq tablet,extended release	P	Use Generic Products
Klor-Con 20 mEq oral packet	P	Use Generic Products

Drug Name	Tier	Drug Restriction
Klor-Con 8 mEq tablet,extended release	P	Use Generic Products
Klor-Con M10 mEq tablet,extended release	P	Use Generic Products
Klor-Con M15 mEq tablet,extended release	P	
Klor-Con M20 mEq tablet,extended release	P	Use Generic Products
Klor-Con Sprinkle 10 mEq capsule,extended release	P	Use Generic Products
Klor-Con Sprinkle 8 mEq capsule,extended release	P	QL(Allowed 1 per 1 day); Use Generic Products
Klor-Con/25 mEq oral packet	P	
Klor-Con/EF 25 mEq effervescent tablet	P	
K-Sol 20 mEq/15 mL oral liquid	P	Use Generic Products
K-Sol 40 mEq/15 mL oral liquid	P	Use Generic Products
K-Tab 10 mEq tablet,extended release	P	Use Generic Products

Drug Name	Tier	Drug Restriction
K-Tab 8 mEq tablet,extended release	P	
potassium bicarbonate-citric acid 25 mEq effervescent tablet	P	
potassium chloride 20 mEq oral packet	P	
potassium chloride 20 mEq/15 mL oral liquid	P	
potassium chloride 40 mEq/15 mL oral liquid	P	
potassium chloride ER 10 mEq capsule,extended release	P	
potassium chloride ER 10 mEq tablet,extended release	P	
potassium chloride ER 10 mEq tablet,extended release(part/cryst)	P	
potassium chloride ER 20 mEq tablet,extended release(part/cryst)	P	
potassium chloride ER 8 mEq capsule,extended release	P	QL(Allowed 1 per 1 day)
potassium chloride ER 8 mEq tablet,extended release	P	
MULTIVITAMIN AND MINERAL COMBINATIONS		
	P	QL(Allowed 1 per 1 day)
A Thru Z 18 mg-500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Men's Ultimate 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Select 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Select 50 Plus Formula 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Select 500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
A Thru Z Select Women's tablet	P	QL(Allowed 1 per 1 day)
ABC Complete Senior Women's 8 mg iron-400 mcg-50 mcg tablet	P	QL(Allowed 1 per 1 day)
ABC Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Adult 50 Plus Eye Health 250 mg-5 mg-1 mg capsule	P	QL(Allowed 1 per 1 day)
Adults 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Adults' Daily Formula 18 mg iron-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Adults Multivitamin 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Alive Once Daily Women 50 Plus 800 mcg-100 mcg tablet	P	QL(Allowed 1 per 1 day)
Alive Women's 50 Plus (fruit-veg blend) 240 mcg-120 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Alive Women's Energy 18 mg-400 mcg-80 mcg tablet	P	QL(Allowed 1 per 1 day)
Antioxidant A/C/E/Selenium capsule	P	QL(Allowed 1 per 1 day)
Antioxidant Formula (selenium yeast) 8,333 unit-167 mg-133 unit tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Antioxidant Vitamins 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
Bacmin 27 mg iron-1 mg tablet	P	QL(Allowed 1 per 1 day)
Biocel (with Lutein) 800 mcg-250 mcg-750 mcg tablet	P	QL(Allowed 1 per 1 day)
Biotin Plus-Calcium and Vit D3 200 mg-450 mcg-400 unit tablet	P	QL(Allowed 1 per 1 day)
Central-Vite 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Central-Vite Energy 18 mg iron-400 mcg-50 mg tablet	P	QL(Allowed 1 per 1 day)
Central-Vite Senior 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Central-Vite Women's Mature 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Centravites 0.4 mg-162 mg-18 mg tablet	P	QL(Allowed 1 per 1 day)
Centravites 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Centravites Adults 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Men 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Silver 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Silver Men 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Silver Ultra Men's 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Silver Women 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Specialist Heart 3 mg-200 mcg-400 mg tablet	P	QL(Allowed 1 per 1 day)
Centrum Ultra Men's 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Adults 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Cardio 3 mg-200 mcg-400 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Century Mature 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Mature 400 mcg-30 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Men's 8 mg iron-200 mcg-60 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Ultimate Men's 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Ultimate Men's 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Ultimate Women's 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Certa Plus 18 mg-0.4 mg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
CertaVite Senior 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Compete tablet	P	QL(Allowed 1 per 1 day)
Complete 18 mg-500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Complete Men 50 Plus 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete Men 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete Multi 18 mg-500 mcg-300 mcg-250 mcg tablet	P	
Complete Multi 50+ 500 mcg-300 mcg-250 mcg tablet	P	
Complete Multivitamin Adult 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete Multivitamin tablet	P	QL(Allowed 1 per 1 day)
Complete Premium Vitamin tablet	P	QL(Allowed 1 per 1 day)
Complete Senior 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Concept DHA 35 mg-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Concept OB 85 mg-1 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Corvite Free 1.25 mg-400 mcg-125 mcg-35 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Daily Multiple 400 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)
Daily Multiple For Men 0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Daily Multiple For Women 18 mg iron-400 mcg-500 mg Ca tablet	P	QL(Allowed 1 per 1 day)
Daily Multiple For Women 50+ 0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Daily Multiple tablet	P	
DAILY VITAMIN FORMULA-MINERALS tablet	P	QL(Allowed 1 per 1 day)
Daily Vitamin with Iron and CA tablet	P	QL(Allowed 1 per 1 day)
Daily Vites/Iron tablet	P	QL(Allowed 1 per 1 day)
Daily-Vite tablet	P	QL(Allowed 1 per 1 day)
Diabetes Health Formula 500 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Elite-OB 50 mg iron-1.25 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
ESSENTIAL Daily 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
ESSENTIAL Man 0.4 mg-2 mg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
ESSENTIAL Man 50+ 0.4 mg-2 mg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Essential Woman 50+ 0.4 mg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Eye Health Plus Lutein 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
Eye Vitamin and Minerals 7,160 unit-113 mg-100 unit tablet	P	QL(Allowed 1 per 1 day)
EyeProtect 7,160 unit-113 mg-100 unit tablet	P	QL(Allowed 1 per 1 day)
Folika-CI 13 mg iron-1 mg tablet	P	QL(Allowed 1 per 1 day)
Folika-MG 20 mg iron-1,670 mcg DFE tablet	P	QL(Allowed 1 per 1 day)
Folivane-OB 85 mg-1 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Fosfree 175.5 mg-14.5 mg tablet	P	QL(Allowed 1 per 1 day)
Freedavite 1.8 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Hair Formula 400 mcg-100 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Hair, Skin and Nails-Argan Oil 66.7 mcg-1,666.7 mcg capsule	P	QL(Allowed 1 per 1 day)
Hair,Skin and Nails (folic acid-biotin) 66.7 mcg-1,000 mcg tablet	P	QL(Allowed 1 per 1 day)
Hair,Skin and Nails (folic acid-biotin) 66.7 mcg-1,666.7 mcg tablet	P	QL(Allowed 1 per 1 day)
Hair,Skin and Nails 1 mg iron-66.7 mcg-1,000 mcg tablet	P	QL(Allowed 1 per 1 day)
Hair,Skin and Nails tablet	P	QL(Allowed 1 per 1 day)
Healthy Eyes 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
Healthy Eyes SuperVision 14,320 unit-226 mg-200 unit capsule	P	QL(Allowed 1 per 1 day)
ICaps AREDS 7,160 unit-113 mg-100 unit tablet,delayed release	P	QL(Allowed 1 per 1 day)
ICaps AREDS2 (copper citrate) 250 mg-200 unit-12.5 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Icaps MV 100 mcg-1.66 mg-0.83 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
I-Vite 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
I-Vite Protect 7,160 unit-113 mg-100 unit tablet	P	QL(Allowed 1 per 1 day)
K-Pax Immune Support 2.25 mg iron-100 mcg tablet	P	QL(Allowed 1 per 1 day)
Macuvite Eye Care 7,160 unit-113 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)
MAXIMUM DAILY GREEN 5 mg-133 mcg tablet	P	QL(Allowed 1 per 1 day)
Maximum Daily Multivitamin 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Mega Multi for Women 13.5 mg-200 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Mega Multivitamin For Men 200 mcg-175 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Mega Multivitamin with Minerals 13.5 mg-200 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Men 50 Plus Advanced One Daily 400 mcg-20 mcg-370 mcg tablet	P	QL(Allowed 1 per 1 day)
Men 50 Plus Multivitamin 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's 50 Plus Daily Formula 400 mcg-20 mcg-370 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's 50 Plus Multivitamin 400 mcg-20 mcg-370 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's Daily Formula 400 mcg-20 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's Daily Multivitamin-Mineral 0.4 mg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's Multivitamin 400 mcg-20 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Mens Multivitamin High Potency 200 mcg-175 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's One Daily 400 mcg-20 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Men's One Daily tablet	P	QL(Allowed 1 per 1 day)
Monocaps 14 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Multi For Her 18 mg iron-600 mcg-80 mcg tablet	P	QL(Allowed 1 per 1 day)
Multi Pro 32 mg iron-1 mg-315 mg capsule	P	QL(Allowed 1 per 1 day)
Multi-Day Plus Minerals 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Multilex 15 mg iron tablet	P	QL(Allowed 1 per 1 day)
Multilex-T and M 15 mg iron tablet	P	QL(Allowed 1 per 1 day)
Multiple Vitamin-Minerals tablet	P	QL(Allowed 1 per 1 day)
multivitamin with iron tablet	P	QL(Allowed 1 per 1 day)
Multivitamin Women 50 Plus 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
multivitamin-minerals-iron fumarate 7.5 mg-folic acid 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Neovite 1 mg-100 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Niva-Plus 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Nutricap 1 mg tablet	P	QL(Allowed 1 per 1 day)
OB Complete 50 mg iron-1.25 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Ocular Vitamins 7,160 unit-113 mg-0.5 mg tablet	P	QL(Allowed 1 per 1 day)
Ocutabs tablet	P	QL(Allowed 1 per 1 day)
Ocuvite Eye Plus Multi 200 mcg-15 mcg-150 mcg tablet	P	QL(Allowed 1 per 1 day)
Ocuvite with Lutein 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
One Daily 0.4 mg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Calcium/Iron tablet	P	QL(Allowed 1 per 1 day)
One Daily Complete 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Complete tablet	P	QL(Allowed 1 per 1 day)
One Daily Energy tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
One Daily For Men 0.4 mg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily For Women 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Healthy Weight 200 mg-18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Maximum 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Men's 50 Plus Advanced 400 mcg-20 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Men's 50 Plus with D3 400 mcg-20 mcg-370 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Multivitamins with Minerals 4.5 mg iron tablet	P	QL(Allowed 1 per 1 day)
One Daily Plus Minerals tablet	P	QL(Allowed 1 per 1 day)
One Daily With Iron tablet	P	QL(Allowed 1 per 1 day)
One Daily Women 50 Plus 400 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Women 50 Plus(Vit K) 400 mcg-500 mg calcium-20 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Women's 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Women's 18 mg iron-400 mcg-450 mg Ca tablet	P	QL(Allowed 1 per 1 day)
One Daily Women's 27 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Womens 50 Plus 0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Women's Health 18 mg iron-400 mcg-450 mg Ca tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Energy 9 mg iron-400 mcg-200 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Menopause Formula 400 mcg-60 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Men's 50 Plus 400 mcg-20 mcg-370 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
One-A-Day Men's Multivitamin 400 mcg-20 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Proactive 65 Plus 200 mcg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Teen Advantage 9 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Vitacraves Omega-3 200 mcg-16 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
One-A-Day WeightSmart 200 mg-18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Women's 50 Plus 400 mcg-20 mcg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Women's Active 18 mg iron-400 mcg-180 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Women's Complete 18 mg-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Women's Healthy Skin 18 mg iron-400 mcg-6 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Women's Petites 9 mg iron-200 mcg tablet	P	QL(Allowed 1 per 1 day)
Opti-Vitamins 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
PNV-Omega 28 mg-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PreserVision AREDS 7,160 unit-113 mg-100 unit tablet	P	QL(Allowed 1 per 1 day)
ProCerv HP 9 mg iron-300 mcg-50 mcg tablet	P	QL(Allowed 1 per 1 day)
PureFe OB Plus 106 mg iron-1 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Quintabs-M 10 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Quintabs-M Iron Free 0.4 mg tablet	P	QL(Allowed 1 per 1 day)
REQ49+ 200 mcg-1.5 mg-1.5 mg tablet	P	QL(Allowed 1 per 1 day)
SAVision tablet	P	QL(Allowed 1 per 1 day)
Senior Tabs 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Sentry (with lutein) 18 mg-500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Sentry Senior 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Sentry Senior 500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Solo 400 mcg-80 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Adult 50 Plus 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Men's 8 mg iron-200 mcg-600 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Senior 500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Ultra Men 50+ 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Ultra Men's Senior 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Ultra Women's Senior 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Strovite Forte 10 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)
Strovite One 1 mg-1,000 unit-15 mg-5 mg tablet	P	QL(Allowed 1 per 1 day)
Sunvite 18 mg iron-400 mcg-25 mcg tablet	P	QL(Allowed 1 per 1 day)
Super Antioxidant capsule	P	QL(Allowed 1 per 1 day)
Super Multiple - Low Iron 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Super Thera Vite M tablet	P	QL(Allowed 1 per 1 day)
Tab-A-Vite-Minerals tablet	P	QL(Allowed 1 per 1 day)
Taron-C DHA 35 mg-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Thera M Plus (ferrous fumarate) 9 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Theragran-M Premier 50 Plus 400 mcg-250 mcg-375 mcg tablet	P	QL(Allowed 1 per 1 day)
Theralogix Companion 0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Thera-M 27 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Thera-M 9 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Thera-M tablet	P	QL(Allowed 1 per 1 day)
Therapeutic M + beta-Carotene 18 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Thera-Tabs M 27 mg iron-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Theratrum Complete 50 Plus(lycopene,lutein) 0.4 mg-300 mcg-250 mcg tab	P	QL(Allowed 1 per 1 day)
Theratrum Complete with Lutein tablet	P	QL(Allowed 1 per 1 day)
Therems-H 27 mg-0.33 mg tablet	P	QL(Allowed 1 per 1 day)
Therems-M 27 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
TRUEplus Diabetic Multivitamin 500 mcg-10 mcg tablet	P	QL(Allowed 1 per 1 day)
Ultimate Men's Complete 50+ 300 mcg-600 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
Ultimate Women's Complete 50+ 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Ultra Freeda 267 mcg tablet	P	QL(Allowed 1 per 1 day)
Ultra Freeda 6 mg iron-267 mcg tablet	P	QL(Allowed 1 per 1 day)
Unicomplex-M tablet	P	QL(Allowed 1 per 1 day)
Virt-C DHA 35 mg-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Virt-PN Plus 28 mg-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vision Formula (with lutein) 1,000 unit-200 mg-60 unit-2mg tablet	P	QL(Allowed 1 per 1 day)
Vision Formula(A-C-E-Zn-Se-Cu) 1,000 unit-60 mg-30 unit tablet	P	QL(Allowed 1 per 1 day)
Vision-Vite + Zinc tablet	P	QL(Allowed 1 per 1 day)
Vitabex Plus 500 mcg-25 mg-10 mg capsule	P	QL(Allowed 1 per 1 day)
Vitacel (with Lutein) 800 mcg-250 mcg-750 mcg tablet	P	QL(Allowed 1 per 1 day)
Vitamins A-D-E with selenium 10,000 unit-400 unit tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Vitamins and Minerals tablet	P	QL(Allowed 1 per 1 day)
Vitatrum 18 mg-500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Vitrum Senior 500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Whole Source Multi-Vitamins tablet	P	QL(Allowed 1 per 1 day)
Women's 50 Plus Daily Formula 400 mcg-500 mg calcium-20 mcg tablet	P	QL(Allowed 1 per 1 day)
Women's 50 Plus Multivitamin 400 mcg-500 mg calcium-20 mcg tablet	P	QL(Allowed 1 per 1 day)
Women's Active 18 mg iron-400 mcg-180 mg tablet	P	QL(Allowed 1 per 1 day)
Women's Daily Caplet 27 mg iron-400 mcg	P	
Women's Daily Formula 18 mg iron-400 mcg-500 mg Ca tablet	P	QL(Allowed 1 per 1 day)
Women's Daily Formula 18 mg iron-400 mcg-500 mg tablet	P	QL(Allowed 1 per 1 day)
Women's Daily Formula 27 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
Women's Multivitamin 18 mg iron-400 mcg-500 mg tablet	P	QL(Allowed 1 per 1 day)
Women's Multivitamin 18 mg-400 mcg-500 mg-50 mcg tablet	P	QL(Allowed 1 per 1 day)
Womens Multivitamin High Potency 13.5 mg-200 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
Women's One Daily 18 mg iron-400 mcg-500 mg Ca tablet	P	QL(Allowed 1 per 1 day)
Zatean-Pn Plus 28 mg-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
MULTIVITAMINS		
A Thru Z Advanced Formula 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Calcium PNV 28 mg-1 mg-250 mg capsule	NP	PA
Central-Vite 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Centrum Complete 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Centrum Women 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Century 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Century Ultimate Women's 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Cerovite Advanced Formula 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Certavite-Antioxidant 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete Multivitamin-Multimineral 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Complete Women 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Daily Multiple 18 mg-400 mcg tablet	P	
Daily Multiple For Men 50+ 400 mcg-600 mcg-120 mg tablet	P	
EnBrace HR 1.5 mg iron-8.73 mg-6.4 mg capsule,immed and delay release	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Essentia 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
ESSENTIAL Balance with Lutein tablet	P	QL(Allowed 1 per 1 day)
Fortavit capsule	P	QL(Allowed 1 per 1 day)
High Potency Multivitamin 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Men's Multi-Vitamin tablet	P	QL(Allowed 1 per 1 day)
Multi Complete with Iron 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
multivitamin tablet	P	QL(Allowed 1 per 1 day)
Nestabs ONE 38 mg-1 mg-225 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Once Daily tablet	P	QL(Allowed 1 per 1 day)
Oncovite tablet	P	QL(Allowed 1 per 1 day)
One Daily Essential 400 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Essential tablet	P	QL(Allowed 1 per 1 day)
One Daily For Men 50+ Advanced 400 mcg-600 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
One Daily Men's 50 Plus Memory Support 400 mcg-600 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)
One Daily Multivitamin 400 mcg tablet	P	QL(Allowed 1 per 1 day)
One Daily Plus Iron 18 mg-400 mcg tablet	P	
One Daily tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Men's 50 Plus (with ginkgo) 400 mcg-300 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)
One-A-Day Teen Advantage 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
PNV-DHA 27 mg iron-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PNV-VP-U 106.5 mg-1 mg capsule	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenate AM 1 mg-500 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Chewable 1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Essential (iron asparto glycinate) 18 mg iron-1 mg-300 mg cap	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Sentry 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Advanced Formula 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Spectravite Ultra Women 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Tab-A-Vite 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Tab-A-Vite Multivitamin w-iron 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Thera 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Thera tablet	P	QL(Allowed 1 per 1 day)
Thera-Tabs tablet	P	QL(Allowed 1 per 1 day)
Therems Multivitamin 400 mcg tablet	P	QL(Allowed 1 per 1 day)
Vinate DHA RF 27 mg iron-1.13 mg-581.28 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Virt-PN DHA 27 mg iron-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Yelets 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Zatean-Pn DHA 27 mg iron-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PEDIATRIC VITAMINS		
ANIMAL CHEWS tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Animal Shape Vitamins chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Animal Shapes chewable tablet	P	QL(Allowed 1 per 1 day)
Chewable-Vite tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Child Multivitamins chewable tablet	P	AL(Maximum Age 13 Years)
Children's Chew Multivitamin tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Children's Chewable Multivitamin 300 mcg tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Children's Chewable Vitamin tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Children's Chewables 300 mcg tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Children's Chewables Extra C 300 mcg tablet	P	QL(Allowed 1 per 1 day)
Children's Multivitamin chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Childs Chew Vite tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Flintstones Gummies Omega-3 DHA 16 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Flintstones Multivitamin chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Pedia Poly-Vite 750 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
pediatric multivitamin chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Poly-Vi-Sol 250 mcg-50 mg-10 mcg/mL oral drops	P	QL(Allowed 50 per Rx)
Poly-Vita 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Poly-Vita Drops 750 unit-35 mg-400 unit/mL oral	P	QL(Allowed 50 per Rx)
Poly-Vitamin 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Poly-Vitamins chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Tri-Vita 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)

Drug Name	Tier	Drug Restriction
Tri-Vitamin 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Zoo Friends chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
PEDIATRIC VITAMINS AND MINERAL COMBINATIONS		
Animal Shapes Complete chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Children's Chewable Complete 9 mg iron-200 mcg tablet	P	QL(Allowed 1 per 1 day)
Flintstones Plus Calcium chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
NovaFerrum Pediatric Multivitamin-Iron 10 mg iron/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Pedia Poly-Vite with Iron 10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Poly-Vi-Sol with Iron 11 mg iron/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Poly-Vita (iron) 1,500 unit-400 unit-10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Poly-Vita With Iron 10 mg/mL oral drops	P	QL(Allowed 50 per Rx)
Poly-Vitamin with Iron 1,500 unit-400 unit-10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
PEDIATRIC VITAMINS WITH FLUORIDE AND MINERALS COMBINATIONS		
Multi-Vit with Fluoride and Iron 0.25 mg-10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
pediatric vitamins A,C,and D-fluoride 0.25 mg-iron 10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Tri-Vit with Fluoride and Iron 0.25 mg-10 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
PEDIATRIC VITAMINS WITH FLUORIDE COMBINATIONS		
Floriva Plus (with biotin) 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Floriva Plus 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Multi-Vitamin With Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Multi-Vitamin With Fluoride 0.25 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Multivitamin With Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Multi-Vitamin With Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Multi-Vitamin With Fluoride 0.5 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Multi-Vitamin With Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Multi-Vitamin-Fluoride (vit E acetate) 0.25 mg/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Multivitamins With Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Multivitamins With Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Multivitamins With Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Mvc-Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Mvc-Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Mvc-Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
pediatric multivitamin-Fl 0.25 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
pediatric multivitamin-Fl 1 mg chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Quflora Pediatric 0.25mg fluoride (0.55 mg) chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Quflora Pediatric 0.5 mg fluoride (1.1 mg) chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Quflora Pediatric 1 mg fluoride (2.2 mg) chewable tablet	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
Quflora Pediatric Drops 0.25 mg fluoride (0.55 mg)/mL oral	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Quflora Pediatric Drops 0.5 mg fluoride (1.1 mg)/mL oral	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Tri-Vitamin With Fluoride 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Tri-Vitamin With Fluoride 0.5 mg fluoride (1.1 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Tri-Vite With Fluoride 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)

Drug Name	Tier	Drug Restriction
Tri-Vite With Fluoride 0.5 mg fluoride (1.1 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Vitamins A,C,D and Fluoride 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
Vitamins A,C,D and Fluoride 0.5 mg fluoride (1.1 mg)/mL oral drops	P	AL(Maximum Age 13 Years); QL(Allowed 50 per Rx)
PRENATAL VITAMINS AND MINERALS		
	NP	PA
Citranatal B-Calm (Fe Gluc) 20 mg iron-1 mg-25 mg/25 mg tablets	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
C-Nate DHA 28 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Complete Natal DHA 29 mg-1 mg-250 mg-200 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
CompleteNate 29 mg iron-1 mg chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
DermacinRx Prenatrix 27 mg iron-1 mg tablet	NP	PA
DermacinRx Prenatryl 27 mg iron-1 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
M-Natal Plus 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Nestabs 32 mg-1,000 mcg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Nestabs DHA 32 mg iron-1,000 mcg-230 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
OB Complete One 40 mg-10 mg-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
OB Complete Petite 35 mg iron-5 mg iron-1 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
OB Complete Premier 30 mg-20 mg-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
OB Complete With Dha 30 mg iron-10 mg iron-1 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PNV 29-1 29 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
PNV OB+DHA 27 mg-1 mg-50 mg-250 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PNV-Select 27 mg-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenatal 19 29 mg iron-1 mg chewable tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenatal 28 mg iron-800 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
Prenatal Multivitamins 28 mg iron-800 mcg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenatal Plus 29 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenatal Tablet 28 mg iron-800 mcg	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenatal Vitamins Plus Low Iron 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Prenate DHA (ferrous asparto glycinate) 18 mg iron-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Elite (iron asparto glycinate) 20 mg iron-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Enhance 28 mg iron-1 mg-400 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Mini (ferrous asparto glycinate) 18 mg-1 mg-350 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Pixie 10 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Prenate Restore 27 mg iron-1 mg-400 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
PrePlus 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
PreTAB 29 mg-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
PrimaCare 30 mg-1 mg-300 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Provida OB 40 mg iron-1.25 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Select-OB (folic acid) 29 mg iron-1 mg chewable tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Select-OB + DHA 29 mg iron-1 mg-250 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Select-OB 29 mg iron-1 mg chewable tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Se-Natal 19 Chewable 29 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Se-Natal-19 29 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Thrivite Rx 29 mg iron-1 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
TriCare 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Tricare Prenatal DHA ONE 27 mg iron-0.8 mg-215 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Trinatal Rx 1 60 mg iron-1 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
TriStart DHA 31 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Tri-Tabs DHA 32 mg iron-1,000 mcg-230 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Triveen-Duo DHA 29 mg-1 mg-400 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Virt-Nate 28 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
Virt-Nate DHA 28 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Virt-PN 27 mg-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
VirtPrex 26 mg-1.2 mg-55 mg-300 mg capsule	NP	PA
Virt-Select 29 mg-1.25 mg-55 mg-325 mg capsule	NP	PA
Vitafol Fe Plus 90 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vitafol Gummies 3.33 mg iron-0.33 mg chewable tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vitafol Nano 18 mg iron-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vitafol Ultra 29 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vitafol-OB 65 mg-1 mg tablet	P	QL(Allowed 1 per 1 day); QL(QL (Limit 100 days supply(ies) per claim))
Vitafol-OB+DHA 65 mg-1 mg-250 mg oral pack	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Vitafol-One 29 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
VP-CH Plus 29 mg iron-1 mg-50 mg-265 mg capsule	NP	PA
VP-Heme OB 28 mg-6 mg-1 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
VP-HEME One 22 mg-6 mg-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
VP-PNV-DHA 28 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
WesTab Plus 27 mg iron-1 mg tablet	P	QL(QL (Limit 100 days supply(ies) per claim))
WestGel DHA 31 mg iron-1 mg-200 mg capsule	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
SODIUM CHLORIDE FLUSHES		
BD PosiFlush Normal Saline 0.9 % injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
BD PosiFlush Saline with Blunt Plastic Cannula injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
BD Pre-Filled Normal Saline 0.9 % injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Monoject 0.9% Sodium Chloride injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Monoject Prefill 0.9 % Saline Flush injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Monoject Prefill Advanced 0.9 % Sodium Chloride injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
Normal Saline Flush 0.9 % injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
sodium chloride 0.9 % (flush) injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
sodium chloride 0.9 % (flush) injection syringe with alcohol swab cap	P	QL(QL (Limit 14 days supply(ies) per claim))
SwabFlush 0.9 % injection syringe with alcohol swab cap	P	QL(QL (Limit 14 days supply(ies) per claim))
Syrex Sodium Chloride 0.9 % injection syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
SODIUM CHLORIDE, PARENTERAL		
sodium chloride 0.9 % intravenous piggyback	P	QL(QL (Limit 14 days supply(ies) per claim))
sodium chloride 0.9 % intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
VITAMINS - B PREPARATION COMBINATIONS		
VP-GGR-B6 1.2 mg-40 mg-124.1 mg-100 mg tablet	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
VITAMINS - B-12, CYANOCOBALAMIN AND DERIVATIVES		
cyanocobalamin (vit B-12) 1,000 mcg/mL injection solution	P	
VITAMINS - B-3, NIACIN AND DERIVATIVES		
niacin ER 250 mg capsule,extended release	P	
niacin ER 500 mg capsule,extended release	P	
VITAMINS - D DERIVATIVES		
Baby Ddrops 10 mcg/drop (400 unit/drop) oral	P	
Baby Vitamin D3 10 mcg/drop (400 unit/drop) oral drops	P	
Baby's Super Daily D3 10 mcg/drop (400 unit/drop) oral drops	P	
Calcidol 200 mcg/mL (8,000 unit/mL) oral drops	P	

Drug Name	Tier	Drug Restriction
Calciferol 200 mcg/mL (8,000 unit/mL) oral drops	P	
calcitriol 0.25 mcg capsule	P	
calcitriol 0.5 mcg capsule	P	
calcitriol 1 mcg/mL oral solution	P	
cholecalciferol (vitamin D3) 1,250 mcg (50,000 unit) capsule	P	
cholecalciferol (vitamin D3) 10 mcg/drop (400 unit/drop) oral drops	P	
cholecalciferol (vitamin D3) 10 mcg/mL (400 unit/mL) oral drops	P	
cholecalciferol (vitamin D3) 125 mcg/mL (5,000 unit/mL) oral drops	P	
cholecalciferol (vitamin D3) 25 mcg (1,000 unit) capsule	P	
cholecalciferol (vitamin D3) 25 mcg (1,000 unit) tablet	P	

Drug Name	Tier	Drug Restriction
Decara 1,250 mcg (50,000 unit) capsule	P	
Dialyvite Vitamin D 125 mcg (5,000 unit) capsule	P	
Drisdol 1,250 mcg (50,000 unit) capsule	P	Use Generic Products
D-Vi-Sol 10 mcg/mL (400 unit/mL) oral drops	P	
D-Vita 10 mcg/mL (400 unit/mL) oral drops	P	
ergocalciferol (vitamin D2) 1,250 mcg (50,000 unit) capsule	P	
ergocalciferol (vitamin D2) 200 mcg/mL (8,000 unit/mL) oral drops	P	
Just D 10 mcg/mL (400 unit/mL) oral drops	P	
Pedia D-Vite 10 mcg/mL (400 unit/mL) oral drops	P	
Rocaltrol 0.25 mcg capsule	NP	PA
Rocaltrol 0.5 mcg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Rocaltrol 1 mcg/mL oral solution	NP	PA
Vitamin D2 1,250 mcg (50,000 unit) capsule	P	Use Generic Products
Vitamin D3 10 mcg (400 unit) tablet	P	
Vitamin D3 25 mcg (1,000 unit) capsule	P	
Vitamin D3 25 mcg (1,000 unit) tablet	P	
Vitamin D3 50 mcg (2,000 unit) capsule	P	
Weekly-D 1,250 mcg (50,000 unit) capsule	P	
VITAMINS - FOLIC ACID AND DERIVATIVES		
Falessa 1 mg tablet	P	
folic acid 1 mg tablet	P	
folic acid 400 mcg tablet	P	QL(Allowed 1 per 1 day)
folic acid 800 mcg tablet	P	QL(Allowed 1 per 1 day)
VITAMINS - K, PHYTONADIONE AND DERIVATIVES		
Mephyton 5 mg tablet	P	Use Generic Products
phytonadione (vitamin K1) 5 mg tablet	P	

Drug Name	Tier	Drug Restriction
ENDOCRINE		
ABORTIFACIENTS- PROGESTERONE RECEPTOR ANTAGONIST		
Mifeprex 200 mg tablet	NP	PA
mifepristone 200 mg tablet	NP	PA
ADRENAL STEROID INHIBITORS		
Isturisa 1 mg tablet	NP	PA; SP
Isturisa 10 mg tablet	NP	PA; SP
Isturisa 5 mg tablet	NP	PA; SP
AGENTS TO TREAT HYPOGLYCEMIA (HYPERGLYCEMICS)		
Baqsimi 3 mg/actuation nasal spray	NP	PA
diazoxide 50 mg/mL oral suspension	P	
GlucaGen HypoKit 1 mg Injection	P	
Glucagon (HCl) Emergency Kit 1 mg solution for injection	P	
Glucagon Emergency Kit 1 mg solution for injection	P	QL(Allowed 1 per Rx)

Drug Name	Tier	Drug Restriction
Gvoke HypoPen 1-Pack 0.5 mg/0.1 mL subcutaneous auto-injector	NP	PA
Gvoke HypoPen 1-Pack 1 mg/0.2 mL subcutaneous auto-injector	NP	PA
Gvoke HypoPen 2-Pack 0.5 mg/0.1 mL subcutaneous auto-injector	NP	PA
Gvoke HypoPen 2-Pack 1 mg/0.2 mL subcutaneous auto-injector	NP	PA
Gvoke PFS 1-Pack 0.5 mg/0.1 mL subcutaneous syringe	NP	PA
Gvoke PFS 1-Pack 1 mg/0.2 mL subcutaneous syringe	NP	PA
Gvoke PFS 2-Pack 0.5 mg/0.1 mL subcutaneous syringe	NP	PA
Gvoke PFS 2-Pack 1 mg/0.2 mL subcutaneous syringe	NP	PA
Proglycem 50 mg/mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Zegalogue 0.6 mg/0.6 mL subcutaneous auto-injector	NP	PA
Zegalogue 0.6 mg/0.6 mL subcutaneous syringe	NP	PA
AMYLOIDOSIS AGENTS- TRANSTHYRETIN (TTR) STABILIZER		
Vyndamax 61 mg capsule	NP	PA; SP
Vyndaqel 20 mg capsule	NP	PA; SP
AMYLOIDOSIS AGENTS-TTR SUPPRESSION, ANTISENSE OLIGONUCLEOTIDE-BASED		
Tegsedi 284 mg/1.5 mL subcutaneous syringe	NP	PA; SP
ANDROGEN - SINGLE AGENTS		
AndroGel 1 % (25 mg/2.5 gram) transdermal gel packet	P	Use Generic Products
AndroGel 1 % (50 mg/5 gram) transdermal gel packet	P	Use Generic Products
AndroGel 1.62 % (40.5 mg/2.5 gram) transdermal gel packet	P	Use Generic Products
AndroGel 20.25 mg/1.25 gram (1.62 %) transdermal gel pump	P	Use Generic Products

Drug Name	Tier	Drug Restriction
Depo-Testosterone 100 mg/mL intramuscular oil	P	Use Generic Products
Depo-Testosterone 200 mg/mL intramuscular oil	P	QL(QL Overtime: Allowed 4 over 30 days); Use Generic Products
Fortesta 10 mg/0.5 gram/actuation transdermal gel pump	P	Use Generic Products
Testim 50 mg/5 gram (1 %) transdermal gel	P	Use Generic Products
testosterone 1 % (25 mg/2.5 gram) transdermal gel packet	P	
testosterone 1 % (50 mg/5 gram) transdermal gel packet	P	
testosterone 1.62 % (40.5 mg/2.5 gram) transdermal gel packet	P	
testosterone 10 mg/0.5 gram/actuation transdermal gel pump	P	
testosterone 12.5 mg/1.25 gram per actuation (1%) transdermal gel pump	P	
testosterone 20.25 mg/1.25 gram (1.62 %) transdermal gel pump	P	
testosterone 30 mg/actuation (1.5 mL) transderm solution metered pump	P	
testosterone 50 mg/5 gram (1 %) transdermal gel	P	
testosterone cypionate 100 mg/mL intramuscular oil	P	
testosterone cypionate 200 mg/mL intramuscular oil	P	QL(QL Overtime: Allowed 4 over 30 days)
testosterone enanthate 200 mg/mL intramuscular oil	P	
Vogelxo 1 % (50 mg/5 gram) transdermal gel packet	P	Use Generic Products
Vogelxo 12.5 mg/1.25 gram per pump actuation (1 %) transdermal gel	P	
Vogelxo 50 mg/5 gram (1 %) transdermal gel	P	Use Generic Products
ANTIDIURETIC AND VASOPRESSOR HORMONES		

Drug Name	Tier	Drug Restriction
DDAVP 0.1 mg tablet	NP	PA; QL(Allowed 6 per 1 day)
DDAVP 0.1 mg/mL (refrigerate) nasal solution	NP	PA; QL(Allowed 5 per Rx)
DDAVP 0.2 mg tablet	NP	PA; QL(Allowed 6 per 1 day)
DDAVP 10 mcg/spray (0.1 mL) nasal spray with pump	NP	PA; QL(Allowed 1 per 1 day); QL(Limit 1 package(s) per fill)
desmopressin 0.1 mg tablet	P	QL(Allowed 6 per 1 day)
desmopressin 0.2 mg tablet	P	QL(Allowed 6 per 1 day)
desmopressin 10 mcg/spray (0.1 mL) nasal spray	P	QL(Allowed 1 per 1 day); QL(Limit 1 package(s) per fill)
desmopressin 10 mcg/spray (0.1 mL) nasal spray (non-refrigerated)	P	QL(Allowed 1 per 1 day); QL(Limit 1 package(s) per fill)
Nocdurna (men) 55.3 mcg disintegrating tablet,sublingual	NP	PA
Nocdurna (women) 27.7 mcg disintegrating tablet,sublingual	NP	PA
Stimate 150 mcg/spray (0.1 mL) nasal spray	P	SP

Drug Name	Tier	Drug Restriction
ANTIHYPERGLYCEMIC - ALPHA-GLUCOSIDASE INHIBITORS		
acarbose 100 mg tablet	P	MT
acarbose 25 mg tablet	P	MT
acarbose 50 mg tablet	P	MT
Glyset 100 mg tablet	NP	PA; MT
Glyset 25 mg tablet	NP	PA; MT
Glyset 50 mg tablet	NP	PA; MT
miglitol 100 mg tablet	P	MT
miglitol 25 mg tablet	P	MT
miglitol 50 mg tablet	P	MT
Precose 100 mg tablet	NP	PA; MT
Precose 25 mg tablet	NP	PA; MT
Precose 50 mg tablet	NP	PA; MT
ANTIHYPERGLYCEMIC - DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
alogliptin 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
alogliptin 25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 6.25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Januvia 100 mg tablet	P	
Januvia 25 mg tablet	P	
Januvia 50 mg tablet	P	
Nesina 12.5 mg tablet	NP	PA; MT
Nesina 25 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Nesina 6.25 mg tablet	NP	PA; MT
Onglyza 2.5 mg tablet	NP	PA
Onglyza 5 mg tablet	NP	PA
Tradjenta 5 mg tablet	P	QL(Allowed 1 per 1 day)
ANTIHYPERGLYCEMIC - DOPAMINE RECEPTOR AGONISTS		
Cycloset 0.8 mg tablet	NP	PA
ANTIHYPERGLYCEMIC - GLUCOCORTICOID (CORTISOL) RECEPTOR BLOCKER (GR-II)		
Korlym 300 mg tablet	NP	PA; SP
ANTIHYPERGLYCEMIC - MEGLITINIDE ANALOG AND BIGUANIDE COMBINATIONS		
repaglinide 1 mg-metformin 500 mg tablet	NP	PA; MT
repaglinide 2 mg-metformin 500 mg tablet	NP	PA; MT
ANTIHYPERGLYCEMIC - MEGLITINIDE ANALOGS		
nateglinide 120 mg tablet	P	QL(Allowed 3 per 1 day); MT
nateglinide 60 mg tablet	P	QL(Allowed 3 per 1 day); MT
Prandin 1 mg tablet	NP	PA; MT
Prandin 2 mg tablet	NP	PA; MT
repaglinide 0.5 mg tablet	NP	PA; MT
repaglinide 1 mg tablet	NP	PA; MT
repaglinide 2 mg tablet	NP	PA; MT
Starlix 120 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
Starlix 60 mg tablet	NP	PA; QL(Allowed 3 per 1 day); MT
ANTIHYPERGLYCEMIC - SGLT-2 INHIBITOR AND BIGUANIDE COMBINATIONS		
Invokamet 150 mg-1,000 mg tablet	NP	PA
Invokamet 150 mg-500 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Invokamet 50 mg-1,000 mg tablet	NP	PA
Invokamet 50 mg-500 mg tablet	NP	PA
Invokamet XR 150 mg-1,000 mg tablet, extended release	NP	PA
Invokamet XR 150 mg-500 mg tablet, extended release	NP	PA
Invokamet XR 50 mg-1,000 mg tablet, extended release	NP	PA
Invokamet XR 50 mg-500 mg tablet, extended release	NP	PA
Segluromet 2.5 mg-1,000 mg tablet	NP	ST; QL(Allowed 2 per 1 day)
Segluromet 2.5 mg-500 mg tablet	NP	ST; QL(Allowed 2 per 1 day)
Segluromet 7.5 mg-1,000 mg tablet	NP	ST; QL(Allowed 2 per 1 day)
Segluromet 7.5 mg-500 mg tablet	NP	ST; QL(Allowed 2 per 1 day)
Synjardy 12.5 mg-1,000 mg tablet	NP	PA
Synjardy 12.5 mg-500 mg tablet	NP	PA
Synjardy 5 mg-1,000 mg tablet	NP	PA
Synjardy 5 mg-500 mg tablet	NP	PA
Synjardy XR 10 mg-1,000 mg tablet, extended release	NP	PA
Synjardy XR 12.5 mg-1,000 mg tablet, extended release	NP	PA
Synjardy XR 25 mg-1,000 mg tablet, extended release	NP	PA
Synjardy XR 5 mg-1,000 mg tablet, extended release	NP	PA
Xigduo XR 10 mg-1,000 mg tablet,extended release	NP	PA
Xigduo XR 10 mg-500 mg tablet,extended release	NP	PA
Xigduo XR 2.5 mg-1,000 mg tablet,extended release	NP	PA
Xigduo XR 5 mg-1,000 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Xigduo XR 5 mg-500 mg tablet,extended release	NP	PA
ANTIHYPERGLYCEMIC - SGLT-2 INHIBITOR AND DPP-4 INHIBITOR COMBINATIONS		
Glyxambi 10 mg-5 mg tablet	NP	PA
Glyxambi 25 mg-5 mg tablet	NP	PA
Qtern 10 mg-5 mg tablet	NP	PA
Qtern 5 mg-5 mg tablet	NP	PA
Steglujan 15 mg-100 mg tablet	NP	PA
Steglujan 5 mg-100 mg tablet	NP	PA
ANTIHYPERGLYCEMIC - SODIUM GLUCOSE COTRANSPORTER-2 (SGLT2) INHIBITORS		
Farxiga 10 mg tablet	NP	PA
Farxiga 5 mg tablet	NP	PA
Invokana 100 mg tablet	P	
Invokana 300 mg tablet	P	
Jardiance 10 mg tablet	P	QL(Allowed 1 per 1 day)
Jardiance 25 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Steglatro 15 mg tablet	NP	ST; QL(Allowed 1 per 1 day)
Steglatro 5 mg tablet	NP	ST; QL(Allowed 1 per 1 day)
ANTIHYPERGLYCEMIC - SULFONYLUREA AND BIGUANIDE COMBINATIONS		
glipizide 2.5 mg-metformin 250 mg tablet	P	MT
glipizide 2.5 mg-metformin 500 mg tablet	P	MT
glipizide 5 mg-metformin 500 mg tablet	P	MT
glyburide 1.25 mg-metformin 250 mg tablet	P	MT
glyburide 2.5 mg-metformin 500 mg tablet	P	MT
glyburide 5 mg-metformin 500 mg tablet	P	MT
ANTIHYPERGLYCEMIC - SULFONYLUREA DERIVATIVES		
Amaryl 1 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Amaryl 2 mg tablet	NP	PA; QL(Allowed 4 per 1 day); MT
Amaryl 4 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
glimepiride 1 mg tablet	P	QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
glimepiride 2 mg tablet	P	QL(Allowed 4 per 1 day); MT
glimepiride 4 mg tablet	P	QL(Allowed 2 per 1 day); MT
glipizide 10 mg tablet	P	MT
glipizide 5 mg tablet	P	MT
glipizide ER 10 mg tablet, extended release 24 hr	P	MT
glipizide ER 2.5 mg tablet, extended release 24 hr	P	MT
glipizide ER 5 mg tablet, extended release 24 hr	P	MT
Glucotrol 10 mg tablet	NP	PA; MT
Glucotrol 5 mg tablet	NP	PA; MT
Glucotrol XL 10 mg tablet,extended release	NP	PA; MT
Glucotrol XL 2.5 mg tablet,extended release	NP	PA; MT
Glucotrol XL 5 mg tablet,extended release	NP	PA; MT
glyburide 1.25 mg tablet	P	MT
glyburide 2.5 mg tablet	P	MT
glyburide 5 mg tablet	P	MT
glyburide micronized 1.5 mg tablet	P	MT
glyburide micronized 3 mg tablet	P	MT
glyburide micronized 6 mg tablet	P	MT
Glynase 1.5 mg tablet	NP	PA; MT
Glynase 3 mg tablet	NP	PA; MT
Glynase 6 mg tablet	NP	PA; MT
tolbutamide 500 mg tablet	P	MT
ANTIHYPERGLYCEMIC - THIAZOLIDINEDIONE AND BIGUANIDE COMBINATIONS		
Actoplus MET 15 mg-500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Actoplus MET 15 mg-850 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
pioglitazone 15 mg-metformin 500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
pioglitazone 15 mg-metformin 850 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
ANTIHYPERGLYCEMIC - THIAZOLIDINEDIONE AND SULFONYLUREA COMBINATIONS		
DUETACT 30 mg-2 mg tablet	NP	PA; MT
DUETACT 30 mg-4 mg tablet	NP	PA; MT
pioglitazone 30 mg-glimepiride 2 mg tablet	NP	PA; MT
pioglitazone 30 mg-glimepiride 4 mg tablet	NP	PA; MT
ANTIHYPERGLYCEMIC, AMYLIN ANALOG-TYPE		
SymlinPen 120 2,700 mcg/2.7 mL subcutaneous pen injector	NP	PA; QL(QL Overtime: Allowed 11 over 30 days)
SymlinPen 60 1,500 mcg/1.5 mL subcutaneous pen injector	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
ANTIHYPERGLYCEMIC, INCRETIN MIMETIC,GLP-1 RECEPTOR AGONIST ANALOG-TYPE		
Adlyxin 10 mcg/0.2 mL-20 mcg/0.2 mL subcutaneous pen injector	NP	PA
Adlyxin 20 mcg/0.2 mL subcutaneous pen injector	NP	PA
Bydureon 2 mg/0.65 mL subcutaneous pen injector	NP	PA; QL(QL Overtime: Allowed 4 over 30 days)
Bydureon BCise 2 mg/0.85 mL subcutaneous auto-injector	NP	PA; QL(QL Overtime: Allowed 3.4 over 28 days)
Byetta 10 mcg/dose(250 mcg/mL)2.4 mL subcutaneous pen injector	P	QL(QL Overtime: Allowed 2.4 over 30 days)
Byetta 5 mcg/dose (250 mcg/mL)1.2 mL subcutaneous pen injector	P	QL(QL Overtime: Allowed 1.2 over 30 days)
Ozempic 0.25 mg or 0.5 mg (2 mg/1.5 mL) subcutaneous pen injector	NP	PA
Ozempic 1 mg/dose (2 mg/1.5 mL) subcutaneous pen injector	NP	PA
Ozempic 1 mg/dose (4 mg/3 mL) subcutaneous pen injector	NP	PA
Rybelsus 14 mg tablet	NP	PA
Rybelsus 3 mg tablet	NP	PA
Rybelsus 7 mg tablet	NP	PA
Trulicity 0.75 mg/0.5 mL subcutaneous pen injector	NP	PA

Drug Name	Tier	Drug Restriction
Trulicity 1.5 mg/0.5 mL subcutaneous pen injector	NP	PA
Trulicity 3 mg/0.5 mL subcutaneous pen injector	NP	PA
Trulicity 4.5 mg/0.5 mL subcutaneous pen injector	NP	PA
Victoza 2-Pak 0.6 mg/0.1 mL (18 mg/3 mL) subcutaneous pen injector	P	QL(Allowed 0.3 per 1 day)
Victoza 3-Pak 0.6 mg/0.1 mL (18 mg/3 mL) subcutaneous pen injector	P	QL(Allowed 0.3 per 1 day)
ANTIHYPERGLYCEMIC-DIPEPTIDYL PEPTIDASE-4 INHIBIT AND THIAZOLIDINEDIONE		
alogliptin 12.5 mg-pioglitazone 15 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 12.5 mg-pioglitazone 30 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 12.5 mg-pioglitazone 45 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 25 mg-pioglitazone 15 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 25 mg-pioglitazone 30 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
alogliptin 25 mg-pioglitazone 45 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Oseni 12.5 mg-15 mg tablet	NP	PA; MT
Oseni 12.5 mg-30 mg tablet	NP	PA; MT
Oseni 12.5 mg-45 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Oseni 25 mg-15 mg tablet	NP	PA; MT
Oseni 25 mg-30 mg tablet	NP	PA; MT
Oseni 25 mg-45 mg tablet	NP	PA; MT
ANTIHYPERGLYCEMIC-DIPEPTIDYL PEPTIDASE-4(DPP-4)INHIBITOR AND BIGUANIDE		
alogliptin 12.5 mg-metformin 1,000 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
alogliptin 12.5 mg-metformin 500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Janumet 50 mg-1,000 mg tablet	NP	PA
Janumet 50 mg-500 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Janumet XR 100 mg-1,000 mg tablet,extended release	NP	PA
Janumet XR 50 mg-1,000 mg tablet,extended release	NP	PA
Janumet XR 50 mg-500 mg tablet,extended release	NP	PA
Jentadueto 2.5 mg-1,000 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Jentadueto 2.5 mg-500 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Jentadueto 2.5 mg-850 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Jentadueto XR 2.5 mg-1,000 mg tablet, extended release	NP	PA
Jentadueto XR 5 mg-1,000 mg tablet, extended release	NP	PA
Kazano 12.5 mg-1,000 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Kazano 12.5 mg-500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Kombiglyze XR 2.5 mg-1,000 mg tablet,extended release	NP	PA
Kombiglyze XR 5 mg-1,000 mg tablet,extended release	NP	PA
Kombiglyze XR 5 mg-500 mg tablet,extended release	NP	PA
ANTIHYPERGLYCEMIC-INSULIN, LONG ACTING AND GLP-1 RECEPTOR AGONIST COMB		
Soliqua 100/33 100 unit-33 mcg/mL subcutaneous insulin pen	NP	PA
Xultophy 100/3.6 100 unit-3.6 mg/mL (3 mL) subcutaneous insulin pen	NP	PA
ANTIHYPERGLYCEMIC-SGLT-2 INHIBITOR, DPP-4 INHIBITOR AND BIGUANIDE COMB		
Trijardy XR 10 mg-5 mg-1,000 mg tablet, extended release	NP	PA
Trijardy XR 12.5 mg-2.5 mg-1,000 mg tablet, extended release	NP	PA
Trijardy XR 25 mg-5 mg-1,000 mg tablet, extended release	NP	PA
Trijardy XR 5 mg-2.5 mg-1,000 mg tablet, extended release	NP	PA

Drug Name	Tier	Drug Restriction
ANTITHYROID AGENTS, THIONAMIDES - IMIDAZOLE DERIVATIVES		
methimazole 10 mg tablet	P	MT
methimazole 5 mg tablet	P	MT
Tapazole 10 mg tablet	NP	PA; MT
Tapazole 5 mg tablet	NP	PA; MT
ANTITHYROID AGENTS, THIONAMIDES - THIOURACIL DERIVATIVES		
propylthiouracil 50 mg tablet	P	MT
BONE RESORPTION INHIBITORS - BISPHOSPHONATE AND VITAMIN D COMBINATIONS		
Fosamax Plus D 70 mg-2,800 unit tablet	NP	PA
Fosamax Plus D 70 mg-5,600 unit tablet	NP	PA
BONE RESORPTION INHIBITORS - BISPHOSPHONATES		
Actonel 150 mg tablet	NP	PA; MT
Actonel 35 mg tablet	NP	PA; QL(QL Overtime: Allowed 4 over 28 days); MT
alendronate 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
alendronate 35 mg tablet	P	QL(Allowed 4 per 28 days); MT
alendronate 70 mg tablet	P	QL(Allowed 4 per 28 days); MT
alendronate 70 mg/75 mL oral solution	P	QL(Allowed 10.8 per 1 day); MT
Atelvia 35 mg tablet,delayed release	NP	PA; MT
Binosto 70 mg effervescent tablet	NP	PA
Boniva 150 mg tablet	NP	PA; MT
Fosamax 70 mg tablet	NP	PA; QL(Allowed 4 per 28 days); MT
ibandronate 150 mg tablet	NP	PA; MT
risedronate 150 mg tablet	NP	PA; MT
risedronate 30 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
risedronate 35 mg tablet	NP	PA; QL(QL Overtime: Allowed 4 over 28 days); MT
risedronate 35 mg tablet,delayed release	NP	PA; MT
risedronate 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
CALCIMIMETIC, PARATHYROID CALCIUM RECEPTOR SENSITIVITY ENHANCER		
cinacalcet 30 mg tablet	NP	PA; SP
cinacalcet 60 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
cinacalcet 90 mg tablet	NP	PA; SP
Sensipar 30 mg tablet	NP	PA; SP
Sensipar 60 mg tablet	NP	PA; SP
Sensipar 90 mg tablet	NP	PA; SP
CALCITONINS		
calcitonin (salmon) 200 unit/actuation nasal spray	P	QL(QL Overtime: Allowed 4 over 30 days)
ESTROGEN AND PROGESTIN WITH ANTIMINERALOCORTICOID ACTIVITY,COMBINATION		
Angeliq 0.25 mg-0.5 mg tablet	NP	PA
Angeliq 0.5 mg-1 mg tablet	NP	PA
ESTROGEN AND SELECTIVE ESTROGEN RECEPTOR MODULATOR (SERM) COMBINATIONS		
Duavee 0.45 mg-20 mg tablet	NP	PA
ESTROGEN-PROGESTIN		
Activella 1 mg-0.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Amabelz 0.5 mg-0.1 mg tablet	P	QL(Allowed 1 per 1 day)
Amabelz 1 mg-0.5 mg tablet	P	QL(Allowed 1 per 1 day)
Bijuva 1 mg-100 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Climara Pro 0.045 mg-0.015 mg/24 hr transdermal patch	NP	PA
CombiPatch 0.05 mg-0.14 mg/24 hr transdermal	P	QL(Allowed 8 per 28 days)
CombiPatch 0.05 mg-0.25 mg/24 hr transdermal	P	QL(Allowed 8 per 28 days)
estradiol-norethindrone acet 0.5 mg-0.1 mg tablet	P	QL(Allowed 1 per 1 day)
estradiol-norethindrone acet 1 mg-0.5 mg tablet	P	QL(Allowed 1 per 1 day)
Femhrt Low Dose 0.5 mg-2.5 mcg tablet	NP	PA
Fyavolv 0.5 mg-2.5 mcg tablet	NP	PA
Fyavolv 1 mg-5 mcg tablet	NP	PA
Jinteli 1 mg-5 mcg tablet	NP	PA
Lopreeza 1 mg-0.5 mg tablet	P	QL(Allowed 1 per 1 day)
Mimvey 1 mg-0.5 mg tablet	P	QL(Allowed 1 per 1 day)
Mimvey Lo 0.5 mg-0.1 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
norethindrone acetate 0.5 mg-ethinyl estradiol 2.5 mcg tablet	NP	PA
norethindrone acetate 1 mg-ethinyl estradiol 5 mcg tablet	NP	PA
Prefest 1 mg (15)/1 mg-0.09 mg (15) tablet	NP	PA
Premphase 0.625 mg(14)/0.625 mg-5mg(14) tablet	P	QL(Allowed 1 per 1 day)
Prempro 0.3 mg-1.5 mg tablet	P	QL(Allowed 1 per 1 day)
Prempro 0.45 mg-1.5 mg tablet	P	QL(Allowed 1 per 1 day)
Prempro 0.625 mg-2.5 mg tablet	P	QL(Allowed 1 per 1 day)
Prempro 0.625 mg-5 mg tablet	P	QL(Allowed 1 per 1 day)
ESTROGENS		
Alora 0.025 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Alora 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Alora 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Alora 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)

Drug Name	Tier	Drug Restriction
Climara 0.025 mg/24 hr transdermal patch	NP	PA
Climara 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days)
Climara 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days)
Climara 0.06 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days)
Climara 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days)
Climara 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days)
Delestrogen 10 mg/mL intramuscular oil	P	
Delestrogen 20 mg/mL intramuscular oil	P	Use Generic Products
Delestrogen 40 mg/mL intramuscular oil	P	Use Generic Products
Depo-Estradiol 5 mg/mL intramuscular oil	P	
Divigel 0.25 mg/0.25 gram (0.1 %) transdermal gel packet	NP	PA

Drug Name	Tier	Drug Restriction
Divigel 0.5 mg/0.5 gram (0.1 %) transdermal gel packet	NP	PA
Divigel 0.75 mg/0.75 gram (0.1%) transdermal gel packet	NP	PA
Divigel 1 mg/gram (0.1 %) transdermal gel packet	NP	PA
Divigel 1.25 mg/1.25 gram (0.1 %) transdermal gel packet	NP	PA
Dotti 0.025 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days)
Dotti 0.0375 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days)
Dotti 0.05 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days)
Dotti 0.075 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days)
Dotti 0.1 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days)
Elestrin 0.87 gram/actuation (0.06%) transdermal gel pump	NP	PA
Estrace 0.5 mg tablet	NP	PA
Estrace 1 mg tablet	NP	PA
Estrace 2 mg tablet	NP	PA
estradiol 0.025 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days)
estradiol 0.025 mg/24 hr weekly transdermal patch	P	
estradiol 0.0375 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days)
estradiol 0.0375 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days)
estradiol 0.05 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days)
estradiol 0.05 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days)
estradiol 0.06 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days)
estradiol 0.075 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days)
estradiol 0.075 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days)

Drug Name	Tier	Drug Restriction
estradiol 0.1 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days)
estradiol 0.1 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days)
estradiol 0.5 mg tablet	P	
estradiol 1 mg tablet	P	
estradiol 2 mg tablet	P	
estradiol valerate 20 mg/mL intramuscular oil	P	
estradiol valerate 40 mg/mL intramuscular oil	P	
Evamist 1.53 mg/spray (1.7 %) transdermal spray	NP	PA
Lyllana 0.025 mg/24 hr transdermal patch	P	
Lyllana 0.0375 mg/24 hr transdermal patch	P	
Lyllana 0.05 mg/24 hr transdermal patch	P	
Lyllana 0.075 mg/24 hr transdermal patch	P	
Lyllana 0.1 mg/24 hr transdermal patch	P	
Menest 0.3 mg tablet	P	
Menest 0.625 mg tablet	P	
Menest 1.25 mg tablet	P	
Menest 2.5 mg tablet	P	
Menostar 14 mcg/24 hr transdermal patch	NP	PA
Minivelle 0.025 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Minivelle 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Minivelle 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Minivelle 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Minivelle 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Premarin 0.3 mg tablet	P	QL(Allowed 1 per 1 day)
Premarin 0.45 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Premarin 0.625 mg tablet	P	QL(Allowed 1 per 1 day)
Premarin 0.9 mg tablet	P	QL(Allowed 1 per 1 day)
Premarin 1.25 mg tablet	P	QL(Allowed 1 per 1 day)
Vivelle-Dot 0.025 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Vivelle-Dot 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Vivelle-Dot 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Vivelle-Dot 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
Vivelle-Dot 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days)
FERTILITY ENHANCER - LUTEAL PHASE SUPPORTING, PROGESTERONE-TYPE		
Crinone 8 % vaginal gel	NP	PA
Endometrin 100 mg vaginal insert	P	
FERTILITY ENHANCER - PRETERM BIRTH PREVENTION, PROGESTERONE-TYPE		
hydroxyprogesterone (PF)(pregnancy preserving) 250 mg/mL (1 mL) IM oil	NP	PA; QL(QL (Limit 35 days supply(ies) per claim)); SP
hydroxyprogesterone caproate (pregnancy preserving) 250 mg/mL IM oil	NP	PA; QL(QL (Limit 35 days supply(ies) per claim)); SP
Makena (PF) 275 mg/1.1 mL subcutaneous auto-injector	P	PA; QL(QL (Limit 35 days supply(ies) per claim)); SP
Makena 250 mg/mL (1 mL) intramuscular oil	P	PA; QL(QL (Limit 35 days supply(ies) per claim)); SP
GLUCOCORTICOIDS		
Alkindi Sprinkle 0.5 mg capsule	NP	PA
Alkindi Sprinkle 1 mg capsule	NP	PA
Alkindi Sprinkle 2 mg capsule	NP	PA
Alkindi Sprinkle 5 mg capsule	NP	PA
Cortef 10 mg tablet	NP	PA
Cortef 20 mg tablet	NP	PA
Cortef 5 mg tablet	NP	PA
cortisone 25 mg tablet	NP	PA
dexamethasone 0.5 mg tablet	P	

Drug Name	Tier	Drug Restriction
dexamethasone 0.5 mg/5 mL oral elixir	P	
dexamethasone 0.5 mg/5 mL oral solution	P	
dexamethasone 0.75 mg tablet	P	
dexamethasone 1 mg tablet	P	
dexamethasone 1.5 mg (21 tabs) tablets in a dose pack	P	
dexamethasone 1.5 mg (35 tabs) tablets in a dose pack	P	
dexamethasone 1.5 mg (51 tabs) tablets in a dose pack	P	
dexamethasone 1.5 mg tablet	P	
dexamethasone 2 mg tablet	P	
dexamethasone 4 mg tablet	P	
dexamethasone 6 mg tablet	P	
Dexamethasone Intensol 1 mg/mL Drops (concentrate)	P	
Emflaza 18 mg tablet	NP	PA; SP
Emflaza 22.75 mg/mL oral suspension	NP	PA; SP
Emflaza 30 mg tablet	NP	PA; SP
Emflaza 36 mg tablet	NP	PA; SP
Emflaza 6 mg tablet	NP	PA; SP
Hemady 20 mg tablet	NP	PA
hydrocortisone 10 mg tablet	P	
hydrocortisone 20 mg tablet	P	
hydrocortisone 5 mg tablet	P	
Medrol (Pak) 4 mg tablets in a dose pack	NP	PA
Medrol 16 mg tablet	NP	PA
Medrol 2 mg tablet	NP	PA
Medrol 32 mg tablet	NP	PA
Medrol 4 mg tablet	NP	PA
Medrol 8 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
methylprednisolone 16 mg tablet	P	
methylprednisolone 32 mg tablet	P	
methylprednisolone 4 mg tablet	P	
methylprednisolone 4 mg tablets in a dose pack	P	
methylprednisolone 8 mg tablet	P	
Millipred 5 mg tablet	P	
prednisolone 10 mg disintegrating tablet	NP	PA
prednisolone 15 mg disintegrating tablet	NP	PA
prednisolone 15 mg/5 mL oral solution	P	
prednisolone 30 mg disintegrating tablet	NP	PA
prednisolone sodium phosphate 10 mg/5 mL oral solution	P	
prednisolone sodium phosphate 15 mg/5 mL (3 mg/mL) oral solution	P	QL(Allowed 240 per Rx)
prednisolone sodium phosphate 20 mg/5 mL (4 mg/mL) oral solution	P	QL(Allowed 150 per Rx)
prednisolone sodium phosphate 25 mg/5 mL (5 mg/mL) oral solution	P	
prednisolone sodium phosphate 5 mg base/5 mL (6.7 mg/5 mL) oral soln	P	
prednisone 1 mg tablet	P	
prednisone 10 mg tablet	P	
prednisone 10 mg tablets in a dose pack	P	
prednisone 2.5 mg tablet	P	
prednisone 20 mg tablet	P	
prednisone 5 mg tablet	P	
prednisone 5 mg tablets in a dose pack	P	
prednisone 5 mg/5 mL oral solution	P	

Drug Name	Tier	Drug Restriction
prednisone 50 mg tablet	P	
Prednisone Intensol 5 mg/mL oral concentrate	P	
Rayos 1 mg tablet,delayed release	NP	PA
Rayos 2 mg tablet,delayed release	NP	PA
Rayos 5 mg tablet,delayed release	NP	PA
TaperDex 1.5 mg (21 tabs) tablets in a dose pack	NP	PA
TaperDex 1.5 mg (27 tabs) tablets in a dose pack	NP	PA
TaperDex 1.5 mg (49 tabs) tablets in a dose pack	NP	PA
GROWTH HORMONE RELEASING HORMONES (GHRH)		
Egrifta 1 mg subcutaneous solution	NP	PA; SP
Egrifta SV 2 mg subcutaneous solution	NP	PA; SP
GROWTH HORMONES		

Drug Name	Tier	Drug Restriction
Genotropin 12 mg/mL (36 unit/mL) subcutaneous cartridge	P	PA; SP
Genotropin 5 mg/mL (15 unit/mL) subcutaneous cartridge	P	PA; SP
Genotropin MiniQuick 0.2 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 0.4 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 0.6 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 0.8 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 1 mg/0.25 mL subcutaneous syringe	P	PA; SP

Drug Name	Tier	Drug Restriction
Genotropin MiniQuick 1.2 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 1.4 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 1.6 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 1.8 mg/0.25 mL subcutaneous syringe	P	PA; SP
Genotropin MiniQuick 2 mg/0.25 mL subcutaneous syringe	P	PA; SP
Humatrope 12 mg (36 unit) injection cartridge	NP	PA; SP
Humatrope 24 mg (72 unit) injection cartridge	NP	PA; SP
Humatrope 5 mg (15 unit) solution for injection	NP	PA; SP
Humatrope 6 mg (18 unit) injection cartridge	NP	PA; SP

Drug Name	Tier	Drug Restriction
Norditropin FlexPro 10 mg/1.5 mL (6.7 mg/mL) subcutaneous pen injector	NP	PA; SP
Norditropin FlexPro 15 mg/1.5 mL (10 mg/mL) subcutaneous pen injector	NP	PA; SP
Norditropin FlexPro 30 mg/3 mL (10 mg/mL) subcutaneous pen injector	NP	PA; SP
Norditropin FlexPro 5 mg/1.5 mL (3.3 mg/mL) subcutaneous pen injector	NP	PA; SP
Nutropin AQ Nuspin 10 mg/2 mL (5 mg/mL) subcutaneous pen injector	NP	PA; SP
Nutropin AQ Nuspin 20 mg/2 mL (10 mg/mL) subcutaneous pen injector	NP	PA; SP
Nutropin AQ Nuspin 5 mg/2 mL (2.5 mg/mL) subcutaneous pen injector	NP	PA; SP

Drug Name	Tier	Drug Restriction
Omnitrope 10 mg/1.5 mL (6.7 mg/mL) subcutaneous cartridge	NP	PA; SP
Omnitrope 5 mg/1.5 mL (3.3 mg/mL) subcutaneous cartridge	NP	PA; SP
Omnitrope 5.8 mg subcutaneous solution	NP	PA; SP
Saizen 5 mg subcutaneous solution	NP	PA; SP
Saizen 8.8 mg subcutaneous solution	NP	PA; SP
Saizen saizenprep 8.8 mg/1.51 mL (final conc.) subcutaneous cartridge	NP	PA; SP
Serostim 4 mg subcutaneous solution	NP	PA; SP
Serostim 5 mg subcutaneous solution	NP	PA; SP
Serostim 6 mg subcutaneous solution	NP	PA; SP
Zomacton 10 mg subcutaneous solution	NP	PA; SP
Zomacton 5 mg subcutaneous solution	NP	PA; SP
Zorbtive 8.8 mg subcutaneous solution	NP	PA; SP
HUMAN INSULINS - FIXED COMBINATIONS		
Humulin 70/30 U-100 Insulin 100 unit/mL subcutaneous suspension	P	QL(Allowed 2 per 1 day); MT
Humulin 70/30 U-100 Insulin KwikPen 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); MT
Novolin 70/30 U-100 Insulin 100 unit/mL subcutaneous suspension	NP	PA; QL(Allowed 2 per 1 day); MT
Novolin 70-30 FlexPen U-100 Insulin 100 unit/mL (70-30) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); MT
HUMAN INSULINS - INTERMEDIATE ACTING		
Humulin N NPH U-100 Insulin (isophane susp) 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); MT
Humulin N NPH U-100 Insulin KwikPen 100 unit/mL (3 mL) subcutaneous	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Novolin N Flexpen 100 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 2 per 1 day); MT
Novolin N NPH U-100 Insulin isophane 100 unit/mL subcutaneous susp	NP	PA; QL(Allowed 2 per 1 day); MT
HUMAN INSULINS - RAPID ACTING		
Afrezza (regular insulin) 8 unit (90)/12 unit (90) cartridge,inhaler	NP	PA; MT
Afrezza 12 unit cartridge with inhaler	NP	PA; MT
Afrezza 4 unit (60)/8 unit (60)/12 unit (60) cartridge with inhaler	NP	PA; MT
Afrezza 4 unit (90)/8 unit (90) cartridge with inhaler	NP	PA; MT
Afrezza 4 unit cartridge with inhaler	NP	PA; MT
Afrezza 8 unit cartridge with inhaler	NP	PA; MT
HUMAN INSULINS - SHORT ACTING		
Humulin R Regular U-100 Insulin 100 unit/mL injection solution	P	QL(Allowed 2 per 1 day); MT
Humulin R U-500 (Conc) Insulin Kwikpen 500 unit/mL (3 mL) subcutaneous	P	QL(Allowed 0.6 per 1 day); MT
Humulin R U-500 (Concentrated) Insulin 500 unit/mL subcutaneous soln	P	QL(Allowed 2 per 1 day); MT
Novolin R Flexpen 100 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 2 per 1 day); MT
Novolin R Regular U-100 Insulin 100 unit/mL injection solution	NP	PA; QL(Allowed 2 per 1 day); MT
INSULIN ANALOGS - FIXED COMBINATIONS		
Humalog Mix 50-50 (U-100) Insulin 100 unit/mL subcutaneous suspension	P	QL(Allowed 2 per 1 day); MT
Humalog Mix 50-50 KwikPen U-100 Insulin 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); MT
Humalog Mix 75-25 (U-100) Insulin 100 unit/mL subcutaneous suspension	P	QL(Allowed 2 per 1 day); MT
Humalog Mix 75-25 KwikPen U-100 insulin 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
insulin aspar prot-insulin aspart 100 unit/mL (70-30) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
insulin aspar prt-insulin aspart 100 unit/mL (70-30) subcutaneous soln	NP	PA; QL(Allowed 2 per 1 day); MT
insulin lispro protamine-lispro 100 unit/mL (75-25) subcutaneous pen	P	QL(Allowed 2 per 1 day); MT
Novolog Mix 70-30 FlexPen U-100 Insulin 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
Novolog Mix 70-30 U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT
INSULIN ANALOGS - LONG ACTING		
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); MT
Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	P	QL(Allowed 2 per 1 day); MT
Lantus U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); MT
Levemir FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	P	QL(Allowed 2 per 1 day); MT
Levemir U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); MT
Semglee Pen U-100 Insulin 100 unit/mL (3 mL) subcutaneous	NP	PA; MT
Semglee U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; MT
Toujeo Max U-300 SoloStar 300 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 0.4 per 1 day); MT
Toujeo SoloStar U-300 Insulin 300 unit/mL (1.5 mL) subcutaneous pen	NP	PA; QL(Allowed 0.45 per 1 day); MT
Tresiba FlexTouch U-100 insulin 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
Tresiba FlexTouch U-200 insulin 200 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Tresiba U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT
INSULIN ANALOGS - RAPID ACTING		
Admelog SoloStar U-100 Insulin lispro 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
Admelog U-100 Insulin lispro 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT
Apidra SoloStar U-100 Insulin 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
Apidra U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT
Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
Fiasp Penfill U-100 Insulin 100 unit/mL (3 mL) subcutaneous cartridge	NP	PA; QL(Allowed 2 per 1 day); MT
Fiasp U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
Humalog Junior KwikPen (U-100) 100 unit/mL subcutaneous half-unit pen	P	QL(Allowed 2 per 1 day); MT
Humalog KwikPen (U-100) Insulin 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); MT
Humalog KwikPen U-200 Insulin 200 unit/mL (3 mL) subcutaneous	P	QL(Allowed 1 per 1 day); MT
Humalog U-100 Insulin 100 unit/mL subcutaneous cartridge	P	QL(Allowed 2 per 1 day); MT
Humalog U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); MT
insulin aspart (U-100) 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); MT
insulin aspart U-100 100 unit/mL subcutaneous cartridge	NP	PA; QL(Allowed 2 per 1 day); MT
insulin aspart U-100 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
insulin lispro (U-100) 100 unit/mL subcutaneous half-unit pen	P	QL(Allowed 2 per 1 day); MT
insulin lispro (U-100) 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); MT
insulin lispro (U-100) 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); MT
Lyumjev KwikPen U-100 Insulin 100 unit/mL subcutaneous	NP	PA; MT
Lyumjev KwikPen U-200 Insulin 200 unit/mL (3 mL) subcutaneous	NP	PA; MT
Lyumjev U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; MT
Novolog Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); MT
Novolog PenFill U-100 Insulin aspart 100 unit/mL subcutaneous cartridg	NP	PA; QL(Allowed 2 per 1 day); MT
Novolog U-100 Insulin aspart 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); MT
INSULIN RESPONSE ENHANCERS - BIGUANIDES		
Fortamet 1,000 mg tablet,extended release	NP	PA; MT
Fortamet 500 mg tablet,extended release	NP	PA; MT
Glumetza 1,000 mg tablet,extended release	NP	PA; MT
Glumetza 500 mg tablet,extended release	NP	PA; MT
metformin 1,000 mg tablet	P	QL(Allowed 2 per 1 day); MT
metformin 500 mg tablet	P	QL(Allowed 5 per 1 day); MT
metformin 500 mg/5 mL oral solution	NP	PA; MT
metformin 850 mg tablet	P	QL(Allowed 3 per 1 day); MT
metformin ER 1,000 mg 24 hr tablet,extended release	P	MT
metformin ER 1,000 mg tablet,extended release 24hr	P	MT

Drug Name	Tier	Drug Restriction
metformin ER 500 mg 24 hr tablet,extended release	P	MT
metformin ER 500 mg tablet,extended release 24 hr	P	QL(Allowed 4 per 1 day); MT
metformin ER 500 mg tablet,extended release 24hr	P	MT
metformin ER 750 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
Riomet 500 mg/5 mL oral solution	NP	PA; MT
Riomet ER 500 mg/5 mL oral suspension,extended release	NP	PA
INSULIN RESPONSE ENHANCERS - THIAZOLIDINEDIONES (PPAR-GAMMA AGONISTS)		
Actos 15 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Actos 30 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Actos 45 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Avandia 2 mg tablet	P	QL(Allowed 1 per 1 day)
Avandia 4 mg tablet	P	QL(Allowed 1 per 1 day)
pioglitazone 15 mg tablet	P	QL(Allowed 1 per 1 day); MT
pioglitazone 30 mg tablet	P	QL(Allowed 1 per 1 day); MT
pioglitazone 45 mg tablet	P	QL(Allowed 1 per 1 day); MT
INSULIN-LIKE GROWTH FACTOR-1 (IGF-1)		
Increlex 10 mg/mL subcutaneous solution	NP	PA; SP
LHRH (GNRH) AGONIST ANALOG PITUITARY SUPPRESSANTS		
Synarel 2 mg/mL nasal spray	NP	PA; SP
LHRH (GNRH) ANTAGONIST, ESTROGEN AND PROGESTIN COMBINATIONS		
Oriahnn 300-1-0.5 mg(AM)/300 mg(PM) capsules	NP	PA
LHRH (GNRH) ANTAGONISTS		
Orilissa 150 mg tablet	P	PA; SP
Orilissa 200 mg tablet	P	PA; SP
MENOPAUSAL SYMPTOMS SUPPRESSANT-SELECTIVE ESTROGEN RECEPTOR MODULATORS		
Osphena 60 mg tablet	NP	PA
MENOPAUSAL SYMPTOMS SUPPRESSANT-SSRI ANTIDEPRESSANT TYPE		
Brisdelle 7.5 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
paroxetine mesylate (menopausal symptoms suppressant) 7.5 mg capsule	NP	PA
MENOPAUSAL SYMPTOMS SUPRESSANT - HORMONAL AGENTS		
Imvexxy Maintenance Pack 10 mcg vaginal insert	NP	PA; MT
Imvexxy Maintenance Pack 4 mcg vaginal insert	NP	PA; MT
Imvexxy Starter Pack 10 mcg vaginal insert, dose pack	NP	PA; MT
Imvexxy Starter Pack 4 mcg vaginal insert, dose pack	NP	PA; MT
Intrarosa 6.5 mg vaginal insert	NP	PA
MINERALOCORTICOIDS		
fludrocortisone 0.1 mg tablet	P	
OXYTOCIC - ERGOT ALKALOIDS		
Methergine 0.2 mg tablet	P	Use Generic Products
methylergonovine 0.2 mg tablet	P	
PROGESTINS		
Aygestin 5 mg tablet	NP	PA
medroxyprogesterone 10 mg tablet	P	
medroxyprogesterone 2.5 mg tablet	P	MT
medroxyprogesterone 5 mg tablet	P	
norethindrone acetate 5 mg tablet	NP	PA
progesterone 50 mg/mL intramuscular oil	P	
progesterone micronized 100 mg capsule	P	QL(Allowed 1 per 1 day)
progesterone micronized 200 mg capsule	P	QL(QL Overtime: Allowed 20 over 30 days)
Prometrium 100 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
Prometrium 200 mg capsule	NP	PA; QL(QL Overtime: Allowed 20 over 30 days)
Provera 10 mg tablet	NP	PA
Provera 2.5 mg tablet	NP	PA; MT
Provera 5 mg tablet	NP	PA
PROLACTIN INHIBITOR - ERGOT DERIVATIVE DOPAMINE RECEPTOR AGONISTS		

Drug Name	Tier	Drug Restriction
cabergoline 0.5 mg tablet	P	
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
Evista 60 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
raloxifene 60 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
SOMATOSTATIC AGENTS		
Bynfezia 2,500 mcg/mL subcutaneous pen injector	NP	PA; SP
Mycapssa 20 mg capsule,delayed release	NP	PA; SP
octreotide acetate 1,000 mcg/mL injection solution	NP	PA; SP
octreotide acetate 100 mcg/mL (1 mL) injection syringe	NP	PA; SP
octreotide acetate 100 mcg/mL injection solution	NP	PA; SP
octreotide acetate 200 mcg/mL injection solution	NP	PA; SP
octreotide acetate 50 mcg/mL (1 mL) injection syringe	NP	PA; SP
octreotide acetate 50 mcg/mL injection solution	NP	PA; SP
octreotide acetate 500 mcg/mL (1 mL) injection syringe	NP	PA; SP
octreotide acetate 500 mcg/mL injection solution	NP	PA; SP
Sandostatin 100 mcg/mL injection solution	NP	PA; SP
Sandostatin 50 mcg/mL injection solution	NP	PA; SP
Sandostatin 500 mcg/mL injection solution	NP	PA; SP
Sandostatin LAR Depot 10 mg intramuscular susp,extended release	NP	PA; SP
Sandostatin LAR Depot 20 mg intramuscular susp,extended release	NP	PA; SP
Sandostatin LAR Depot 30 mg intramuscular susp,extended release	NP	PA; SP
Signifor 0.3 mg/mL (1 mL) subcutaneous solution	NP	PA; SP

Drug Name	Tier	Drug Restriction
Signifor 0.6 mg/mL (1 mL) subcutaneous solution	NP	PA; SP
Signifor 0.9 mg/mL (1 mL) subcutaneous solution	NP	PA; SP
Signifor LAR 10 mg intramuscular suspension	NP	PA; SP
Signifor LAR 20 mg intramuscular suspension	NP	PA; SP
Signifor LAR 30 mg intramuscular suspension	NP	PA; SP
Signifor LAR 40 mg intramuscular suspension	NP	PA; SP
Signifor LAR 60 mg intramuscular suspension	NP	PA; SP
Somatuline Depot 120 mg/0.5 mL subcutaneous syringe	NP	PA; SP
Somatuline Depot 60 mg/0.2 mL subcutaneous syringe	NP	PA; SP
Somatuline Depot 90 mg/0.3 mL subcutaneous syringe	NP	PA; SP
THYROID HORMONES - ANIMAL SOURCE (PORCINE)		

Drug Name	Tier	Drug Restriction
Armour Thyroid 120 mg tablet	P	MT
Armour Thyroid 15 mg tablet	P	MT
Armour Thyroid 180 mg tablet	P	
Armour Thyroid 240 mg tablet	P	
Armour Thyroid 30 mg tablet	P	MT
Armour Thyroid 300 mg tablet	P	
Armour Thyroid 60 mg tablet	P	MT
Armour Thyroid 90 mg tablet	P	MT
NP Thyroid 120 mg tablet	P	MT
NP Thyroid 15 mg tablet	P	MT
NP Thyroid 30 mg tablet	P	MT
NP Thyroid 60 mg tablet	P	MT
NP Thyroid 90 mg tablet	P	MT
thyroid (pork) 120 mg tablet	P	MT
thyroid (pork) 15 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
thyroid (pork) 30 mg tablet	P	MT
thyroid (pork) 60 mg tablet	P	MT
thyroid (pork) 90 mg tablet	P	MT
THYROID HORMONES - SYNTHETIC T3 (TRIIODOTHYRONINE)		
Cytomel 25 mcg tablet	NP	PA; MT
Cytomel 5 mcg tablet	NP	PA; MT
Cytomel 50 mcg tablet	NP	PA; MT
liothyronine 25 mcg tablet	P	MT
liothyronine 5 mcg tablet	P	MT
liothyronine 50 mcg tablet	P	MT
THYROID HORMONES - SYNTHETIC T4 (THYROXINE)		
Euthyrox 100 mcg tablet	P	MT
Euthyrox 112 mcg tablet	P	MT
Euthyrox 125 mcg tablet	P	MT
Euthyrox 137 mcg tablet	P	MT
Euthyrox 150 mcg tablet	P	MT
Euthyrox 175 mcg tablet	P	MT
Euthyrox 200 mcg tablet	P	MT
Euthyrox 25 mcg tablet	P	MT
Euthyrox 50 mcg tablet	P	MT
Euthyrox 75 mcg tablet	P	MT
Euthyrox 88 mcg tablet	P	MT
Levo-T 100 mcg tablet	P	MT
Levo-T 112 mcg tablet	P	MT
Levo-T 125 mcg tablet	P	MT
Levo-T 137 mcg tablet	P	MT
Levo-T 150 mcg tablet	P	MT
Levo-T 175 mcg tablet	P	MT
Levo-T 200 mcg tablet	P	MT
Levo-T 25 mcg tablet	P	MT
Levo-T 300 mcg tablet	P	MT

Drug Name	Tier	Drug Restriction
Levo-T 50 mcg tablet	P	MT
Levo-T 75 mcg tablet	P	MT
Levo-T 88 mcg tablet	P	MT
levothyroxine 100 mcg capsule	NP	PA
levothyroxine 100 mcg tablet	P	MT
levothyroxine 112 mcg capsule	NP	PA
levothyroxine 112 mcg tablet	P	MT
levothyroxine 125 mcg capsule	NP	PA
levothyroxine 125 mcg tablet	P	MT
levothyroxine 13 mcg capsule	NP	PA
levothyroxine 137 mcg capsule	NP	PA
levothyroxine 137 mcg tablet	P	MT
levothyroxine 150 mcg capsule	NP	PA
levothyroxine 150 mcg tablet	P	MT
levothyroxine 175 mcg capsule	NP	PA
levothyroxine 175 mcg tablet	P	MT
levothyroxine 200 mcg capsule	NP	PA
levothyroxine 200 mcg tablet	P	MT
levothyroxine 25 mcg capsule	NP	PA
levothyroxine 25 mcg tablet	P	MT
levothyroxine 300 mcg tablet	P	MT
levothyroxine 50 mcg capsule	NP	PA
levothyroxine 50 mcg tablet	P	MT
levothyroxine 75 mcg capsule	NP	PA
levothyroxine 75 mcg tablet	P	MT
levothyroxine 88 mcg capsule	NP	PA
levothyroxine 88 mcg tablet	P	MT
Levoxyl 100 mcg tablet	P	MT
Levoxyl 112 mcg tablet	P	MT
Levoxyl 125 mcg tablet	P	MT

Drug Name	Tier	Drug Restriction
Levoxyl 137 mcg tablet	P	MT
Levoxyl 150 mcg tablet	P	MT
Levoxyl 175 mcg tablet	P	MT
Levoxyl 200 mcg tablet	P	MT
Levoxyl 25 mcg tablet	P	MT
Levoxyl 50 mcg tablet	P	MT
Levoxyl 75 mcg tablet	P	MT
Levoxyl 88 mcg tablet	P	MT
Synthroid 100 mcg tablet	NP	PA; MT
Synthroid 112 mcg tablet	NP	PA; MT
Synthroid 125 mcg tablet	NP	PA; MT
Synthroid 137 mcg tablet	NP	PA; MT
Synthroid 150 mcg tablet	NP	PA; MT
Synthroid 175 mcg tablet	NP	PA; MT
Synthroid 200 mcg tablet	NP	PA; MT
Synthroid 25 mcg tablet	NP	PA; MT
Synthroid 300 mcg tablet	NP	PA; MT
Synthroid 50 mcg tablet	NP	PA; MT
Synthroid 75 mcg tablet	NP	PA; MT
Synthroid 88 mcg tablet	NP	PA; MT
Thyquidity 20 mcg/mL oral solution	NP	PA
Tirosint 100 mcg capsule	NP	PA
Tirosint 112 mcg capsule	NP	PA
Tirosint 125 mcg capsule	NP	PA
Tirosint 13 mcg capsule	NP	PA
Tirosint 137 mcg capsule	NP	PA
Tirosint 150 mcg capsule	NP	PA
Tirosint 175 mcg capsule	NP	PA
Tirosint 200 mcg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Tirosint 25 mcg capsule	NP	PA
Tirosint 50 mcg capsule	NP	PA
Tirosint 75 mcg capsule	NP	PA
Tirosint 88 mcg capsule	NP	PA
Tirosint-Sol 100 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 112 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 125 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 13 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 137 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 150 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 175 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 200 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 25 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 50 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 75 mcg/mL oral solution	NP	PA; MT
Tirosint-Sol 88 mcg/mL oral solution	NP	PA; MT
Unithroid 100 mcg tablet	P	MT
Unithroid 112 mcg tablet	P	MT
Unithroid 125 mcg tablet	P	MT
Unithroid 137 mcg tablet	P	MT
Unithroid 150 mcg tablet	P	MT
Unithroid 175 mcg tablet	P	MT
Unithroid 200 mcg tablet	P	MT
Unithroid 25 mcg tablet	P	MT
Unithroid 300 mcg tablet	P	MT

Drug Name	Tier	Drug Restriction
Unithroid 50 mcg tablet	P	MT
Unithroid 75 mcg tablet	P	MT
Unithroid 88 mcg tablet	P	MT
GASTROINTESTINAL THERAPY AGENTS		
ANTACID - ALUMINUM		
aluminum hydroxide gel 320 mg/5 mL oral suspension	P	
ANTACID - BICARBONATE		
sodium bicarbonate 325 mg tablet	P	
sodium bicarbonate 650 mg tablet	P	
ANTACID - CALCIUM		
Antacid (calcium carbonate) 200 mg calcium (500 mg) chewable tablet	P	
Antacid (calcium carbonate) 215 mg calcium (500 mg) chewable tablet	P	
Antacid Calcium 215 mg calcium (500 mg) chewable tablet	P	
Calcium Antacid 200 mg calcium (500 mg) chewable tablet	P	
calcium carbonate 200 mg calcium (500 mg) chewable tablet	P	
Cal-Gest Antacid 200 mg calcium (500 mg) chewable tablet	P	
Tame The Flame 195 mg calcium (500 mg) chewable tablet	P	
Tums 200 mg calcium (500 mg) chewable tablet	P	
Tums Freshers 200 mg calcium (500 mg) chewable tablet	P	
ANTACID - SIMETHICONE COMBINATIONS		
Advanced Antacid-Antigas 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Almacone 200 mg-200 mg-20 mg/5 mL oral suspension	P	
aluminum-mag hydroxide-simethicone 200 mg-200 mg-20 mg/5 mL oral susp	P	
Antacid 200 mg-200 mg-20 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Antacid Anti-Gas 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid Extra-Strength 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid Liquid 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid M 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid Plus Anti-Gas 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid Regular Strength 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid with Simethicone 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Antacid-Antigas 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Comfort Gel 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Flanax Antacid 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Geri-Lanta 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Geri-Mox Antacid-Antigas 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Liquid Antacid 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Mag-Al Plus 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Mi-Acid 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Mintox 200 mg-200 mg-20 mg/5 mL oral suspension	P	
Rulox 200 mg-200 mg-20 mg/5 mL oral suspension	P	
ANTIDIARRHEAL - ANTIPERISTALTIC AGENTS		
Anti-Diarrhea 2 mg tablet	P	QL(Allowed 8 per 1 day)
Anti-Diarrheal (loperamide) 1 mg/5 mL oral liquid	P	QL(Allowed 40 per 1 day)

Drug Name	Tier	Drug Restriction
Anti-Diarrheal (loperamide) 1 mg/7.5 mL oral liquid	P	QL(Allowed 60 per 1 day)
Anti-Diarrheal (loperamide) 2 mg capsule	P	QL(Allowed 8 per 1 day); Use Generic Products
Anti-Diarrheal (loperamide) 2 mg tablet	P	QL(Allowed 8 per 1 day)
Diamode 2 mg tablet	P	QL(Allowed 8 per 1 day)
loperamide 1 mg/5 mL oral liquid	P	QL(Allowed 40 per 1 day)
loperamide 1 mg/7.5 mL oral liquid	P	QL(Allowed 60 per 1 day)
loperamide 2 mg capsule	P	QL(Allowed 8 per 1 day)
loperamide 2 mg tablet	P	QL(Allowed 8 per 1 day)
paregoric 2 mg/5 mL oral liquid	P	
ANTIDIARRHEAL - BISMUTH AGENTS		
Bismatrol 262 mg chewable tablet	P	
Bismatrol 525 mg/15 mL oral suspension	P	
Bismuth 262 mg chewable tablet	P	
Bismuth Maximum Strength 525 mg/15 mL oral suspension	P	
bismuth subsalicylate 262 mg chewable tablet	P	
Diotame 262 mg chewable tablet	P	
Kaopectate Ex Str (bismuth ss) 525 mg/15 mL oral suspension	P	
Peptic Relief 262 mg chewable tablet	P	
Pepto-Bismol 262 mg chewable tablet	P	
Pepto-Bismol Max St 525 mg/15 mL oral suspension	P	
Pepto-Bismol To-Go 262 mg chewable tablet	P	
Pink Bismuth 262 mg chewable tablet	P	
Pink Bismuth 262 mg tablet	P	
Pink Bismuth 525 mg/15 mL oral suspension	P	
Pink Bismuth Maximum Strength 525 mg/15 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
Soothe (bismuth subsalicylate) 262 mg chewable tablet	P	
Stomach Relief 262 mg chewable tablet	P	
Stomach Relief 262 mg tablet	P	
Stomach Relief 525 mg/15 mL oral suspension	P	
Stomach Relief Max Strength 525 mg/15 mL oral suspension	P	
ANTIDIARRHEAL - TRYPTOPHAN HYDROXYLASE INHIBITOR		
Xermelo 250 mg tablet	NP	PA; SP
ANTIDIARRHEAL ANTIPERISTALTIC-ANTICHOLINERGIC COMBINATIONS		
diphenoxylate-atropine 2.5 mg-0.025 mg tablet	P	
diphenoxylate-atropine 2.5 mg-0.025 mg/5 mL oral liquid	P	
Lomotil 2.5 mg-0.025 mg tablet	P	Use Generic Products
ANTIEMETIC - ANTICHOLINERGICS		
scopolamine 1 mg over 3 days transdermal patch	P	
Transderm-Scop 1.5 mg transdermal patch (1 mg over 3 days)	P	
ANTIEMETIC - ANTIHISTAMINES		
meclizine 12.5 mg tablet	P	
meclizine 25 mg tablet	P	
ANTIEMETIC - ANTIHISTAMINE-VITAMIN COMBINATIONS		
Bonjesta 20 mg-20 mg tablet,immediate and delay release	NP	PA
Diclegis 10 mg-10 mg tablet,delayed release	NP	PA
doxylamine 10 mg-pyridoxine (vit B6) 10 mg tablet,delayed release	NP	PA
ANTIEMETIC - CANNABINOID TYPE		
dronabinol 10 mg capsule	NP	PA
dronabinol 2.5 mg capsule	NP	PA
dronabinol 5 mg capsule	NP	PA
Marinol 10 mg capsule	NP	PA
Marinol 2.5 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Marinol 5 mg capsule	NP	PA
ANTIEMETIC - DOPAMINE (D2)/5-HT3 ANTAGONISTS		
Tigan 300 mg capsule	NP	PA
trimethobenzamide 300 mg capsule	NP	PA
ANTIEMETIC - PHENOTHIAZINES		
Compro 25 mg rectal suppository	P	
Phenadoz 12.5 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Phenadoz 25 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 12.5 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 25 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 50 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx)
prochlorperazine 25 mg rectal suppository	P	
prochlorperazine maleate 10 mg tablet	P	MT
prochlorperazine maleate 5 mg tablet	P	MT
promethazine 12.5 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx)
promethazine 25 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx)
promethazine 50 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx)
Promethegan 12.5 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Promethegan 25 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx); Use Generic Products
Promethegan 50 mg rectal suppository	P	AL(Minimum Age 2 Years); QL(Allowed 12 per Rx)
ANTIEMETIC - SELECTIVE SEROTONIN 5-HT3 ANTAGONISTS		
Anzemet 100 mg tablet	NP	PA
Anzemet 50 mg tablet	NP	PA
granisetron HCl 1 mg tablet	NP	PA
ondansetron 4 mg disintegrating tablet	P	QL(Allowed 20 per Rx)
ondansetron 8 mg disintegrating tablet	P	QL(Allowed 20 per Rx)
ondansetron HCl 4 mg tablet	P	QL(Allowed 20 per Rx)

Drug Name	Tier	Drug Restriction
ondansetron HCl 4 mg/5 mL oral solution	P	QL(Allowed 50 per Rx)
ondansetron HCl 8 mg tablet	P	QL(Allowed 20 per Rx)
Sancuso 3.1 mg/24 hour transdermal patch	NP	PA
Zofran 4 mg tablet	NP	PA; QL(Allowed 20 per Rx)
Zofran 8 mg tablet	NP	PA; QL(Allowed 20 per Rx)
Zuplenz 4 mg oral soluble film	NP	PA
Zuplenz 8 mg oral soluble film	NP	PA
ANTIEMETIC - SUBSTANCE P-NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant 125 mg (1)-80 mg (2) capsules in a dose pack	P	
aprepitant 125 mg capsule	P	
aprepitant 40 mg capsule	P	
aprepitant 80 mg capsule	P	
Emend 125 mg (1)-80 mg (2) capsules in a dose pack	NP	PA
Emend 125 mg (25 mg/mL final conc.) oral suspension	NP	PA
Emend 80 mg capsule	NP	PA
Varubi 90 mg tablet	NP	PA
ANTIEMETIC - SUBSTANCE P-NEUROKININ 1 AND 5-HT3 RECEPT ANTAGONIST COMB		
Akynzeo (netupitant) 300 mg-0.5 mg capsule	NP	PA
BILE ACIDS		
Cholbam 250 mg capsule	NP	PA; QL(Allowed 5 per 1 day); SP
Cholbam 50 mg capsule	NP	PA; QL(Allowed 5 per 1 day); SP
CHRONIC IDIOPATHIC CONST. AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
Linzess 145 mcg capsule	NP	PA
Linzess 290 mcg capsule	NP	PA
Linzess 72 mcg capsule	NP	PA
Trulance 3 mg tablet	NP	PA
COLONIC ACIDIFIER (AMMONIA INHIBITOR)		
Enulose 10 gram/15 mL oral solution	P	

Drug Name	Tier	Drug Restriction
Generlac 10 gram/15 mL oral solution	P	
lactulose 10 gram/15 mL (15 mL) oral solution	P	
DIGESTIVE ENZYME MIXTURES		
Creon 12,000-38,000-60,000 unit capsule,delayed release	P	
Creon 24,000-76,000-120,000 unit capsule,delayed release	P	
Creon 3,000 unit-9,500 unit-15,000 unit capsule,delayed release	P	
Creon 36,000 unit-114,000 unit-180,000 unit capsule,delayed release	P	
Creon 6,000-19,000-30,000 unit capsule,delayed release	P	
Pancreaze 10,500 unit-35,500 unit-61,500 unit capsule,delayed release	P	
Pancreaze 16,800 unit-56,800 unit-98,400 unit capsule,delayed release	P	
Pancreaze 2,600 unit-6,200 unit-10,850 unit capsule,delayed release	P	
Pancreaze 21,000 unit-54,700 unit-83,900 unit capsule,delayed release	P	
Pancreaze 4,200 unit-14,200 unit-24,600 unit capsule,delayed release	P	
Pertzye 16,000 unit-57,500 unit-60,500 unit capsule,delayed release	NP	PA
Pertzye 24,000-86,250-90,750 unit capsule,delayed release	NP	PA
Pertzye 4,000 unit-14,375 unit-15,125 unit capsule,delayed release	NP	PA
Pertzye 8,000 unit-28,750 unit-30,250 unit capsule,delayed release	NP	PA

Drug Name	Tier	Drug Restriction
Viokace 10,440 unit-39,150 unit-39,150 unit tablet	NP	PA
Viokace 20,880 unit-78,300 unit-78,300 unit tablet	NP	PA
Zenpep 10,000 unit-32,000 unit-42,000 unit capsule,delayed release	P	
Zenpep 15,000 unit-47,000 unit-63,000 unit capsule,delayed release	P	
Zenpep 20,000 unit-63,000 unit-84,000 unit capsule,delayed release	P	
Zenpep 25,000 unit-79,000 unit-105,000 unit capsule,delayed release	P	
Zenpep 3,000 unit-10,000 unit-14,000 unit capsule,delayed release	P	
Zenpep 40,000 unit-126,000 unit-168,000 unit capsule,delayed release	P	
Zenpep 5,000 unit-17,000 unit-24,000 unit capsule,delayed release	P	
GALLSTONE SOLUBILIZING (LITHOLYSIS) AGENTS		
Actigall 300 mg capsule	NP	PA; QL(Allowed 3 per 1 day)
Chenodal 250 mg tablet	NP	PA; SP
Reltone 200 mg capsule	NP	PA
Reltone 400 mg capsule	NP	PA
URSO 250 250 mg tablet	NP	PA; QL(Allowed 7 per 1 day)
URSO Forte 500 mg tablet	NP	PA
ursodiol 250 mg tablet	NP	PA; QL(Allowed 7 per 1 day)
ursodiol 300 mg capsule	P	QL(Allowed 3 per 1 day)
ursodiol 500 mg tablet	NP	PA
GASTRIC ACID SECRETION REDUCERS - HISTAMINE H2-RECEPTOR ANTAGONISTS		
cimetidine 200 mg tablet	P	
cimetidine 300 mg tablet	P	

Drug Name	Tier	Drug Restriction
cimetidine 300 mg/5 mL oral solution	P	QL(Allowed 27 per 1 day)
cimetidine 400 mg tablet	P	
cimetidine 800 mg tablet	P	
famotidine 20 mg tablet	P	
famotidine 40 mg tablet	P	
famotidine 40 mg/5 mL (8 mg/mL) oral suspension	P	
nizatidine 150 mg capsule	P	
nizatidine 150 mg/10 mL oral solution	P	
nizatidine 300 mg capsule	P	
Pepcid 20 mg tablet	NP	PA
Pepcid 40 mg tablet	NP	PA
ranitidine 15 mg/mL oral syrup	NP	PA; QL(Allowed 40 per 1 day)
ranitidine 150 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
ranitidine 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
ranitidine 300 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
ranitidine 300 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
GASTRIC ACID SECRETION REDUCING AGENTS - PROTON PUMP INHIBITORS (PPIS)		
AcipHex 20 mg tablet,delayed release	NP	PA
AcipHex Sprinkle 10 mg capsule,delayed release	NP	PA
AcipHex Sprinkle 5 mg capsule,delayed release	NP	PA
Dexilant 30 mg capsule, delayed release	NP	ST
Dexilant 60 mg capsule, delayed release	NP	ST
esomeprazole magnesium 20 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
esomeprazole magnesium 40 mg capsule,delayed release	NP	PA
esomeprazole magnesium DR 10 mg granules delayed release for susp	NP	PA

Drug Name	Tier	Drug Restriction
esomeprazole magnesium DR 20 mg granules delayed release for susp	NP	PA
esomeprazole magnesium DR 40 mg granules delayed release for susp	NP	PA
lansoprazole 15 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
lansoprazole 15 mg delayed release,disintegrating tablet	P	
lansoprazole 30 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
lansoprazole 30 mg delayed release,disintegrating tablet	P	
Nexium 20 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
Nexium 40 mg capsule,delayed release	NP	PA
Nexium Packet 10 mg granules delayed release for susp	NP	PA
Nexium Packet 2.5 mg granules delayed release for susp	NP	PA
Nexium Packet 20 mg granules delayed release for susp	NP	PA
Nexium Packet 40 mg granules delayed release for susp	NP	PA
Nexium Packet 5 mg granules delayed release for susp	NP	PA
omeprazole 10 mg capsule,delayed release	P	QL(Allowed 2 per 1 day)
omeprazole 20 mg capsule,delayed release	P	QL(Allowed 2 per 1 day)
omeprazole 40 mg capsule,delayed release	P	QL(Allowed 2 per 1 day)
pantoprazole 20 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
pantoprazole 40 mg tablet,delayed release	P	QL(Allowed 2 per 1 day)
pantoprazole DR 40 mg granules delayed-release for susp in packet	NP	PA

Drug Name	Tier	Drug Restriction
Prevacid 15 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
Prevacid 30 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
Prevacid SoluTab 15 mg delayed release,disintegrating tablet	NP	PA
Prevacid SoluTab 30 mg delayed release,disintegrating tablet	NP	PA
Prilosec 10 mg oral suspension,delayed release	NP	PA
Prilosec 2.5 mg oral suspension,delayed release	NP	PA
Protonix 20 mg tablet,delayed release	NP	PA; QL(Allowed 1 per 1 day)
Protonix 40 mg granules delayed-release packet	NP	PA
Protonix 40 mg tablet,delayed release	NP	PA; QL(Allowed 2 per 1 day)
rabeprazole 20 mg tablet,delayed release	NP	PA
GASTRIC ACID SECRETION REDUCING-PROTON PUMP INHIBITOR AND ANTACID COMB		
omeprazole 20 mg-sodium bicarbonate 1,680 mg oral packet	NP	PA
omeprazole 20 mg-sodium bicarbonate 1.1 gram capsule	NP	PA
omeprazole 40 mg-sodium bicarbonate 1,680 mg oral packet	NP	PA
omeprazole 40 mg-sodium bicarbonate 1.1 gram capsule	NP	PA
Zegerid 20 mg-1,680 mg oral packet	NP	PA
Zegerid 20 mg-1.1 gram capsule	NP	PA
Zegerid 40 mg-1,680 mg oral packet	NP	PA
Zegerid 40 mg-1.1 gram capsule	NP	PA
GASTRIC MUCOSA - CYTOPROTECTIVE PROSTAGLANDIN ANALOGS		
Cytotec 100 mcg tablet	NP	PA
Cytotec 200 mcg tablet	NP	PA
misoprostol 100 mcg tablet	P	
misoprostol 200 mcg tablet	P	

Drug Name	Tier	Drug Restriction
GASTROINTESTINAL - PROKINETIC AGENTS - 5-HT4 RECEPTOR AGONISTS		
Motegrity 1 mg tablet	NP	PA
Motegrity 2 mg tablet	NP	PA
GASTROINTESTINAL ANTIFLATULENTS		
Gas Relief (simethicone) 40 mg/0.6 mL oral drops,suspension	P	
Gas Relief (simethicone) 80 mg chewable tablet	P	
Gas Relief 80 (simethicone) 80 mg chewable tablet	P	
Infants Gas Relief 40 mg/0.6 mL oral drops,suspension	P	
Infants' Mylicon 40 mg/0.6 mL oral drops,suspension	P	
Little Remedies Gas Relief 40 mg/0.6 mL oral drops,suspension	P	
Little Tummys Gas Relief 40 mg/0.6 mL oral drops,suspension	P	
Mi-Acid Gas Relief (simethicone) 80 mg chewable tablet	P	
Mytab Gas (simethicone) 80 mg chewable tablet	P	
simethicone 40 mg/0.6 mL oral drops,suspension	P	
simethicone 80 mg chewable tablet	P	
GASTROINTESTINAL PROKINETIC AGENTS - D2 ANTAGONIST/5-HT4 AGONISTS		
metoclopramide 10 mg disintegrating tablet	NP	PA
metoclopramide 10 mg tablet	P	
metoclopramide 5 mg disintegrating tablet	NP	PA
metoclopramide 5 mg tablet	P	
metoclopramide 5 mg/5 mL oral solution	P	
Reglan 10 mg tablet	NP	PA
Reglan 5 mg tablet	NP	PA
GI ANTISPASMODIC - BELLADONNA ALKALOIDS		
Anaspaz 0.125 mg disintegrating tablet	NP	PA
Ed-Spaz 0.125 mg disintegrating tablet	P	

Drug Name	Tier	Drug Restriction
hyoscyamine 0.125 mg disintegrating tablet	P	
hyoscyamine 0.125 mg sublingual tablet	P	
hyoscyamine 0.125 mg/5 mL oral elixir	P	
hyoscyamine 0.125 mg/mL oral drops	P	
hyoscyamine sulfate 0.125 mg tablet	P	
Levsin 0.125 mg tablet	NP	PA
Levsin/SL 0.125 mg sublingual tablet	NP	PA
methscopolamine 2.5 mg tablet	NP	PA
methscopolamine 5 mg tablet	NP	PA
NuLev 0.125 mg disintegrating tablet	P	
Oscimin 0.125 mg disintegrating tablet	P	
Oscimin 0.125 mg tablet	P	
Oscimin SL 0.125 mg sublingual tablet	P	
Oscimin SR 0.375 mg tablet,extended release	P	QL(Allowed 4 per 1 day)
GI ANTISPASMODIC - QUATERNARY AMMONIUM COMPOUNDS		
Glycate 1.5 mg tablet	NP	PA
glycopyrrolate 1 mg tablet	P	QL(Allowed 4 per 1 day)
glycopyrrolate 2 mg tablet	P	QL(Allowed 4 per 1 day)
propantheline 15 mg tablet	P	
GI ANTISPASMODIC - SYNTHETIC TERTIARY AMINES		
dicyclomine 10 mg capsule	P	
dicyclomine 10 mg/5 mL oral solution	P	QL(Allowed 40 per 1 day)
dicyclomine 20 mg tablet	P	
GI ANTISPASMODIC AND BENZODIAZEPINE COMBINATIONS		
chlordiazepoxide-clidinium 5 mg-2.5 mg capsule	NP	PA
Librax (with clidinium) 5 mg-2.5 mg capsule	NP	PA
GI ANTISPASMODIC COMBINATIONS OTHER		
belladonna alkaloids-opium 16.2 mg-30 mg rectal suppository	P	APA

Drug Name	Tier	Drug Restriction
belladonna alkaloids-opium 16.2 mg-60 mg rectal suppository	P	APA
INFLAMMATORY BOWEL AGENT - INTERLEUKIN-12 AND IL-23 INHIBITORS, MC AB		
Stelara 130 mg/26 mL intravenous solution	NP	PA; SP
INFLAMMATORY BOWEL AGENT - AMINOSALICYLATES AND RELATED AGENTS		
Apriso 0.375 gram capsule,extended release	NP	PA
Asacol HD 800 mg tablet,delayed release	NP	PA; QL(Allowed 3 per 1 day)
Azulfidine 500 mg tablet	NP	PA
Azulfidine EN-tabs 500 mg tablet,delayed release	NP	PA
balsalazide 750 mg capsule	P	QL(Allowed 9 per 1 day)
Canasa 1,000 mg rectal suppository	NP	PA
Colazal 750 mg capsule	NP	PA; QL(Allowed 9 per 1 day)
Delzicol 400 mg capsule (DR tablets inside)	NP	PA
Dipentum 250 mg capsule	NP	PA
Lialda 1.2 gram tablet,delayed release	NP	PA
mesalamine 1,000 mg rectal suppository	P	
mesalamine 1.2 gram tablet,delayed release	NP	PA
mesalamine 4 gram/60 mL enema	P	QL(Allowed 60 per 1 day)
mesalamine 400 mg capsule (with delayed release tablets inside)	NP	PA
mesalamine 800 mg tablet,delayed release	NP	PA; QL(Allowed 3 per 1 day)
mesalamine ER 0.375 gram capsule,extended release 24 hr	NP	PA
mesalamine rectal susp enema with cleansing wipes 4 gram/60 mL kit	NP	PA
Pentasa 250 mg capsule,controlled release	P	
Pentasa 500 mg capsule,controlled release	P	
Rowasa rectal suspension enema 4 gram/60 mL kit	NP	PA

Drug Name	Tier	Drug Restriction
sfRowasa 4 gram/60 mL enema	P	
sulfasalazine 500 mg tablet	P	
sulfasalazine 500 mg tablet,delayed release	P	
INFLAMMATORY BOWEL AGENT - GLUCOCORTICOIDS		
budesonide DR - ER 3 mg capsule,delayed,extended release	NP	PA
budesonide DR-ER 9 mg tablet,delayed and extended release	NP	PA
Cortenema 100 mg/60 mL	NP	PA; QL(Allowed 420 per Rx)
Cortifoam 10 % (80 mg) rectal	NP	PA
Entocort EC 3 mg capsule,delayed,extended release	NP	PA
hydrocortisone 100 mg/60 mL enema	P	QL(Allowed 420 per Rx)
Ortikos 6 mg capsule,extended release	NP	PA
Ortikos 9 mg capsule,extended release	NP	PA
Uceris 2 mg/actuation rectal foam	NP	PA
Uceris 9 mg tablet, extended release	NP	PA
INFLAMMATORY BOWEL AGENT - INTEGRIN RECEPTOR ANTAGONIST, MC ANTIBODY		
Entyvio 300 mg intravenous solution	NP	PA; SP
INFLAMMATORY BOWEL AGENT - JANUS KINASE (JAK) INHIBITORS		
Xeljanz 10 mg tablet	P	PA; SP
Xeljanz XR 22 mg tablet,extended release	P	PA; SP
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
alosetron 0.5 mg tablet	NP	PA
alosetron 1 mg tablet	NP	PA
Amitiza 24 mcg capsule	NP	PA
Amitiza 8 mcg capsule	NP	PA
Lotronex 0.5 mg tablet	NP	PA
Lotronex 1 mg tablet	NP	PA
lubiprostone 24 mcg capsule	NP	PA
lubiprostone 8 mcg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Viberzi 100 mg tablet	NP	PA
Viberzi 75 mg tablet	NP	PA
Zelnorm 6 mg tablet	NP	PA
LAXATIVE - BULK FORMING		
calcium polycarbophil 625 mg tablet	P	QL(Allowed 10 per 1 day)
Daily Fiber (psyllium-sucrose) 3.4 gram/7 gram oral powder	P	
Daily Fiber 0.52 gram capsule	P	
Fiber (calcium polycarbophil) 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber (psyllium husk) 0.52 gram capsule	P	
Fiber (psyllium husk-sugar) 3.4 gram/11 gram oral powder	P	
Fiber (psyllium husk-sugar) 3.4 gram/12 gram oral powder	P	
Fiber (psyllium husk-sugar) 3.4 gram/7 gram oral powder	P	

Drug Name	Tier	Drug Restriction
Fiber (with aspartame) 3.4 gram/5.8 gram oral powder	P	
Fiber Laxative (calcium polycarbophil) 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber Laxative (psyllium husk) 0.52 gram capsule	P	
fiber oral powder	P	
Fiber Smooth (with sucrose) oral powder	P	
Fiber Smooth oral powder	P	
Fiber Therapy (ca polycarbophil) 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber Therapy (psyllium husk-sucrose) 3 gram/12 gram oral powder	P	
Fiber Therapy (psyllium seed) 3.4 gram/5.8 gram oral powder	P	
Fiber Therapy Laxative (psyllium husk) 0.52 gram capsule	P	

Drug Name	Tier	Drug Restriction
Fiber-Caps (ca polycarbophil) 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber-Caps (psyllium husk) 0.52 gram capsule	P	
FiberCon 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber-Lax 625 mg tablet	P	QL(Allowed 10 per 1 day)
Fiber-Tabs 625 mg tablet	P	QL(Allowed 10 per 1 day)
Konsyl (sugar) 3.4 gram/11 gram oral powder	P	
Konsyl (sugar) 3.4 gram/12 gram oral powder	P	
Konsyl Fiber 625 mg tablet	P	QL(Allowed 10 per 1 day)
Konsyl Sugar-Free 0.52 gram capsule	P	
Metamucil (sugar) oral powder	P	
Metamucil (with sugar) 3.4 gram/12 gram oral powder	P	
Metamucil (with sugar) 3.4 gram/7 gram oral powder	P	
Metamucil 0.52 gram capsule	P	
Metamucil MultiHealth Fiber 3.4 gram/5.8 gram oral powder	P	
Metamucil Sugar-Free (aspartame) 3.4 gram/5.8 gram oral powder	P	
Multihealth Fiber (sugar) 3.4 gram/7 gram oral powder	P	
Multihealth Fiber 3.4 gram/5.8 gram oral powder	P	
Natural Daily Fiber 3.4 gram/5.8 gram oral powder	P	
Natural Fiber Laxative (aspartame) 3.4 gram/5.8 gram oral powder	P	
Natural Fiber Laxative (aspartame) oral powder	P	
Natural Fiber Laxative (sugar) 3.4 gram/12 gram oral powder	P	
Natural Fiber Laxative (sugar) 3.4 gram/7 gram oral powder	P	

Drug Name	Tier	Drug Restriction
Natural Fiber Laxative (sugar) oral powder	P	
Natural Fiber Laxative 0.52 gram capsule	P	
Natural Fiber Laxative Therapy oral powder	P	
Natural Psyllium Fiber 3.4 gram/5.8 gram oral powder	P	
psyllium husk 0.52 gram capsule	P	
Reguloid (aspartame) 3 gram/5.8 gram oral powder	P	
Reguloid (psyllium husk) 0.52 gram capsule	P	
Reguloid (psyllium husk-sucrose) 3 gram/12 gram oral powder	P	
Reguloid (psyllium husk-sucrose) 3 gram/7 gram oral powder	P	
Reguloid (psyllium husk-sucrose) 3.4 gram/12 gram oral powder	P	
Reguloid (psyllium husk-sucrose) 3.4 gram/7 gram oral powder	P	
Reguloid, Sugar Free oral powder	P	
Wal-Mucil Fiber (aspartame) 3.4 gram/5.8 gram oral powder	P	
Wal-Mucil Fiber (sugar) 3.4 gram/7 gram oral powder	P	
Wal-Mucil Fiber 0.52 gram capsule	P	
Wal-Mucil Natural Fiber Laxative 3.4 gram/12 gram oral powder	P	
LAXATIVE - LUBRICANT		
mineral oil enema	P	
LAXATIVE - SALINE AND OSMOTIC		
Citrate of Magnesia oral	P	
Citroma oral solution	P	
ClearLax 17 gram oral powder packet	P	Use Generic Products
ClearLax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day); Use Generic Products

Drug Name	Tier	Drug Restriction
Constulose 10 gram/15 mL oral solution	P	Use Generic Products
Fleet Glycerin (Adult) rectal suppository	P	
Gavilax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
GentleLax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day); Use Generic Products
glycerin (adult) rectal suppository	P	
GlycoLax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day); Use Generic Products
HealthyLax 17 gram oral powder packet	P	
lactulose 10 gram/15 mL oral solution	P	
lactulose 20 gram/30 mL oral solution	P	
LaxaClear 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
Laxative PEG 3350 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
magnesium citrate oral solution	P	
magnesium hydroxide 400 mg/5 mL oral suspension	P	
Milk of Magnesia 400 mg/5 mL oral suspension	P	
Miralax 17 gram oral powder packet	P	Use Generic Products
Miralax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day); Use Generic Products
Natura-LAX 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
Phillips Milk of Magnesia 400 mg/5 mL oral suspension	P	
polyethylene glycol 3350 17 gram oral powder packet	P	
polyethylene glycol 3350 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
Powderlax 17 gram oral powder packet	P	
Powderlax 17 gram/dose oral	P	QL(Allowed 34 per 1 day)
Purelax 17 gram oral powder packet	P	Use Generic Products
Purelax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day); Use Generic Products

Drug Name	Tier	Drug Restriction
Sani-Supp (Adult) rectal	P	
SmoothLax 17 gram oral powder packet	P	
SmoothLax 17 gram/dose oral powder	P	QL(Allowed 34 per 1 day)
Suppository Adult rectal	P	
LAXATIVE - SALINE/OSMOTIC MIXTURES		
Colyte with Flavor Packs 240 gram-22.72 g-6.72 g-5.84 g oral solution	P	QL(Allowed 4000 per Rx)
Enema 19 gram-7 gram/118 mL	P	
Enema Disposable 19 gram-7 gram/118 mL	P	
Fleet Enema 19 gram-7 gram/118 mL	P	
Fleet Pediatric 9.5 gram-3.5 gram/59 mL enema	P	
Gavilyte-C 240 gram-22.72 gram-6.72 gram-5.84 gram oral solution	P	QL(Allowed 4000 per Rx)
GaviLyte-G 236 gram-22.74 gram-6.74 gram-5.86 gram oral solution	P	QL(Allowed 4000 per Rx); Use Generic Products
GaviLyte-N 420 gram oral solution	P	QL(Allowed 4000 per Rx); Use Generic Products
Golytely 236 gram-22.74 gram-6.74 gram-5.86 gram oral solution	P	QL(Allowed 4000 per Rx); Use Generic Products
NuLYTELY with Flavor Packs 420 gram oral solution	P	QL(Allowed 4000 per Rx); Use Generic Products
Pediatric Enema 9.5 gram-3.5 gram/59 mL	P	
peg 3350 240 gram-electrolytes 22.72 gram-6.72 g-5.84 g powdr for soln	P	QL(Allowed 4000 per Rx)
peg 3350-electrolytes 236 gram-22.74 gram-6.74 gram-5.86 gram solution	P	QL(Allowed 4000 per Rx)
peg-electrolyte solution 420 gram oral solution	P	QL(Allowed 4000 per Rx)
Pure and Gentle Disposable 19 gram-7 gram/118 mL enema	P	
Ready-To-Use Enema 19 gram-7 gram/118 mL	P	
TriLyte With Flavor Packets 420 gram oral solution	P	QL(Allowed 4000 per Rx); Use Generic Products
LAXATIVE - STIMULANT		

Drug Name	Tier	Drug Restriction
Alophen (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Bisac-Evac 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
bisacodyl 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
bisacodyl 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Bisa-Lax (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Biscolax 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
castor oil 100 % oral	P	
Correctol 5 mg tablet	P	QL(Allowed 1 per 1 day)
Ducodyl (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Dulcolax (bisacodyl) 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
Dulcolax (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Evac-U-Gen (sennosides) 8.6 mg tablet	P	
Fleet Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Gentle Laxative (bisacodyl) 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
Gentle Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Geri-kot 8.6 mg tablet	P	
Laxative (bisacodyl) 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
Laxative (bisacodyl) 5 mg tablet	P	QL(Allowed 1 per 1 day)
Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Laxative Feminine 5 mg tablet	P	QL(Allowed 1 per 1 day)
Natural Vegetable Laxative (sennosides) 8.6 mg tablet	P	
Senexon 8.6 mg tablet	P	

Drug Name	Tier	Drug Restriction
senna 8.6 mg tablet	P	
senna 8.8 mg/5 mL oral syrup	P	
Senna Lax 8.6 mg tablet	P	
Senna Laxative 8.6 mg tablet	P	
Senno 8.6 mg tablet	P	
Senokot 8.6 mg tablet	P	
The Magic Bullet 10 mg rectal suppository	P	QL(Allowed 12 per Rx)
Vegetable Laxative 8.6 mg tablet	P	
Woman's Laxative (bisacodyl) 5 mg tablet	P	QL(Allowed 1 per 1 day)
Woman's Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Women's Gentle Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
Women's Laxative (bisacodyl) 5 mg tablet	P	QL(Allowed 1 per 1 day)
Women's Laxative (bisacodyl) 5 mg tablet,delayed release	P	QL(Allowed 1 per 1 day)
LAXATIVE - STIMULANT AND SURFACTANT COMBINATIONS		
Colace 2-In-1 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Doc-Q-Lax 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Docuzen 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
DOK Plus 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Laxacin 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Laxative Plus Stool Softener 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
P-COL RITE 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
PERI-COLACE 8.6 mg-50 mg tablet	P	
Senexon-S 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Senna Laxative-Stool Softener 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Senna Plus 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
Senna with Docusate Sodium 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Sennalax-S 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Senna-S 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Senna-Time S 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
sennosides 8.6 mg-docusate sodium 50 mg tablet	P	QL(Allowed 4 per 1 day)
Senokot-S 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Stimulant Laxative Plus 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Stool Softener-Laxative 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Stool Softener-Stimulant Laxative 8.6 mg-50 mg tablet	P	QL(Allowed 4 per 1 day)
Vegetable Laxative-Stool Softener 8.6 mg-50 mg tablet	P	
LAXATIVE - SURFACTANT		
Colace 100 mg capsule	P	QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
Col-Rite 100 mg capsule	P	QL(Allowed 3 per 1 day)
Col-Rite 250 mg capsule	P	QL(Allowed 3 per 1 day)
Diocto 50 mg/5 mL oral liquid	P	
Diocto 60 mg/15 mL oral syrup	P	
Doc-Q-Lace 100 mg capsule	P	QL(Allowed 3 per 1 day)
Docu 50 mg/5 mL oral liquid	P	
Docuprene 100 mg tablet	P	QL(Allowed 3 per 1 day)
docusate sodium 100 mg capsule	P	QL(Allowed 3 per 1 day)
docusate sodium 100 mg tablet	P	QL(Allowed 3 per 1 day)
docusate sodium 250 mg capsule	P	QL(Allowed 3 per 1 day)
docusate sodium 50 mg/5 mL oral liquid	P	
Docusil 100 mg capsule	P	QL(Allowed 3 per 1 day)
DOK 100 mg capsule	P	QL(Allowed 3 per 1 day)
DOK 100 mg tablet	P	QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
DOK 250 mg capsule	P	QL(Allowed 3 per 1 day)
DSS 250 mg capsule	P	QL(Allowed 3 per 1 day)
DulcoEase 100 mg capsule	P	QL(Allowed 3 per 1 day)
Dulcolax Stool Softener (docusate) 100 mg capsule	P	QL(Allowed 3 per 1 day)
Laxa Basic 100 mg capsule	P	QL(Allowed 3 per 1 day)
Move It Along 100 mg tablet	P	QL(Allowed 3 per 1 day)
Phillips' Liqui-Gels 100 mg capsule	P	QL(Allowed 3 per 1 day)
Promolaxin 100 mg tablet	P	QL(Allowed 3 per 1 day)
Silace 50 mg/5 mL oral liquid	P	
Silace 60 mg/15 mL oral syrup	P	
Sof-Lax 100 mg capsule	P	QL(Allowed 3 per 1 day)
Stool Softener 100 mg capsule	P	QL(Allowed 3 per 1 day)
Stool Softener 100 mg tablet	P	QL(Allowed 3 per 1 day)
Stool Softener 250 mg capsule	P	QL(Allowed 3 per 1 day)
Stool Softener 50 mg/5 mL oral liquid	P	
Stool Softener 60 mg/15 mL oral syrup	P	
PEPTIC ULCER - GASTRIC LUMEN ADHERENT CYTOPROTECTIVES		
Carafate 1 gram tablet	NP	PA; QL(Allowed 4 per 1 day)
Carafate 100 mg/mL oral suspension	P	
sucralfate 1 gram tablet	P	QL(Allowed 4 per 1 day)
sucralfate 100 mg/mL oral suspension	P	
PEPTIC ULCER - TREATMENT OF H. PYLORI: ANTIBIOTIC-BISMUTH COMBINATIONS		
Helidac 250 mg-500 mg-262.4 mg oral pack	NP	PA
Pylera 140 mg-125 mg-125 mg capsule	NP	PA
PEPTIC ULCER-TREATMENT H. PYLORI-PROTON PUMP INHIBITOR AND ANTIBIOTICS		
amoxicillin 500 mg-clarithromycin 500 mg-lansoprazole 30 mg combo pack	NP	PA
Omeclamox-Pak 20 mg-500 mg-500 mg (40) oral pack	NP	PA

Drug Name	Tier	Drug Restriction
Talicia 10 mg-250 mg-12.5 mg capsule,immediate - delay release	NP	PA
SHORT BOWEL SYNDROME (SBS) - GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOG		
Gattex 30-Vial 5 mg subcutaneous kit	NP	PA; SP
Gattex One-Vial 5 mg subcutaneous kit	NP	PA; SP
GENITOURINARY THERAPY		
BPH AGENT- 5-ALPHA REDUCTASE INHIB AND ALPHA-1 ADRENOCEPTOR ANTAG COMB		
dutasteride 0.5 mg-tamsulosin ER 0.4 mg capsule ext.release 24hr mphas	NP	PA; MT
Jalyn 0.5 mg-0.4 mg capsule, extended release	NP	PA; MT
CYSTINOSIS THERAPY (CYSTINE DEPLETING AGENTS)		
Cystagon 150 mg capsule	P	SP
Cystagon 50 mg capsule	P	SP
Procysbi 25 mg capsule,delayed release sprinkle	NP	PA; SP
Procysbi 300 mg oral DR granules in packet	NP	PA; SP
Procysbi 75 mg capsule,delayed release sprinkle	NP	PA; SP
Procysbi 75 mg oral DR granules in packet	NP	PA; SP
INTERSTITIAL CYSTITIS AGENTS		
Elmiron 100 mg capsule	NP	PA; QL(Allowed 3 per 1 day)
KIDNEY STONE AGENTS		
Thiola 100 mg tablet	NP	PA; SP
Thiola EC 100 mg tablet,delayed release	NP	PA; SP
Thiola EC 300 mg tablet,delayed release	NP	PA; SP
OVERACTIVE BLADDER AGENTS - BETA -3 ADRENERGIC RECEPTOR AGONIST		
Gemtesa 75 mg tablet	NP	PA
Myrbetriq 25 mg tablet,extended release	NP	PA
Myrbetriq 50 mg tablet,extended release	NP	PA
PHOSPHATE BINDERS		
Auryxia 210 mg iron tablet	NP	PA

Drug Name	Tier	Drug Restriction
calcium acetate(phosphate binders) 667 mg capsule	P	
calcium acetate(phosphate binders) 667 mg tablet	P	
Fosrenol 1,000 mg chewable tablet	NP	PA
Fosrenol 1,000 mg oral powder packet	P	
Fosrenol 500 mg chewable tablet	NP	PA
Fosrenol 750 mg chewable tablet	NP	PA
Fosrenol 750 mg oral powder packet	P	
lanthanum 1,000 mg chewable tablet	P	
lanthanum 500 mg chewable tablet	P	
lanthanum 750 mg chewable tablet	P	
Phoslyra 667 mg (169 mg calcium)/5 mL oral solution	NP	PA
Renagel 800 mg tablet	NP	PA
Renvela 0.8 gram oral powder packet	NP	PA
Renvela 2.4 gram oral powder packet	NP	PA
Renvela 800 mg tablet	NP	PA
sevelamer carbonate 0.8 gram oral powder packet	NP	PA
sevelamer carbonate 2.4 gram oral powder packet	NP	PA
sevelamer carbonate 800 mg tablet	P	
sevelamer HCl 400 mg tablet	P	
sevelamer HCl 800 mg tablet	P	
Velphoro 500 mg chewable tablet	NP	PA
POLYCYSTIC KIDNEY DISEASE - VASOPRESSIN V2 RECEPTOR ANTAGONISTS		
Jynarque 15 mg (AM)/15 mg (PM) tablets	NP	PA; SP
Jynarque 15 mg tablet	NP	PA; SP
Jynarque 30 mg (AM)/15 mg (PM) tablets	NP	PA; SP
Jynarque 30 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Jynarque 45 mg (AM)/15 mg (PM) tablets	NP	PA; SP
Jynarque 60 mg (AM)/30 mg (PM) tablets	NP	PA; SP
Jynarque 90 mg (AM)/30 mg (PM) tablets	NP	PA; SP
PROSTATIC HYPERTROPHY AGENT - ALPHA-1-ADRENOCEPTOR ANTAGONISTS		
alfuzosin ER 10 mg tablet,extended release 24 hr	P	MT
Flomax 0.4 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Rapaflo 4 mg capsule	NP	PA; MT
Rapaflo 8 mg capsule	NP	PA; MT
silodosin 4 mg capsule	NP	PA; MT
silodosin 8 mg capsule	NP	PA; MT
tamsulosin 0.4 mg capsule	P	QL(Allowed 2 per 1 day); MT
PROSTATIC HYPERTROPHY AGENT - TYPE II 5-ALPHA REDUCTASE INHIBITORS		
finasteride 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
Proscar 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
PROSTATIC HYPERTROPHY AGENT-TYPE I AND II 5-ALPHA REDUCTASE INHIBITORS		
Avodart 0.5 mg capsule	NP	PA; MT
dutasteride 0.5 mg capsule	NP	PA; MT
URINARY ACIDIFIER - BACTERIAL UREASE INHIBITOR		
Lithostat 250 mg tablet	NP	PA
URINARY ACIDIFIER - PHOSPHATES		
Av-Phos 250 Neutral 250 mg tablet	P	QL(Allowed 8 per 1 day)
K-Phos No 2 305 mg-700 mg tablet	NP	PA
K-Phos-Neutral 250 mg tablet	P	QL(Allowed 8 per 1 day)
Phospha 250 Neutral 250 mg tablet	P	QL(Allowed 8 per 1 day)
Phosphorous 250 mg tablet	P	QL(Allowed 8 per 1 day)
Phospho-Trin 250 Neutral 250 mg tablet	P	QL(Allowed 8 per 1 day)
Virt-Phos 250 Neutral 250 mg tablet	P	QL(Allowed 8 per 1 day)
URINARY ALKALINIZER - CITRATES		
Cytra K Crystals 3,300 mg-1,002 mg oral packet	NP	PA
Oracit 490 mg-640 mg/5 mL oral solution	P	

Drug Name	Tier	Drug Restriction
potas and sod citrate-citric acid 550 mg-500 mg-334 mg/5 mL oral soln	NP	PA
potassium citrate ER 10 mEq (1,080 mg) tablet,extended release	NP	PA
potassium citrate ER 15 mEq (1,620 mg) tablet,extended release	NP	PA
potassium citrate ER 5 mEq (540 mg) tablet,extended release	NP	PA
potassium citrate-citric acid 1,100 mg-334 mg/5 mL oral solution	NP	PA
potassium citrate-citric acid 3,300 mg-1,002 mg oral packet	NP	PA
sodium citrate-citric acid 500 mg-334 mg/5 mL oral solution	P	QL(QL Overtime: Allowed 500 over 30 days)
Taron-Crystals 3,300 mg-1,002 mg oral packet	NP	PA
Tricitrates 550 mg-500 mg-334 mg/5 mL oral solution	NP	PA

Drug Name	Tier	Drug Restriction
Urocit-K 10 10 mEq (1,080 mg) tablet,extended release	NP	PA
Urocit-K 15 15 mEq (1,620 mg) tablet,extended release	NP	PA
Urocit-K 5 5 mEq (540 mg) tablet,extended release	NP	PA
URINARY ANALGESICS		
phenazopyridine 100 mg tablet	P	
phenazopyridine 200 mg tablet	P	
Pyridium 100 mg tablet	NP	PA
Pyridium 200 mg tablet	NP	PA
URINARY ANTIBACTERIAL - METHENAMINE AND SALTS		
Hiprex 1 gram tablet	NP	PA
methenamine hippurate 1 gram tablet	P	
methenamine mandelate 0.5 g tablet	P	
methenamine mandelate 1 gram tablet	P	

Drug Name	Tier	Drug Restriction
URINARY ANTIBACTERIAL - NITROFURAN DERIVATIVES		
Furadantin 25 mg/5 mL oral suspension	NP	PA; QL(Allowed 40 per 1 day)
Macrobid 100 mg capsule	NP	PA
Macrodantin 100 mg capsule	NP	PA
Macrodantin 25 mg capsule	NP	PA
Macrodantin 50 mg capsule	NP	PA
nitrofurantoin 25 mg/5 mL oral suspension	P	QL(Allowed 40 per 1 day)
nitrofurantoin macrocrystal 100 mg capsule	P	
nitrofurantoin macrocrystal 25 mg capsule	P	
nitrofurantoin macrocrystal 50 mg capsule	P	
nitrofurantoin monohydrate/macrocrystals 100 mg capsule	P	
URINARY ANTIBACTERIALS OTHER		
fosfomycin tromethamine 3 gram oral packet	P	
Monurol 3 gram oral packet	P	
URINARY ANTI-INFECTIVE METHENAMINE-ANTISPAS-ANALG COMBINATIONS		
Hyolev MB 81 mg-10.8 mg-40.8 mg tablet	NP	PA
Hyophen 81.6 mg-0.12 mg-10.8 mg tablet	NP	PA
Phosphasal 81.6 mg-10.8 mg-40.8 mg tablet	NP	PA
Uramit MB 118 mg-10 mg-40.8 mg-36 mg capsule	NP	PA
URIMAR-T 120 mg-0.12 mg-10.8 mg tablet	NP	PA
Urin DS 81.6 mg-10.8 mg-40.8 mg tablet	NP	PA
Uro-458 81 mg-10.8 mg-40.8 mg tablet	NP	PA
Uro-MP 118 mg-10 mg-40.8 mg-36 mg capsule	NP	PA
Ustell 120 mg-0.12 mg capsule	NP	PA
URINARY ANTI-INFECTIVE METHENAMINE-ANTISPASMODIC COMBINATIONS		

Drug Name	Tier	Drug Restriction
methenamine 81.6 mg-sod phos 40.8 mg-methylene blue 0.12mg-hyos tablet	NP	PA
Urogesic-Blue 81.6 mg-40.8 mg-0.12 mg tablet	NP	PA
URINARY ANTISPASMODIC - ANTICHOL., M(3) MUSCARINIC SELECTIVE (BLADDER)		
darifenacin ER 15 mg tablet,extended release 24 hr	NP	PA; MT
darifenacin ER 7.5 mg tablet,extended release 24 hr	NP	PA; MT
Enablex 7.5 mg tablet,extended release	NP	PA; MT
solifenacin 10 mg tablet	P	MT
solifenacin 5 mg tablet	P	MT
Vesicare 10 mg tablet	NP	PA; MT
Vesicare 5 mg tablet	NP	PA; MT
Vesicare LS 1 mg/mL oral suspension	NP	PA
URINARY ANTISPASMODIC - SMOOTH MUSCLE RELAXANTS		
Detrol 1 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Detrol 2 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Detrol LA 2 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Detrol LA 4 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Ditropan XL 10 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Ditropan XL 5 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
flavoxate 100 mg tablet	NP	PA; MT
Gelnique 10 % (100 mg/gram) transdermal gel packet	NP	PA
oxybutynin chloride 5 mg tablet	P	QL(Allowed 3 per 1 day); MT
oxybutynin chloride 5 mg/5 mL oral syrup	P	QL(Allowed 16 per 1 day); MT
oxybutynin chloride ER 10 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
oxybutynin chloride ER 15 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
oxybutynin chloride ER 5 mg tablet,extended release 24 hr	P	QL(Allowed 2 per 1 day); MT
Oxytrol 3.9 mg/24 hr transdermal patch	NP	PA
tolterodine 1 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
tolterodine 2 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
tolterodine ER 2 mg capsule,extended release 24 hr	NP	PA; QL(Allowed 1 per 1 day); MT
tolterodine ER 4 mg capsule,extended release 24 hr	NP	PA; QL(Allowed 1 per 1 day); MT
Toviaz 4 mg tablet,extended release	NP	PA
Toviaz 8 mg tablet,extended release	NP	PA
trospium 20 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
trospium ER 60 mg capsule,extended release 24 hr	NP	PA; MT
URINARY RETENTION THERAPY - PARASYMPATHOMIMETIC AGENTS		
bethanechol chloride 10 mg tablet	P	MT
bethanechol chloride 25 mg tablet	P	MT
bethanechol chloride 5 mg tablet	P	MT
bethanechol chloride 50 mg tablet	P	MT
GOUT AND HYPERURICEMIA THERAPY		
GOUT ACUTE THERAPY - ANTIMITOTICS		
colchicine 0.6 mg capsule	NP	PA; MT
colchicine 0.6 mg tablet	NP	PA; QL(Allowed 6 per Rx); MT
Colcrys 0.6 mg tablet	NP	PA; QL(Allowed 6 per Rx); MT
Gloperba 0.6 mg/5 mL oral solution	NP	PA
Mitigare 0.6 mg capsule	NP	PA; MT
GOUT AND HYPERURICEMIA - ANTIMITOTIC-URICOSURIC COMBINATIONS		
probenecid 500 mg-colchicine 0.5 mg tablet	P	MT
HYPERURICEMIA THERAPY - URICOSURICS		
probenecid 500 mg tablet	P	MT
HYPERURICEMIA THERAPY - XANTHINE OXIDASE INHIBITORS		
allopurinol 100 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
allopurinol 300 mg tablet	P	MT
febuxostat 40 mg tablet	NP	PA; MT
febuxostat 80 mg tablet	NP	PA; MT
Uloric 40 mg tablet	NP	PA; MT
Uloric 80 mg tablet	NP	PA; MT
Zyloprim 300 mg tablet	NP	PA; MT
HEMATOLOGICAL AGENTS		
ANTICOAGULANTS - COUMARIN		
Jantoven 1 mg tablet	P	
Jantoven 10 mg tablet	P	
Jantoven 2 mg tablet	P	MT
Jantoven 2.5 mg tablet	P	MT
Jantoven 3 mg tablet	P	MT
Jantoven 4 mg tablet	P	
Jantoven 5 mg tablet	P	MT
Jantoven 6 mg tablet	P	
Jantoven 7.5 mg tablet	P	
warfarin 1 mg tablet	P	
warfarin 10 mg tablet	P	
warfarin 2 mg tablet	P	MT
warfarin 2.5 mg tablet	P	MT
warfarin 3 mg tablet	P	MT
warfarin 4 mg tablet	P	
warfarin 5 mg tablet	P	MT
warfarin 6 mg tablet	P	
warfarin 7.5 mg tablet	P	
ANTI-INHIBITOR COAGULATION COMPLEX		
Feiba NF 1,750 unit-3,250 unit intravenous solution	P	PA; SP
Feiba NF 350 unit-650 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Feiba NF 700 unit-1,300 unit intravenous solution	P	PA; SP
BLOOD CELL AND PLATELET DISORDER TX-SPLEEN TYROSINE KINASE INHIBITORS		
Tavalisse 100 mg tablet	NP	PA; SP
Tavalisse 150 mg tablet	NP	PA; SP
C1 ESTERASE INHIBITOR AGENTS		
Haegarda 2,000 unit subcutaneous solution	NP	PA; SP
Haegarda 3,000 unit subcutaneous solution	NP	PA; SP
DIRECT FACTOR XA INHIBITORS		
Bevyxxa 40 mg capsule	NP	PA; QL(QL Overtime: Allowed 42 over 42 days)
Eliquis 2.5 mg tablet	P	PA; QL(Allowed 4 per 1 day)
Eliquis 5 mg tablet	P	PA; QL(Allowed 4 per 1 day)
Eliquis DVT-PE Treatment 30-Day Starter 5 mg (74 tablets) in dose pack	P	PA; QL(Allowed 4 per 1 day)
Savaysa 15 mg tablet	NP	PA
Savaysa 30 mg tablet	NP	PA
Savaysa 60 mg tablet	NP	PA
Xarelto 10 mg tablet	P	PA; QL(Allowed 1 per 1 day, QL Overtime: Allowed 35 over 180 days)
Xarelto 15 mg tablet	P	PA; QL(Allowed 2 per 1 day)
Xarelto 2.5 mg tablet	P	PA
Xarelto 20 mg tablet	P	PA; QL(Allowed 1 per 1 day)
Xarelto DVT-PE Treatment 30-Day Starter 15 mg(42)-20 mg(9) tablet pack	P	PA
ERYTHROPOIETINS		
Aranesp 10 mcg/0.4 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 100 mcg/0.5 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 100 mcg/mL (in polysorbate) Injection	NP	PA; SP
Aranesp 150 mcg/0.3 mL (in polysorbate) injection syringe	NP	PA; SP

Drug Name	Tier	Drug Restriction
Aranesp 200 mcg/0.4 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 200 mcg/mL (in polysorbate) Injection	NP	PA; SP
Aranesp 25 mcg/0.42 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 25 mcg/mL (in polysorbate) Injection	NP	PA; SP
Aranesp 300 mcg/0.6 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 40 mcg/0.4 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 40 mcg/mL (in polysorbate) Injection	NP	PA; SP
Aranesp 500 mcg/mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 60 mcg/0.3 mL (in polysorbate) injection syringe	NP	PA; SP
Aranesp 60 mcg/mL (in polysorbate) Injection	NP	PA; SP
Epogen 10,000 unit/mL injection solution	P	PA; SP
Epogen 2,000 unit/mL injection solution	P	PA; SP
Epogen 20,000 unit/2 mL injection solution	P	PA; SP
Epogen 20,000 unit/mL injection solution	P	PA; SP
Epogen 3,000 unit/mL injection solution	P	PA; SP
Epogen 4,000 unit/mL injection solution	P	PA; SP
Mircera 100 mcg/0.3 mL injection syringe	NP	PA; SP
Mircera 150 mcg/0.3 mL injection syringe	NP	PA; SP
Mircera 200 mcg/0.3 mL injection syringe	NP	PA; SP
Mircera 30 mcg/0.3 mL injection syringe	NP	PA; SP

Drug Name	Tier	Drug Restriction
Mircera 50 mcg/0.3 mL injection syringe	NP	PA; SP
Mircera 75 mcg/0.3 mL injection syringe	NP	PA; SP
Procrit 10,000 unit/mL injection solution	P	PA; SP
Procrit 2,000 unit/mL injection solution	P	PA; SP
Procrit 20,000 unit/2 mL injection solution	P	PA; SP
Procrit 20,000 unit/mL injection solution	P	PA; SP
Procrit 3,000 unit/mL injection solution	P	PA; SP
Procrit 4,000 unit/mL injection solution	P	PA; SP
Procrit 40,000 unit/mL injection solution	P	PA; SP
Retacrit 10,000 unit/mL injection solution	NP	PA; SP
Retacrit 2,000 unit/mL injection solution	NP	PA; SP

Drug Name	Tier	Drug Restriction
Retacrit 20,000 unit/2 mL injection solution	NP	PA; SP
Retacrit 20,000 unit/mL injection solution	NP	PA; SP
Retacrit 3,000 unit/mL injection solution	NP	PA; SP
Retacrit 4,000 unit/mL injection solution	NP	PA; SP
Retacrit 40,000 unit/mL injection solution	NP	PA; SP
FACTOR IX PREPARATIONS		
AlphaNine SD 1,000 (+/-) unit intravenous solution	P	PA; SP
AlphaNine SD 1,500 (+/-) unit intravenous solution	P	PA; SP
AlphaNine SD 500 (+/-) unit intravenous solution	P	PA; SP
Alprolix 1,000 unit intravenous solution	P	PA; SP
Alprolix 2,000 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Alprolix 250 unit intravenous solution	P	PA; SP
Alprolix 3,000 unit intravenous solution	P	PA; SP
Alprolix 4,000 unit intravenous solution	P	PA; SP
Alprolix 500 unit intravenous solution	P	PA; SP
BeneFIX 1,000 unit intravenous solution	P	PA; SP
BeneFIX 2,000 unit intravenous solution	P	PA; SP
BeneFIX 250 unit intravenous solution	P	PA; SP
BeneFIX 3,000 unit intravenous solution	P	PA; SP
BeneFIX 500 unit intravenous solution	P	PA; SP
Idelvion 1,000 (+/-) unit intravenous solution	P	PA; SP
Idelvion 2,000 (+/-) unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Idelvion 250 (+/-) unit intravenous solution	P	PA; SP
Idelvion 3,500 (+/-) unit intravenous solution	P	PA; SP
Idelvion 500 (+/-) unit intravenous solution	P	PA; SP
Ixinity 1,000 unit intravenous solution	P	PA; SP
Ixinity 1,500 unit intravenous solution	P	PA; SP
Ixinity 2,000 unit intravenous solution	P	PA; SP
Ixinity 250 unit intravenous solution	P	PA; SP
Ixinity 3,000 unit intravenous solution	P	PA; SP
Ixinity 500 unit intravenous solution	P	PA; SP
Mononine 1,000 (+/-) unit intravenous solution	P	PA; SP
Profilnine 1,000 (+/-) unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Profilnine 1,500 (+/-) unit intravenous solution	P	PA; SP
Profilnine 500 (+/-) unit intravenous solution	P	PA; SP
Rebinyn 1,000 (+/-) unit intravenous solution	P	PA; SP
Rebinyn 2,000 (+/-) unit intravenous solution	P	PA; SP
Rebinyn 500 (+/-) unit intravenous solution	P	PA; SP
Rixubis 1,000 unit intravenous solution	P	PA; SP
Rixubis 2,000 unit intravenous solution	P	PA; SP
Rixubis 250 unit intravenous solution	P	PA; SP
Rixubis 3,000 unit intravenous solution	P	PA; SP
Rixubis 500 unit intravenous solution	P	PA; SP
FACTOR VII PREPARATIONS		
Novoseven RT 1 mg (1,000 mcg) intravenous solution	P	PA; SP
Novoseven RT 2 mg (2,000 mcg) intravenous solution	P	PA; SP
Novoseven RT 5 mg (5,000 mcg) intravenous solution	P	PA; SP
Novoseven RT 8 mg (8,000 mcg) intravenous solution	P	PA; SP
FACTOR VIII PREPARATIONS (AHF)		
Advate 1,000 (+/-) unit intravenous solution	P	PA; SP
Advate 1,500 (+/-) unit intravenous solution	P	PA; SP
Advate 2,000 (+/-) unit intravenous solution	P	PA; SP
Advate 250 (+/-) unit intravenous solution	P	PA; SP
Advate 3,000 (+/-) unit intravenous solution	P	PA; SP
Advate 4,000 (+/-) unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Advate 500 (+/-) unit intravenous solution	P	PA; SP
Adynovate 1,000 (+/-) unit intravenous solution	P	PA; SP
Adynovate 1,500 (+/-) unit intravenous solution	P	PA; SP
Adynovate 2,000 (+/-) unit intravenous solution	P	PA; SP
Adynovate 250 (+/-) unit intravenous solution	P	PA; SP
Adynovate 3,000 (+/-) unit intravenous solution	P	PA; SP
Adynovate 500 (+/-) unit intravenous solution	P	PA; SP
Adynovate 750 (+/-) unit intravenous solution	P	PA; SP
Afstyla 1,000 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 1,500 (+/-) unit range intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Afstyla 2,000 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 2,500 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 250 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 3,000 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 500 (+/-) unit range intravenous solution	P	PA; SP
Alphanate 1,000 (400 vWF) unit/10 mL intravenous solution	P	PA; SP
Alphanate 1,500 (600 vWF) unit/10 mL intravenous solution	P	PA; SP
Alphanate 2,000 (800 vWF) unit/10 mL intravenous solution	P	PA; SP
Alphanate 250 (100 vWF) unit/5 mL intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Alphanate 500 (200 vWF) unit/5 mL intravenous solution	P	PA; SP
Eloctate 1,000 unit intravenous solution	P	PA; SP
Eloctate 1,500 unit intravenous solution	P	PA; SP
Eloctate 2,000 unit intravenous solution	P	PA; SP
Eloctate 250 unit intravenous solution	P	PA; SP
Eloctate 3,000 unit intravenous solution	P	PA; SP
Eloctate 4,000 unit intravenous solution	P	PA; SP
Eloctate 5,000 unit intravenous solution	P	PA; SP
Eloctate 500 unit intravenous solution	P	PA; SP
Eloctate 6,000 unit intravenous solution	P	PA; SP
Eloctate 750 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Esperoct 1,000 (+/-) unit intravenous solution	P	PA; SP
Esperoct 1,500 (+/-) unit intravenous solution	P	PA; SP
Esperoct 2,000 (+/-) unit intravenous solution	P	PA; SP
Esperoct 3,000 (+/-) unit intravenous solution	P	PA; SP
Esperoct 500 (+/-) unit intravenous solution	P	PA; SP
Hemofil M High 801 unit-1,500 unit intravenous solution	P	PA; SP
Hemofil M Low 220 unit-400 unit intravenous solution	P	PA; SP
Hemofil M Mid 401 unit-800 unit intravenous solution	P	PA; SP
Hemofil M Super High 1,501 unit-2,000 unit intravenous solution	P	PA; SP
Humate-P 1,000 unit-2,400 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Humate-P 250 unit-600 unit intravenous solution	P	PA; SP
Humate-P 500 unit-1,200 unit intravenous solution	P	PA; SP
Jivi 1,000 (+/-) unit intravenous solution	P	PA; SP
Jivi 2,000 (+/-) unit intravenous solution	P	PA; SP
Jivi 3,000 (+/-) unit intravenous solution	P	PA; SP
Jivi 500 (+/-) unit intravenous solution	P	PA; SP
Koate 1,000 (+/-) unit intravenous solution	P	PA; SP
Koate 250 (+/-) unit intravenous solution	P	PA; SP
Koate 500 (+/-) unit intravenous solution	P	PA; SP
Kogenate FS 1,000 (+/-) unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Kogenate FS 2,000 (+/-) unit intravenous solution	P	PA; SP
Kogenate FS 250 (+/-) unit intravenous solution	P	PA; SP
Kogenate FS 3,000 (+/-) unit intravenous solution	P	PA; SP
Kogenate FS 500 (+/-) unit intravenous solution	P	PA; SP
Kovaltry 1,000 (+/-) unit intravenous solution	P	PA; SP
Kovaltry 2,000 (+/-) unit intravenous solution	P	PA; SP
Kovaltry 250 (+/-) unit intravenous solution	P	PA; SP
Kovaltry 3,000 (+/-) unit intravenous solution	P	PA; SP
Kovaltry 500 (+/-) unit intravenous solution	P	PA; SP
Novoeight 1,000 (+/-) unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Novoeight 1,500 (+/-) unit intravenous solution	P	PA; SP
Novoeight 2,000 (+/-) unit intravenous solution	P	PA; SP
Novoeight 250 (+/-) unit intravenous solution	P	PA; SP
Novoeight 3,000 (+/-) unit intravenous solution	P	PA; SP
Novoeight 500 (+/-) unit intravenous solution	P	PA; SP
Nuwiq 1,000 (+/-) unit intravenous solution	P	PA; SP
Nuwiq 2,000 (+/-) unit intravenous solution	P	PA; SP
Nuwiq 2,500 unit intravenous solution	P	PA; SP
Nuwiq 250 (+/-) unit intravenous solution	P	PA; SP
Nuwiq 3,000 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Nuwiq 4,000 unit intravenous solution	P	PA; SP
Nuwiq 500 (+/-) unit intravenous solution	P	PA; SP
Obizur 500 (+/-) unit range intravenous solution	P	PA; SP
Recombinate 1,000 (+/-) unit intravenous solution	P	PA; SP
Recombinate 1,500 (+/-) unit intravenous solution	P	PA; SP
Recombinate 2,000 (+/-) unit intravenous solution	P	PA; SP
Recombinate 250 (+/-) unit intravenous solution	P	PA; SP
Recombinate 500 (+/-) unit intravenous solution	P	PA; SP
Wilate 1,000 unit-1,000 unit intravenous solution	P	PA; SP

Drug Name	Tier	Drug Restriction
Wilate 500 unit-500 unit intravenous solution	P	PA; SP
Xyntha 1,000 (+/-) unit intravenous solution	P	PA; SP
Xyntha 2,000 (+/-) unit intravenous solution	P	PA; SP
Xyntha 250 (+/-) unit intravenous solution	P	PA; SP
Xyntha 500 (+/-) unit intravenous solution	P	PA; SP
Xyntha Solofuse 1,000 (+/-) unit intravenous syringe	P	PA; SP
Xyntha Solofuse 2,000 (+/-) unit intravenous syringe	P	PA; SP
Xyntha Solofuse 250 (+/-) unit intravenous syringe	P	PA; SP
Xyntha Solofuse 3,000 (+/-) unit intravenous syringe	P	PA; SP
Xyntha Solofuse 500 (+/-) unit intravenous syringe	P	PA; SP
FACTOR VIII-MIMETIC AGENT, MONOCLONAL ANTIBODY		
Hemlibra 105 mg/0.7 mL subcutaneous solution	P	PA; SP
Hemlibra 150 mg/mL subcutaneous solution	P	PA; SP
Hemlibra 30 mg/mL subcutaneous solution	P	PA; SP
Hemlibra 60 mg/0.4 mL subcutaneous solution	P	PA; SP
FACTOR X PREPARATIONS		
Coagadex 250 (+/-) unit range intravenous solution	P	PA; SP
Coagadex 500 (+/-) unit range intravenous solution	P	PA; SP
FACTOR XIII PREPARATIONS		
Corifact 1,000 unit-1,600 unit intravenous solution	P	PA; SP
Tretten 2,500 unit intravenous solution	P	PA; SP
GRANULOCYTE COLONY-STIMULATING FACTOR (G-CSF)		

Drug Name	Tier	Drug Restriction
Fulphila 6 mg/0.6 mL subcutaneous syringe	NP	PA; SP
Granix 300 mcg/0.5 mL subcutaneous syringe	NP	PA; SP
Granix 300 mcg/mL subcutaneous solution	NP	PA; SP
Granix 480 mcg/0.8 mL subcutaneous syringe	NP	PA; SP
Granix 480 mcg/1.6 mL subcutaneous solution	NP	PA; SP
Neulasta 6 mg/0.6 mL subcutaneous syringe	NP	PA; SP
Neulasta Onpro 6 mg/0.6 mL with wearable subcutaneous injector	NP	PA; SP
Neupogen 300 mcg/0.5 mL injection syringe	P	SP
Neupogen 300 mcg/mL injection solution	P	SP
Neupogen 480 mcg/0.8 mL injection syringe	P	SP
Neupogen 480 mcg/1.6 mL injection solution	P	SP
Nivestym 300 mcg/0.5 mL subcutaneous syringe	NP	PA; SP
Nivestym 300 mcg/mL injection solution	NP	PA; SP
Nivestym 480 mcg/0.8 mL subcutaneous syringe	NP	PA; SP
Nivestym 480 mcg/1.6 mL injection solution	NP	PA; SP
Nyvepria 6 mg/0.6 mL subcutaneous syringe	NP	PA; SP
Udenyca 6 mg/0.6 mL subcutaneous syringe	NP	PA; SP
Zarxio 300 mcg/0.5 mL injection syringe	NP	PA; SP
Zarxio 480 mcg/0.8 mL injection syringe	NP	PA; SP
Ziextenzo 6 mg/0.6 mL subcutaneous syringe	NP	PA; SP
GRANULOCYTE-MACROPHAGE COLONY-STIMULATING FACTOR (GM-CSF)		

Drug Name	Tier	Drug Restriction
Leukine 250 mcg solution for injection	P	SP
HEMATOPOIETIC AGENTS - ERYTHROID (RBC) MATURATION AGENTS		
Reblozyl 25 mg subcutaneous solution	NP	PA; SP
Reblozyl 75 mg subcutaneous solution	NP	PA; SP
HEMATORHEOLOGIC AGENTS		
pentoxifylline ER 400 mg tablet,extended release	P	
HEMOSTATIC SYSTEMIC - ANTIFIBRINOLYTIC AGENTS		
Amicar 500 mg tablet	P	QL(Allowed 24 per Rx); SP; Use Generic Products
aminocaproic acid 500 mg tablet	P	QL(Allowed 24 per Rx); SP
Lysteda 650 mg tablet	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed 30 over 5 days); QL(Limit 2 fill(s) per 30 days); Use Generic Products
tranexamic acid 650 mg tablet	P	AL(Minimum Age 12 Years); QL(QL Overtime: Allowed 30 over 5 days); QL(Limit 2 fill(s) per 30 days)
HEMOSTATIC SYSTEMIC- VON WILLEBRAND FACTOR (VWF) PREPARATIONS		
Vonvendi 1,300 (+/-) unit range intravenous solution	P	PA; SP
Vonvendi 650 (+/-) unit range intravenous solution	P	PA; SP
HEPARIN FLUSH FORMULATIONS		
Hep Flush-10 (PF) 10 unit/mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
Heparin Lock Flush (Porcine) (PF) 10 unit/mL intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
heparin lock flush (porcine) 10 unit/mL intravenous solution	P	QL(QL (Limit 14 days supply(ies) per claim))
heparin, porcine (PF) 10 unit/mL intravenous syringe	P	QL(QL (Limit 14 days supply(ies) per claim))
HEPARINS		
heparin (porcine) 1,000 unit/mL injection solution	P	
heparin (porcine) 10,000 unit/mL injection solution	P	
heparin (porcine) 20,000 unit/mL injection solution	P	
heparin (porcine) 5,000 unit/mL (1 mL) injection cartridge	P	

Drug Name	Tier	Drug Restriction
heparin (porcine) 5,000 unit/mL injection solution	P	
heparin (porcine) 5,000 unit/mL injection syringe	P	
heparin, porcine (PF) 1,000 unit/mL injection solution	P	
heparin, porcine (PF) 5,000 unit/0.5 mL injection solution	P	
heparin, porcine (PF) 5,000 unit/0.5 mL injection syringe	P	
heparin, porcine (PF) 5,000 unit/0.5 mL subcutaneous syringe	P	
heparin, porcine (PF) 5,000 unit/mL injection syringe	P	
INDIRECT FACTOR XA INHIBITORS		
Arixtra 10 mg/0.8 mL subcutaneous solution syringe	NP	PA; SP
Arixtra 2.5 mg/0.5 mL subcutaneous solution syringe	NP	PA; SP
Arixtra 5 mg/0.4 mL subcutaneous solution syringe	NP	PA; SP
Arixtra 7.5 mg/0.6 mL subcutaneous solution syringe	NP	PA; SP
fondaparinux 10 mg/0.8 mL subcutaneous solution syringe	P	SP
fondaparinux 2.5 mg/0.5 mL subcutaneous solution syringe	P	SP
fondaparinux 5 mg/0.4 mL subcutaneous solution syringe	P	SP
fondaparinux 7.5 mg/0.6 mL subcutaneous solution syringe	P	SP
LOW MOLECULAR WEIGHT HEPARINS		
enoxaparin 100 mg/mL subcutaneous syringe	P	QL(QL Overtime: Allowed 14 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 120 mg/0.8 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 12 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 150 mg/mL subcutaneous syringe	P	QL(QL Overtime: Allowed 14 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 30 mg/0.3 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 5 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP

Drug Name	Tier	Drug Restriction
enoxaparin 300 mg/3 mL subcutaneous solution	P	QL(QL Overtime: Allowed 42 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 40 mg/0.4 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 6 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 60 mg/0.6 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 9 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
enoxaparin 80 mg/0.8 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 12 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Fragmin 10,000 anti-Xa unit/mL subcutaneous syringe	P	SP
Fragmin 12,500 anti-Xa unit/0.5 mL subcutaneous syringe	P	SP
Fragmin 15,000 anti-Xa unit/0.6 mL subcutaneous syringe	P	SP
Fragmin 18,000 anti-Xa unit/0.72 mL subcutaneous syringe	P	SP
Fragmin 2,500 anti-Xa unit/0.2 mL subcutaneous syringe	P	SP
Fragmin 25,000 anti-Xa unit/mL subcutaneous solution	P	SP
Fragmin 5,000 anti-Xa unit/0.2 mL subcutaneous syringe	P	SP
Fragmin 7,500 anti-Xa unit/0.3 mL subcutaneous syringe	P	SP
Lovenox 100 mg/mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 14 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 120 mg/0.8 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 12 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 150 mg/mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 14 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 30 mg/0.3 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 5 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 300 mg/3 mL subcutaneous solution	NP	PA; QL(QL Overtime: Allowed 42 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 40 mg/0.4 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 6 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP

Drug Name	Tier	Drug Restriction
Lovenox 60 mg/0.6 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 9 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
Lovenox 80 mg/0.8 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 12 over 7 days); QL(QL (Limit 21 days supply(ies) per 180 days)); SP
PLATELET AGGREGATION INHIB - CYCLOPENTYL-TRIAZOLO-PYRIMIDINES (CPTPS)		
Brilinta 60 mg tablet	P	QL(Allowed 2 per 1 day)
Brilinta 90 mg tablet	P	QL(Allowed 2 per 1 day)
PLATELET AGGREGATION INHIBITOR COMBINATIONS		
aspirin 25 mg-dipyridamole 200 mg capsule,ext.release 12 hr multiphase	P	
PLATELET AGGREGATION INHIBITORS - PHOSPHODIESTERASE III INHIBITORS		
cilostazol 100 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
cilostazol 50 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
PLATELET AGGREGATION INHIBITORS - QUINAZOLINE AGENTS		
Agrylin 0.5 mg capsule	NP	PA
anagrelide 0.5 mg capsule	P	
anagrelide 1 mg capsule	P	
PLATELET AGGREGATION INHIBITORS - SALICYLATES		
aspirin 81 mg chewable tablet	P	
Children's Aspirin 81 mg chewable tablet	P	
PLATELET AGGREGATION INHIBITORS - THIENOPYRIDINE AGENTS		
clopidogrel 300 mg tablet	P	
clopidogrel 75 mg tablet	P	QL(Allowed 1 per 1 day)
Effient 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Effient 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Plavix 75 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
prasugrel 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
prasugrel 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
PLATELET AGGREGATION INHIBITORS-SALICYLATES AND PROTON PUMP INHIB COMB		
Yosprala 325 mg-40 mg tablet,immediate and delay release	NP	PA
PLATELET AGGREGATION INHIB-PDESTERASE AND ADENOSINE DEAMINASE INHIBITR		
dipyridamole 25 mg tablet	P	MT
dipyridamole 50 mg tablet	P	

Drug Name	Tier	Drug Restriction
dipyridamole 75 mg tablet	P	
PLATELET AGGREGATION INHIB-PROTEASE-ACTIV.RECEPTOR-1(PAR-1) ANTAGONIST		
Zontivity 2.08 mg tablet	NP	PA
SICKLE CELL ANEMIA AGENTS, OTHERS		
Droxia 200 mg capsule	P	
Droxia 300 mg capsule	P	
Droxia 400 mg capsule	P	
THROMBIN INHIBITOR - SELECTIVE DIRECT AND REVERSIBLE		
Pradaxa 110 mg capsule	NP	PA
Pradaxa 150 mg capsule	NP	PA
Pradaxa 75 mg capsule	NP	PA
THROMBOPOIETIN RECEPTOR AGONISTS		
Doptelet (10 tab pack) 20 mg tablet	NP	PA; SP
Doptelet (15 tab pack) 20 mg tablet	NP	PA; SP
Doptelet (30 tab pack) 20 mg tablet	NP	PA; SP
Mulpleta 3 mg tablet	NP	PA; SP
Nplate 125 mcg subcutaneous solution	NP	PA; SP
Nplate 250 mcg subcutaneous solution	NP	PA; SP
Nplate 500 mcg subcutaneous solution	NP	PA; SP
Promacta 12.5 mg oral powder packet	NP	PA; SP
Promacta 12.5 mg tablet	NP	PA; SP
Promacta 25 mg oral powder packet	NP	PA; SP
Promacta 25 mg tablet	NP	PA; SP
Promacta 50 mg tablet	NP	PA; SP
Promacta 75 mg tablet	NP	PA; SP
HEPATOBILIARY SYSTEM TREATMENT AGENTS		
FARNESOID X RECEPTOR (FXR) AGONIST, BILE ACID ANALOG		
Ocaliva 10 mg tablet	NP	PA; SP
Ocaliva 5 mg tablet	NP	PA; SP
IMMUNOSUPPRESSIVE AGENTS		
IMMUNOSUPPRESSIVE - CALCINEURIN INHIBITORS		

Drug Name	Tier	Drug Restriction
Astagraf XL 0.5 mg capsule,extended release	NP	PA
Astagraf XL 1 mg capsule,extended release	NP	PA
Astagraf XL 5 mg capsule,extended release	NP	PA
cyclosporine 100 mg capsule	P	
cyclosporine 25 mg capsule	P	
cyclosporine modified 100 mg capsule	P	QL(Allowed 4 per 1 day)
cyclosporine modified 100 mg/mL oral solution	P	QL(Allowed 8 per 1 day)
cyclosporine modified 25 mg capsule	P	QL(Allowed 4 per 1 day)
cyclosporine modified 50 mg capsule	P	QL(Allowed 4 per 1 day)
Envarsus XR 0.75 mg tablet,extended release	NP	PA
Envarsus XR 1 mg tablet,extended release	NP	PA
Envarsus XR 4 mg tablet,extended release	NP	PA
Gengraf 100 mg capsule	P	QL(Allowed 4 per 1 day)
Gengraf 100 mg/mL oral solution	P	QL(Allowed 8 per 1 day)
Gengraf 25 mg capsule	P	QL(Allowed 4 per 1 day)
Lupkynis 7.9 mg capsule	NP	PA; SP
Neoral 100 mg capsule	NP	PA; QL(Allowed 4 per 1 day)
Neoral 100 mg/mL oral solution	NP	PA; QL(Allowed 8 per 1 day)
Neoral 25 mg capsule	NP	PA; QL(Allowed 4 per 1 day)
Prograf 0.2 mg oral granules in packet	NP	PA
Prograf 0.5 mg capsule	NP	PA; QL(Allowed 3 per 1 day)
Prograf 1 mg capsule	NP	PA; QL(Allowed 3 per 1 day)
Prograf 1 mg oral granules in packet	NP	PA
Prograf 5 mg capsule	NP	PA; QL(Allowed 3 per 1 day)
Sandimmune 100 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Sandimmune 100 mg/mL oral solution	P	
Sandimmune 25 mg capsule	NP	PA
tacrolimus 0.5 mg capsule, immediate-release	P	QL(Allowed 3 per 1 day)
tacrolimus 1 mg capsule, immediate-release	P	QL(Allowed 3 per 1 day)
tacrolimus 5 mg capsule, immediate-release	P	QL(Allowed 3 per 1 day)
IMMUNOSUPPRESSIVE - INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
CellCept 200 mg/mL oral suspension	NP	PA; QL(Allowed 15 per 1 day)
CellCept 250 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
CellCept 500 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
mycophenolate mofetil 200 mg/mL oral suspension	P	QL(Allowed 15 per 1 day)
mycophenolate mofetil 250 mg capsule	P	QL(Allowed 2 per 1 day)
mycophenolate mofetil 500 mg tablet	P	QL(Allowed 4 per 1 day)
mycophenolate sodium 180 mg tablet,delayed release	P	QL(Allowed 2 per 1 day)
mycophenolate sodium 360 mg tablet,delayed release	P	QL(Allowed 4 per 1 day)
Myfortic 180 mg tablet,delayed release	NP	PA; QL(Allowed 2 per 1 day)
Myfortic 360 mg tablet,delayed release	NP	PA; QL(Allowed 4 per 1 day)
IMMUNOSUPPRESSIVE - MAMMALIAN TARGET OF RAPAMYCIN (MTOR) INHIBITORS		
everolimus (immunosuppressive) 0.25 mg tablet	NP	PA
everolimus (immunosuppressive) 0.5 mg tablet	NP	PA
everolimus (immunosuppressive) 0.75 mg tablet	NP	PA
Rapamune 0.5 mg tablet	NP	PA
Rapamune 1 mg tablet	NP	PA
Rapamune 1 mg/mL oral solution	NP	PA
Rapamune 2 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
sirolimus 0.5 mg tablet	P	
sirolimus 1 mg tablet	P	
sirolimus 1 mg/mL oral solution	P	
sirolimus 2 mg tablet	P	
Zortress 0.25 mg tablet	NP	PA
Zortress 0.5 mg tablet	NP	PA
Zortress 0.75 mg tablet	NP	PA
Zortress 1 mg tablet	NP	PA
IMMUNOSUPPRESSIVE - PURINE ANALOGS		
Azasan 100 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
Azasan 75 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
azathioprine 50 mg tablet	P	
Imuran 50 mg tablet	NP	PA
LOCOMOTOR SYSTEM		
AGENTS TO TREAT PERIODIC PARALYSIS - CARBONIC ANHYDRASE INHIBITORS		
Keveyis 50 mg tablet	NP	PA; SP
ALS AGENTS - BENZATHIAZOLES		
Rilutek 50 mg tablet	NP	PA
riluzole 50 mg tablet	P	
Tiglutik 50 mg/10 mL oral suspension	NP	PA; SP
ANTIMYASTHENIC AGENT - REVERSIBLE CHOLINESTERASE INHIBITORS		
Mestinon 60 mg tablet	NP	PA
Mestinon 60 mg/5 mL oral syrup	NP	PA
Mestinon Timespan 180 mg tablet,extended release	NP	PA
pyridostigmine bromide 30 mg tablet	P	
pyridostigmine bromide 60 mg tablet	P	
pyridostigmine bromide 60 mg/5 mL oral syrup	P	
pyridostigmine bromide ER 180 mg tablet,extended release	P	
ANTIMYASTHENIC AGENTS OTHER		
guanidine 125 mg tablet	NP	PA
SKELETAL MUSCLE RELAXANT - ANALGESIC SALICYLATE COMBINATIONS		

Drug Name	Tier	Drug Restriction
Norgesic Forte 50 mg-770 mg-60 mg tablet	NP	PA
SKELETAL MUSCLE RELAXANT - CENTRAL MUSCLE RELAXANTS		
Amrix 15 mg capsule,extended release	NP	PA
Amrix 30 mg capsule,extended release	NP	PA
baclofen 10 mg tablet	P	
baclofen 20 mg tablet	P	
baclofen 5 mg tablet	P	
carisoprodol 250 mg tablet	NP	PA
carisoprodol 350 mg tablet	NP	PA
chlorzoxazone 250 mg tablet	P	
chlorzoxazone 375 mg tablet	P	
chlorzoxazone 500 mg tablet	P	
chlorzoxazone 750 mg tablet	P	
cyclobenzaprine 10 mg tablet	P	QL(Allowed 3 per 1 day)
cyclobenzaprine 5 mg tablet	P	QL(Allowed 3 per 1 day)
cyclobenzaprine 7.5 mg tablet	P	QL(Allowed 4 per 1 day)
cyclobenzaprine ER 15 mg capsule,extended release 24 hr	NP	PA
cyclobenzaprine ER 30 mg capsule,extended release 24 hr	NP	PA
Fexmid 7.5 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Lorzone 375 mg tablet	P	
Lorzone 750 mg tablet	P	
Metaxall 800 mg tablet	NP	PA
metaxalone 400 mg tablet	NP	PA
metaxalone 800 mg tablet	NP	PA
methocarbamol 500 mg tablet	P	
methocarbamol 750 mg tablet	P	
orphenadrine citrate ER 100 mg tablet,extended release	P	

Drug Name	Tier	Drug Restriction
Ozobax 5 mg/5 mL oral solution	NP	PA
Skelaxin 800 mg tablet	NP	PA
Soma 250 mg tablet	NP	PA
Soma 350 mg tablet	NP	PA
tizanidine 2 mg capsule	NP	PA
tizanidine 2 mg tablet	P	
tizanidine 4 mg capsule	NP	PA
tizanidine 4 mg tablet	P	
tizanidine 6 mg capsule	NP	PA
Zanaflex 2 mg capsule	NP	PA
Zanaflex 4 mg capsule	NP	PA
Zanaflex 4 mg tablet	NP	PA
Zanaflex 6 mg capsule	NP	PA
SKELETAL MUSCLE RELAXANT - DIRECT MUSCLE RELAXANTS		
Dantrium 25 mg capsule	NP	PA
Dantrium 50 mg capsule	NP	PA
dantrolene 100 mg capsule	P	
dantrolene 25 mg capsule	P	
dantrolene 50 mg capsule	P	
SKELETAL MUSCLE RELAXANT, SALICYLATE, AND OPIOID ANALGESIC COMB.		
carisoprodol 200 mg-aspirin 325 mg-codeine 16 mg tablet	NP	APA
MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT (DME)		
MEDICAL SUPPLIES AND DME - ADHESIVE BANDAGES		
Restore Trio 3" X 3" bandage	P	
MEDICAL SUPPLIES AND DME - BLOOD GLUCOSE TESTS		
	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Accu-Chek Aviva Plus test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Accu-Chek Compact Plus Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Accu-Chek Guide test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Accu-Chek SmartView Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Accutrend Glucose test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Advance Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Advanced Glucose Meter Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Advocate Redi-Code Plus strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Advocate Redi-Code strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Advocate Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
AgaMatrix Amp Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Assure 3 Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Assure 4 Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Assure II Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Assure Platinum Test Strip	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Assure Prism Multi Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Assure Pro Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
At-Last Test strips	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Bionime Rightest Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Bioscanner Glucose Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Blood Glucose Test strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Breeze 2 Test Strips	NP	PA
CareSens N Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
CareTouch Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Clever Choice Micro Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Clever Choice Pro Blood Glucose Monitor strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Clever Choice Talk Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Clever Choice Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Clever Choice Voice+ Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Contour Next Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Contour Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Cool Glucose Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Diatrue Plus Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
DuoCare strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Plus II Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Plus strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Pro Plus Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Step strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Talk Glucose Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Touch Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Trak Glucose Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easy Trak II Test Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
EasyGluco Plus strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EasyGluco Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Easymax 15 test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EasyMax strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EasyPRO Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Element Compact Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Element Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Embrace Blood Glucose System strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Embrace EVO test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Embrace PRO test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Embrace TALK test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EvenCare G2 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EvenCare G3 Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EvenCare Mini Glucose Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Evencare ProView Test Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
EvenCare Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Evolution Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
ExacTech R-S-G Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
ExacTech Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
EZ Smart Plus Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Ez Smart Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fifty50 Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora 6 Connect Glucose Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Fora D15g strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora D20 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora D40-G31 Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora G20 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora G30-Premium V10 Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora GD50 Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora GTel Glucose Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora Test N'Go Advance Pro Test Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Fora Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora TN'G Voice Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora V10 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora V10-V12-D10-D20 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora V12 Glucose strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora V20 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Fora V30A strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
ForaCare GD20 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
ForaCare GD40 test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
FortisCare glucose test strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Freestyle InsuLinx strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Freestyle InsuLinx Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
FreeStyle Lite Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
FreeStyle Precision Neo Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
FreeStyle Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
GE100 Blood Glucose Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
GenStrip Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Gluco Navii Test Strip	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Glucocard 01 Sensor Plus strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocard Expression strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocard Shine Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocard Vital Sensor strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocard Vital Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocard X-Sensor strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Glucocom Glucose strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
GM100 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Harmony Glucose Test Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
HealthPro Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
iGlucose Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Infinity Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Infinity Voice Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Keynote strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Liberty Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Micro Blood Glucose strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Microdot Blood Glucose Monitoring System strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Microdot Xtra Blood Glucose strips	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Myglucohealth strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Neutek 2Tek Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Nexgen Test strips	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Nova Max Glucose Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
On Call Express Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
On Call Plus Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
On Call Vivid Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
OneTouch Ultra Blue Test Strip	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
OneTouch Verio test strips	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Optium EZ strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Optium Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
OptumRx strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Pharmacist Choice Glucose Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
PocketChem EZ strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision PCX Plus Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision PCX Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision Point Of Care Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision Q-I-D Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision Sof-Tact Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Precision Xtra Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Premier Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Premium V10 strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Pro Voice V8-V9 Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Prodigy No Coding strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
PTS Panels strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Quicktek Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Quintet AC strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Quintet Glucose Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Refuah Plus strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Relion Confirm-Micro strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
ReliOn Prime Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Relion Ultima strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Reveal Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Rightest GS550 Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Sidekick Blood Glucose System kit	NP	PA
Smart Sense Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Smartest Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Solus V2 Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Supreme Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Sure Edge strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
SureChek Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Sure-Test EasyPlus Mini strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Telcare Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Test N'Go Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
True Metrix Glucose Test Strip	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
True Metrix Pro Test Strip	NP	PA; QL(QL (Limit 100 days supply(ies) per claim))
Truetest Test Strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Truetrack Test strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultima Test Strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
UltraTRAK strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
UltraTrak Ultimate strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
UniStrip1 Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Verasens Test Strip	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
Victory Glucose Test strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
VivaGuard Ino Test Strip	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
Vocal Point strips	NP	QL(QL (Limit 100 days supply(ies) per claim)); APA
WaveSense Jazz strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
WaveSense Presto strips	NP	QL(QL (Limit 90 days supply(ies) per claim)); APA
MEDICAL SUPPLIES AND DME - BLOOD GLUCOSE-KETONE COMB. TEST SUPPLIES		
Fora GTel Multi-functional Monitor	NP	PA
Precision Xtra Ketone-Glucose Monitor kit	NP	PA
MEDICAL SUPPLIES AND DME - FACIAL MASKS		
Pillow Mask Adult	P	QL(QL Overtime: Allowed 1 over 360 days)
MEDICAL SUPPLIES AND DME - GAUZE BANDAGES		
Band-Aid Gauze Pads 2" X 2" bandage	P	
Band-Aid Gauze Pads 3" X 3" bandage	P	
Band-Aid Gauze Pads 4" X 4" bandage	P	
Band-Aid Mirasorb Gauze 4" X 4" sponge	P	
Bordered Gauze 4" X 4" bandage	P	
Curity Gauze 2" X 2" bandage	P	
Curity Gauze 2" X 2" sponge	P	

Drug Name	Tier	Drug Restriction
Curity Gauze 3" X 3" bandage	P	
Curity Gauze 3" X 3" sponge	P	
Curity Gauze 4" X 4" bandage	P	
Curity Gauze 4" X 4" sponge	P	
Dermacea 2" X 2" bandage	P	
Dermacea 2" X 2" sponge	P	
Dermacea 3" X 3" bandage	P	
Dermacea 3" X 3" sponge	P	
Dermacea 4" X 4" bandage	P	
Dermacea 4" X 4" sponge	P	
Dermacea Non-Woven 2" X 2" sponge	P	
Dermacea Non-Woven 3" X 3" sponge	P	
Dermacea Non-Woven 4" X 4" sponge	P	
gauze bandage 2" X 2"	P	
gauze bandage 4" X 4"	P	
Gauze Pad 2" X 2" bandage	P	
Gauze Pad 3" X 3" bandage	P	
Gauze Pad 4" X 4" bandage	P	
Kerlix 4" X 4" sponge	P	
Lisco 2" X 2" sponge	P	
Lisco 4" X 4" sponge	P	
Sterile Pads 2" X 2" bandage	P	
Sterile Pads 3" X 3" bandage	P	
Sterile Pads 4" X 4" bandage	P	
Versalon 2" X 2" sponge	P	
Versalon 3" X 3" sponge	P	
Versalon 4" X 4" sponge	P	
Versalon Nonwoven All-Purpose 2" X 2" sponge	P	

Drug Name	Tier	Drug Restriction
Versalon Nonwoven All-Purpose 3" X 3" sponge	P	
Versalon Nonwoven All-Purpose 4" X 4" sponge	P	
Vistec X-Ray Detect 4" X 4" sponge	P	
MEDICAL SUPPLIES AND DME - GAUZE PADS AND DRESSINGS		
Curity Cover 3" X 3" sponge	P	
Curity Cover 4" X 4" sponge	P	
Curity Non-Adhering Dressing 3" X 3"	P	
Dermacea I.V. 2" X 2" sponge	P	
Excilon 4" X 4" sponge	P	
Excilon Drain 4" X 4" sponge	P	
Excilon I.V. 2" X 2" sponge	P	
MEDICAL SUPPLIES AND DME - GLUCOSE MONITORING TEST SUPPLIES		
	P	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
1st Tier Unilet ComforTouch Lancet 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
1st Tier Unilet ComforTouch Lancet 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
2-In-1 Lancet Device 30 gauge	P	QL(QL Overtime: Allowed 1 over 180 days)
Accu-Chek Aviva Connect meter	NP	PA
Accu-Chek Aviva Meter	NP	PA
Accu-Chek Aviva Plus Meter	NP	PA
Accu-Chek Guide Glucose Meter	NP	PA
Accu-Chek Guide Me Glucose Meter	NP	PA
Accu-Chek Multiclix Lancet kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Accu-Chek Nano	NP	PA
Adjustable Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Advance Intuition Glucose kit	NP	PA
Advance Meter	NP	PA
Advanced Glucose Meter	NP	PA

Drug Name	Tier	Drug Restriction
Advanced Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Advocate Blood Glucose Monitor	NP	PA
Advocate Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Advocate Rapid-Safe Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Advocate Redi-Code Glucose Monitor	NP	PA
Advocate Redi-Code Glucose Monitor kit	NP	PA
Advocate Redi-Code Plus	NP	PA
AgaMatrix AMP Glucose Monitoring System	NP	PA
Alternate Site Lancet 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Alternate Site Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Aqua Lance Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Assure 3 kit	NP	PA
Assure 4 Meter	NP	PA
Assure Platinum Glucose Meter	NP	PA
Assure Prism Multi Meter	NP	PA
Assure Pro Blood Glucose Meter kit	NP	PA
At Last Blood Glucose System kit	NP	PA
Auto-Lancet Mini	P	QL(QL Overtime: Allowed 1 over 180 days)
Autolet Impression Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Autolet Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Autolet Plus Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
BD Lancet Device	P	QL(QL Overtime: Allowed 1 over 180 days)
BD Latitude kit	NP	PA
BD Logic Glucose Monitor kit	NP	PA
BD Ultra-Fine II Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Bionime Rightest Gm300 System kit	NP	PA
BioTel Care BGM-4 Meter	NP	PA
Blood Glucose Monitor Kit	NP	PA

Drug Name	Tier	Drug Restriction
Blood Glucose Monitoring kit	NP	PA
blood-glucose meter	NP	PA
blood-glucose meter kit	NP	PA
Breeze 2 kit	NP	PA
Careone Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Careone Thin Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Careone Ultra Thin Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
CareSens N	NP	PA
CareSens N Voice	NP	PA
CareTouch Glucose Monitoring System kit	NP	PA
CareTouch Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
CareTouch Safety Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
CareTouch Safety Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Clever Chek Blood Glucose	NP	PA
Clever Chek Blood Glucose Syst kit	NP	PA
Clever Choice Blood Glucose System	NP	PA
Clever Choice Micro	NP	PA
Clever Choice Mini Blood Glucose Monitor	NP	PA
Clever Choice Pro Blood Glucose Monitor	NP	PA
Clever Choice Talk Blood Glucose System	NP	PA
Comfort Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Contour Link kit	NP	PA
Contour Meter	NP	PA
Contour Meter kit	NP	PA
Contour Next EZ Meter	NP	PA
Contour Next EZ Meter kit	NP	PA
Contour Next Glucose Meter kit	NP	PA

Drug Name	Tier	Drug Restriction
Contour Next Link 2.4 kit	NP	PA
Contour Next Link kit	NP	PA
Contour Next Meter	NP	PA
Contour Next One Meter	NP	PA
Cool Blood Glucose Meter	NP	PA
Cool Blood Glucose Meter kit	NP	PA
Dexcom G4 Receiver	NP	PA
Dexcom G4 Receiver Pediatric	NP	PA
Dexcom G4 Receiver with Share (Pediatric)	NP	PA
Dexcom G4 Receiver with Share Kit	NP	PA
Dexcom G4 Transmitter device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))
Dexcom G5 Receiver	NP	PA
Dexcom G5 Transmitter device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))
Dexcom G5-G4 Sensor device	NP	PA

Drug Name	Tier	Drug Restriction
Dexcom G6 Receiver misc	P	PA
Dexcom G6 Sensor device	P	PA
Dexcom G6 Transmitter device	P	PA; QL(QL (Limit 90 days supply(ies) per claim))
Dexcom Receiver	NP	PA
Diatrue Plus Blood Glucose Meter System	NP	PA
Droplet Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Droplet Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Easy Click Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Easy Mini Eject Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Easy Plus II Blood Glucose Meter	NP	PA
Easy Pro Plus Kit	NP	PA
Easy Step Blood Glucose Meter	NP	PA
Easy Step Blood Glucose System kit	NP	PA
Easy Talk Blood Glucose Meter	NP	PA

Drug Name	Tier	Drug Restriction
Easy Talk Glucose System kit	NP	PA
Easy Touch Glucose Monitor	NP	PA
Easy Touch Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Lancets 32 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Easy Touch Twist Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Twist Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Twist Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Twist Lancets 32 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Touch Twist Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Easy Trak Blood Glucose Meter	NP	PA
Easy Trak Glucose System kit	NP	PA
EasyGluco Meter kit	NP	PA
EasyGluco Monitoring System kit	NP	PA
EasyMax L Blood Glucose Meter	NP	PA
EasyMax L Glucose System kit	NP	PA
EasyMax N Blood Glucose System	NP	PA
EasyMax N kit	NP	PA
EasyMax NG kit	NP	PA
EasyMax NG meter	NP	PA
EasyMax V Glucose System kit	NP	PA
EasyMax V Speaking Blood Glucose System	NP	PA
EasyMax V2 Blood Glucose Meter	NP	PA
EasyMax V2 Glucose System Kit	NP	PA
EasyPlus R13N kit	NP	PA
EasyPlus V Glucose System kit	NP	PA
EasyPRO Blood Glucose System kit	NP	PA

Drug Name	Tier	Drug Restriction
Easy-Touch Blood Glucose Meter	NP	PA
Element Blood Glucose Meter kit	NP	PA
Element Compact Glucose Meter	NP	PA
Element Compact V Glucose Meter	NP	PA
Element Plus Blood Glucose Kit	NP	PA
Embrace Blood Glucose kit	NP	PA
Embrace Blood Glucose System	NP	PA
Embrace EVO Blood Glucose Kit	NP	PA
Embrace PRO Blood Glucose Meter	NP	PA
Embrace TALK Blood Glucose Monitoring System kit	NP	PA
Embrace TALK Glucose Monitor	NP	PA
Enlite Glucose Sensor device	NP	PA
Enlite System	NP	PA
EvenCare G2	NP	PA
EvenCare G3 Glucose Meter kit	NP	PA
EvenCare kit	NP	PA
EvenCare Mini Monitor System	NP	PA
Eversense Sensor-Holder subcutaneous device	NP	PA
Eversense Smart Transmitter device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))
Evolution Blood Glucose Meter kit	NP	PA
E-Z Ject Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
E-Z Ject Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
E-Z Ject Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
E-Z Ject Lancets 32 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
E-Z Ject Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
E-Z Ject Thin Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ez Smart Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
EZ Smart Plus System kit	NP	PA

Drug Name	Tier	Drug Restriction
Ez Smart System kit	NP	PA
EZ-Lets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
First Choice Lancets Thin	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Fora G20 kit	NP	PA
Fora G30A	NP	PA
Fora GD50 Blood Glucose System	NP	PA
Fora Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Fora Premium V10 glucose meter	NP	PA
Fora Test N'Go Voice Meter	NP	PA
Fora TN'G Voice meter	NP	PA
Fora V10 kit	NP	PA
Fora V10-V12-D10-D20 strips-lancets 30 gauge combo pack	NP	PA
Fora V12 Blood Glucose System	NP	PA
Fora V12 Blood Glucose System kit	NP	PA

Drug Name	Tier	Drug Restriction
Fora V20 kit	NP	PA
Fora V30A	NP	PA
Fora V30A kit	NP	PA
ForaCare GD20 Glucose Meter	NP	PA
ForaCare GD40a Glucose Meter	NP	PA
ForaCare GD40b Glucose Meter	NP	PA
ForaCare Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
FortisCare blood glucose system kit	NP	PA
FortisCare HIGH solution	P	QL(QL Overtime: Allowed 1 over 72 days)
FortisCare LOW solution	P	QL(QL Overtime: Allowed 1 over 72 days)
FortisCare NORMAL solution	P	QL(QL Overtime: Allowed 1 over 72 days)
FreeStyle Flash System kit	NP	PA
FreeStyle Freedom kit	NP	PA
FreeStyle Freedom Lite kit	NP	PA
Freestyle InsuLinx meter	NP	PA

Drug Name	Tier	Drug Restriction
FreeStyle Libre 10 Day Reader	NP	PA
FreeStyle Libre 10 Day Sensor kit	NP	PA
FreeStyle Libre 14 Day Reader	NP	PA
FreeStyle Libre 14 Day Sensor kit	NP	PA
FreeStyle Libre 2 Reader	NP	PA
FreeStyle Libre 2 Sensor kit	NP	PA
FreeStyle Lite Meter kit	NP	PA
FreeStyle Precision Neo Meter	NP	PA
FreeStyle Sidekick II kit	NP	PA
FreeStyle System Kit	NP	PA
GE100 Blood Glucose System	NP	PA
GE100 Blood Glucose System kit	NP	PA
Genteel Vacuum Lancing Device combo pack	P	QL(QL Overtime: Allowed 1 over 180 days)
Glucocard 01 Meter	NP	PA

Drug Name	Tier	Drug Restriction
Glucocard 01 Meter kit	NP	PA
Glucocard 01-Mini kit	NP	PA
Glucocard Expression	NP	PA
Glucocard Expression kit	NP	PA
Glucocard Shine Connex Meter	NP	PA
Glucocard Shine Express Meter	NP	PA
Glucocard Shine Meter	NP	PA
Glucocard Shine Meter Kit	NP	PA
Glucocard Shine XL Meter	NP	PA
Glucocard Vital kit	NP	PA
Glucocard X-Meter kit	NP	PA
Glucocom Blood Glucose kit	NP	PA
Glucocom Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Glucocom Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
GM100 kit	NP	PA

Drug Name	Tier	Drug Restriction
Gmate Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Gojji Glucose Control Solution-Normal	P	QL(QL Overtime: Allowed 1 over 72 days)
Guardian Connect Transmitter device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))
Guardian Link 3 Transmitter device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))
Guardian Real-Time Glucose Monitor	NP	PA
Guardian RT Charger	NP	PA
Guardian RT Monitor System	NP	PA
Guardian RT Monitor System kit	NP	PA
Guardian RT Software misc	NP	PA
Guardian RT Starter Kit	NP	PA
Guardian RT Test Plug Device	NP	PA
Guardian RT Transmitter misc	NP	PA
Guardian RT Transmitter Tape	NP	PA
Guardian Sensor 3 device	NP	PA; QL(QL (Limit 90 days supply(ies) per claim))

Drug Name	Tier	Drug Restriction
HealthPro Glucose Monitor	NP	PA
Healthy Accents Autolet Impression Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Healthy Accents Unilet Lancet 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
iBG-Star kit	NP	PA
iGlucose Blood Glucose Monitor kit	NP	PA
inControl Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
inControl Super Thin Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
inControl Ultra Thin Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Infinity Meter Kit	NP	PA
Infinity Starter Kit	NP	PA
Infinity Voice Glucose Monitor	NP	PA
Invacare Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Jazz Wireless 2 Meter kit	NP	PA

Drug Name	Tier	Drug Restriction
Keynote Blood Glucose System	NP	PA
Keynote Pro Blood Glucose System	NP	PA
Kinney Brand Lancets 23 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Lancets, Super Thin	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Lancets,Thin	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Lancets,Thin 23 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Lancets,Thin 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Lancets,Ultra Thin 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
lancing device	P	QL(QL Overtime: Allowed 1 over 180 days)
lancing device with lancets	P	QL(QL Overtime: Allowed 1 over 180 days)
lancing device with lancets kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Lanzo Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Latitude Diabetes System kit	NP	PA
Liberty Blood Glucose Meter	NP	PA
Liberty Blood Glucose Monitor	NP	PA
Lite Touch Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Medisense Thin Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Micro Blood Glucose kit	NP	PA
Micro Thin Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Microdot Blood Glucose Monitoring System	NP	PA
Microlet 2 Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Microlet Next Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Mini Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
MiniMed 630G Guardian Starter Transmitter Kit	NP	PA

Drug Name	Tier	Drug Restriction
Monolet Lancets 21 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Myglucohealth kit	NP	PA
Nexgen Meter kit	NP	PA
Nova Max Blood Glucose Meter	NP	PA
Nova Sureflex Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
On Call Express Meter	NP	PA
On Call Express Meter kit	NP	PA
On Call Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
On Call Plus Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
On Call Plus Meter	NP	PA
On Call Plus Meter kit	NP	PA
On Call Vivid Meter	NP	PA
On Call Vivid Meter kit	NP	PA
On Call Vivid Pal Blood Glucose Meter	NP	PA

Drug Name	Tier	Drug Restriction
On Call Vivid Pal Blood Glucose Meter kit	NP	PA
OneTouch Delica Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim))
OneTouch Delica Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim))
OneTouch Delica Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
OneTouch Delica Plus Lancet 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim))
OneTouch Delica Plus Lancet 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim))
OneTouch Delica Plus Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
OneTouch Ultra2 Meter	P	
OneTouch Ultra2 Meter kit	NP	PA
OneTouch UltraLink kit	NP	PA
OneTouch UltraMini kit	NP	
OneTouch Verio Flex Meter	P	
OneTouch Verio Flex Start kit	NP	PA

Drug Name	Tier	Drug Restriction
OneTouch Verio IQ Meter	P	
OneTouch Verio IQ Meter kit	NP	PA
OneTouch Verio Meter	P	
OneTouch Verio Reflect Meter	P	
OneTouch Verio Reflect Start kit	NP	PA
OneTouch Verio Sync kit	NP	PA
Optium Glucose Monitor System	NP	PA
Optium Glucose Monitor System kit	NP	PA
OptumRx kit	NP	PA
OptumRx meter	NP	PA
Oval Tape	NP	PA
Pharmacist Choice Blood Glucose System	NP	PA
Pip Lancet 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Pip Lancet 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
PocketChem EZ kit	NP	PA
Pogo Automatic Blood Glucose System	NP	PA
Precision Link kit	NP	PA
Precision QID Monitor	NP	PA
Precision Sof-Tact Monitor kit	NP	PA
Precision Xtra Monitor	NP	PA
Premier BLU Glucose Meter	NP	PA
Premier Compact Glucose Meter kit	NP	PA
Premier Voice Glucose Meter	NP	PA
Premium Blood Glucose Monitoring System	NP	PA
Premium V10	NP	PA
Presto Pro Blood Glucose Meter	NP	PA
Pro Voice V8 Glucose Monitor	NP	PA
Pro Voice V9 Glucose Monitor	NP	PA

Drug Name	Tier	Drug Restriction
Prodigy Autocode Blood Glucose Monitoring System	NP	PA
Prodigy Autocode Meter kit	NP	PA
Prodigy Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Prodigy Pocket Meter kit	NP	PA
Prodigy Twist Top Lancet 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Prodigy Voice Glucose Meter kit	NP	PA
Pure Comfort Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Pure Comfort Safety Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Quicktek kit	NP	PA
Quintet AC meter	NP	PA
Quintet Blood Glucose Meter	NP	PA
Real-Time Starter Kit	NP	PA
Refuah Plus Glucose Monitor kit	NP	PA
ReliaMed Lancet 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
ReliaMed Mini Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
ReliaMed Safety Seal Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
ReliaMed Safety Seal Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
ReliOn All-In-One Meter kit	NP	PA
Relion Confirm kit	NP	PA
ReliOn Micro Glucose Monitor kit	NP	PA
ReliOn Prime Meter	NP	PA
ReliOn Thin Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
ReliOn Ultra Thin Plus Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Replacement Pediatric Monitor	NP	PA
Reveal Blood Glucose Meter kit	NP	PA
Rightest GD500 Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Rightest GL300 Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Rightest GM550 System kit	NP	PA

Drug Name	Tier	Drug Restriction
Safety Seal Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Smart Sense Lancets 21 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Smart Sense Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Smart Sense Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Smart Sense Monitoring System	NP	PA
SmartDiabetes Vantage	P	QL(QL Overtime: Allowed 1 over 180 days)
Smartest Eject kit	NP	PA
Smartest Persona Starter kit	NP	PA
Smartest Pronto Starter kit	NP	PA
Smartest Protege kit	NP	PA
Sof-Sensor device	NP	PA
Solus V2 Audible Meter	NP	PA
Solus V2 Audible Meter kit	NP	PA
Solus V2 Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Sterilance TL 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Sterilance TL 32 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Super Thin Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Super Thin Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Super Thin Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Super Thin Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Sure Comfort Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Sure Comfort Lancing Pen	P	QL(QL Overtime: Allowed 1 over 180 days)
Sure Edge Blood Glucose Meter	NP	PA
Sureflex Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Sureflex Lancing Device with Lancets kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Sure-Test EasyPlus Mini Meter	NP	PA
TechLITE Lancets 25 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
TechLITE Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
TechLITE Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Telcare BGM kit	NP	PA
TelCare Blood Glucose kit	NP	PA
Test N'Go Blood Glucose System	NP	PA
Thin Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Topcare Universal1 Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
True Metrix Air Glucose Meter	NP	PA
True Metrix Air Glucose Meter kit	NP	PA
True Metrix Glucose Meter	NP	PA
True Metrix Go Glucose Meter	NP	PA
True Metrix Level 1 solution	P	QL(QL Overtime: Allowed 1 over 72 days)
True Metrix Level 2 solution	P	QL(QL Overtime: Allowed 1 over 72 days)
True Metrix Level 3 solution	P	QL(QL Overtime: Allowed 1 over 72 days)
True2Go Blood Glucose System kit	NP	PA
TrueControl Level 0 solution	P	QL(QL Overtime: Allowed 1 over 72 days)
TrueControl Level 1 solution	P	QL(QL Overtime: Allowed 1 over 72 days)

Drug Name	Tier	Drug Restriction
TRUEdraw Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
TRUEplus Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
TRUEplus Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
TRUEplus Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
TRUEplus Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Trueresult Blood Glucose System	NP	PA
Trueresult Blood Glucose System kit	NP	PA
Truetest High Glucose Control solution	P	QL(QL Overtime: Allowed 1 over 72 days)
Truetest Low Glucose Control solution	P	QL(QL Overtime: Allowed 1 over 72 days)
Truetest Normal Glucose Control solution	P	QL(QL Overtime: Allowed 1 over 72 days)
Truetrack Blood Glucose System kit	NP	PA
TrueTrack Smart System kit	NP	PA
Ulti-Lance misc	P	QL(QL Overtime: Allowed 1 over 180 days)
Ultilet Classic Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Ultima Monitor	NP	PA
Ultra Thin Lancets	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultra Thin Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultra Thin Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultra Thin Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Ultra Thin Plus Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
UltraTRAK Glucose Meter	NP	PA
UltraTRAK Glucose Meter kit	NP	PA
UltraTrak Ultimate	NP	PA
Unilet ComforTouch Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet ComforTouch Lancet 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet Excelite II Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet Excelite Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet GP Lancet	P	QL(QL (Limit 90 days supply(ies) per claim)); APA

Drug Name	Tier	Drug Restriction
Unilet Lancet 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet Lancet 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unilet Super Thin Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unistik Touch Lancets 21 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unistik Touch Lancets 23 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unistik Touch Lancets 28 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Unistik Touch Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Universal 1 Lancets 21 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Universal 1 Lancets 26 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Universal 1 Lancets 30 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Universal 1 Lancets 33 gauge	P	QL(QL (Limit 90 days supply(ies) per claim)); APA
Verasens Blood Glucose Meter	NP	PA
Verasens Meter Starter Kit	NP	PA
Victory Blood Glucose Monitor	NP	PA

Drug Name	Tier	Drug Restriction
VivaGuard Ino Glucose Meter	NP	PA
VivaGuard Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Wavesense AMP kit	NP	PA
WaveSense Presto	NP	PA
WaveSense Presto kit	NP	PA
MEDICAL SUPPLIES AND DME - INSULIN NEEDLES-SYRINGES AND ADMIN SUPPLIES		
1st Tier Unifine Pentips 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips Plus 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips Plus 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips Plus 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips Plus 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
1st Tier Unifine Pentips Plus 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
AboutTime Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
AboutTime Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
AboutTime Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
AboutTime Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Advocate Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Advocate Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Advocate Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Advocate Syringes 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Advocate Syringes 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Assure ID Insulin Safety 0.5 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Assure ID Insulin Safety 1 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Assure ID Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Assure ID Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
BD Autoshield Pen Needle 29 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Eclipse Luer-Lok 1 mL 30 gauge x 1/2" syringe	P	
BD Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 25 gauge x 5/8"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 25 x 1"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 26 x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
BD Insulin Syringe Micro-Fine 0.3 mL 28	P	
BD Insulin Syringe Micro-Fine 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Micro-Fine 1/2 mL 28 gauge x 1/2"	P	
BD Insulin Syringe Safety-Lok 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Slip Tip 1 mL	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine (half unit) 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Ultra-Fine 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Integra Insulin Syringe 1 mL 29 gauge x 1/2"	P	
BD Lo-Dose Micro-Fine IV 0.3 mL 28 gauge x 1/2" syringe	P	
BD Lo-Dose Micro-Fine IV 1/2 mL 28 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
BD Lo-Dose Ultra-Fine 0.3 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
BD Lo-Dose Ultra-Fine 0.5 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
BD Nano 2nd Gen Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
BD SafetyGlide Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD SafetyGlide Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
BD SafetyGlide Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	
BD SafetyGlide Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD SafetyGlide Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD SafetyGlide Insulin Syringe 1 mL 31 gauge x 15/64"	P	QL(Allowed 5 per 1 day)
BD SafetyGlide Syringe 1 mL 27 gauge x 5/8"	P	
BD Ultra-Fine Micro Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
BD Ultra-Fine Mini Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
BD Ultra-Fine Nano Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
BD Ultra-Fine Original Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
BD Ultra-Fine Short Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
BD Veo Insulin Syringe Ultra-Fine (half unit) 0.3 mL 31 gauge x 15/64"	P	
BD Veo Insulin Syringe Ultra-Fine 1 mL 31 gauge x 15/64"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
CareFine Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
CareTouch Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
CareTouch Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
CareTouch Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
CareTouch Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
CareTouch Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Clickfine Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Clickfine Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Clickfine Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Comfort EZ Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Comfort EZ Pen Needles 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Comfort EZ Pen Needles 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe (half unit) 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 15/64"	P	
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe (half unit) 0.5 mL 31 gauge x 15/64"	P	

Drug Name	Tier	Drug Restriction
Droplet Insulin Syringe (half unit) 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 1 mL 31 gauge x 15/64"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Droplet Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Droplet Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
DropSafe Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
DropSafe Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	
Easy Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Easy Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Comfort Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Pen Needles 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Easy Comfort Pen Needles 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Pen Needles 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Comfort Pen Needles 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Easy Touch 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Easy Touch 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Easy Touch 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Easy Touch 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Easy Touch 32 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Easy Touch 32 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Easy Touch 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
Easy Touch FlipLock Insulin 1 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Easy Touch FlipLock Insulin 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Easy Touch FlipLock Insulin syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch FlipLock Insulin syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Safety Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Safety Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Easy Touch Insulin Safety Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Safety Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Easy Touch Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1/2 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Easy Touch Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Easy Touch SheathLock Insulin 1 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Easy Touch SheathLock Insulin 1 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Easy Touch SheathLock Insulin 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Easy Touch SheathLock Insulin syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Exel Insulin 0.3 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Exel Insulin 0.5 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Exel Insulin 1 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Exel Insulin 1/2 mL 28 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
FreeStyle Precision 0.5 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
FreeStyle Precision 0.5 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
FreeStyle Precision 1 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
FreeStyle Precision 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
HealthWise Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
HealthWise Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
HealthWise Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
HealthWise Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Healthy Accents Unifine Pentip 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Healthy Accents Unifine Pentip 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Healthy Accents Unifine Pentip 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Healthy Accents Unifine Pentip 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Healthy Accents Unifine Pentip 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
inControl Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
inControl Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
inControl Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
inControl Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
inControl Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Insulin Syringe MicroFine 0.3 mL 28 gauge x 1/2"	P	
Insulin Syringe MicroFine 1 mL 27 gauge x 5/8"	P	QL(Allowed 5 per 1 day)
Insulin Syringe MicroFine 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe needleless 1 mL	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
insulin syringe U-100 with needle 0.3 mL 29 gauge	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.3 mL 30	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
insulin syringe U-100 with needle 1 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 28 gauge	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 29 gauge x 7/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 30 gauge x 7/16"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 31 gauge x 15/64"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
insulin syringe U-100 with needle 1/2 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1/2 mL 28 gauge	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1/2 mL 29	P	QL(Allowed 5 per 1 day)
insulin syringe U-100 with needle 1/2 mL 30 gauge	P	QL(Allowed 5 per 1 day)
Insulin Syringe Ultrafine 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
insulin syringe-needle U-100 half unit marking 0.3 mL 31 gauge x 1/4"	P	
insulin syringes (disposable) 1 mL	P	QL(Allowed 5 per 1 day)
Insupen 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Insupen 30 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Insupen 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Insupen 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Insupen 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Insupen 32 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Insupen 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Pen Needles 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Pen Needles 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Pen Needles 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Pen Needles 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Lite Touch Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 28 gauge	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 29 gauge	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 30 gauge x 7/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1/2 mL 28 gauge	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Lite Touch Insulin Syringe 1/2 mL 29	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Lite Touch Insulin Syringe 1/2 mL 30 gauge	P	QL(Allowed 5 per 1 day)
Magellan Insulin Safety Syringe 0.3 mL 29 x 1/2"	P	QL(Allowed 5 per 1 day)
Magellan Insulin Safety Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Magellan Insulin Safety Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Magellan Insulin Safety Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Magellan Syringe 0.3 mL 30 x 5/16"	P	QL(Allowed 5 per 1 day)
Magellan Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Maxicomfort II Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Maxicomfort Insulin Syringe 1 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Maxi-Comfort Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Maxicomfort Insulin Syringe 1/2 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Maxi-Comfort Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Maxicomfort Safety Pen Needle 29 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Mini Ultra-Thin II 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Monoject Insulin Safety Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Safety Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Safety Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Safety Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Safety Syringe 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Monoject Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 25 gauge x 5/8"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 27 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Monoject Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Monoject Syringe 1/2 mL 28 gauge	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Monoject Ultra Comfort Insulin 1/2 mL 28 gauge syringe	P	QL(Allowed 5 per 1 day)
NovoFine 30 30 gauge x 1/3" needle	P	QL(Allowed 5 per 1 day)
Novofine 32 32 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Novofine Autocover 30 gauge x 1/3" needle	P	QL(Allowed 5 per 1 day)
NovoFine Plus 32 gauge x 1/6" needle	P	QL(Allowed 5 per 1 day)
NovoTwist 30 gauge x 1/3" needle	P	
NovoTwist 32 gauge x 1/5" needle	P	QL(Allowed 5 per 1 day)
Omnipod Dash Personal Diabetes Manager Kit	P	PA
Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 31 gauge x 1/3"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
pen needle, diabetic 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Pentips 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Pentips 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Pentips 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Pentips 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Pentips 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Pro Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Pro Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Pro Comfort Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Pro Comfort Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Pro Comfort Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Prodigy Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Prodigy Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Prodigy Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Pure Comfort Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Pure Comfort Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Pure Comfort Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
ReliOn Needles 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
ReliOn Pen Needles 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
SafeSnap Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
SafeSnap Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
SafeSnap Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
SafeSnap Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
SafeSnap Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Safety Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Sure Comfort Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Insulin Syringe U-100 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure Comfort Pen Needle 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Sure Comfort Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure Comfort Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Sure Comfort Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Sure-Fine Pen Needles 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure-Fine Pen Needles 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Sure-Fine Pen Needles 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Sure-Ject Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.3 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.3 mL 31 gauge x 15/64"	P	
TechLITE Insulin Syringe (half unit) 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
TechLITE Insulin Syringe (half unit) 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe (half unit) 0.5 mL 31 gauge x 15/64"	P	
TechLITE Insulin Syringe (half unit) 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe 1 mL 31 gauge x 15/64"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
TechLITE Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Topcare Clickfine 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Topcare Clickfine 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 0.3 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 0.3 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 0.3 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Topcare Ultra Comfort 0.5 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 0.5 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 0.5 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 1 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 1 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
Topcare Ultra Comfort 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
True Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
True Comfort Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
True Comfort Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
True Comfort Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
True Comfort Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.3 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.3 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.3 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.5 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.5 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 0.5 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 1 mL 28 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 1 mL 29 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 1 mL 30 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
TRUEplus Insulin 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Insulin 1/2 mL 28 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
TRUEplus Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
TRUEplus Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
TRUEplus Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
TRUEplus Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
TRUEplus Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
UltiCare 0.3 mL 29 x 1/2" syringe	P	
UltiCare 0.3 mL 30 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
UltiCare 0.3 mL 30 x 5/16" syringe	P	
UltiCare 0.3 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
UltiCare 0.5 mL 30 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
UltiCare 0.5 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
UltiCare 1 mL 29 x 1/2" syringe	P	
UltiCare 1 mL 30 gauge x 1/2" syringe	P	QL(Allowed 5 per 1 day)
UltiCare 1 mL 30 gauge x 5/16" syringe	P	
UltiCare 1 mL 31 gauge x 5/16" syringe	P	QL(Allowed 5 per 1 day)
UltiCare 1/2 mL 29 x 1/2" syringe	P	
UltiCare 1/2 mL 30 gauge x 5/16" syringe	P	
UltiCare Insulin Syringe (half unit) 0.3 mL 31 gauge x 1/4"	P	
UltiCare Pen Needle 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
UltiCare Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
UltiCare Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
UltiCare Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
UltiCare Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
UltiCare Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
UltiGuard SafePack-Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
UltiGuard SafePack-Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
UltiGuard SafePack-Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
UltiGuard SafePack-Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
UltiGuard SafePack-Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Ultilet Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe (half unit) 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe (half unit) 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe (half unit) 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.3 mL 30	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 28 gauge	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Ultra Comfort Insulin Syringe 1 mL 29 gauge	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 30 gauge x 7/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1/2 mL 28 gauge	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1/2 mL 28 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1/2 mL 29	P	QL(Allowed 5 per 1 day)
Ultra Comfort Insulin Syringe 1/2 mL 30 gauge	P	QL(Allowed 5 per 1 day)
Ultra Thin Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Ultracare Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 1 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultracare Pen Needle 31 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Ultracare Pen Needle 31 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Ultracare Pen Needle 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Ultracare Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)
Ultracare Pen Needle 32 gauge x 3/16"	P	QL(Allowed 5 per 1 day)
Ultracare Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 0.5 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 1 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II (Short) Insulin syringe 1 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Ultra-Thin II (Short) Pen NDL 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Ultra-Thin II Insulin Pen Needles 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II Insulin Syringe 0.3 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II Insulin Syringe 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Ultra-Thin II Insulin Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
Unifine Pentips 29 gauge needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 32 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
Unifine Pentips Plus 29 gauge x 1/2" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips Plus 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips Plus 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips Plus 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
Unifine Pentips Plus 32 gauge x 5/32" needle	P	QL(Allowed 5 per 1 day)
Unifine SafeControl 30 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
VanishPoint Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
VanishPoint Syringe 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)
MEDICAL SUPPLIES AND DME - MALE CONDOMS		
Aimsco Latex Condom	P	QL(Allowed 36 per Rx)
Condoms-Prem Lubricated	P	QL(Allowed 36 per Rx)
Fantasy Condom	P	QL(Allowed 36 per Rx)

Drug Name	Tier	Drug Restriction
Kimono Condoms(Non-lubricated)	P	QL(Allowed 36 per Rx)
Kimono Maxx Condoms	P	QL(Allowed 36 per Rx)
Kimono MicroThin Aqua Lube Condom	P	QL(Allowed 36 per Rx)
Kimono MicroThin Condoms	P	QL(Allowed 36 per Rx)
Kimono MicroThin Large Condoms	P	QL(Allowed 36 per Rx)
Kimono Textured Condoms	P	QL(Allowed 36 per Rx)
Trustex Latex Condom	P	QL(Allowed 36 per Rx)
Trustex Lubricated Condoms	P	QL(Allowed 36 per Rx)
Trustex Non-Lubricated Condoms	P	QL(Allowed 36 per Rx)
Trustex-RIA Lubricated Condoms	P	QL(Allowed 36 per Rx)
Trustex-RIA Lubricated/Spermicide Condom	P	QL(Allowed 36 per Rx)
Trustex-RIA Non-Lubricated Condoms	P	QL(Allowed 36 per Rx)
MEDICAL SUPPLIES AND DME - MISCELLANEOUS OTHER		

Drug Name	Tier	Drug Restriction
Airs Pediatric Disposable Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Disposable Paper Mouthpiece	P	QL(QL Overtime: Allowed 1 over 180 days)
Omnipod Dash 5 Pack Insulin Pod subcutaneous cartridge	P	PA
Omnipod Insulin Refill subcutaneous cartridge	P	PA
Pediatric Mouthpieces	P	QL(QL Overtime: Allowed 1 over 180 days)
Pediatric-Small Mouth Adaptor misc	P	QL(QL Overtime: Allowed 1 over 180 days)
MEDICAL SUPPLIES AND DME - NEBULIZERS		
Altera Nebulizer misc	P	QL(QL Overtime: Allowed 1 over 360 days)
MEDICAL SUPPLIES AND DME - NEEDLES AND SYRINGES		
BD Eclipse Luer-Lok 1 mL 27 x 1/2" syringe	P	
BD Luer-Lok Syringe 1 mL 20 gauge x 1"	P	
BD Luer-Lok Syringe 10 mL 20 x 1 1/2"	P	
BD Luer-Lok Syringe 10 mL 20 x 1"	P	
BD Luer-Lok Syringe 10 mL 21 gauge x 1"	P	
BD Luer-Lok Syringe 10 mL 21 x 1 1/2"	P	
BD Luer-Lok Syringe 10 mL 22 x 1"	P	
BD Luer-Lok Syringe 10 mL 23 x 1 1/4"	P	
BD Luer-Lok Syringe 3 mL 18 x 1 1/2"	P	
BD Luer-Lok Syringe 3 mL 20 gauge x 1 1/2"	P	
BD Luer-Lok Syringe 3 mL 20 gauge x 1"	P	
BD Luer-Lok Syringe 3 mL 23 gauge x 1 1/2"	P	
BD Luer-Lok Syringe 3 mL 23 x 1"	P	
BD Luer-Lok Syringe 3 mL 25 x 1 1/2"	P	
BD Luer-Lok Syringe 3 mL 25 x 5/8"	P	

Drug Name	Tier	Drug Restriction
BD Luer-Lok Syringe 3 mL 26 x 5/8"	P	
BD Luer-Lok Syringe 5 mL 20 x 1 1/2"	P	
BD Luer-Lok Syringe 5 mL 20 x 1"	P	
BD Luer-Lok Syringe 5 mL 21 gauge x 1"	P	
BD Luer-Lok Syringe 5 mL 22 gauge x 1 1/2"	P	
BD Luer-Lok Syringe 5 mL 22 x 1"	P	
BD SafetyGlide Shielding Regular Bevel 1 mL 25 gauge x 5/8" syringe	P	
BD SafetyGlide Syringe 10 mL 22 x 1 1/2"	P	
BD Safety-Lok Detachable Needle 3 mL 22 gauge x 1" syringe	P	
BD Safety-Lok Detachable Needle 5 mL 21 gauge x 1 1/2" syringe	P	

Drug Name	Tier	Drug Restriction
BD Safety-Lok Detachable Needle syringe 3 mL 21 gauge x 1 1/2"	P	
BD Slip Tip Syringe 1 mL 26 gauge x 5/8"	P	
Easy Touch FlipLock Syringe 1 mL 26 gauge x 3/8"	P	
Flow-Eze Vented Needle	P	
Integra Syringe 1 mL 25 gauge x 1"	P	
Lifeshield Blunt Cannula 1 mL 18 gauge x 1" syringe	P	
Lifeshield Blunt Cannula 3 mL 18 x 1" syringe	P	
Magellan Safety Syringe 1 mL 23 gauge x 1"	P	
Monoject 3cc Syringe 3 mL 25 gauge x 1"	P	
Monoject Syringe 12 mL 18 gauge x 1"	P	
Monoject Syringe 12 mL 20 x 1 1/2"	P	
Monoject Syringe 12 mL 21 gauge x 1 1/2"	P	

Drug Name	Tier	Drug Restriction
Monoject Syringe 12 mL 21 gauge x 1"	P	
Monoject Syringe 3 mL 20 x 3/4"	P	
Monoject Syringe 3 mL 25 x 1 1/4"	P	
Monoject Syringe 3 mL 27 gauge x 1 1/4"	P	
Monoject Syringe 6 mL 20 x 1 1/2"	P	
Monoject Syringe 6 mL 21 x 1 1/2"	P	
Monoject Syringe 6 mL 21 x 1"	P	
Monoject Syringe 6 mL 22 x 1 1/2"	P	
Syringe 3 mL 21 gauge x 1"	P	
Syringe 3cc 22 gauge x 3/4"	P	
syringe with needle 1 mL 25 gauge x 1"	P	
syringe with needle 3 mL 22 x 1 1/2"	P	
UltiCare 1.5 mL 22 gauge x 1 1/2" syringe	P	
MEDICAL SUPPLIES AND DME - PARENTERAL THERAPY SUPPLIES		
Paradigm Real-Time Transmitter	NP	PA
MEDICAL SUPPLIES AND DME - RESPIRATORY THERAPY SUPPLIES		
Ace Aerosol Cloud Enhancer spacer	P	QL(QL Overtime: Allowed 1 over 360 days)
Adult Aerosol Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Adult Disposable Mouthpiece	P	QL(QL Overtime: Allowed 1 over 180 days)
Aerochamber Mini	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber MV spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber Plus Flow-Vu	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber Plus Flow-Vu,Large Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber Plus Flow-Vu,Medium Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber Plus Flow-Vu,Small Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber Plus Z Stat Large Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
AeroChamber Plus Z Stat Medium Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
AeroChamber Plus Z Stat Small Mask	P	QL(QL Overtime: Allowed 2 over 360 days)

Drug Name	Tier	Drug Restriction
Aerochamber Plus Z Stat spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Aerochamber with Flowsignal	P	QL(QL Overtime: Allowed 2 over 360 days)
AeroChamber Z-Stat Plus-Flow Signal	P	QL(QL Overtime: Allowed 2 over 360 days)
AeroTrach Plus spacer	P	QL(QL Overtime: Allowed 1 over 360 days)
Aerovent Plus spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Air Tube With Air Plugs	P	QL(QL Overtime: Allowed 1 over 360 days)
All Flow 1000 PFT Filter	P	QL(QL Overtime: Allowed 1 over 360 days)
BreatheRite MDI Spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite Spacer and Mask, Adult	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite Spacer and Mask, Child	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite Spacer and Mask, Infant	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite Spacer and Mask, Neonate	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite Spacer and Mask, Small Child	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite with Mask, Large	P	QL(QL Overtime: Allowed 2 over 360 days)

Drug Name	Tier	Drug Restriction
BreatheRite with Mask, Medium	P	QL(QL Overtime: Allowed 2 over 360 days)
BreatheRite with Mask, Small	P	QL(QL Overtime: Allowed 2 over 360 days)
Bubbles the Fish Pedi Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Clever Choice Holding Chamber-Large Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Clever Choice Holding Chamber-Medium Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Clever Choice Holding Chamber-Small Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Compact Space Chamber	P	QL(QL Overtime: Allowed 2 over 360 days)
Compact Space Chamber-Lrg Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Compact Space Chamber-Med Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Compact Space Chamber-Sm Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
EasiVent Holding Chamber	P	QL(QL Overtime: Allowed 2 over 360 days)
EasiVent Mask Large	P	QL(QL Overtime: Allowed 2 over 360 days)
EasiVent Mask Medium	P	QL(QL Overtime: Allowed 2 over 360 days)

Drug Name	Tier	Drug Restriction
EasiVent Mask Small	P	QL(QL Overtime: Allowed 2 over 360 days)
eBase Controller device	P	QL(QL Overtime: Allowed 1 over 360 days)
eRapid Nebulizer Handset	P	QL(QL Overtime: Allowed 1 over 360 days)
Expiratory Mouthpiece	P	QL(QL Overtime: Allowed 1 over 180 days)
E-Z Spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Filters Replacement	P	QL(QL Overtime: Allowed 1 over 360 days)
Flexichamber spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Hypersoniq Nebulizer Cartridge	P	QL(QL Overtime: Allowed 1 over 360 days)
Innospire Replacement Filter	P	QL(QL Overtime: Allowed 1 over 360 days)
InspiraChamber spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
InspiraChamber with Mask-Large	P	QL(QL Overtime: Allowed 2 over 360 days)
InspiraChamber with Mask-Med	P	QL(QL Overtime: Allowed 2 over 360 days)
InspiraChamber with Mask-Small	P	QL(QL Overtime: Allowed 2 over 360 days)
Inspiration Elite Filter	P	QL(QL Overtime: Allowed 1 over 360 days)
Lite Touch-Medium Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
LiteAire MDI Chamber	P	QL(QL Overtime: Allowed 2 over 360 days)
LiteTouch-Large Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
LiteTouch-Small Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Micro Elite Lithium Battery misc	P	QL(QL Overtime: Allowed 1 over 360 days)
Micro Elite Replacement Filter	P	QL(QL Overtime: Allowed 1 over 360 days)
Microchamber spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Microspacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Mini Elite Filter Replacement	P	QL(QL Overtime: Allowed 1 over 360 days)
Mini Elite Lithium Battery	P	QL(QL Overtime: Allowed 1 over 360 days)
Mouthpiece device	P	QL(QL Overtime: Allowed 1 over 360 days)
Nose Clip	P	QL(QL Overtime: Allowed 1 over 360 days)
One Way Valved Mouthpiece device	P	QL(QL Overtime: Allowed 1 over 180 days)
Optichamber Adult Mask-Large	P	QL(QL Overtime: Allowed 1 over 360 days)
OptiChamber Diamond VHC spacer	P	QL(QL Overtime: Allowed 2 over 360 days)

Drug Name	Tier	Drug Restriction
OptiChamber Diamond VHC with Large Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
OptiChamber Diamond VHC with Medium Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
OptiChamber Diamond VHC with Small Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Pari Baby Conversion Kit - Size 1	P	QL(QL Overtime: Allowed 1 over 360 days)
Pari Baby Conversion Kit - Size 2	P	QL(QL Overtime: Allowed 1 over 360 days)
Pari Baby Conversion Kit - Size 3	P	QL(QL Overtime: Allowed 1 over 360 days)
PFLEX Inspiratory Trainer device	P	QL(QL Overtime: Allowed 1 over 360 days)
Pillow Mask Child	P	QL(QL Overtime: Allowed 1 over 360 days)
Pillow Mask Pediatric	P	QL(QL Overtime: Allowed 1 over 360 days)
POCKET CHAMBER spacer	P	QL(QL Overtime: Allowed 2 over 360 days)
Pro Comfort Spacer-Adult Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Pro Comfort Spacer-Child Mask	P	QL(QL Overtime: Allowed 2 over 360 days)
Procare Spacer With Adult Mask	P	
Procare Spacer With Child Mask	P	
ProChamber	P	QL(QL Overtime: Allowed 2 over 360 days)
Proneb Ultra Filter Set	P	QL(QL Overtime: Allowed 1 over 360 days)
Proneb Ultra II Filter Assembly	P	QL(QL Overtime: Allowed 1 over 360 days)
RiteFlo Aerochamber	P	QL(QL Overtime: Allowed 2 over 360 days)
Sami The Seal Filter	P	QL(QL Overtime: Allowed 1 over 360 days)
Sami The Seal Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Sidestream Adult Face Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Sidestream Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Sidestream Pediatric Face Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Silicone Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
Silicone Mask - Infant	P	QL(QL Overtime: Allowed 1 over 360 days)
Silicone Mask - Pediatric	P	QL(QL Overtime: Allowed 1 over 360 days)
SootheNeb NBL100 Adult Mask	P	QL(QL Overtime: Allowed 1 over 360 days)

Drug Name	Tier	Drug Restriction
SootheNeb NBL100 Child Mask	P	QL(QL Overtime: Allowed 1 over 360 days)
SootheNeb NBL100 Med Cup misc	P	QL(QL Overtime: Allowed 1 over 360 days)
SootheNeb NBL100 Mesh Cap	P	QL(QL Overtime: Allowed 1 over 360 days)
Threshold IMT Trainer device	P	QL(QL Overtime: Allowed 1 over 360 days)
Vortex Holding Chamber	P	QL(QL Overtime: Allowed 2 over 360 days)
Vortex VHC Frog Mask-Child	P	QL(QL Overtime: Allowed 2 over 360 days)
WINDMILL TRAINER device	P	QL(QL Overtime: Allowed 1 over 360 days)
Wing Tip Tubing misc	P	QL(QL Overtime: Allowed 1 over 360 days)
MEDICAL SUPPLIES AND DME - SUBCUTANEOUS INSULIN DELIVERY DEVICES		
V-GO 20 device	NP	PA
V-GO 30 device	NP	PA
V-GO 40 device	NP	PA
MEDICAL SUPPLIES AND DME - SUBCUTANEOUS INSULIN PUMP		
Omnipod Insulin Management	P	PA
MEDICAL SUPPLIES AND DME - URINE KETONE TESTS		
Ketone Urine Test strips	P	
TRUEplus Ketone strips	P	
METABOLIC MODIFIERS		
HYPERPARATHYROID TREATMENT AGENTS - VITAMIN D ANALOG-TYPE		
doxercalciferol 0.5 mcg capsule	P	
doxercalciferol 1 mcg capsule	P	
doxercalciferol 2.5 mcg capsule	P	
paricalcitol 1 mcg capsule	NP	PA
paricalcitol 2 mcg capsule	NP	PA
paricalcitol 4 mcg capsule	NP	PA
Rayaldee 30 mcg capsule,extended release	NP	PA
Zemplar 1 mcg capsule	NP	PA
Zemplar 2 mcg capsule	NP	PA
METABOLIC MODIFIER - CARNITINE REPLENISHER AGENTS		
Carnitor (sugar-free) 100 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day)

Drug Name	Tier	Drug Restriction
Carnitor 100 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day)
Carnitor 330 mg tablet	NP	PA; QL(Allowed 3 per 1 day)
levocarnitine (with sugar) 100 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day)
levocarnitine 100 mg/mL oral solution	NP	PA
METABOLIC MODIFIER - HEREDITARY TYROSINEMIA TREATMENT AGENTS		
nitisinone 10 mg capsule	P	SP
nitisinone 2 mg capsule	P	SP
nitisinone 5 mg capsule	P	SP
Nityr 10 mg tablet	NP	PA; SP
Nityr 2 mg tablet	NP	PA; SP
Nityr 5 mg tablet	NP	PA; SP
Orfadin 10 mg capsule	P	SP
Orfadin 2 mg capsule	P	SP
Orfadin 20 mg capsule	P	SP
Orfadin 4 mg/mL oral suspension	NP	PA; SP
Orfadin 5 mg capsule	P	SP
METABOLIC MODIFIER - HOMOCYSTINURIA TREATMENT AGENTS		
Cystadane 1 gram/1.7 mL oral powder	NP	PA; SP
METABOLIC MODIFIER - UREA CYCLE DISORDER AGENTS-CONJUGATING AGENTS		
Buphenyl 0.94 gram/gram oral powder	NP	PA; SP
Buphenyl 500 mg tablet	NP	PA; SP
Ravicti 1.1 gram/mL oral liquid	NP	PA; SP
sodium phenylbutyrate 0.94 gram/gram oral powder	NP	PA; SP
sodium phenylbutyrate 500 mg tablet	NP	PA; SP
METABOLIC MODIFIER-CARBAMOYL PHOSPHATE SYNTHETASE 1 (CPS 1) ACTIVATOR		
Carbaglu 200 mg dispersible tablet	NP	PA; SP
PHARMACOENHANCER - CYTOCHROME P450 INHIBITORS		
Tybost 150 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
PHARMACOLOGICAL CHAPERONE TX - ALPHA-GALACTOSIDASE A ENZYME STABILIZER		

Drug Name	Tier	Drug Restriction
Galafold 123 mg capsule	NP	PA; SP
PHENYLKETONURIA(PKU) TX AGENTS - COFACTOR OF PHENYLALANINE HYDROXYLASE		
Kuvan 100 mg oral powder packet	NP	PA; SP
Kuvan 100 mg soluble tablet	NP	PA; SP
Kuvan 500 mg oral powder packet	NP	PA; SP
sapropterin 100 mg oral powder packet	NP	PA; SP
sapropterin 100 mg soluble tablet	NP	PA; SP
sapropterin 500 mg oral powder packet	NP	PA; SP
MISCELLANEOUS		
OTHER		
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	P	AL(Maximum Age 13 Years); QL(Allowed 1 per 1 day)
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	P	QL(Allowed 5 per 1 day)
	NP	PA
MOUTH-THROAT-DENTAL - PREPARATIONS		
DENTAL PRODUCT - FLUORIDE PREPARATIONS		
	NP	PA
Denta 5000 Plus 1.1 % cream	NP	PA; QL(Allowed 102 per Rx)
DentaGel 1.1 %	NP	PA; QL(Allowed 672 per Rx)

Drug Name	Tier	Drug Restriction
Fluor-a-day 2.5 mg fluoride (5.56 mg sodium fluoride)/mL oral drops	P	
fluoride 0.25 mg (0.55 mg sodium fluoride) chewable tablet	P	
fluoride 0.5 mg (1.1 mg sodium fluoride) chewable tablet	P	
fluoride 0.5 mg (1.1 mg sodium fluoride)/mL oral drops	P	
fluoride 1 mg (2.2 mg sodium fluoride) chewable tablet	P	
Fluoritab 0.125 mg (0.275 mg sodium fluoride)/drop oral drops	P	
Fluoritab 0.5 mg fluoride (1.1 mg sodium fluoride) chewable tablet	P	
Fluoritab 1 mg fluoride (2.2 mg sodium fluoride) chewable tablet	P	
Ludent Fluoride 0.25 mg fluoride (0.55 mg sod.fluorid) chewable tablet	P	
Ludent Fluoride 0.5 mg fluoride (1.1 mg sod.fluoride) chewable tablet	P	
Ludent Fluoride 1 mg fluoride (2.2 mg sodium fluoride) chewable tablet	P	
SF 1.1 % dental gel	NP	PA; QL(Allowed 672 per Rx)
SF 5000 Plus 1.1 % dental cream	NP	PA; QL(Allowed 102 per Rx)
sodium fluoride 1.1 % dental cream	NP	PA; QL(Allowed 102 per Rx)
sodium fluoride 1.1 % dental gel	NP	PA; QL(Allowed 672 per Rx)
sodium fluoride 1.1 %-potassium nitrate 5 % dental paste	NP	PA
Sodium Fluoride 5000 Plus 1.1 % dental cream	NP	PA; QL(Allowed 102 per Rx)
MOUTH AND THROAT - ANTIFUNGALS		
clotrimazole 10 mg troche	P	
nystatin 100,000 unit/mL oral suspension	P	QL(Allowed 120 per Rx)

Drug Name	Tier	Drug Restriction
MOUTH AND THROAT - ANTISEPTICS		
chlorhexidine gluconate 0.12 % mouthwash	P	
MOUTH AND THROAT - ARTIFICIAL SALIVA		
Aquoral mucosal spray	NP	PA
MOUTH AND THROAT - GLUCOCORTICOIDS		
Oralone 0.1 % dental paste	P	QL(Allowed 5 per Rx)
triamcinolone acetonide 0.1 % dental paste	P	QL(Allowed 5 per Rx)
MOUTH AND THROAT - LOCAL ANESTHETIC AMIDES		
lidocaine HCl 2 % mucosal jelly	P	QL(Allowed 30 per Rx)
lidocaine HCl 2 % mucosal solution	P	QL(Allowed 100 per Rx)
lidocaine HCl 4 % (40 mg/mL) mucosal solution	P	
Lidocaine Viscous 2 % mucosal solution	P	QL(Allowed 100 per Rx)
MOUTH AND THROAT - MUCOSITIS-STOMATITIS AGENTS		
gelX oral mucosal gel	NP	PA
MOUTH AND THROAT - SALIVA STIMULANTS		
cevimeline 30 mg capsule	NP	PA
Evoxac 30 mg capsule	NP	PA
pilocarpine 5 mg tablet	P	QL(Allowed 6 per 1 day)
pilocarpine 7.5 mg tablet	P	
Salagen (pilocarpine) 5 mg tablet	NP	PA; QL(Allowed 6 per 1 day)
Salagen (pilocarpine) 7.5 mg tablet	NP	PA
PERIODONTAL PRODUCT - TETRACYCLINE-TYPE, COLLAGENASE INHIBITORS		
doxycycline hyclate 20 mg tablet	P	
THERAPY FOR DROOLING- PRIMARY OR SECONDARY SIALORRHEA-ANTICHOLINERGIC		
Cuvposa 1 mg/5 mL (0.2 mg/mL) oral solution	NP	PA
MULTIPLE SCLEROSIS AGENTS		
LEUKOCYTE ADHESION INHIBITORS, ALPHA4-MEDIATED, IGG4K MC ANTIBODY		
Tysabri 300 mg/15 mL intravenous solution	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - CD20 SPECIFIC MONOCLONAL ANTIBODY		
Kesimpta Pen 20 mg/0.4 mL subcutaneous pen injector	NP	PA; SP
Ocrevus 30 mg/mL intravenous solution	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - CD52 SPECIFIC MONOCLONAL ANTIBODY		

Drug Name	Tier	Drug Restriction
Lemtrada 12 mg/1.2 mL intravenous solution	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - INTERFERONS		
Avonex (with albumin) 30 mcg intramuscular kit	NP	PA
Avonex 30 mcg/0.5 mL intramuscular pen kit	NP	PA; SP
Avonex 30 mcg/0.5 mL intramuscular syringe kit	NP	PA; SP
Betaseron 0.3 mg subcutaneous kit	P	SP
Extavia 0.3 mg subcutaneous kit	NP	PA; SP
Extavia 0.3 mg subcutaneous solution	NP	PA; SP
Plegridy 125 mcg/0.5 mL intramuscular syringe	NP	PA; SP
Plegridy 125 mcg/0.5 mL subcutaneous pen injector	NP	PA; SP
Plegridy 125 mcg/0.5 mL subcutaneous syringe	NP	PA; SP
Plegridy 63 mcg/0.5 mL-94 mcg/0.5 mL subcutaneous pen injector	NP	PA; SP
Plegridy 63 mcg/0.5 mL-94 mcg/0.5 mL subcutaneous syringe	NP	PA; SP
Rebif (with albumin) 22 mcg/0.5 mL subcutaneous syringe	P	SP
Rebif (with albumin) 44 mcg/0.5 mL subcutaneous syringe	P	SP
Rebif Rebidose 22 mcg/0.5 mL subcutaneous pen injector	P	SP
Rebif Rebidose 44 mcg/0.5 mL subcutaneous pen injector	P	SP
Rebif Rebidose 8.8 mcg/0.2 mL-22 mcg/0.5 mL (6) subcutaneous pen inj.	P	SP
Rebif Titration Pack 8.8 mcg/0.2 mL-22 mcg/0.5 mL subcutaneous syringe	P	SP

Drug Name	Tier	Drug Restriction
MULTIPLE SCLEROSIS AGENT - OTHERS		
Bafiertam 95 mg capsule,delayed release	NP	PA; SP
Copaxone 20 mg/mL subcutaneous syringe	P	SP
Copaxone 40 mg/mL subcutaneous syringe	NP	PA; SP
dimethyl fumarate 120 mg (14)-240 mg (46) capsule,delayed release	NP	PA; SP
dimethyl fumarate 120 mg capsule,delayed release	NP	PA; SP
dimethyl fumarate 240 mg capsule,delayed release	NP	PA; SP
glatiramer 20 mg/mL subcutaneous syringe	NP	PA; SP
glatiramer 40 mg/mL subcutaneous syringe	NP	PA; SP
Glatopa 20 mg/mL subcutaneous syringe	NP	PA; SP
Glatopa 40 mg/mL subcutaneous syringe	NP	PA; SP
Tecfidera 120 mg (14)-240 mg (46) capsule,delayed release	P	PA; SP
Tecfidera 120 mg capsule,delayed release	P	PA; SP
Tecfidera 240 mg capsule,delayed release	P	PA; SP
Vumerity 231 mg capsule,delayed release	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - POTASSIUM CHANNEL BLOCKER		
Ampyra 10 mg tablet,extended release	NP	PA; SP
dalfampridine ER 10 mg tablet,extended release,12 hr	NP	PA; SP
Firdapse 10 mg tablet	NP	PA; SP
Ruzurgi 10 mg tablet	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - PURINE NUCLEOSIDE ANALOGS		
Mavenclad (10 tablet pack) 10 mg tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
Mavenclad (4 tablet pack) 10 mg tablet	NP	PA; SP
Mavenclad (5 tablet pack) 10 mg tablet	NP	PA; SP
Mavenclad (6 tablet pack) 10 mg tablet	NP	PA; SP
Mavenclad (7 tablet pack) 10 mg tablet	NP	PA; SP
Mavenclad (8 tablet pack) 10 mg tablet	NP	PA; SP
Mavenclad (9 tablet pack) 10 mg tablet	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - PYRIMIDINE SYNTHESIS INHIBITORS		
Aubagio 14 mg tablet	NP	PA; SP
Aubagio 7 mg tablet	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - SPHINGOSINE 1-PHOSPHATE RECEPTOR MODULATOR		
Gilenya 0.25 mg capsule	NP	PA; SP
Gilenya 0.5 mg capsule	NP	PA; SP
Mayzent 0.25 mg tablet	NP	PA; SP
Mayzent 2 mg tablet	NP	PA; SP
Mayzent Starter Pack 0.25 mg (12 tabs) tablets	NP	PA; SP
Ponvory 14-Day Starter Pack 2-3-4-5-6-7-8-9-10 mg tablets	NP	PA; SP
Ponvory 20 mg tablet	NP	PA; SP
Zeposia 0.92 mg capsule	NP	PA; SP
Zeposia Starter Kit 0.23 mg-0.46 mg-0.92 mg capsules in a dose pack	NP	PA; SP
Zeposia Starter Pack 0.23 mg (4)-0.46 mg (3) capsules in a dose pack	NP	PA; SP
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANT COMBINATIONS		
Artificial Tears (petrolatum/mineral oil) 83 %-15 % eye ointment	P	QL(Allowed 42 per Rx)
For Sty Relief eye ointment	P	QL(Allowed 42 per Rx)
GenTeal Tears Severe (petrolatum-mineral oil) 94 %-3 % eye ointment	P	QL(Allowed 42 per Rx)
Lubricant Eye 56.8 %-41.5 % ointment	P	QL(Allowed 42 per Rx)

Drug Name	Tier	Drug Restriction
Lubricant Eye 57.3 %-42.5 % ointment	P	QL(Allowed 42 per Rx)
Lubricant Eye 57.7 %-31.9 % ointment	P	QL(Allowed 42 per Rx)
Lubricant Eye 83 %-15 % ointment	P	QL(Allowed 42 per Rx)
Lubrifresh PM 83 %-15 % eye ointment	P	QL(Allowed 42 per Rx)
Nighttime Dry-Eye Relief 57.3 %-42.5 % ointment	P	QL(Allowed 42 per Rx)
Overnight Lubricating Eye 94 %-3 % ointment	P	QL(Allowed 42 per Rx)
Puralube 85 %-15 % eye ointment	P	QL(Allowed 42 per Rx)
Refresh Lacri-Lube 56.8 %-42.5 % eye ointment	P	QL(Allowed 42 per Rx)
Refresh P.M. 57.3 %-42.5 % eye ointment	P	QL(Allowed 42 per Rx)
Restore PM 57.3 %-42.5 % eye ointment	P	QL(Allowed 42 per Rx)
Retaine PM 80 %-20 % eye ointment	P	QL(Allowed 42 per Rx)
Soothe Night Time Lubricant 80 %-20 % eye ointment	P	QL(Allowed 42 per Rx)
Stye Lubricant 57.7 %-31.9 % eye ointment	P	QL(Allowed 42 per Rx)
Systane Nighttime 94 %-3 % eye ointment	P	QL(Allowed 42 per Rx)
Tears Again 80 %-20 % eye ointment	P	QL(Allowed 42 per Rx)
Tears Naturale PM 94 %-3 % eye ointment	P	QL(Allowed 42 per Rx)
Ultra Fresh PM eye ointment	P	QL(Allowed 4 per Rx)
ARTIFICIAL TEARS AND LUBRICANT SINGLE AGENTS		
Artificial Tears (polyvinyl alcohol) 1.4 % eye drops	P	QL(Allowed 15 per Rx)
Lacrisert 5 mg eye inserts	P	
LiquiTears 1.4 % eye drops	P	QL(Allowed 15 per Rx)
polyvinyl alcohol 1.4 % eye drops	P	QL(Allowed 15 per Rx)
Tears Again (PVA) 1.4 % eye drops	P	QL(Allowed 15 per Rx)
MIOTICS - CHOLINESTERASE INHIBITORS		
Phospholine Iodide 0.125 % eye drops	P	
MIOTICS - DIRECT ACTING		
Isopto Carpine 1 % eye drops	NP	PA

Drug Name	Tier	Drug Restriction
Isopto Carpine 2 % eye drops	NP	PA
Isopto Carpine 4 % eye drops	NP	PA
pilocarpine 1 % eye drops	P	
pilocarpine 2 % eye drops	P	
pilocarpine 4 % eye drops	P	
MYDRIATIC AND CYCLOPLEGIC COMBINATIONS		
Cyclomydril 0.2 %-1 % eye drops	P	
Paremyd 1 %-0.25 % eye drops	NP	PA
OPHTHALMIC - ADRENERGIC-CARBONIC ANHYDRASE INHIBITOR COMBINATIONS		
Simbrinza 1 %-0.2 % eye drops,suspension	NP	PA
OPHTHALMIC - ANTIBACTERIAL-GLUCOCORTICOID COMBINATIONS		
Blephamide 10 %-0.2 % eye drops,suspension	NP	PA; QL(Allowed 10 per Rx)
Blephamide S.O.P. 10 %-0.2 % eye ointment	NP	PA; QL(Allowed 4 per Rx)
Maxitrol 3.5 mg/g-10,000 unit/g-0.1 % eye ointment	NP	PA; QL(Allowed 4 per Rx)

Drug Name	Tier	Drug Restriction
Maxitrol 3.5 mg/mL-10,000 unit/mL-0.1% eye drops,suspension	NP	PA; QL(Allowed 5 per Rx)
neomycin 3.5 mg/g-polymyxin B 10,000 unit/g-dexameth 0.1 % eye oint	P	QL(Allowed 4 per Rx)
neomycin 3.5 mg-polymyxin 10,000 unit-hydrocort 10 mg/mL eye drop,susp	P	QL(Allowed 8 per Rx)
neomycin-bacitracin-poly-HC 3.5 mg-400-10,000 unit/g-1 % eye ointment	P	
neomycin-polymyxin-dexameth 3.5 mg/mL-10,000 unit/mL-0.1% eye drops	P	QL(Allowed 5 per Rx)
Neo-Polycin HC 3.5 mg-400-10,000 unit/g-1 % eye ointment	P	
Pred-G 0.3 %-1 % eye drops,suspension	NP	PA; QL(Limit 1 package(s) per fill, limit 1 package(s) per 30 days)
Pred-G S.O.P. 0.3 %-0.6 % eye ointment	NP	PA

Drug Name	Tier	Drug Restriction
sulfacetamide-prednisolone 10 %-0.23 % (0.25 %) eye drops	NP	PA; QL(Allowed 10 per Rx)
TobraDex 0.3 %-0.1 % eye drops,suspension	NP	PA; QL(Allowed 10 per Rx)
TobraDex 0.3 %-0.1 % eye ointment	NP	PA; QL(Allowed 4 per Rx)
Tobradex ST 0.3 %-0.05 % eye drops,suspension	NP	PA
tobramycin 0.3 %-dexamethasone 0.1 % eye drops,suspension	P	QL(Allowed 10 per Rx)
Zylet 0.3 %-0.5 % eye drops,suspension	NP	PA
OPHTHALMIC - ANTICHOLINERGICS		
atropine 1 % eye drops	P	QL(Allowed 15 per Rx)
atropine 1 % eye ointment	P	QL(Allowed 4 per Rx)
Cyclogyl 0.5 % eye drops	NP	PA
Cyclogyl 1 % eye drops	NP	PA; QL(Allowed 15 per Rx)
Cyclogyl 2 % eye drops	NP	PA; QL(Allowed 15 per Rx)
cyclopentolate 0.5 % eye drops	P	
cyclopentolate 1 % eye drops	P	QL(Allowed 15 per Rx)
cyclopentolate 2 % eye drops	P	QL(Allowed 15 per Rx)
Isopto Atropine 1 % eye drops	NP	PA; QL(Allowed 15 per Rx)
Mydriacyl 1 % eye drops	NP	PA; QL(Allowed 15 per Rx)
tropicamide 0.5 % eye drops	P	QL(Allowed 15 per Rx)
tropicamide 1 % eye drops	P	QL(Allowed 15 per Rx)
OPHTHALMIC - ANTIHISTAMINES		
azelastine 0.05 % eye drops	P	QL(Allowed 6 per Rx)
Bepreve 1.5 % eye drops	NP	PA
epinastine 0.05 % eye drops	NP	PA
Lastacaft 0.25 % eye drops	NP	PA
olopatadine 0.1 % eye drops	NP	PA
olopatadine 0.2 % eye drops	NP	PA
Pazeo 0.7 % eye drops	P	
Zerviate 0.24 % eye drops in a dropperette	NP	PA

Drug Name	Tier	Drug Restriction
OPHTHALMIC - ANTI-INFLAMMATORY, GLUCOCORTICOIDS		
Alrex 0.2 % eye drops,suspension	P	
dexamethasone sodium phosphate 0.1 % eye drops	P	QL(Allowed 5 per Rx)
Dextenza 0.4 mg intracanalicular insert	NP	PA; SP
Durezol 0.05 % eye drops	NP	PA
Eysuvis 0.25 % eye drops,suspension	NP	PA
Flarex 0.1 % eye drops,suspension	P	
fluorometholone 0.1 % eye drops,suspension	P	QL(Allowed 15 per Rx)
FML Forte 0.25 % eye drops,suspension	P	
FML Liquifilm 0.1 % eye drops,suspension	NP	PA; QL(Allowed 15 per Rx)
FML S.O.P. 0.1 % eye ointment	P	QL(Allowed 4 per Rx)
Inveltys 1 % eye drops,suspension	NP	PA
Lotemax 0.5 % eye drops,suspension	NP	PA
Lotemax 0.5 % eye gel drops	NP	PA
Lotemax 0.5 % eye ointment	NP	PA
Lotemax SM 0.38 % eye gel drops	NP	PA
loteprednol etabonate 0.5 % eye drops,suspension	P	
loteprednol etabonate 0.5 % eye gel drops	NP	PA
Maxidex 0.1 % eye drops,suspension	P	
Omnipred 1 % eye drops,suspension	NP	PA; QL(Allowed 15 per Rx)
Pred Forte 1 % eye drops,suspension	NP	PA; QL(Allowed 15 per Rx)
Pred Mild 0.12 % eye drops,suspension	P	QL(Allowed 10 per Rx)
prednisolone acetate 1 % eye drops,suspension	P	QL(Allowed 15 per Rx)
prednisolone sodium phosphate 1 % eye drops	P	QL(Allowed 15 per Rx)
OPHTHALMIC - ANTI-INFLAMMATORY, IMMUNOMODULATORS		
Cequa 0.09 % eye drops in a dropperette	NP	PA
Restasis 0.05 % eye drops in a dropperette	NP	PA

Drug Name	Tier	Drug Restriction
Restasis MultiDose 0.05 % eye drops	NP	PA
OPHTHALMIC - ANTI-INFLAMMATORY, LFA-1 ANTAGONISTS		
Xiidra 5 % eye drops in a dropperette	NP	PA
OPHTHALMIC - ANTI-INFLAMMATORY, NSAIDS		
Acular 0.5 % eye drops	NP	PA; QL(Allowed 10 per Rx)
Acular LS 0.4 % eye drops	NP	PA; QL(Limit 3 fill(s) per 90 days)
Acuvail (PF) 0.45 % eye drops in a dropperette	NP	PA
bromfenac 0.09 % eye drops	NP	PA
BromSite 0.075 % eye drops	NP	PA
diclofenac 0.1 % eye drops	P	QL(Allowed 5 per Rx)
flurbiprofen 0.03 % eye drops	P	QL(Allowed 3 per Rx)
Ilevro 0.3 % eye drops,suspension	NP	PA
ketorolac 0.4 % eye drops	P	QL(Limit 3 fill(s) per 90 days)
ketorolac 0.5 % eye drops	P	QL(Allowed 10 per Rx)
Nevanac 0.1 % eye drops,suspension	NP	PA

Drug Name	Tier	Drug Restriction
Prolensa 0.07 % eye drops	NP	PA
OPHTHALMIC - BETA BLOCKERS-ADRENERGIC COMBINATIONS		
Combigan 0.2 %-0.5 % eye drops	NP	PA
OPHTHALMIC - BETA BLOCKERS-CARBONIC ANHYDRASE INHIBITOR COMBINATIONS		
Cosopt (PF) 2 %-0.5 % eye drops in a dropperette	NP	PA
Cosopt 22.3 mg-6.8 mg/mL eye drops	NP	PA; QL(Allowed 10 per Rx)
dorzolamide 22.3 mg-timolol 6.8 mg/mL eye drops	P	QL(Allowed 10 per Rx)
dorzolamide-timolol (PF) 2 %-0.5 % eye drops in a dropperette	NP	PA
OPHTHALMIC - CARBONIC ANHYDRASE INHIBITORS		
Azopt 1 % eye drops,suspension	NP	PA; QL(Allowed 15 per Rx)
brinzolamide 1 % eye drops,suspension	NP	PA
dorzolamide 2 % eye drops	P	QL(Allowed 10 per Rx)
Trusopt 2 % eye drops	NP	PA; QL(Allowed 10 per Rx)
OPHTHALMIC - CYSTINE DEPLETING AGENTS		
Cystadrops 0.37 % eye drops	NP	PA; SP

Drug Name	Tier	Drug Restriction
Cystaran 0.44 % eye drops	NP	PA; SP
OPHTHALMIC - DECONGESTANTS		
Eye Drops (tetrahydrozoline) 0.05 %	P	QL(Allowed 1 per 1 day)
Opti-Clear 0.05 % eye drops	P	QL(Allowed 1 per 1 day)
phenylephrine 10 % eye drops	NP	PA
phenylephrine 2.5 % eye drops	NP	PA; QL(Allowed 30 per Rx)
Redness Reliever Eye Drops 0.05 %	P	QL(Allowed 1 per 1 day)
Sterile Eye Drops 0.05 %	P	QL(Allowed 1 per 1 day)
Visine 0.05 % eye drops	P	QL(Allowed 1 per 1 day)
OPHTHALMIC - DIAGNOSTIC AGENTS		
fluorescein 0.3 %-benoxinate 0.4 % eye drops	NP	PA
GloStrips 1 mg for the eye	NP	PA
OPHTHALMIC - HUMAN NERVE GROWTH FACTOR (HNGF)		
Oxervate 0.002 % eye drops	NP	PA; SP
OPHTHALMIC - INTRAOCULAR PRESSURE REDUCING AGENTS, BETA-BLOCKERS		
betaxolol 0.5 % eye drops	P	QL(Allowed 15 per Rx)
Betoptic S 0.25 % eye drops,suspension	NP	PA; QL(Allowed 15 per Rx)
carteolol 1 % eye drops	P	QL(Limit 3 fill(s) per 90 days)
Istalol 0.5 % eye drops	NP	PA; QL(Allowed 15 per Rx)
levobunolol 0.5 % eye drops	P	QL(Allowed 15 per Rx)
timolol maleate (PF) 0.5 % eye drops in a dropperette	NP	PA; QL(Allowed 60 per Rx)
timolol maleate 0.25 % eye drops	P	QL(Allowed 15 per Rx)
timolol maleate 0.25 % eye gel forming solution	P	
timolol maleate 0.5 % eye drops	P	QL(Allowed 15 per Rx)
timolol maleate 0.5 % eye gel forming solution	P	QL(Allowed 5 per Rx)
timolol maleate 0.5 % once daily eye drops	P	QL(Allowed 15 per Rx)
Timoptic 0.25 % eye drops	NP	PA; QL(Allowed 15 per Rx)
Timoptic 0.5 % eye drops	NP	PA; QL(Allowed 15 per Rx)

Drug Name	Tier	Drug Restriction
Timoptic Ocudose (PF) 0.25 % eye drops in a dropperette	NP	PA; QL(Allowed 60 per Rx)
Timoptic Ocudose (PF) 0.5 % eye drops in a dropperette	NP	PA; QL(Allowed 60 per Rx)
Timoptic-XE 0.25 % eye gel	NP	PA
Timoptic-XE 0.5 % eye gel	NP	PA; QL(Allowed 5 per Rx)
OPHTHALMIC - LOCAL ANESTHETIC ESTERS		
Alcaine 0.5 % eye drops	NP	PA
proparacaine 0.5 % eye drops	NP	PA
tetracaine 0.5 % eye drops	NP	PA
tetracaine HCl (PF) 0.5 % eye drops	NP	PA
OPHTHALMIC - LOCAL ANESTHETIC, AMIDES		
Akten (PF) 3.5 % eye gel	NP	PA
OPHTHALMIC - MAST CELL STABILIZERS		
Alocril 2 % eye drops	NP	PA; QL(Allowed 5 per Rx)
Alomide 0.1 % eye drops	NP	PA; QL(Allowed 10 per Rx)
cromolyn 4 % eye drops	P	QL(Allowed 10 per Rx)
OPHTHALMIC - RHO KINASE INHIBITOR AND PROSTAGLANDIN ANALOG COMBINATION		
Rocklatan 0.02 %-0.005 % eye drops	NP	PA
OPHTHALMIC ANTIBACTERIAL MIXTURES		
AK-Poly-Bac 500 unit-10,000 unit/gram eye ointment	P	QL(Allowed 4 per Rx)
bacitracin-polymyxin B 500 unit-10,000 unit/gram eye ointment	P	QL(Allowed 4 per Rx)
neomycin 1.75 mg-polymyxin 10,000 unit-gramicidin 0.025mg/mL eye drops	P	QL(Allowed 10 per Rx)
neomycin-bacitracin-polymyxn 3.5 mg-400 unit-10,000 unit/gram eye oint	P	QL(Allowed 4 per Rx)
Neo-Polycin 3.5 mg-400 unit-10,000 unit/g eye ointment	P	QL(Allowed 4 per Rx)
Polycin 500 unit-10,000 unit/gram eye ointment	P	QL(Allowed 4 per Rx)
polymyxin B sulfate 10,000 unit-trimethoprim 1 mg/mL eye drops	P	QL(Allowed 10 per Rx)
Polytrim 10,000 unit-1 mg/mL eye drops	NP	PA; QL(Allowed 10 per Rx)
OPHTHALMIC ANTIBIOTIC - AMINOGLYCOSIDES		

Drug Name	Tier	Drug Restriction
Gentak 0.3 % (3 mg/gram) eye ointment	P	QL(Allowed 4 per Rx)
gentamicin 0.3 % eye drops	P	QL(Allowed 15 per Rx)
tobramycin 0.3 % eye drops	P	QL(Allowed 5 per Rx)
Tobrex 0.3 % eye drops	NP	PA; QL(Allowed 5 per Rx)
Tobrex 0.3 % eye ointment	P	QL(Allowed 4 per Rx)
OPHTHALMIC ANTIBIOTIC - DEHYDROPEPTIDASE INHIBITORS		
bacitracin 500 unit/gram eye ointment	P	QL(Allowed 4 per Rx)
OPHTHALMIC ANTIBIOTIC - FLUOROQUINOLONES		
Besivance 0.6 % eye drops,suspension	NP	PA
Ciloxan 0.3 % eye drops	NP	PA; QL(Allowed 10 per Rx)
Ciloxan 0.3 % eye ointment	P	QL(Allowed 4 per Rx)
ciprofloxacin 0.3 % eye drops	P	QL(Allowed 10 per Rx)
gatifloxacin 0.5 % eye drops	NP	PA
levofloxacin 0.5 % eye drops	P	
Moxeza 0.5 % eye drops	NP	PA
moxifloxacin 0.5 % eye drops	NP	PA; QL(Allowed 3 per Rx)
moxifloxacin 0.5 % viscous eye drops	NP	PA
Ocuflox 0.3 % eye drops	NP	PA; QL(Allowed 10 per Rx)
ofloxacin 0.3 % eye drops	P	QL(Allowed 10 per Rx)
Vigamox 0.5 % eye drops	NP	PA; QL(Allowed 3 per Rx)
Zymaxid 0.5 % eye drops	NP	PA
OPHTHALMIC ANTIBIOTIC - MACROLIDES		
Azasite 1 % eye drops	NP	PA
erythromycin 5 mg/gram (0.5 %) eye ointment	P	QL(Allowed 4 per Rx)
OPHTHALMIC ANTIBIOTIC - SULFONAMIDES		
Bleph-10 10 % eye drops	NP	PA; QL(Allowed 15 per Rx)
sulfacetamide sodium 10 % eye drops	P	QL(Allowed 15 per Rx)
sulfacetamide sodium 10 % eye ointment	P	QL(Allowed 4 per Rx)
OPHTHALMIC ANTIFUNGALS		
Natacyn 5 % eye drops,suspension	P	
OPHTHALMIC ANTISEPTICS		

Drug Name	Tier	Drug Restriction
Betadine Ophthalmic Prep 5 % solution	NP	PA
OPHTHALMIC ANTIVIRALS		
trifluridine 1 % eye drops	P	QL(Allowed 8 per Rx)
Zirgan 0.15 % eye gel	P	
OPHTHALMIC-INTRAOCULAR PRESS. REDUCING, SEL. ALPHA ADRENERGIC AGONISTS		
Alphagan P 0.1 % eye drops	P	
Alphagan P 0.15 % eye drops	P	
apraclonidine 0.5 % eye drops	NP	PA
brimonidine 0.15 % eye drops	P	
brimonidine 0.2 % eye drops	P	QL(Allowed 15 per Rx)
Iopidine 1 % eye drops in a dropperette	NP	PA
OPHTHALMIC-INTRAOCULAR PRESSURE REDUCING AGENTS, PROSTAGLANDIN ANALOGS		
bimatoprost 0.03 % eye drops	NP	PA
latanoprost 0.005 % eye drops	P	QL(Allowed 3 per Rx)
Lumigan 0.01 % eye drops	NP	PA

Drug Name	Tier	Drug Restriction
Travatan Z 0.004 % eye drops	NP	PA
travoprost 0.004 % eye drops	NP	PA
Vyzulta 0.024 % eye drops	NP	PA
Xalatan 0.005 % eye drops	NP	PA; QL(Allowed 3 per Rx)
Xelpros 0.005 % eye drop emulsion	NP	PA
Zioptan (PF) 0.0015 % eye drops in a dropperette	NP	PA
OPHTHALMIC-INTRAOCULAR PRESSURE REDUCING AGENTS, RHO KINASE INHIBITORS		
Rhopressa 0.02 % eye drops	NP	PA
OTIC (EAR)		
OTIC (EAR) - ANTI-INFECTIVE-GLUCOCORTICOID COMBINATIONS		
Cipro HC 0.2 %-1 % ear drops,suspension	NP	PA
Ciprodex 0.3 %-0.1 % ear drops,suspension	P	QL(Allowed 7.5 per Rx); QL(Limit 1 fill(s) per 30 days)
ciprofloxacin 0.3 %-dexamethasone 0.1 % ear drops,suspension	P	QL(Allowed 7.5 per Rx)
ciprofloxacin 0.3 %-fluocinolone 0.025 % (0.25 mL) ear solution	NP	PA

Drug Name	Tier	Drug Restriction
Cortisporin-TC 3.3 mg-3 mg-10 mg-0.5 mg/mL ear drops,suspension	NP	PA
neomycin-polymyxin-hydrocort 3.5 mg/mL-10,000 unit/mL-1 % ear solution	P	QL(Allowed 10 per Rx)
neomycin-polymyxin-hydrocort 3.5 mg-10,000 unit/mL-1 % ear drops,susp	P	QL(Allowed 10 per Rx)
Otovel 0.3 %-0.025 % (0.25 mL) ear solution	NP	PA
OTIC (EAR) - ANTI-INFECTIVES OTHER		
acetic acid 2 % ear solution	P	QL(Allowed 15 per Rx)
OTIC (EAR) - FLUOROQUINOLONES		
ciprofloxacin 0.2 % ear drops in a dropperette	NP	PA
Floxin 0.3 % ear drops	NP	PA; QL(Allowed 10 per Rx)
ofloxacin 0.3 % ear drops	P	QL(Allowed 10 per Rx)
OTIC (EAR) - GLUCOCORTICOIDS		
DermOtic Oil 0.01 % ear drops	NP	PA; QL(Allowed 20 per Rx)
Flac Otic (ear) Oil 0.01 % drops	NP	PA; QL(Allowed 20 per Rx)
fluocinolone acetonide oil 0.01 % ear drops	NP	PA; QL(Allowed 20 per Rx)
hydrocortisone-acetic acid 1 %-2 % ear drops	NP	PA; QL(Allowed 10 per Rx)
RESPIRATORY THERAPY AGENTS		
1ST GENERATION ANTIHISTAMINE-DECONGESTANT COMBINATIONS		
Brotapp 1 mg-15 mg/5 mL oral liquid	P	QL(Allowed 120 per Rx)
Children's Cold-Allergy (phenylephrine) 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Children's Dibromm Cold and Allergy 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Children's Wal-Tap Cold-Allergy 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Cold and Allergy (bromphen-PE) 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Dimaphen (PE) 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Dimetapp Cold-Allergy (PE) 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)

Drug Name	Tier	Drug Restriction
LoHist - D 2 mg-30 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Promethazine VC 6.25 mg-5 mg/5 mL oral syrup	P	Use Generic Products
promethazine-phenylephrine 6.25 mg-5 mg/5 mL oral syrup	P	
Q-Tapp 1 mg-15 mg/5 mL oral liquid	P	QL(Allowed 120 per Rx)
Rynex PE 1 mg-2.5 mg/5 mL oral solution	P	QL(Allowed 120 per Rx)
Rynex PSE 1 mg-15 mg/5 mL oral liquid	P	QL(Allowed 120 per Rx)
Valu-Tapp 1 mg-15 mg/5 mL oral liquid	P	QL(Allowed 120 per Rx)
2ND GENERATION ANTIHISTAMINE-DECONGESTANT COMBINATIONS		
Alavert D-12 Allergy-Sinus 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
All Day Allergy-D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
AllerClear D-12hr 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
AllerClear D-24hr 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
Allergy and Congestion Relief 10 mg-240 mg tablet,extend release 24 hr	P	QL(Allowed 1 per 1 day)
Allergy and Congestion Relief 5 mg-120 mg tablet,extend release 12 hr	P	QL(Allowed 2 per 1 day)
Allergy Complete-D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Allergy D-12 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Allergy plus Congestn Relief-D(cetiriz) 5 mg-120 mg tablet,ext.release	P	QL(Allowed 2 per 1 day)
Allergy Relief and Nasal Decongestant 10 mg-240 mg tablet,extended rel	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Allergy Relief D12 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Allergy Relief D-24hr 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
Allergy Relief-D (cetirizine) 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Allergy Relief-D (loratadine) 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Allergy-Congestion Relief-D 10 mg-240 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day)
Aller-Tec D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Cetiri-D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
cetirizine 5 mg-pseudoephedrine ER 120 mg tablet,extended release,12hr	P	QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Claritin-D 12 Hour 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Claritin-D 24 Hour 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
Lorata-D 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
lorata-dine D 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
Loratadine-D 10 mg-240 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day)
Loratadine-D 5 mg-120 mg tablet,extended release 12 hr	P	QL(Allowed 2 per 1 day)
Wal-itin D 10 mg-240 mg tablet,extended release	P	QL(Allowed 1 per 1 day)
Wal-Itin D 12 Hour 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Wal-Zyr D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Zyrtec-D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
ANTIHISTAMINES - 1ST GENERATION		
Aler-Cap 25 mg capsule	P	QL(Allowed 4 per 1 day)
Aller-Chlor 2 mg/5 mL oral syrup	P	QL(Allowed 60 per 1 day)
Aller-Chlor 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Aller-G-Time 25 mg tablet	P	QL(Allowed 4 per 1 day)
Allergy (chlorpheniramine) 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Allergy (diphenhydramine) 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Allergy (diphenhydramine) 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Allergy (diphenhydramine) 25 mg tablet	P	QL(Allowed 4 per 1 day)
Allergy 4-Hour 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Allergy Medication 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Allergy Medicine 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Allergy Medicine 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Allergy Medicine 25 mg tablet	P	QL(Allowed 4 per 1 day)
Allergy Relief (chlorpheniramine) 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Allergy Relief (clemastine) 1.34 mg tablet	P	QL(Allowed 2 per 1 day)
Allergy Relief (diphenhydramine) 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Allergy Relief (diphenhydramine) 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Allergy Relief (diphenhydramine) 25 mg tablet	P	QL(Allowed 4 per 1 day)
Allergy-Time 4 mg tablet	P	QL(Allowed 120 per Rx)
Allerhist (clemastine) 1.34 mg tablet	P	QL(Allowed 2 per 1 day)
Allerhist-1 1.34 mg tablet	P	QL(Allowed 2 per 1 day)
Banophen 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Banophen 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products

Drug Name	Tier	Drug Restriction
Banophen 25 mg tablet	P	QL(Allowed 4 per 1 day)
Banophen 50 mg capsule	P	QL(Allowed 4 per 1 day)
Banophen Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Benadryl 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Benadryl Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Benadryl Allergy 25 mg tablet	P	QL(Allowed 4 per 1 day)
Children's Allergy (diphenhydramine) 12.5 mg/5 mL oral elixir	P	QL(Allowed 240 per Rx); Use Generic Products
Children's Allergy (diphenhydramine) 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Children's Aurodryl Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Wal-Dryl Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Wal-Dryl Allergy 12.5 mg/5 mL prefilled spoon	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
ChlorHist 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
chlorpheniramine 4 mg tablet	P	QL(Allowed 120 per Rx)
ChlorTabs 4 mg tablet	P	QL(Allowed 120 per Rx)
Chlor-Trimeton 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Complete Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Complete Allergy 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Complete Allergy 25 mg tablet	P	QL(Allowed 4 per 1 day)
Complete Allergy Medicine 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Complete Allergy Medicine 25 mg tablet	P	QL(Allowed 4 per 1 day)
cyproheptadine 2 mg/5 mL oral syrup	P	
cyproheptadine 4 mg tablet	P	
Dayhist 1.34 mg tablet	P	QL(Allowed 2 per 1 day)
Dayhist Allergy 1.34 mg tablet	P	QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Diphedryl 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Diphedryl 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Diphedryl 25 mg tablet	P	QL(Allowed 4 per 1 day)
Diphedryl Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diphen 12.5 mg/5 mL oral elixir	P	QL(Allowed 240 per Rx)
Diphen 25 mg tablet	P	QL(Allowed 4 per 1 day)
Diphenhist 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Diphenhist 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Diphenhist 25 mg tablet	P	QL(Allowed 4 per 1 day)
diphenhydramine 12.5 mg/5 mL oral elixir	P	QL(Allowed 240 per Rx)
diphenhydramine 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
diphenhydramine 25 mg capsule	P	QL(Allowed 4 per 1 day)
diphenhydramine 25 mg tablet	P	QL(Allowed 4 per 1 day)
diphenhydramine 50 mg capsule	P	QL(Allowed 4 per 1 day)
ED Chlorped Jr 2 mg/5 mL oral syrup	P	QL(Allowed 60 per 1 day)
Ed-Chlortan 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Geri-Dryl 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Geri-Dryl 25 mg tablet	P	QL(Allowed 4 per 1 day)
M-Dryl 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Naramin 12.5 mg/5 mL oral liquid in packet	P	QL(Allowed 240 per Rx)
Nighttime Allergy Relief 25 mg tablet	P	QL(Allowed 4 per 1 day)
Pharbechlor 4 mg tablet	P	QL(Allowed 120 per Rx); Use Generic Products
Pharbedryl 25 mg capsule	P	QL(Allowed 4 per 1 day)
Pharbedryl 50 mg capsule	P	QL(Allowed 4 per 1 day)
promethazine 12.5 mg tablet	P	AL(Minimum Age 2 Years)
promethazine 25 mg tablet	P	AL(Minimum Age 2 Years)
promethazine 50 mg tablet	P	AL(Minimum Age 2 Years)

Drug Name	Tier	Drug Restriction
promethazine 6.25 mg/5 mL oral syrup	P	AL(Minimum Age 2 Years); QL(Allowed 240 per Rx)
Q-Dryl 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Q-Dryl 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Quenalin 12.5 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Siladryl SA 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products
Silphen Cough 12.5 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Total Allergy Medicine 25 mg tablet	P	QL(Allowed 4 per 1 day)
Valu-Dryl Allergy 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
Wal-Dryl Allergy 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Wal-Dryl Allergy 25 mg capsule	P	QL(Allowed 4 per 1 day)
Wal-Dryl Allergy 25 mg tablet	P	QL(Allowed 4 per 1 day)
Wal-Finate 4 mg tablet	P	QL(Allowed 120 per Rx)
ANTIHISTAMINES - 2ND GENERATION		
24Hour Allergy 10 mg tablet	P	QL(Allowed 1 per 1 day)
24HR Allergy Relief 5 mg tablet	P	QL(Allowed 1 per 1 day)
Alavert 10 mg disintegrating tablet	P	Use Generic Products
All Day Allergy (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx); Use Generic Products
All Day Allergy (cetirizine) 10 mg chewable tablet	P	
All Day Allergy (cetirizine) 10 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
All Day Allergy Relief (cetirizine) 10 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Allegra Allergy 180 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Allegra Allergy 60 mg tablet	P	QL(Allowed 2 per 1 day); Use Generic Products
Allerclear 10 mg tablet	P	Use Generic Products
Aller-ease 180 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Aller-ease 60 mg tablet	P	QL(Allowed 2 per 1 day)
Aller-Fex 180 mg tablet	P	QL(Allowed 1 per 1 day)
Allergy Relief (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)

Drug Name	Tier	Drug Restriction
Allergy Relief (cetirizine) 10 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Allergy Relief (fexofenadine) 180 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Allergy Relief (fexofenadine) 60 mg tablet	P	QL(Allowed 2 per 1 day)
Allergy Relief (levocetirizine) 5 mg tablet	P	QL(Allowed 1 per 1 day)
Allergy Relief (loratadine) 10 mg disintegrating tablet	P	Use Generic Products
Allergy Relief (loratadine) 10 mg tablet	P	Use Generic Products
Allergy Relief (loratadine) 5 mg/5 mL oral solution	P	QL(Allowed 240 per Rx); Use Generic Products
Aller-Tec 10 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
cetirizine 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
cetirizine 10 mg chewable tablet	P	QL(Allowed 1 per 1 day)
cetirizine 10 mg tablet	P	QL(Allowed 1 per 1 day)
cetirizine 5 mg chewable tablet	P	QL(Allowed 1 per 1 day)
cetirizine 5 mg tablet	P	QL(Allowed 1 per 1 day)
Children's All Day Allergy (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx); Use Generic Products
Children's Allergy (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Children's Allergy Complete 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Children's Allergy Relief (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx); Use Generic Products
Children's Allergy Relief (cetirizine) 10 mg chewable tablet	P	QL(Allowed 1 per 1 day)
Children's Allergy Relief (loratadine) 5 mg/5 mL oral solution	P	QL(Allowed 240 per Rx); Use Generic Products
Children's Aller-Tec 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Children's Cetirizine 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Children's Cetirizine 10 mg chewable tablet	P	QL(Allowed 1 per 1 day)
Children's Cetirizine 5 mg chewable tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Children's Claritin 5 mg/5 mL oral solution	P	QL(Allowed 240 per Rx); Use Generic Products
Children's Wal-Zyr 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Children's Wal-Zyr 10 mg chewable tablet	P	QL(Allowed 1 per 1 day)
Claritin 10 mg tablet	P	Use Generic Products
Claritin RediTabs 10 mg disintegrating tablet	P	Use Generic Products
fexofenadine 180 mg tablet	P	QL(Allowed 1 per 1 day)
fexofenadine 60 mg tablet	P	QL(Allowed 2 per 1 day)
levocetirizine 5 mg tablet	P	QL(Allowed 1 per 1 day)
Loradamed 10 mg tablet	P	
loratadine 10 mg disintegrating tablet	P	
loratadine 10 mg tablet	P	
loratadine 5 mg/5 mL oral solution	P	QL(Allowed 240 per Rx)
Mucinex Allergy 180 mg tablet	P	QL(Allowed 1 per 1 day)
Non-Drowsy Allergy 10 mg tablet	P	Use Generic Products
Wal-Fex Allergy 180 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Wal-Fex Allergy 60 mg tablet	P	QL(Allowed 2 per 1 day)
Wal-itin 10 mg disintegrating tablet	P	Use Generic Products
Wal-itin 10 mg tablet	P	
Wal-itin 5 mg/5 mL oral solution	P	QL(Allowed 240 per Rx); Use Generic Products
Wal-Zyr (cetirizine) 1 mg/mL oral solution	P	QL(Allowed 480 per Rx)
Wal-Zyr (cetirizine) 10 mg tablet	P	QL(Allowed 1 per 1 day)
Xyzal 5 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
Zyrtec 10 mg tablet	P	QL(Allowed 1 per 1 day); Use Generic Products
ANTITUSSIVES - NON-OPIOID		
benzonatate 100 mg capsule	P	AL(Minimum Age 10 Years)
benzonatate 200 mg capsule	P	AL(Minimum Age 10 Years); QL(QL Overtime: Allowed 30 over 30 days); QL(Limit 1 fill(s) per 30 days)

Drug Name	Tier	Drug Restriction
Children's Cough DM ER 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
Children's Delsym Cough 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
Children's Robitussin ER 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
Cough DM ER 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
Delsym 12 hour 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
dextromethorphan polistirex ER 30 mg/5 mL oral susp ext.release 12hr	P	QL(QL Overtime: Allowed 240 over 7 days)
Robitussin ER 30 mg/5 mL oral suspension,extended release	P	QL(QL Overtime: Allowed 240 over 7 days)
Tessalon Perles 100 mg capsule	P	AL(Minimum Age 10 Years); Use Generic Products
ASTHMA THERAPY - 5-LIPOXYGENASE INHIBITORS		
zileuton ER 600 mg tablet,extended release 12hr mphase	NP	PA; MT
Zyflo 600 mg tablet	NP	PA
ASTHMA THERAPY - INHALED CORTICOSTEROIDS (GLUCOCORTICOIDS)		
Alvesco 160 mcg/actuation aerosol inhaler	NP	PA
Alvesco 80 mcg/actuation aerosol inhaler	NP	PA
ArmonAir Digihaler 113 mcg/actuation aerosol powder breath act, sensor	NP	PA
ArmonAir Digihaler 232 mcg/actuation aerosol powder breath act, sensor	NP	PA
ArmonAir Digihaler 55 mcg/actuation aerosol powder breath act, sensor	NP	PA
Arnuity Ellipta 100 mcg/actuation powder for inhalation	NP	PA
Arnuity Ellipta 200 mcg/actuation powder for inhalation	NP	PA

Drug Name	Tier	Drug Restriction
Arnuity Ellipta 50 mcg/actuation powder for inhalation	NP	PA
Asmanex HFA 100 mcg/actuation aerosol inhaler	NP	PA
Asmanex HFA 200 mcg/actuation aerosol inhaler	NP	PA
Asmanex HFA 50 mcg/actuation aerosol inhaler	NP	PA
Asmanex Twisthaler 110 mcg/actuation(30 doses) breath activated inhalr	P	
Asmanex Twisthaler 220 mcg/actuation(120 doses) breath activated inhlr	P	
Asmanex Twisthaler 220 mcg/actuation(14 doses) breath activated inhalr	P	
Asmanex Twisthaler 220 mcg/actuation(30 doses) breath activated inhalr	P	
Asmanex Twisthaler 220 mcg/actuation(60 doses) breath activated inhalr	P	
budesonide 0.25 mg/2 mL suspension for nebulization	P	AL(Maximum Age 8 Years); QL(QL Overtime: Allowed 120 over 30 days)
budesonide 0.5 mg/2 mL suspension for nebulization	P	AL(Maximum Age 8 Years); QL(QL Overtime: Allowed 120 over 30 days)
budesonide 1 mg/2 mL suspension for nebulization	P	AL(Maximum Age 8 Years); QL(QL Overtime: Allowed 120 over 30 days)
Flovent Diskus 100 mcg/actuation powder for inhalation	P	QL(Allowed 2 per 1 day)
Flovent Diskus 250 mcg/actuation powder for inhalation	P	QL(Allowed 2 per 1 day)
Flovent Diskus 50 mcg/actuation powder for inhalation	P	QL(Allowed 60 per Rx)
Flovent HFA 110 mcg/actuation aerosol inhaler	P	QL(Allowed 12 per Rx)
Flovent HFA 220 mcg/actuation aerosol inhaler	P	QL(Allowed 12 per Rx)

Drug Name	Tier	Drug Restriction
Flovent HFA 44 mcg/actuation aerosol inhaler	P	QL(Allowed 11 per Rx)
Pulmicort 0.25 mg/2 mL suspension for nebulization	NP	AL(Maximum Age 8 Years); PA; QL(QL Overtime: Allowed 120 over 30 days)
Pulmicort 0.5 mg/2 mL suspension for nebulization	NP	AL(Maximum Age 8 Years); PA; QL(QL Overtime: Allowed 120 over 30 days)
Pulmicort 1 mg/2 mL suspension for nebulization	NP	AL(Maximum Age 8 Years); PA; QL(QL Overtime: Allowed 120 over 30 days)
Pulmicort Flexhaler 180 mcg/actuation breath activated	NP	PA; QL(QL Overtime: Allowed 1 over 25 days)
Pulmicort Flexhaler 90 mcg/actuation breath activated	NP	PA; QL(QL Overtime: Allowed 1 over 25 days)
Qvar RediHaler 40 mcg/actuation HFA breath activated aerosol	NP	PA
Qvar RediHaler 80 mcg/actuation HFA breath activated aerosol	NP	PA
ASTHMA THERAPY - INTERLEUKIN-5 (IL-5) RECEPTOR ALPHA ANTAGONISTS, MAB		
Fasenra 30 mg/mL subcutaneous syringe	NP	PA; SP
Fasenra Pen 30 mg/mL subcutaneous auto-injector	NP	PA; SP

Drug Name	Tier	Drug Restriction
ASTHMA THERAPY - LEUKOTRIENE RECEPTOR ANTAGONISTS		
Accolate 10 mg tablet	NP	PA; MT
Accolate 20 mg tablet	NP	PA; MT
montelukast 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
montelukast 4 mg chewable tablet	P	QL(Allowed 1 per 1 day); MT
montelukast 4 mg oral granules in packet	P	QL(Allowed 1 per 1 day); MT
montelukast 5 mg chewable tablet	P	QL(Allowed 1 per 1 day); MT
Singulair 10 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Singulair 4 mg chewable tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Singulair 4 mg oral granules in packet	NP	PA; QL(Allowed 1 per 1 day); MT
Singulair 5 mg chewable tablet	NP	PA; QL(Allowed 1 per 1 day); MT
zafirlukast 10 mg tablet	P	MT
zafirlukast 20 mg tablet	P	MT
ASTHMA THERAPY - MAST CELL STABILIZERS		
cromolyn 20 mg/2 mL solution for nebulization	P	QL(QL Overtime: Allowed 240 over 30 days)

Drug Name	Tier	Drug Restriction
ASTHMA THERAPY - MONOCLONAL ANTIBODIES TO IMMUNOGLOBULIN E (IGE)		
Xolair 150 mg subcutaneous solution	NP	PA; SP
Xolair 150 mg/mL subcutaneous syringe	NP	PA; SP
Xolair 75 mg/0.5 mL subcutaneous syringe	NP	PA; SP
ASTHMA THERAPY - XANTHINES		
Theo-24 100 mg capsule,extended release	P	
Theo-24 200 mg capsule,extended release	P	
Theo-24 300 mg capsule,extended release	P	
Theo-24 400 mg capsule,extended release	P	
theophylline 80 mg/15 mL oral elixir	P	QL(Allowed 475 per Rx); MT
theophylline 80 mg/15 mL oral solution	P	QL(Allowed 475 per Rx)
theophylline ER 300 mg tablet,extended release,12 hr	P	
theophylline ER 400 mg tablet,extended release 24 hr	P	
theophylline ER 450 mg tablet,extended release,12 hr	P	
theophylline ER 600 mg tablet,extended release 24 hr	P	MT
ASTHMA THERAPY- MONOCLONAL ANTIBODY - INTERLEUKIN-5 (IL-5) ANTAGONISTS		
Cinqair 10 mg/mL intravenous solution	NP	PA; SP
Nucala 100 mg subcutaneous solution	P	PA; SP
Nucala 100 mg/mL subcutaneous auto-injector	NP	PA; SP
Nucala 100 mg/mL subcutaneous syringe	NP	PA; SP
ASTHMA/COPD - PHOSPHODIESTERASE-4 (PDE4) INHIBITORS		
Daliresp 250 mcg tablet	NP	PA
Daliresp 500 mcg tablet	NP	PA
ASTHMA/COPD - ANTICHOLINERGIC AGENTS, INHALED LONG ACTING		

Drug Name	Tier	Drug Restriction
Incruse Ellipta 62.5 mcg/actuation powder for inhalation	NP	PA; QL(Allowed 30 per Rx)
Lonhala Magnair Refill 25 mcg/mL solution for nebulization	NP	PA
Lonhala Magnair Starter 25 mcg/mL solution for nebulization	NP	PA
Seebri Neohaler 15.6 mcg capsule with inhalation device	NP	PA
Spiriva Respimat 1.25 mcg/actuation solution for inhalation	P	
Spiriva Respimat 2.5 mcg/actuation solution for inhalation	NP	PA
Spiriva with HandiHaler 18 mcg and inhalation capsules	P	
Tudorza Pressair 400 mcg/actuation breath activated	NP	PA; QL(QL Overtime: Allowed 1 over 30 days)
Yupelri 175 mcg/3 mL solution for nebulization	NP	PA
ASTHMA/COPD - ANTICHOLINERGIC AGENTS, INHALED SHORT ACTING		
Atrovent HFA 17 mcg/actuation aerosol inhaler	P	QL(QL Overtime: Allowed 26 over 30 days)
ipratropium bromide 0.02 % solution for inhalation	P	QL(QL Overtime: Allowed 375 over 27 days)
ASTHMA/COPD - BETA 2-ADRENERGIC AGENTS, INHALED, ULTRA-LONG ACTING		
Striverdi Respimat 2.5 mcg/actuation solution for inhalation	NP	PA
ASTHMA/COPD THERAPY - BETA 2-ADRENERGIC AGENTS, INHALED, LONG ACTING		
Brovana 15 mcg/2 mL solution for nebulization	NP	PA
Perforomist 20 mcg/2 mL solution for nebulization	NP	PA
Serevent Diskus 50 mcg/dose powder for inhalation	P	QL(Allowed 2 per 1 day)
ASTHMA/COPD THERAPY - BETA 2-ADRENERGIC AGENTS, INHALED, SHORT ACTING		
albuterol sulfate 0.63 mg/3 mL solution for nebulization	P	QL(QL Overtime: Allowed 375 over 27 days)
albuterol sulfate 1.25 mg/3 mL solution for nebulization	P	QL(QL Overtime: Allowed 375 over 27 days)
albuterol sulfate 2.5 mg/3 mL (0.083 %) solution for nebulization	P	QL(QL Overtime: Allowed 375 over 27 days)

Drug Name	Tier	Drug Restriction
albuterol sulfate concentrate 2.5 mg/0.5 mL solution for nebulization	P	QL(Allowed 2 per 1 day)
albuterol sulfate concentrate 5 mg/mL(0.5 %) solution for nebulization	P	QL(Allowed 2 per 1 day)
albuterol sulfate HFA 90 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
levalbuterol 0.31 mg/3 mL solution for nebulization	P	
levalbuterol 0.63 mg/3 mL solution for nebulization	P	
levalbuterol 1.25 mg/3 mL solution for nebulization	P	
levalbuterol concentrate 1.25 mg/0.5 mL solution for nebulization	P	
levalbuterol HFA 45 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
Proair Digihaler 90 mcg/actuation aerosol powder breath act, sensor	NP	PA
ProAir HFA 90 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
ProAir RespiClick 90 mcg/actuation breath activated	NP	PA
Proventil HFA 90 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
Ventolin HFA 90 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
Xopenex 0.31 mg/3 mL solution for nebulization	NP	PA
Xopenex 0.63 mg/3 mL solution for nebulization	NP	PA
Xopenex 1.25 mg/3 mL solution for nebulization	NP	PA
Xopenex Concentrate 1.25 mg/0.5 mL solution for nebulization	NP	PA
Xopenex HFA 45 mcg/actuation aerosol inhaler	P	QL(Limit 2 package(s) per 30 days)
ASTHMA/COPD THERAPY - BETA ADRENERGIC AGENTS		
albuterol sulfate 2 mg tablet	NP	PA
albuterol sulfate 2 mg/5 mL oral syrup	P	MT
albuterol sulfate 4 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
albuterol sulfate ER 4 mg tablet,extended release,12 hr	NP	PA
albuterol sulfate ER 8 mg tablet,extended release,12 hr	NP	PA
metaproterenol 10 mg/5 mL oral syrup	NP	PA; QL(Allowed 30 per 1 day)
terbutaline 2.5 mg tablet	P	
terbutaline 5 mg tablet	P	
ASTHMA/COPD THERAPY - BETA ADRENERGIC-ANTICHOLINERGIC COMBINATIONS		
Anoro Ellipta 62.5 mcg-25 mcg/actuation powder for inhalation	NP	PA
Bevespi Aerosphere 9 mcg-4.8 mcg HFA aerosol inhaler	P	
Combivent Respimat 20 mcg-100 mcg/actuation solution for inhalation	NP	PA; QL(QL Overtime: Allowed 4 over 30 days)
Duaklir Pressair 400 mcg-12 mcg/actuation breath activated	NP	PA
ipratropium 0.5 mg-albuterol 3 mg (2.5 mg base)/3 mL nebulization soln	P	QL(Allowed 12 per 1 day)
Stiolto Respimat 2.5 mcg-2.5 mcg/actuation solution for inhalation	NP	PA
Utibron Neohaler 27.5 mcg-15.6 mcg capsule with inhalation device	NP	PA
ASTHMA/COPD THERAPY - BETA ADRENERGIC-GLUCOCORTICOID COMBINATIONS		
Advair Diskus 100 mcg-50 mcg/dose powder for inhalation	NP	PA; QL(Allowed 2 per 1 day)
Advair Diskus 250 mcg-50 mcg/dose powder for inhalation	NP	PA; QL(Allowed 2 per 1 day)
Advair Diskus 500 mcg-50 mcg/dose powder for inhalation	NP	PA; QL(Allowed 2 per 1 day)
Advair HFA 115 mcg-21 mcg/actuation aerosol inhaler	NP	PA
Advair HFA 230 mcg-21 mcg/actuation aerosol inhaler	NP	PA

Drug Name	Tier	Drug Restriction
Advair HFA 45 mcg-21 mcg/actuation aerosol inhaler	NP	PA
AirDuo Digihaler 113 mcg-14 mcg/actuation breath act,powder sensor	NP	PA
AirDuo Digihaler 232 mcg-14 mcg/actuation breath act,powder sensor	NP	PA
AirDuo Digihaler 55 mcg-14 mcg/actuation breath act,powder sensor	NP	PA
AirDuo RespiClick 113 mcg-14 mcg/actuation breath activated	NP	PA
AirDuo RespiClick 232 mcg-14 mcg/actuation breath activated	NP	PA
AirDuo RespiClick 55 mcg-14 mcg/actuation breath activated	NP	PA
Breo Ellipta 100 mcg-25 mcg/dose powder for inhalation	NP	PA
Breo Ellipta 200 mcg-25 mcg/dose powder for inhalation	NP	PA
budesonide-formoterol HFA 160 mcg-4.5 mcg/actuation aerosol inhaler	NP	PA; QL(Allowed 11 per Rx)
budesonide-formoterol HFA 80 mcg-4.5 mcg/actuation aerosol inhaler	NP	PA; QL(Allowed 11 per Rx)
Dulera 100 mcg-5 mcg/actuation HFA aerosol inhaler	P	QL(Allowed 13 per Rx)
Dulera 200 mcg-5 mcg/actuation HFA aerosol inhaler	P	QL(Allowed 13 per Rx)
Dulera 50 mcg-5 mcg/actuation HFA aerosol inhaler	P	
fluticasone 100 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	NP	PA; QL(Allowed 2 per 1 day)
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr	NP	PA

Drug Name	Tier	Drug Restriction
fluticasone 232 mcg-salmeterol 14 mcg/actuation breath activated powdr	NP	PA
fluticasone 250 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	NP	PA; QL(Allowed 2 per 1 day)
fluticasone 500 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation	NP	PA; QL(Allowed 2 per 1 day)
fluticasone 55 mcg-salmeterol 14 mcg/actuation breath activated powder	NP	PA
Symbicort 160 mcg-4.5 mcg/actuation HFA aerosol inhaler	P	QL(Allowed 11 per Rx)
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler	P	QL(Allowed 11 per Rx)
Wixela Inhub 100 mcg-50 mcg/dose powder for inhalation	P	QL(Allowed 2 per 1 day)
Wixela Inhub 250 mcg-50 mcg/dose powder for inhalation	P	QL(Allowed 2 per 1 day)
Wixela Inhub 500 mcg-50 mcg/dose powder for inhalation	P	QL(Allowed 2 per 1 day)
ASTHMA/COPD TX - BETA-ADRENERGIC-ANTICHOLINERGIC-GLUCOCORTICOID COMB,		
Breztri Aerosphere 160 mcg-9mcg-4.8mcg/actuation HFA aerosol inhaler	NP	PA
Trelegy Ellipta 100 mcg-62.5 mcg-25 mcg powder for inhalation	NP	PA
Trelegy Ellipta 200 mcg-62.5 mcg-25 mcg powder for inhalation	NP	PA
CYSTIC FIBROSIS - INHALED AMINOGLYCOSIDES		
Bethkis 300 mg/4 mL solution for nebulization	NP	PA; SP
Kitabis Pak 300 mg/5 mL solution for nebulization	P	SP
Tobi 300 mg/5 mL solution for nebulization	NP	PA; SP
Tobi Podhaler 28 mg capsule with inhalation device	NP	PA; SP
Tobi Podhaler 28 mg capsules for inhalation	NP	PA; SP

Drug Name	Tier	Drug Restriction
tobramycin 300 mg/4 mL solution for nebulization	NP	PA; SP
tobramycin 300 mg/5 mL in 0.225 % sodium chloride for nebulization	NP	PA; SP
tobramycin with nebulizer 300 mg/5 mL solution for nebulization	NP	PA; SP
CYSTIC FIBROSIS - INHALED MONOBACTAMS		
Cayston 75 mg/mL solution for nebulization	NP	PA; SP
CYSTIC FIBROSIS - INHALED OSMOTIC AGENTS		
Bronchitol 40 mg capsule with inhalation device	NP	PA; SP
CYSTIC FIBROSIS-TRANSMEMBRANE CONDUCTANCE REGULATOR (CFTR) POTENTIATOR		
Kalydeco 150 mg tablet	NP	PA; SP
Kalydeco 25 mg oral granules in packet	NP	PA; SP
Kalydeco 50 mg oral granules in packet	NP	PA; SP
Kalydeco 75 mg oral granules in packet	NP	PA; SP
CYSTIC FIB-TRANSMEMB CONDUCT. REG.(CFTR) POTENTIATOR AND CORRECTOR CMB		
Orkambi 100 mg-125 mg oral granules in packet	NP	PA; SP
Orkambi 100 mg-125 mg tablet	NP	PA; SP
Orkambi 150 mg-188 mg oral granules in packet	NP	PA; SP
Orkambi 200 mg-125 mg tablet	NP	PA; SP
Symdeko 100 mg-150 mg (day)/150 mg (night) tablets	NP	PA; SP
Symdeko 50 mg-75 mg (day)/75 mg (night) tablets	NP	PA; SP
Trikafta 100-50-75 mg (d)/150 mg (n) tablets	NP	PA; SP
DECONGESTANT-ANALGESIC, NSAID COX NON-SPECIFIC		
Advil Cold and Sinus 30 mg-200 mg tablet	P	
Cold and Sinus Pain Relief 30 mg-200 mg tablet	P	
Cold-Sinus Relief 30 mg-200 mg tablet	P	
Ibuprofen Cold-Sinus (with pseudoephedrine) 30 mg-200 mg tablet	P	

Drug Name	Tier	Drug Restriction
Wal-Profen Cold-Sinus 30 mg-200 mg tablet	P	
Wal-Profen D Cold and Sinus 30 mg-200 mg tablet	P	
DECONGESTANT-EXPECTORANT COMBINATIONS		
ED Bron GP 5 mg-100 mg/5 mL oral liquid	P	QL(QL Overtime: Allowed 240 over 7 days)
Rescon-GG 5 mg-100 mg/5 mL oral liquid	P	QL(QL Overtime: Allowed 240 over 7 days)
EXPECTORANTS - SINGLE AGENTS, GENERAL		
Adult Tussin Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Adult Wal-Tussin 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Chest Congestion Relief 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Child Mucus Relief Expectorant 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Mucinex Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Cough Control (guaifenesin) 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Cough Syrup 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diabetic Siltussin DAS-Na 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diabetic Tussin EX 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Expectorant 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Expectorant Cough Syrup 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Geri-Tussin 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
guaifenesin 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
guaifenesin ER 600 mg tablet, extended release 12 hr	P	QL(Allowed 40 per Rx)
Iophen-NR 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Mucinex 600 mg tablet, extended release	P	QL(Allowed 40 per Rx)

Drug Name	Tier	Drug Restriction
Mucus Relief ER 600 mg tablet, extended release	P	QL(Allowed 40 per Rx)
Mucus-Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Q-Tussin 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Robafen 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Scot-Tussin Expectorant 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Siltussin SA 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin Expectorant 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin Mucus-Chest Congestion 100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
MUCOLYTICS		
acetylcysteine 100 mg/mL (10 %) solution	P	
acetylcysteine 200 mg/mL (20 %) solution	P	
Pulmozyme 1 mg/mL solution for inhalation	P	SP
NASAL ANTIBIOTICS		
Bactroban Nasal 2 % ointment	P	
NASAL ANTICHOLINERGICS		
ipratropium bromide 21 mcg (0.03 %) nasal spray	NP	PA; QL(Allowed 30 per Rx)
ipratropium bromide 42 mcg (0.06 %) nasal spray	NP	PA; QL(Allowed 25 per Rx)
NASAL ANTIHISTAMINE AND ANTI-INFLAMMATORY STEROID COMBINATIONS		
azelastine-fluticasone 137 mcg-50 mcg/spray nasal spray	NP	PA
Dymista 137 mcg-50 mcg/spray nasal spray	NP	PA
NASAL ANTIHISTAMINES		
azelastine 137 mcg (0.1 %) nasal spray aerosol	P	QL(Allowed 1 per 1 day)
azelastine 205.5 mcg (0.15 %) nasal spray	P	

Drug Name	Tier	Drug Restriction
olopatadine 0.6 % nasal spray	P	
Patanase 0.6 % nasal spray	NP	PA
NASAL CORTICOSTEROIDS		
Beconase AQ 42 mcg (0.042 %) nasal spray	NP	PA
flunisolide 25 mcg (0.025 %) nasal spray	P	QL(Allowed 25 per Rx)
fluticasone propionate 50 mcg/actuation nasal spray,suspension	P	QL(Allowed 16 per Rx)
mometasone 50 mcg/actuation nasal spray	NP	PA
Nasonex 50 mcg/actuation Spray	NP	PA
Omnaris 50 mcg nasal spray	NP	PA
QNASL 40 mcg/actuation nasal aerosol spray	NP	PA
QNASL 80 mcg/actuation nasal aerosol spray	NP	PA
Xhance 93 mcg/actuation breath activated aerosol	NP	PA

Drug Name	Tier	Drug Restriction
Zetonna 37 mcg/actuation nasal HFA inhaler	NP	PA
NASAL MAST CELL STABILIZERS		
cromolyn 5.2 mg/spray (4 %) nasal spray	P	QL(Allowed 26 per Rx)
Nasalcrom 5.2 mg/spray (4 %) spray	P	QL(Allowed 26 per Rx); Use Generic Products
NASAL MOISTURIZERS		
Altamist 0.65 % nasal spray aerosol	P	QL(Allowed 480 per Rx)
Ayr Saline 0.65 % nasal spray aerosol	P	QL(Allowed 480 per Rx)
Baby Ayr Saline 0.65 % nasal drops	P	QL(Allowed 480 per Rx)
Children's Saline Nasal Spray 0.65 % aerosol	P	QL(Allowed 480 per Rx)
Deep Sea Nasal 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Little Remedies 0.65 % nasal spray aerosol	P	QL(Allowed 480 per Rx)
Nasal Moisturizing 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Nasal Spray (sodium chloride) 0.65 % aerosol	P	QL(Allowed 480 per Rx)

Drug Name	Tier	Drug Restriction
Ocean Nasal 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Saline Mist 0.65 % nasal spray aerosol	P	QL(Allowed 480 per Rx)
Saline Nasal 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Saline Nasal Mist 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Saline Nose 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
Sea Soft Nasal Mist 0.65 % spray aerosol	P	QL(Allowed 480 per Rx)
sodium chloride 0.65 % nasal spray aerosol	P	QL(Allowed 480 per Rx)
NASAL POST-SURGICAL AGENTS		
Sinuva 1,350 mcg sinus implant	NP	PA
NON-OPIOID ANTITUSSIVE-1ST GEN ANTIHISTAMINE-ANALGESIC, NON-SALICYLATE		
Cold-Flu Relief 12.5 mg-30 mg-1,000 mg/30 mL oral liquid	P	
Contac Cold-Flu Night 12.5 mg-30 mg-1,000 mg/30 mL oral liquid	P	
Cough-Sore Throat Night 12.5 mg-30 mg-1,000 mg/30 mL oral liquid	P	
Nite Time Cold-Flu Relief 12.5 mg-30 mg-1,000 mg/30 mL oral liquid	P	
Nitetime Multi-Symptom 12.5 mg-30 mg-1,000 mg/30 mL oral liquid	P	
NON-OPIOID ANTITUSSIVE-1ST GEN.ANTIHISTAMINE-DECONGESTANT COMBINATIONS		
Bromfed DM 2 mg-30 mg-10 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx); Use Generic Products
brompheniramine-pseudoephedrine-DM 2 mg-30 mg-10 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Brotapp DM 1 mg-15 mg-5 mg/5 mL oral elixir	P	QL(Allowed 240 per Rx)
Kidkare Cough/Cold 1 mg-15 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Pedia Relief Cough-Cold 1 mg-15 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Pediatric Cough and Cold 1 mg-15 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Q-Tapp DM 1 mg-15 mg-5 mg/5 mL oral elixir	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
NON-OPIOID ANTITUSSIVE-ANTIHISTAMINE COMBINATIONS		
Dimetapp Long-Acting(chlorpheniramine-DM) 1 mg-7.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
promethazine-DM 6.25 mg-15 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
NON-OPIOID ANTITUSSIVE-DECONGESTANT COMBINATIONS		
Children's Cold-Cough Daytime 2.5 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Pediacare Multi-Symptom Cold 2.5 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Triaminic Cold and Cough (PE) 2.5 mg-5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
NON-OPIOID ANTITUSSIVE-DECONGESTANT-ANALGESIC, NON-SALICYLATE COMB		
Alka-Seltzer Plus Day 5 mg-10 mg-325 mg capsule	P	
Alka-Seltzer Plus Sinus-Cough 5 mg-10 mg-325 mg capsule	P	
Day Time PE 5 mg-10 mg-325 mg capsule	P	
DayTime 5 mg-10 mg-325 mg capsule	P	
Daytime Cold and Flu Relief (phenylephrine) 5 mg-10 mg-325 mg capsule	P	
Mucinex Fast-Max Congestion-Headache (DM) 5 mg-10 mg-325 mg capsule	P	
Mucinex Sinus-Max Severe Congestion-Pain(DM) 5 mg-10 mg-325 mg capsule	P	
Vicks DayQuil Cold and Flu Relief 5 mg-10 mg-325 mg capsule	P	
NON-OPIOID ANTITUSSIVE-EXPECTORANT COMBINATIONS		
Adult Cough Formula DM Max 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Adult Robitussin Peak Cold DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Adult Robitussin Peak Cold DM Max 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
Adult Tussin Cough Congestion DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Adult Tussin DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Adult Wal-Tussin DM Max 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Antitussive DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Biocotron 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Child Chest Congestion-Cough 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Child Mucus Relief Cough 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Child Robitussin Cough-Chest DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children Delsym Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
Children's Cough 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Children's Mucinex Cough 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Cough Control DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Cough Formula DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Cough Suppressant-Expectorant 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Cough Syrup DM 10 mg-100 mg/5 mL	P	QL(Allowed 240 per Rx)
Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Delsym Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
dextromethorphan-guaifenesin 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
dextromethorphan-guaifenesin 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Diabetic Siltussin-DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diabetic Siltussin-DM Max Str 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diabetic Tussin DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Diabetic Tussin DM 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
DM Max 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Geri-Tussin DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Geri-Tussin DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Giltuss Diabetic 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Giltuss HBP 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
G-Tron 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Guaiasorb DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Guaicon DMS 20 mg-200 mg/10 mL oral liquid in packet	P	QL(Allowed 240 per Rx)
Guaifenesin-DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Iophen DM-NR 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Mucinex Fast-Max DM Max 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Mucus Relief Cough 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Mucus Relief DM Max 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Q-Tussin DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
Robafen DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Robafen DM Cough 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Robafen DM Cough-Chest Congestion 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Robafen DM Peak Cold 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Robitussin Cough-Chest Congestion DM 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Robitussin Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Safe Tussin DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Siltussin DM DAS 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Siltussin-DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Sorbugen NR 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tusnel Diabetic 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin Cough and Chest Congestion 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin DM 10 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Tussin DM Clear 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Tussin DM Cough 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Tussin DM Cough and Chest 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
Tussin DM Cough and Chest 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Tussin DM Cough and Chest 5 mg-100 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)

Drug Name	Tier	Drug Restriction
Tussin DM Max 10 mg-200 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx)
Wal-Tussin DM 10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
OPIOID ANTITUSSIVE-1ST GENERATION ANTIHISTAMINE COMBINATIONS		
promethazine 6.25 mg-codeine 10 mg/5 mL syrup	P	AL(Minimum Age 18 Years); QL(Allowed 240 per Rx)
OPIOID ANTITUSSIVE-1ST GENERATION ANTIHISTAMINE-DECONGESTANT COMB.		
Promethazine VC-Codeine 6.25 mg-5 mg-10 mg/5 mL oral syrup	P	AL(Minimum Age 18 Years); QL(Allowed 240 per Rx)
promethazine-phenylephrine-codeine 6.25 mg-5 mg-10 mg/5 mL oral syrup	P	AL(Minimum Age 18 Years); QL(Allowed 240 per Rx)
OPIOID ANTITUSSIVE-ANTICHOLINERGIC COMBINATIONS		
hydrocodone-homatropine 5 mg-1.5 mg/5 mL (5 mL) oral syrup	P	AL(Minimum Age 18 Years); APA
hydrocodone-homatropine 5 mg-1.5 mg/5 mL oral syrup	P	AL(Minimum Age 18 Years); APA
Hydromet 5 mg-1.5 mg/5 mL oral syrup	P	AL(Minimum Age 18 Years); APA; Use Generic Products
OPIOID ANTITUSSIVE-DECONGESTANT-EXPECTORANT COMBINATIONS		
Virtussin DAC 30 mg-10 mg-100 mg/5 mL oral syrup	P	QL(Allowed 240 per Rx)
OPIOID ANTITUSSIVE-EXPECTORANT COMBINATIONS		
Cheratussin AC 10 mg-100 mg/5 mL oral liquid	P	
codeine 10 mg-guaifenesin 100 mg/5 mL oral liquid	P	
G Tussin AC 10 mg-100 mg/5 mL oral liquid	P	
Guaiatussin AC 10 mg-100 mg/5 mL oral liquid	P	
Guaifenesin AC 10 mg-100 mg/5 mL oral liquid	P	
Iophen C-NR 10 mg-100 mg/5 mL oral liquid	P	
Maxi-Tuss AC 10 mg-100 mg/5 mL oral liquid	P	
Robafen AC 10 mg-100 mg/5 mL oral liquid	P	
Virtussin AC 10 mg-100 mg/5 mL oral liquid	P	
PULMONARY FIBROSIS TREATMENT AGENTS - ANTIFIBROTIC THERAPY		

Drug Name	Tier	Drug Restriction
Esbriet 267 mg capsule	NP	PA; SP
Esbriet 267 mg tablet	NP	PA; SP
Esbriet 801 mg tablet	NP	PA; SP
PULMONARY FIBROSIS TREATMENT AGENTS - MULTIKINASE INHIBITORS		
Ofev 100 mg capsule	NP	PA; SP
Ofev 150 mg capsule	NP	PA; SP
SYSTEMIC SYMPATHOMIMETIC DECONGESTANTS		
12 Hour Cold Relief 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
12 Hour Decongestant ER 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
12 Hour Nasal Decongestant (PSE) 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Children's Silfedrine 15 mg/5 mL oral liquid	P	
Children's Sudafed 15 mg/5 mL oral liquid	P	

Drug Name	Tier	Drug Restriction
Nasal Decongestant (phenylephrine) 10 mg tablet	P	QL(Allowed 24 per Rx)
Nasal Decongestant (pseudoephedrine) 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Nasal Decongestant (pseudoephedrine) 30 mg tablet	P	
Nasal Decongestant (pseudoephedrine) 30 mg/5 mL oral liquid	P	
pseudoephedrine 30 mg tablet	P	
pseudoephedrine 30 mg/5 mL oral liquid	P	
pseudoephedrine 60 mg tablet	P	
pseudoephedrine ER 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Sinus 12 Hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Sinus Decongestant (PE) 10 mg tablet	P	QL(Allowed 24 per Rx)
Sinus PE Decongestant 10 mg tablet	P	QL(Allowed 24 per Rx)

Drug Name	Tier	Drug Restriction
Sudafed 12 Hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Sudafed 30 mg tablet	P	
Sudafed PE 10 mg tablet	P	QL(Allowed 24 per Rx)
Sudogest 12-hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Sudogest 30 mg tablet	P	
Sudogest 60 mg tablet	P	
Sudogest PE 10 mg tablet	P	QL(Allowed 24 per Rx)
Suphedrin 12 Hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Suphedrin 15 mg/5 mL oral liquid	P	
Suphedrin 30 mg tablet	P	
Suphedrine 12 Hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Suphedrine 30 mg tablet	P	
Suphedrine PE 10 mg tablet	P	QL(Allowed 24 per Rx)
Wal-phed 12 hour 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Wal-phed 30 mg tablet	P	
Wal-Phed D 120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
Wal-phed PE 10 mg tablet	P	QL(Allowed 24 per Rx)
VAGINAL PRODUCTS		
VAGINAL ANTIBACTERIAL - LINCOSAMIDES		
Cleocin 100 mg vaginal suppository	P	
Cleocin 2 % vaginal cream	NP	PA; QL(Allowed 40 per Rx)
clindamycin 2 % vaginal cream	P	QL(Allowed 40 per Rx)
Clindesse 2 % vaginal cream,extended release	NP	PA
VAGINAL ANTIFUNGAL - IMIDAZOLES		
clotrimazole 2 % vaginal cream	P	QL(Allowed 30 per Rx)
Gynazole-1 2 % vaginal cream	NP	PA
Miconazole-3 200 mg vaginal suppository	P	QL(Allowed 3 per Rx)

Drug Name	Tier	Drug Restriction
VAGINAL ANTIFUNGAL - TRIAZOLES		
terconazole 0.4 % vaginal cream	P	QL(Allowed 45 per Rx)
terconazole 0.8 % vaginal cream	P	QL(Allowed 20 per Rx)
terconazole 80 mg vaginal suppository	P	QL(Allowed 3 per Rx)
VAGINAL ANTIPROTOZOAL-ANTIBACTERIAL - NITROIMIDAZOLE DERIVATIVES		
Metrogel Vaginal 0.75 %	NP	PA; QL(Allowed 70 per Rx)
metronidazole 0.75 % vaginal gel	P	QL(Allowed 70 per Rx)
Nuvessa 1.3 % vaginal gel	NP	PA
Vandazole 0.75 % vaginal gel	P	QL(Allowed 70 per Rx)
VAGINAL ANTISEPTIC MIXTURES		
Trimo-San Jelly 0.025 %-0.01 % vaginal	NP	PA
VAGINAL ESTROGENS		
Estrace 0.01% (0.1 mg/gram) vaginal cream	NP	PA; QL(QL Overtime: Allowed 43 over 30 days); MT
estradiol 0.01% (0.1 mg/gram) vaginal cream	P	QL(QL Overtime: Allowed 43 over 30 days); MT
estradiol 10 mcg vaginal tablet	NP	PA; MT
Estring 2 mg (7.5 mcg/24 hour) vaginal ring	NP	PA; MT
Femring 0.05 mg/24 hr vaginal	NP	PA; MT
Femring 0.1 mg/24 hr vaginal	NP	PA; MT
Premarin 0.625 mg/gram vaginal cream	P	QL(QL Overtime: Allowed 43 over 30 days); MT
Vagifem 10 mcg vaginal tablet	NP	PA; MT
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Adult 50 Plus Eye Health 250 mg-5 mg-1 mg capsule 232
Adult Aerosol Mask.....390
Adult Cough Formula DM Max 10 mg-200 mg/5 mL oral liquid.....434
Adult Disposable Mouthpiece 390
Adult Robitussin Peak Cold DM 10 mg-100 mg/5 mL oral liquid.....434
Adult Robitussin Peak Cold DM Max 10 mg-200 mg/5 mL oral liquid.....434
Adult Tussin Chest Congestion 100 mg/5 mL oral liquid 430
Adult Tussin Cough Congestion DM 10 mg-100 mg/5 mL oral liquid.....435
Adult Tussin DM 10 mg-100 mg/5 mL oral syrup 435
Adult Wal-Tussin 100 mg/5 mL oral liquid 430
Adult Wal-Tussin DM Max 10 mg-200 mg/5 mL oral liquid.....435
Adults 50 Plus 0.4 mg-300 mcg-250 mcg tablet.....232
Adults' Daily Formula 18 mg iron-25 mcg tablet.....232
Adults Multivitamin 18 mg iron-400 mcg-25 mcg tablet 232
Advair Diskus 100 mcg-50 mcg/dose powder for inhalation 426
Advair Diskus 250 mcg-50 mcg/dose powder for inhalation 426
Advair Diskus 500 mcg-50 mcg/dose powder for inhalation 426
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Advate 3,000 (+/-) unit intravenous solution 323
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Advocate Blood Glucose Monitor.....348
Advocate Lancing Device 348
Advocate Pen Needle 29 gauge x 1/2...363
Advocate Pen Needle 31 gauge x 3/16.363
Advocate Pen Needle 31 gauge x 5/16.363
Advocate Rapid-Safe Lancing Device....348
Advocate Redi-Code Glucose Monitor .348
Advocate Redi-Code Glucose Monitor kit 348
Advocate Redi-Code Plus.....348
Advocate Redi-Code Plus strips 340
Advocate Redi-Code strips.....340
Advocate Syringes 0.3 mL 29 gauge x 1/2 364
Advocate Syringes 0.3 mL 30 gauge x 5/16 364
Advocate Syringes 0.3 mL 31 gauge x 5/16 364
Advocate Syringes 0.5 mL 29 gauge x 1/2 364
Advocate Syringes 0.5 mL 30 gauge x 5/16 364
Advocate Syringes 0.5 mL 31 gauge x 5/16 364
Advocate Syringes 1 mL 29 gauge x 1/2364
Advocate Syringes 1 mL 30 gauge x 5/16 364
Advocate Syringes 1 mL 31 gauge x 5/16 364
Advocate Test Strips 340
Adynovate 1,000 (+/-) unit intravenous solution 324
Adynovate 1,500 (+/-) unit intravenous solution 324
Adynovate 2,000 (+/-) unit intravenous solution 324
Adynovate 250 (+/-) unit intravenous solution 324
Adynovate 3,000 (+/-) unit intravenous solution 324
Adynovate 500 (+/-) unit intravenous solution 324
Adynovate 750 (+/-) unit intravenous solution 324
Adzenys ER 1.25 mg/mL suspension, extended release 24hr 166
Adzenys XR-ODT 12.5 mg extended release disintegrating tablet 166
Adzenys XR-ODT 15.7 mg extended release disintegrating tablet 166
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Adzenys XR-ODT 3.1 mg extended release disintegrating tablet.....166
Adzenys XR-ODT 6.3 mg extended release disintegrating tablet.....166
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Aerochamber MV spacer 390
Aerochamber Plus Flow-Vu 390
Aerochamber Plus Flow-Vu,Large Mask 390
Aerochamber Plus Flow-Vu,Medium Mask 390
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Aerochamber Plus Z Stat Large Mask ...390
AeroChamber Plus Z Stat Medium Mask 390
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Afinitor 10 mg tablet 76
Afinitor 2.5 mg tablet 76
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Afinitor 7.5 mg tablet 76
Afinitor Disperz 2 mg tablet for oral suspension 76
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Afinitor Disperz 5 mg tablet for oral suspension 76

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Afluria Qd 2020-21 (36 mos up)(PF)60 mcg (15 mcg x4)/0.5 mL IM syringe 85
Afluria Qd 2020-21 (6-35 mos)(PF) 30 mcg(7.5 mcgx4)/0.25 mL IM syringe..85
Afluria Quad 2020-2021 60 mcg (15 mcg x 4)/0.5 mL intramuscular susp. 85
Afrezza (regular insulin) 8 unit (90)/12 unit (90) cartridge,inhaler 275
Afrezza 12 unit cartridge with inhaler ..275
Afrezza 4 unit (60)/8 unit (60)/12 unit (60) cartridge with inhaler 275
Afrezza 4 unit (90)/8 unit (90) cartridge with inhaler.....275
Afrezza 4 unit cartridge with inhaler 275
Afrezza 8 unit cartridge with inhaler 275
Afstyla 1,000 (+/-) unit range intravenous solution 324
Afstyla 1,500 (+/-) unit range intravenous solution 324
Afstyla 2,000 (+/-) unit range intravenous solution 324
Afstyla 2,500 (+/-) unit range intravenous solution 324
Afstyla 250 (+/-) unit range intravenous solution 324
Afstyla 3,000 (+/-) unit range intravenous solution 324
Afstyla 500 (+/-) unit range intravenous solution 324
AgaMatrix AMP Glucose Monitoring System 348
AgaMatrix Amp Test Strips 340
Agrylin 0.5 mg capsule.....333
Aimovig Autoinjector 140 mg/mL subcutaneous auto-injector.....175
Aimovig Autoinjector 70 mg/mL subcutaneous auto-injector.....175
Aimsco Latex Condom 387
Air Tube With Air Plugs.....391
AirDuo Digihaler 113 mcg-14 mcg/actuation breath act,powder sensor 427
AirDuo Digihaler 232 mcg-14 mcg/actuation breath act,powder sensor 427
AirDuo Digihaler 55 mcg-14 mcg/actuation breath act,powder sensor.....427
AirDuo RespiClick 113 mcg-14 mcg/actuation breath activated 427
AirDuo RespiClick 232 mcg-14 mcg/actuation breath activated 427
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Airs Pediatric Disposable Mask.....388
Ajovy 225 mg/1.5 mL subcutaneous auto-injector.....175
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Aklief 0.005 % topical cream 204
AK-Poly-Bac 500 unit-10,000 unit/gram eye ointment 408
Akten (PF) 3.5 % eye gel 408
Aktipak 3 %-5 % topical gel.....202
Akynzeo (netupitant) 300 mg-0.5 mg capsule.....292
Alavert 10 mg disintegrating tablet 417
Alavert D-12 Allergy-Sinus 5 mg-120 mg tablet,extended release.....412
albendazole 200 mg tablet 40
Albenza 200 mg tablet.....40
albuterol sulfate 0.63 mg/3 mL solution for nebulization.....424
albuterol sulfate 1.25 mg/3 mL solution for nebulization.....424
albuterol sulfate 2 mg tablet 425
albuterol sulfate 2 mg/5 mL oral syrup 425
albuterol sulfate 2.5 mg/3 mL (0.083 %) solution for nebulization.....424
albuterol sulfate 4 mg tablet 425
albuterol sulfate concentrate 2.5 mg/0.5 mL solution for nebulization 425
albuterol sulfate concentrate 5 mg/mL(0.5 %) solution for nebulization.....425
albuterol sulfate ER 4 mg tablet,extended release,12 hr 426
albuterol sulfate ER 8 mg tablet,extended release,12 hr 426
albuterol sulfate HFA 90 mcg/actuation aerosol inhaler 425
Alcaine 0.5 % eye drops.....408
alclometasone 0.05 % topical cream 213
alclometasone 0.05 % topical ointment 213
Alcohol Prep Pads 81
alcohol swabs 81
Aldactazide 25 mg-25 mg tablet.....119
Aldactazide 50 mg-50 mg tablet.....119
Aldactone 100 mg tablet 118
Aldactone 25 mg tablet 118
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Aldara 5 % topical cream packet 219
Alecensa 150 mg capsule.....71
alendronate 10 mg tablet.....264
alendronate 35 mg tablet.....264
alendronate 70 mg tablet.....264
alendronate 70 mg/75 mL oral solution 264
Aler-Cap 25 mg capsule 414
alfuzosin ER 10 mg tablet,extended release 24 hr 313
aliskiren 150 mg tablet 124
aliskiren 300 mg tablet 124
Alive Once Daily Women 50 Plus 800 mcg-100 mcg tablet 232
Alive Women's 50 Plus (fruit-veg blend) 240 mcg-120 mcg-300 mcg tablet ...232
Alive Women's Energy 18 mg-400 mcg-80 mcg tablet 232
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Alka-Seltzer Plus Day 5 mg-10 mg-325 mg capsule 434
Alka-Seltzer Plus Sinus-Cough 5 mg-10 mg-325 mg capsule 434
Alkeran 2 mg tablet 70
Alkindi Sprinkle 0.5 mg capsule 269
Alkindi Sprinkle 1 mg capsule 269
Alkindi Sprinkle 2 mg capsule 269
Alkindi Sprinkle 5 mg capsule 269
All Day Allergy (cetirizine) 1 mg/mL oral solution 417
All Day Allergy (cetirizine) 10 mg chewable tablet.....417
All Day Allergy (cetirizine) 10 mg tablet417
All Day Allergy Relief (cetirizine) 10 mg tablet.....417
All Day Allergy-D 5 mg-120 mg tablet,extended release.....412
All Flow 1000 PFT Filter 391
Allegra Allergy 180 mg tablet 417
Allegra Allergy 60 mg tablet 417
Aller-Chlor 2 mg/5 mL oral syrup.....414
Aller-Chlor 4 mg tablet 414
Allerclear 10 mg tablet 417
AllerClear D-12hr 5 mg-120 mg tablet,extended release.....412
AllerClear D-24hr 10 mg-240 mg tablet,extended release.....412
Aller-ease 180 mg tablet.....417
Aller-ease 60 mg tablet.....417
Aller-Fex 180 mg tablet 417
Aller-G-Time 25 mg tablet 414
Allergy (chlorpheniramine) 4 mg tablet414
Allergy (diphenhydramine) 12.5 mg/5 mL oral liquid 414
Allergy (diphenhydramine) 25 mg capsule 414
Allergy (diphenhydramine) 25 mg tablet 414
Allergy 4-Hour 4 mg tablet 414
Allergy and Congestion Relief 10 mg-240 mg tablet,extend release 24 hr.....412

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
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Allergy and Congestion Relief 5 mg-120 mg tablet,extend release 12 hr.....412
Allergy Complete-D 5 mg-120 mg tablet,extended release.....412
Allergy D-12 5 mg-120 mg tablet,extended release 412
Allergy Medication 25 mg capsule.....414
Allergy Medicine 12.5 mg/5 mL oral liquid 414
Allergy Medicine 25 mg capsule.....414
Allergy Medicine 25 mg tablet.....414
Allergy plus Congestn Relief-D(cetiriz) 5 mg-120 mg tablet,ext.release.....412
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Allergy Relief (cetirizine) 10 mg tablet..418
Allergy Relief (chlorpheniramine) 4 mg tablet.....414
Allergy Relief (clemastine) 1.34 mg tablet 414
Allergy Relief (diphenhydramine) 12.5 mg/5 mL oral liquid.....414
Allergy Relief (diphenhydramine) 25 mg capsule.....414
Allergy Relief (diphenhydramine) 25 mg tablet.....414
Allergy Relief (fexofenadine) 180 mg tablet.....418
Allergy Relief (fexofenadine) 60 mg tablet 418
Allergy Relief (levocetirizine) 5 mg tablet 418
Allergy Relief (loratadine) 10 mg disintegrating tablet.....418
Allergy Relief (loratadine) 10 mg tablet418
Allergy Relief (loratadine) 5 mg/5 mL oral solution.....418
Allergy Relief and Nasal Decongestant 10 mg-240 mg tablet,extended rel 412
Allergy Relief D12 5 mg-120 mg tablet,extended release.....413
Allergy Relief D-24hr 10 mg-240 mg tablet,extended release.....413
Allergy Relief-D (cetirizine) 5 mg-120 mg tablet,extended release.....413
Allergy Relief-D (loratadine) 5 mg-120 mg tablet,extended release.....413
Allergy-Congestion Relief-D 10 mg-240 mg tablet,extended release 24 hr.....413
Allergy-Time 4 mg tablet 414
Allerhist (clemastine) 1.34 mg tablet....414
Allerhist-1 1.34 mg tablet 414
Aller-Tec 10 mg tablet 418
Aller-Tec D 5 mg-120 mg tablet,extended release 413
allopurinol 100 mg tablet 317
allopurinol 300 mg tablet 318
Allzital 25 mg-325 mg tablet.....23
Almacone 200 mg-200 mg-20 mg/5 mL oral suspension 287
almotriptan malate 12.5 mg tablet.....176
almotriptan malate 6.25 mg tablet.....176
Alocril 2 % eye drops 408
alogliptin 12.5 mg tablet.....256
alogliptin 12.5 mg-metformin 1,000 mg tablet.....262
alogliptin 12.5 mg-metformin 500 mg tablet.....262
alogliptin 12.5 mg-pioglitazone 15 mg tablet.....262
alogliptin 12.5 mg-pioglitazone 30 mg tablet.....262
alogliptin 12.5 mg-pioglitazone 45 mg tablet.....262
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alogliptin 25 mg-pioglitazone 15 mg tablet 262
alogliptin 25 mg-pioglitazone 30 mg tablet 262
alogliptin 25 mg-pioglitazone 45 mg tablet 262
alogliptin 6.25 mg tablet.....257
Alomide 0.1 % eye drops 408
Alophen (bisacodyl) 5 mg tablet,delayed release 307
Alora 0.025 mg/24 hr transdermal patch 266
Alora 0.05 mg/24 hr transdermal patch 266
Alora 0.075 mg/24 hr transdermal patch 266
Alora 0.1 mg/24 hr transdermal patch .266
alosetron 0.5 mg tablet 301
alosetron 1 mg tablet 301
Alphagan P 0.1 % eye drops.....410
Alphagan P 0.15 % eye drops.....410
Alphanate 1,000 (400 vWF) unit/10 mL intravenous solution 324
Alphanate 1,500 (600 vWF) unit/10 mL intravenous solution 324
Alphanate 2,000 (800 vWF) unit/10 mL intravenous solution 324
Alphanate 250 (100 vWF) unit/5 mL intravenous solution 324
Alphanate 500 (200 vWF) unit/5 mL intravenous solution 325
AlphaNine SD 1,000 (+/-) unit intravenous solution 321
AlphaNine SD 1,500 (+/-) unit intravenous solution 321
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alprazolam 2 mg disintegrating tablet..125
alprazolam 2 mg tablet.....125
alprazolam ER 0.5 mg tablet,extended release 24 hr 125
alprazolam ER 1 mg tablet,extended release 24 hr 125
alprazolam ER 2 mg tablet,extended release 24 hr 125
alprazolam ER 3 mg tablet,extended release 24 hr 125
Alprazolam Intensol 1 mg/mL oral concentrate.....125
Alprolix 1,000 unit intravenous solution 321
Alprolix 2,000 unit intravenous solution 321
Alprolix 250 unit intravenous solution .322
Alprolix 3,000 unit intravenous solution 322
Alprolix 4,000 unit intravenous solution 322
Alprolix 500 unit intravenous solution .322
Alrex 0.2 % eye drops,suspension 405
Altace 1.25 mg capsule.....88
Altace 10 mg capsule.....88
Altace 2.5 mg capsule.....88
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Altamist 0.65 % nasal spray aerosol 432
Altavera (28) 0.15 mg-0.03 mg tablet...189
Altera Nebulizer misc.....388
Alternate Site Lancet 26 gauge.....348
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Altoprev 20 mg tablet,extended release 102
Altoprev 40 mg tablet,extended release 102
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Altreno 0.05 % lotion.....204

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aluminum hydroxide gel 320 mg/5 mL oral suspension 287
aluminum-mag hydroxide-simethicone 200 mg-200 mg-20 mg/5 mL oral susp 287
Alunbrig 180 mg tablet 71
Alunbrig 30 mg tablet 71
Alunbrig 90 mg (7)-180 mg (23) tablets in a dose pack 71
Alunbrig 90 mg tablet 71
Alvesco 160 mcg/actuation aerosol inhaler 420
Alvesco 80 mcg/actuation aerosol inhaler 420
alvimopan 12 mg capsule 36
Alyacen 1/35 (28) 1 mg-35 mcg tablet .189
Alyacen 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet 197
Alyq 20 mg tablet.....124
Amabelz 0.5 mg-0.1 mg tablet.....265
Amabelz 1 mg-0.5 mg tablet.....265
amantadine HCl 100 mg capsule 152
amantadine HCl 100 mg tablet 152
amantadine HCl 50 mg/5 mL oral solution 152
Amaryl 1 mg tablet 259
Amaryl 2 mg tablet 259
Amaryl 4 mg tablet 259
Ambien 10 mg tablet 181
Ambien 5 mg tablet 181
Ambien CR 12.5 mg tablet,extended release 181
Ambien CR 6.25 mg tablet,extended release 182
ambrisentan 10 mg tablet 123
ambrisentan 5 mg tablet 123
amcinonide 0.1 % lotion 213
amcinonide 0.1 % topical cream.....213
Ameluz 10 % topical gel.....222
Amerge 1 mg tablet 176
Amerge 2.5 mg tablet 176
Amethia 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack 188
Amethia Lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack ..188
Amethyst (28) 90 mcg-20 mcg tablet ...189
Amicar 500 mg tablet 330
amikacin 1,000 mg/4 mL injection solution 37
amikacin 500 mg/2 mL injection solution 37
amiloride 5 mg tablet 119
amiloride 5 mg-hydrochlorothiazide 50 mg tablet.....119
aminocaproic acid 500 mg tablet 330
amiodarone 100 mg tablet 99
amiodarone 200 mg tablet 99
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Amitiza 24 mcg capsule 301
Amitiza 8 mcg capsule 301
amitriptyline 10 mg tablet 147
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amlodipine 10 mg tablet.....112
amlodipine 10 mg-atorvastatin 10 mg tablet.....105
amlodipine 10 mg-atorvastatin 20 mg tablet.....105
amlodipine 10 mg-atorvastatin 40 mg tablet.....105
amlodipine 10 mg-atorvastatin 80 mg tablet.....105
amlodipine 10 mg-benazepril 20 mg capsule.....86
amlodipine 10 mg-benazepril 40 mg capsule.....86
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amlodipine 10 mg-olmesartan 40 mg tablet.....91
amlodipine 10 mg-valsartan 160 mg tablet 91
amlodipine 10 mg-valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet ..92
amlodipine 10 mg-valsartan 160 mg-hydrochlorothiazide 25 mg tablet 92
amlodipine 10 mg-valsartan 320 mg tablet 91
amlodipine 10 mg-valsartan 320 mg-hydrochlorothiazide 25 mg tablet 92
amlodipine 2.5 mg tablet.....112
amlodipine 2.5 mg-atorvastatin 10 mg tablet.....105
amlodipine 2.5 mg-atorvastatin 20 mg tablet.....105
amlodipine 2.5 mg-atorvastatin 40 mg tablet.....105
amlodipine 2.5 mg-benazepril 10 mg capsule.....86
amlodipine 5 mg tablet.....112
amlodipine 5 mg-atorvastatin 10 mg tablet.....105
amlodipine 5 mg-atorvastatin 20 mg tablet.....105
amlodipine 5 mg-atorvastatin 40 mg tablet.....105
amlodipine 5 mg-atorvastatin 80 mg tablet.....105
amlodipine 5 mg-benazepril 10 mg capsule.....86
amlodipine 5 mg-benazepril 20 mg capsule.....86
amlodipine 5 mg-benazepril 40 mg capsule.....86
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amlodipine 5 mg-olmesartan 40 mg tablet 91
amlodipine 5 mg-valsartan 160 mg tablet 91
amlodipine 5 mg-valsartan 160 mg-hydrochlorothiazide 12.5 mg tablet ..92
amlodipine 5 mg-valsartan 160 mg-hydrochlorothiazide 25 mg tablet 92
amlodipine 5 mg-valsartan 320 mg tablet 91
ammonium lactate 12 % lotion.....213
ammonium lactate 12 % topical cream 213
Amnesteem 10 mg capsule.....200
Amnesteem 20 mg capsule.....200
Amnesteem 40 mg capsule.....200
amoxapine 100 mg tablet.....147
amoxapine 150 mg tablet.....147
amoxapine 25 mg tablet.....148
amoxapine 50 mg tablet.....148
amoxicillin 125 mg chewable tablet 38
amoxicillin 125 mg/5 mL oral suspension 38
amoxicillin 200 mg/5 mL oral suspension 38
amoxicillin 200 mg-potassium clavulanate 28.5 mg chewable tablet 39
amoxicillin 200 mg-potassium clavulanate 28.5 mg/5 mL oral suspension.....39
amoxicillin 250 mg capsule.....38
amoxicillin 250 mg chewable tablet 38
amoxicillin 250 mg/5 mL oral suspension 38
amoxicillin 250 mg-potassium clavulanate 125 mg tablet.....39
amoxicillin 250 mg-potassium clavulanate 62.5 mg/5 mL oral suspension.....39
amoxicillin 400 mg/5 mL oral suspension 38

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amoxicillin 400 mg-potassium clavulanate 57 mg chewable tablet 39
amoxicillin 400 mg-potassium clavulanate 57 mg/5 mL oral suspension 39
amoxicillin 500 mg capsule 38
amoxicillin 500 mg tablet.....38
amoxicillin 500 mg-clarithromycin 500 mg-lansoprazole 30 mg combo pack 310
amoxicillin 500 mg-potassium clavulanate 125 mg tablet.....39
amoxicillin 600 mg-potassium clavulanate 42.9 mg/5 mL oral suspension 39
amoxicillin 875 mg tablet.....38
amoxicillin 875 mg-potassium clavulanate 125 mg tablet.....39
amoxicillin-potassium clavulanate 1,000 mg-62.5 mg tablet,ext.rel 12hr 39
amphetamine ER 1.25 mg/mL oral 24 hr extended-release suspension 166
amphetamine sulfate 10 mg tablet 173
amphetamine sulfate 5 mg tablet 173
ampicillin 1 gram intravenous solution ..38
ampicillin 1 gram solution for injection ..38
ampicillin 10 gram solution for injection 38
ampicillin 125 mg solution for injection .39
ampicillin 2 gram intravenous solution ..39
ampicillin 2 gram solution for injection ..39
ampicillin 250 mg solution for injection .39
ampicillin 500 mg capsule.....39
ampicillin 500 mg solution for injection .39
ampicillin-sulbactam 1.5 gram intravenous solution 39
ampicillin-sulbactam 1.5 gram solution for injection 40
ampicillin-sulbactam 15 gram solution for injection 40
ampicillin-sulbactam 3 gram intravenous solution 40
ampicillin-sulbactam 3 gram solution for injection 40
Ampyra 10 mg tablet,extended release400
Amrix 15 mg capsule,extended release 338
Amrix 30 mg capsule,extended release 338
Amzeeq 4 % topical foam 201
Anafranil 25 mg capsule 148
Anafranil 50 mg capsule 148
Anafranil 75 mg capsule 148
anagrelide 0.5 mg capsule 333
anagrelide 1 mg capsule 333
Ana-Lex 2 %-2 % rectal kit.....35
Anaspaz 0.125 mg disintegrating tablet 298
anastrozole 1 mg tablet 72
Ancobon 250 mg capsule.....41
Ancobon 500 mg capsule.....41
AndroGel 1 % (25 mg/2.5 gram) transdermal gel packet 254
AndroGel 1 % (50 mg/5 gram) transdermal gel packet.....254
AndroGel 1.62 % (40.5 mg/2.5 gram) transdermal gel packet 254
AndroGel 20.25 mg/1.25 gram (1.62 %) transdermal gel pump 254
Angeliq 0.25 mg-0.5 mg tablet 265
Angeliq 0.5 mg-1 mg tablet 265
ANIMAL CHEWS tablet.....245
Animal Shape Vitamins chewable tablet 245
Animal Shapes chewable tablet.....245
Animal Shapes Complete chewable tablet 246
Annovera 0.15 mg-0.013 mg/24 hr vaginal ring.....199
Anoro Ellipta 62.5 mcg-25 mcg/actuation powder for inhalation 426
Antabuse 250 mg tablet 184
Antabuse 500 mg tablet 184
Antacid (calcium carbonate) 200 mg calcium (500 mg) chewable tablet...287
Antacid (calcium carbonate) 215 mg calcium (500 mg) chewable tablet...287
Antacid 200 mg-200 mg-20 mg/5 mL oral suspension 287
Antacid Anti-Gas 200 mg-200 mg-20 mg/5 mL oral suspension 288
Antacid Calcium 215 mg calcium (500 mg) chewable tablet 287
Antacid Extra-Strength 200 mg-200 mg-20 mg/5 mL oral suspension.....288
Antacid Liquid 200 mg-200 mg-20 mg/5 mL oral suspension 288
Antacid M 200 mg-200 mg-20 mg/5 mL oral suspension 288
Antacid Plus Anti-Gas 200 mg-200 mg-20 mg/5 mL oral suspension.....288
Antacid Regular Strength 200 mg-200 mg-20 mg/5 mL oral suspension.....288
Antacid with Simethicone 200 mg-200 mg-20 mg/5 mL oral suspension.....288
Antacid-Antigas 200 mg-200 mg-20 mg/5 mL oral suspension 288
Antara 30 mg capsule 101
Antara 90 mg capsule 101
Antibiotic Plus (pramoxine) 3.5 mg-10,000 unit-10 mg/gram top cream 208
Antibiotic Plus Pain Relief 3.5 mg-10,000 unit-10 mg/gram top cream 208
Antibiotic(neomy-bacit-polym) 3.5 mg-400 unit-5,000 unit/gram top oint.....207
Anti-Dandruff (coal tar) 0.5 % shampoo 220
Anti-Diarrhea 2 mg tablet.....288
Anti-Diarrheal (loperamide) 1 mg/5 mL oral liquid 288
Anti-Diarrheal (loperamide) 1 mg/7.5 mL oral liquid 289
Anti-Diarrheal (loperamide) 2 mg capsule 289
Anti-Diarrheal (loperamide) 2 mg tablet 289
Antifungal (clotrimazole) 1 % topical cream 209
Anti-Itch (hydrocortisone) 1 % topical cream 213
Anti-Itch (menthol-camphor) 0.5 %-0.5 % lotion.....211
Antioxidant A/C/E/Selenium capsule ...232
Antioxidant Formula (selenium yeast) 8,333 unit-167 mg-133 unit tablet...232
Antioxidant Vitamins 1,000 unit-200 mg-60 unit-2mg tablet 232
Antitussive DM 10 mg-100 mg/5 mL oral syrup 435
Anusol-HC 2.5 % topical cream with perineal applicator.....34
Anzemet 100 mg tablet 291
Anzemet 50 mg tablet 291
Apadaz 4.08 mg-325 mg tablet.....16
Apadaz 6.12 mg-325 mg tablet.....16
Apadaz 8.16 mg-325 mg tablet.....16
ApexiCon E 0.05 % topical cream 213
Aphen 325 mg tablet 20
Apidra SoloStar U-100 Insulin 100 unit/mL subcutaneous pen.....277
Apidra U-100 Insulin 100 unit/mL subcutaneous solution.....277
Aplenzin 174 mg tablet,extended release 146
Aplenzin 348 mg tablet,extended release 147
Aplenzin 522 mg tablet,extended release 147
APOKYN 10 mg/mL subcutaneous cartridge.....152
apraclonidine 0.5 % eye drops.....410
aprepitant 125 mg (1)-80 mg (2) capsules in a dose pack 292
aprepitant 125 mg capsule 292
aprepitant 40 mg capsule 292
aprepitant 80 mg capsule 292
Apri 0.15 mg-0.03 mg tablet.....189

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Apriso 0.375 gram capsule,extended release 300
Aprizio Pak II 2.5 %-2.5 % topical kit.....221
Aptensio XR 10 mg capsule,extended release sprinkle.....166
Aptensio XR 15 mg capsule,extended release sprinkle.....166
Aptensio XR 20 mg capsule,extended release sprinkle.....166
Aptensio XR 30 mg capsule,extended release sprinkle.....166
Aptensio XR 40 mg capsule,extended release sprinkle.....166
Aptensio XR 50 mg capsule,extended release sprinkle.....166
Aptensio XR 60 mg capsule,extended release sprinkle.....166
Aptiom 200 mg tablet.....133
Aptiom 400 mg tablet.....133
Aptiom 600 mg tablet.....133
Aptiom 800 mg tablet.....133
Aptivus (with vitamin E) 100 mg/mL oral solution 65
Aptivus 250 mg capsule 65
Aqua Care Sodium Chloride 0.9 % irrigation solution 228
Aqua Lance Lancing Device.....348
Aquoral mucosal spray 398
Aranelle (28) 0.5 mg/1 mg/0.5 mg-35 mcg tablet.....197
Aranesp 10 mcg/0.4 mL (in polysorbate) injection syringe.....319
Aranesp 100 mcg/0.5 mL (in polysorbate) injection syringe.....319
Aranesp 100 mcg/mL (in polysorbate) Injection 319
Aranesp 150 mcg/0.3 mL (in polysorbate) injection syringe.....319
Aranesp 200 mcg/0.4 mL (in polysorbate) injection syringe.....320
Aranesp 200 mcg/mL (in polysorbate) Injection 320
Aranesp 25 mcg/0.42 mL (in polysorbate) injection syringe.....320
Aranesp 25 mcg/mL (in polysorbate) Injection 320
Aranesp 300 mcg/0.6 mL (in polysorbate) injection syringe.....320
Aranesp 40 mcg/0.4 mL (in polysorbate) injection syringe.....320
Aranesp 40 mcg/mL (in polysorbate) Injection 320
Aranesp 500 mcg/mL (in polysorbate) injection syringe.....320
Aranesp 60 mcg/0.3 mL (in polysorbate) injection syringe.....320
Aranesp 60 mcg/mL (in polysorbate) Injection 320
Arava 10 mg tablet 28
Arava 20 mg tablet 29
Arazlo 0.045 % lotion.....204
Arcalyst 220 mg subcutaneous solution .24
Aricept 10 mg tablet 185
Aricept 23 mg tablet 185
Aricept 5 mg tablet 185
Arikayce 590 mg/8.4 mL suspension for inhalation via nebulization.....37
Arimidex 1 mg tablet 72
aripiprazole 1 mg/mL oral solution.....163
aripiprazole 10 mg disintegrating tablet 163
aripiprazole 10 mg tablet.....163
aripiprazole 15 mg disintegrating tablet 163
aripiprazole 15 mg tablet.....163
aripiprazole 2 mg tablet.....163
aripiprazole 20 mg tablet.....163
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Aristada 1,064 mg/3.9 mL suspension, extend.rel. IM syringe 164
Aristada 441 mg/1.6 mL suspension, extend.rel. IM syringe 164
Aristada 662 mg/2.4 mL suspension, extend.rel. IM syringe 164
Aristada 882 mg/3.2 mL suspension, extend.rel. IM syringe 164
Aristada Initio 675 mg/2.4 mL suspension, extend.rel. IM syringe 164
Arixtra 10 mg/0.8 mL subcutaneous solution syringe.....331
Arixtra 2.5 mg/0.5 mL subcutaneous solution syringe.....331
Arixtra 5 mg/0.4 mL subcutaneous solution syringe.....331
Arixtra 7.5 mg/0.6 mL subcutaneous solution syringe.....331
armodafinil 150 mg tablet 179
armodafinil 200 mg tablet 179
armodafinil 250 mg tablet 179
armodafinil 50 mg tablet 179
ArmonAir Digihaler 113 mcg/actuation aerosol powder breath act, sensor ..420
ArmonAir Digihaler 232 mcg/actuation aerosol powder breath act, sensor ..420
ArmonAir Digihaler 55 mcg/actuation aerosol powder breath act, sensor ..420
Armour Thyroid 120 mg tablet 282
Armour Thyroid 15 mg tablet 282
Armour Thyroid 180 mg tablet 282
Armour Thyroid 240 mg tablet 282
Armour Thyroid 30 mg tablet 282
Armour Thyroid 300 mg tablet 282
Armour Thyroid 60 mg tablet 282
Armour Thyroid 90 mg tablet 282
Arnuity Ellipta 100 mcg/actuation powder for inhalation 420
Arnuity Ellipta 200 mcg/actuation powder for inhalation 420
Arnuity Ellipta 50 mcg/actuation powder for inhalation 421
Aromasin 25 mg tablet 72
Arthrotec 50 mg-200 mcg tablet,film-coated 29
Arthrotec 75 75 mg-200 mcg tablet,film-coated 29
Artificial Tears (petrolatum/mineral oil) 83 %-15 % eye ointment.....401
Artificial Tears (polyvinyl alcohol) 1.4 % eye drops 402
Asacol HD 800 mg tablet,delayed release 300
Ascomp with Codeine 30 mg-50 mg-325 mg-40 mg capsule.....15
asenapine 10 mg sublingual tablet.....154
asenapine 2.5 mg sublingual tablet.....154
asenapine 5 mg sublingual tablet.....154
Ashlyna 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack 188
Asmanex HFA 100 mcg/actuation aerosol inhaler.....421
Asmanex HFA 200 mcg/actuation aerosol inhaler.....421
Asmanex HFA 50 mcg/actuation aerosol inhaler.....421
Asmanex Twisthaler 110 mcg/actuation(30 doses) breath activated inhalr 421
Asmanex Twisthaler 220 mcg/actuation(120 doses) breath activated inhlr.....421
Asmanex Twisthaler 220 mcg/actuation(14 doses) breath activated inhalr 421
Asmanex Twisthaler 220 mcg/actuation(30 doses) breath activated inhalr 421
Asmanex Twisthaler 220 mcg/actuation(60 doses) breath activated inhalr 421

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

aspirin 25 mg-dipyridamole 200 mg capsule,ext.release 12 hr multiphase 333
aspirin 81 mg chewable tablet....333
aspirin,buffered (calcium carbonate-magnesium) 325 mg tablet....34
Assure 3 kit 348
Assure 3 Test strips....340
Assure 4 Meter 348
Assure 4 Strips 340
Assure ID Insulin Safety 0.5 mL 29 gauge x 1/2....364
Assure ID Insulin Safety 1 mL 29 gauge x 1/2....364
Assure ID Pen Needle 30 gauge x 5/16 .364
Assure ID Pen Needle 31 gauge x 3/16 .364
Assure II Test strips....340
Assure Platinum Glucose Meter 348
Assure Platinum Test Strip....340
Assure Prism Multi Meter....348
Assure Prism Multi Strip 340
Assure Pro Blood Glucose Meter kit....348
Assure Pro Test Strips....340
Astagraf XL 0.5 mg capsule,extended release 335
Astagraf XL 1 mg capsule,extended release 335
Astagraf XL 5 mg capsule,extended release 335
At Last Blood Glucose System kit....348
Atacand 16 mg tablet 94
Atacand 32 mg tablet 94
Atacand 4 mg tablet 94
Atacand 8 mg tablet 94
Atacand HCT 16 mg-12.5 mg tablet....93
Atacand HCT 32 mg-12.5 mg tablet....93
Atacand HCT 32 mg-25 mg tablet....93
atazanavir 150 mg capsule 65
atazanavir 200 mg capsule 65
atazanavir 300 mg capsule 65
Atelvia 35 mg tablet,delayed release ...264
atenolol 100 mg tablet 106
atenolol 100 mg-chlorthalidone 25 mg tablet....115
atenolol 25 mg tablet 106
atenolol 50 mg tablet 106
atenolol 50 mg-chlorthalidone 25 mg tablet....115
Athenol 325 mg tablet....20
Athlete's Foot (clotrimazole) 1 % topical cream 209
Ativan 0.5 mg tablet 126
Ativan 1 mg tablet 126
Ativan 2 mg tablet 126
At-Last Test strips 340
atomoxetine 10 mg capsule 172
atomoxetine 100 mg capsule 172
atomoxetine 18 mg capsule 172
atomoxetine 25 mg capsule 172
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atorvastatin 40 mg tablet 102
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atovaquone 250 mg-proguanil 100 mg tablet....43
atovaquone 750 mg/5 mL oral suspension 44
atovaquone-proguanil (pediatric) 62.5 mg-25 mg tablet....43
Atralin 0.05 % topical gel 204
Atripla 600 mg-200 mg-300 mg tablet....48
atropine 1 % eye drops....404
atropine 1 % eye ointment 404
Atrovent HFA 17 mcg/actuation aerosol inhaler....424
Aubagio 14 mg tablet 401
Aubagio 7 mg tablet 401
Aubra 0.1 mg-20 mcg tablet 189
Aubra EQ 0.1 mg-20 mcg tablet....189
Aurovela 1.5/30 (21) 1.5 mg-30 mcg tablet 189
Aurovela 1/20 (21) 1 mg-20 mcg tablet189
Aurovela 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet 190
Aurovela Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet 190
Aurovela Fe 1-20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet 190
Auryxia 210 mg iron tablet 311
Austedo 12 mg tablet 178
Austedo 6 mg tablet 178
Austedo 9 mg tablet 178
Auto-Lancet Mini 348
Autolet Impression Lancing Device kit..348
Autolet Lancing Device 348
Autolet Plus Lancing Device....348
Avalide 150 mg-12.5 mg tablet....93
Avalide 300 mg-12.5 mg tablet....93
Avandia 2 mg tablet....279
Avandia 4 mg tablet....279
Avapro 150 mg tablet 95
Avapro 300 mg tablet 95
Avapro 75 mg tablet 95
Avelox 400 mg tablet....55
Aviane 0.1 mg-20 mcg tablet....190
Avita 0.025 % topical cream 204
Avita 0.025 % topical gel....204
Avodart 0.5 mg capsule 313
Avonex (with albumin) 30 mcg intramuscular kit....399
Avonex 30 mcg/0.5 mL intramuscular pen kit 399
Avonex 30 mcg/0.5 mL intramuscular syringe kit....399
Av-Phos 250 Neutral 250 mg tablet....313
Avsola 100 mg intravenous solution....24
Avycaz 2.5 gram intravenous solution....51
Aygestin 5 mg tablet....280
Ayr Saline 0.65 % nasal spray aerosol...432
Ayuna 0.15 mg-0.03 mg tablet 190
Ayvakit 100 mg tablet....78
Ayvakit 200 mg tablet....78
Ayvakit 300 mg tablet....78
Azactam 1 gram solution for injection....63
Azactam 2 gram solution for injection....63
Azasan 100 mg tablet 337
Azasan 75 mg tablet 337
Azasite 1 % eye drops....409
azathioprine 50 mg tablet 337
azelaic acid 15 % topical gel....222
azelastine 0.05 % eye drops 404
azelastine 137 mcg (0.1 %) nasal spray aerosol 431
azelastine 205.5 mcg (0.15 %) nasal spray 431
azelastine-fluticasone 137 mcg-50 mcg/spray nasal spray 431
Azelex 20 % topical cream 201
Azilect 0.5 mg tablet....151
Azilect 1 mg tablet....151
azithromycin 1 gram oral packet 61
azithromycin 100 mg/5 mL oral suspension 61
azithromycin 200 mg/5 mL oral suspension 61
azithromycin 250 mg tablet....61
azithromycin 500 mg tablet....61
azithromycin 600 mg tablet....61
Azopt 1 % eye drops,suspension 406
Azor 10 mg-20 mg tablet 91
Azor 10 mg-40 mg tablet 91
Azor 5 mg-20 mg tablet 91
Azor 5 mg-40 mg tablet 91
aztreonam 1 gram solution for injection 63
aztreonam 2 gram solution for injection 63
Azulfidine 500 mg tablet....300
Azulfidine EN-tabs 500 mg tablet,delayed release 300

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 188

B

Baby Ayr Saline 0.65 % nasal drops 432
Baby Ddrops 10 mcg/drop (400 unit/drop) oral.....251
Baby Vitamin D3 10 mcg/drop (400 unit/drop) oral drops 251
Baby's Super Daily D3 10 mcg/drop (400 unit/drop) oral drops 251
bacitracin 500 unit/gram eye ointment409
bacitracin-polymyxin B 500 unit-10,000 unit/gram eye ointment 408
baclofen 10 mg tablet.....338
baclofen 20 mg tablet.....338
baclofen 5 mg tablet.....338
Bacmin 27 mg iron-1 mg tablet 232
Bactrim 400 mg-80 mg tablet 40
Bactrim DS 800 mg-160 mg tablet.....40
Bactroban Nasal 2 % ointment 431
Bafiertam 95 mg capsule,delayed release 400
Balcoltra 0.1 mg-0.02 mg(21)/36.5 mg(7) tablet.....190
balsalazide 750 mg capsule 300
Balversa 3 mg tablet 75
Balversa 4 mg tablet 75
Balversa 5 mg tablet 75
Balziva (28) 0.4 mg-35 mcg tablet 190
Band-Aid Gauze Pads 2 345
Band-Aid Gauze Pads 3 345
Band-Aid Gauze Pads 4 345
Band-Aid Mirasorb Gauze 4 345
Banophen 12.5 mg/5 mL oral liquid 414
Banophen 25 mg capsule.....414
Banophen 25 mg tablet 415
Banophen 50 mg capsule.....415
Banophen Allergy 12.5 mg/5 mL oral liquid 415
Banzel 200 mg tablet 139
Banzel 40 mg/mL oral suspension 139
Banzel 400 mg tablet 140
Baqsimi 3 mg/actuation nasal spray.....253
Baraclude 0.05 mg/mL oral solution.....57
Baraclude 0.5 mg tablet.....57
Baraclude 1 mg tablet.....57
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous 276
Baxdela 450 mg tablet 55
BD Alcohol Swabs 81
BD Autoshield Pen Needle 29 gauge x 5/16.....364
BD Eclipse Luer-Lok 1 mL 27 x 1/2 388
BD Eclipse Luer-Lok 1 mL 30 gauge x 1/2 364
BD Insulin Syringe 0.3 mL 29 gauge x 1/2 364
BD Insulin Syringe 0.5 mL 29 gauge x 1/2 364
BD Insulin Syringe 1 mL 25 gauge x 5/8 364
BD Insulin Syringe 1 mL 25 x 1 364
BD Insulin Syringe 1 mL 26 x 1/2.....364
BD Insulin Syringe 1 mL 27 gauge x 1/2 364
BD Insulin Syringe 1 mL 28 gauge x 1/2 364
BD Insulin Syringe 1 mL 29 gauge x 1/2 364
BD Insulin Syringe Micro-Fine 0.3 mL 28 365
BD Insulin Syringe Micro-Fine 1 mL 28 gauge x 1/2 365
BD Insulin Syringe Micro-Fine 1/2 mL 28 gauge x 1/2 365
BD Insulin Syringe Safety-Lok 1 mL 29 gauge x 1/2 365
BD Insulin Syringe Slip Tip 1 mL 365
BD Insulin Syringe Ultra-Fine (half unit) 0.3 mL 31 gauge x 5/16.....365
BD Insulin Syringe Ultra-Fine 0.3 mL 30 gauge x 1/2 365
BD Insulin Syringe Ultra-Fine 0.3 mL 31 gauge x 5/16 365
BD Insulin Syringe Ultra-Fine 0.5 mL 30 gauge x 1/2 365
BD Insulin Syringe Ultra-Fine 0.5 mL 31 gauge x 5/16 365
BD Insulin Syringe Ultra-Fine 1 mL 29 gauge x 1/2 365
BD Insulin Syringe Ultra-Fine 1 mL 30 gauge x 1/2 365
BD Insulin Syringe Ultra-Fine 1 mL 31 gauge x 5/16 365
BD Integra Insulin Syringe 1 mL 29 gauge x 1/2.....365
BD Lancet Device 348
BD Latitude kit 348
BD Lo-Dose Micro-Fine IV 0.3 mL 28 gauge x 1/2 365
BD Lo-Dose Micro-Fine IV 1/2 mL 28 gauge x 1/2 365
BD Lo-Dose Ultra-Fine 0.3 mL 29 gauge x 1/2.....365
BD Lo-Dose Ultra-Fine 0.5 mL 29 gauge x 1/2.....365
BD Logic Glucose Monitor kit 348
BD Luer-Lok Syringe 1 mL 20 gauge x 1 388
BD Luer-Lok Syringe 10 mL 20 x 1.....388
BD Luer-Lok Syringe 10 mL 20 x 1 1/2 ..388
BD Luer-Lok Syringe 10 mL 21 gauge x 1 388
BD Luer-Lok Syringe 10 mL 21 x 1 1/2 ..388
BD Luer-Lok Syringe 10 mL 22 x 1.....388
BD Luer-Lok Syringe 10 mL 23 x 1 1/4 ..388
BD Luer-Lok Syringe 3 mL 18 x 1 1/2 388
BD Luer-Lok Syringe 3 mL 20 gauge x 1 388
BD Luer-Lok Syringe 3 mL 20 gauge x 1 1/2 388
BD Luer-Lok Syringe 3 mL 23 gauge x 1 1/2 388
BD Luer-Lok Syringe 3 mL 23 x 1.....388
BD Luer-Lok Syringe 3 mL 25 x 1 1/2 388
BD Luer-Lok Syringe 3 mL 25 x 5/8 388
BD Luer-Lok Syringe 3 mL 26 x 5/8 389
BD Luer-Lok Syringe 5 mL 20 x 1.....389
BD Luer-Lok Syringe 5 mL 20 x 1 1/2 389
BD Luer-Lok Syringe 5 mL 21 gauge x 1 389
BD Luer-Lok Syringe 5 mL 22 gauge x 1 1/2 389
BD Luer-Lok Syringe 5 mL 22 x 1.....389
BD Nano 2nd Gen Pen Needle 32 gauge x 5/32.....365
BD PosiFlush Normal Saline 0.9 % injection syringe.....250
BD PosiFlush Saline with Blunt Plastic Cannula injection syringe.....250
BD Pre-Filled Normal Saline 0.9 % injection syringe.....251
BD SafetyGlide Insulin Syringe 0.3 mL 29 gauge x 1/2 365
BD SafetyGlide Insulin Syringe 0.3 mL 31 gauge x 5/16 365
BD SafetyGlide Insulin Syringe 0.5 mL 29 gauge x 1/2 366
BD SafetyGlide Insulin Syringe 0.5 mL 30 gauge x 5/16 366
BD SafetyGlide Insulin Syringe 1 mL 29 gauge x 1/2 366
BD SafetyGlide Insulin Syringe 1 mL 31 gauge x 15/64 366
BD SafetyGlide Shielding Regular Bevel 1 mL 25 gauge x 5/8.....389
BD SafetyGlide Syringe 1 mL 27 gauge x 5/8.....366
BD SafetyGlide Syringe 10 mL 22 x 1 1/2 389
BD Safety-Lok Detachable Needle 3 mL 22 gauge x 1 389
BD Safety-Lok Detachable Needle 5 mL 21 gauge x 1 1/2 389
BD Safety-Lok Detachable Needle syringe 3 mL 21 gauge x 1 1/2.....389

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

BD Slip Tip Syringe 1 mL 26 gauge x 5/8 389
BD Ultra-Fine II Lancets 30 gauge 348
BD Ultra-Fine Micro Pen Needle 32 gauge x 1/4 366
BD Ultra-Fine Mini Pen Needle 31 gauge x 3/16.....366
BD Ultra-Fine Nano Pen Needle 32 gauge x 5/32.....366
BD Ultra-Fine Original Pen Needle 29 gauge x 1/2 366
BD Ultra-Fine Short Pen Needle 31 gauge x 5/16.....366
BD Veo Insulin Syringe Ultra-Fine (half unit) 0.3 mL 31 gauge x 15/64 366
BD Veo Insulin Syringe Ultra-Fine 1 mL 31 gauge x 15/64 366
Beconase AQ 42 mcg (0.042 %) nasal spray 432
Bekyree (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 188
Belbuca 150 mcg buccal film 18
Belbuca 300 mcg buccal film 18
Belbuca 450 mcg buccal film 18
Belbuca 600 mcg buccal film 18
Belbuca 75 mcg buccal film 18
Belbuca 750 mcg buccal film 18
Belbuca 900 mcg buccal film 18
belladonna alkaloids-opium 16.2 mg-30 mg rectal suppository 299
belladonna alkaloids-opium 16.2 mg-60 mg rectal suppository 300
Belsomra 10 mg tablet.....182
Belsomra 15 mg tablet.....182
Belsomra 20 mg tablet.....182
Belsomra 5 mg tablet.....182
Benadryl 25 mg capsule.....415
Benadryl Allergy 12.5 mg/5 mL oral liquid 415
Benadryl Allergy 25 mg tablet 415
benazepril 10 mg tablet.....88
benazepril 10 mg-hydrochlorothiazide 12.5 mg tablet.....87
benazepril 20 mg tablet.....88
benazepril 20 mg-hydrochlorothiazide 12.5 mg tablet.....87
benazepril 20 mg-hydrochlorothiazide 25 mg tablet.....87
benazepril 40 mg tablet.....88
benazepril 5 mg tablet.....88
benazepril 5 mg-hydrochlorothiazide 6.25 mg tablet.....87
BeneFIX 1,000 unit intravenous solution 322
BeneFIX 2,000 unit intravenous solution 322
BeneFIX 250 unit intravenous solution.322
BeneFIX 3,000 unit intravenous solution 322
BeneFIX 500 unit intravenous solution.322
Benicar 20 mg tablet.....95
Benicar 40 mg tablet.....95
Benicar 5 mg tablet.....95
Benicar HCT 20 mg-12.5 mg tablet 93
Benicar HCT 40 mg-12.5 mg tablet 93
Benicar HCT 40 mg-25 mg tablet 93
Benlysta 200 mg/mL subcutaneous auto-injector.....29
Benlysta 200 mg/mL subcutaneous syringe.....29
Bensal HP 3 % topical ointment.....220
Benzaclin 1 %-5 % topical gel.....202
Benzaclin Pump 1 %-5 % topical gel 202
Benzamycin 3 %-5 % topical gel.....202
benzhydrocodone 4.08 mg-acetaminophen 325 mg tablet.....16
benzhydrocodone 6.12 mg-acetaminophen 325 mg tablet.....16
benzhydrocodone 8.16 mg-acetaminophen 325 mg tablet.....16
benznidazole 100 mg tablet 44
benznidazole 12.5 mg tablet 44
benzonatate 100 mg capsule.....419
benzonatate 200 mg capsule.....419
benztropine 0.5 mg tablet 151
benztropine 1 mg tablet 151
benztropine 2 mg tablet 151
Bepreve 1.5 % eye drops 404
Beser 0.05 % lotion 214
Beser Kit 0.05 % kit,top lotion and cream,emollient.....219
Besivance 0.6 % eye drops,suspension.409
Betadine Ophthalmic Prep 5 % solution 410
betamethasone dipropionate 0.05 % lotion.....214
betamethasone dipropionate 0.05 % topical cream 214
betamethasone dipropionate 0.05 % topical ointment 214
betamethasone valerate 0.1 % lotion...214
betamethasone valerate 0.1 % topical cream 214
betamethasone valerate 0.1 % topical ointment 214
betamethasone valerate 0.12 % topical foam.....214
betamethasone, augmented 0.05 % lotion 214
betamethasone, augmented 0.05 % topical cream 214
betamethasone, augmented 0.05 % topical gel.....214
betamethasone, augmented 0.05 % topical ointment 214
Betapace 120 mg tablet.....99
Betapace 160 mg tablet.....99
Betapace 80 mg tablet.....99
Betapace AF 120 mg tablet.....99
Betapace AF 160 mg tablet.....99
Betapace AF 80 mg tablet.....99
Betasept Surgical Scrub 4 % topical liquid 81
Betaseron 0.3 mg subcutaneous kit 399
BetaTemp 160 mg/5 mL oral suspension20
betaxolol 0.5 % eye drops.....407
betaxolol 10 mg tablet.....106
betaxolol 20 mg tablet.....106
bethanechol chloride 10 mg tablet.....317
bethanechol chloride 25 mg tablet.....317
bethanechol chloride 5 mg tablet.....317
bethanechol chloride 50 mg tablet.....317
Bethkis 300 mg/4 mL solution for nebulization 428
Betoptic S 0.25 % eye drops,suspension 407
Bevespi Aerosphere 9 mcg-4.8 mcg HFA aerosol inhaler 426
Bevyxxa 40 mg capsule 319
bexarotene 75 mg capsule.....80
Bexsero 50 mcg-50 mcg-50 mcg-25 mcg/0.5 mL intramuscular syringe 84
Beyaz (28) 3 mg-0.02 mg-0.451 mg (24)/0.451 mg (4) tablet 190
Biatain 4.....224
bicalutamide 50 mg tablet.....71
Bicillin C-R 1,200,000 unit/2 mL intramuscular syringe 65
Bicillin C-R 900,000 unit-300k unit/2 mL intramuscular syringe 65
Bicillin L-A 1,200,000 unit/2 mL intramuscular syringe 63
Bicillin L-A 2,400,000 unit/4 mL intramuscular syringe 63
Bicillin L-A 600,000 unit/mL intramuscular syringe.....63
BiDil 20 mg-37.5 mg tablet 125
Bijuva 1 mg-100 mg capsule 265
Biktarvy 50 mg-200 mg-25 mg tablet 48
Biltricide 600 mg tablet 40
bimatoprost 0.03 % eye drops.....410

P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

Binosto 70 mg effervescent tablet 264
Biocel (with Lutein) 800 mcg-250 mcg-750 mcg tablet 232
Biocotron 10 mg-100 mg/5 mL oral liquid 435
Bioguard gauze 0.3 %-2 224
Bioguard gauze 0.3 %-4 224
Bioguard gauze 0.3 %-4.5 224
Bionime Rightest Gm300 System kit.....348
Bionime Rightest Test Strips 340
Bioscanner Glucose Test strips 340
BioTel Care BGM-4 Meter.....348
Biotin Plus-Calcium and Vit D3 200 mg-450 mcg-400 unit tablet.....232
Bisac-Evac 10 mg rectal suppository.....307
bisacodyl 10 mg rectal suppository 307
bisacodyl 5 mg tablet,delayed release .307
Bisa-Lax (bisacodyl) 5 mg tablet,delayed release 307
Biscolax 10 mg rectal suppository 307
Bismatrol 262 mg chewable tablet 289
Bismatrol 525 mg/15 mL oral suspension 289
Bismuth 262 mg chewable tablet 289
Bismuth Maximum Strength 525 mg/15 mL oral suspension 289
bismuth subsalicylate 262 mg chewable tablet.....289
bisoprolol 10 mg-hydrochlorothiazide 6.25 mg tablet.....115
bisoprolol 2.5 mg-hydrochlorothiazide 6.25 mg tablet.....115
bisoprolol 5 mg-hydrochlorothiazide 6.25 mg tablet.....115
bisoprolol fumarate 10 mg tablet.....106
bisoprolol fumarate 5 mg tablet.....106
Blanche 4 % topical cream.....213
Bleph-10 10 % eye drops 409
Blephamide 10 %-0.2 % eye drops,suspension 403
Blephamide S.O.P. 10 %-0.2 % eye ointment 403
Blisovi 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet.....190
Blisovi Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet 190
Blisovi Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet 190
Blood Glucose Monitor Kit.....348
Blood Glucose Monitoring kit 349
Blood Glucose Test strips.....340
blood-glucose meter.....349
blood-glucose meter kit.....349
Boniva 150 mg tablet.....264
Bonjesta 20 mg-20 mg tablet,immediate and delay release 290
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular suspension 83
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular syringe.....83
Bordered Gauze 4 345
bosentan 125 mg tablet.....123
bosentan 62.5 mg tablet.....123
Bosulif 100 mg tablet.....78
Bosulif 400 mg tablet.....78
Bosulif 500 mg tablet.....78
BP 10-1 10 %-1 % topical cleanser 202
Braftovi 75 mg capsule 73
BreatheRite MDI Spacer 391
BreatheRite Spacer and Mask, Adult 391
BreatheRite Spacer and Mask, Child.....391
BreatheRite Spacer and Mask, Infant ...391
BreatheRite Spacer and Mask, Neonate 391
BreatheRite Spacer and Mask, Small Child 391
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ceftazidime 1 gram/50 mL in dextrose 5 % intravenous piggyback 53
ceftazidime 2 gram solution for injection 53
ceftazidime 2 gram/50 mL in dextrose 5 % intravenous piggyback 53
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Central-Vite 18 mg-400 mcg tablet 242
Central-Vite Energy 18 mg iron-400 mcg-50 mg tablet.....232
Central-Vite Senior 0.4 mg-300 mcg-250 mcg tablet 232
Central-Vite Women's Mature 8 mg iron-400 mcg-300 mcg tablet 232
Centravites 0.4 mg-162 mg-18 mg tablet 232
Centravites 50 Plus 0.4 mg-300 mcg-250 mcg tablet 232
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Centravites Adults 18 mg iron-400 mcg-25 mcg tablet 233
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cephalexin 250 mg tablet 52
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Cequa 0.09 % eye drops in a dropperette 405
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CeraSport 115 mg-40 mg-40 kcal/250 mL oral liquid 229
CeraSport EX1 200 mg-100 mg-20 kcal/250mL oral liquid 229
Cerovite Advanced Formula 18 mg-400 mcg tablet 243
Cerovite Senior tablet.....227
Certa Plus 18 mg-0.4 mg-250 mcg tablet 233
CertaVite Senior 0.4 mg-300 mcg-250 mcg tablet.....233
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Cervarix Vaccine (PF) 20 mcg-20 mcg/0.5 mL intramuscular syringe.....84
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cevimeline 30 mg capsule.....398
Chantix 0.5 mg tablet.....185
Chantix 1 mg tablet.....185
Chantix Continuing Month Box 1 mg tablet 185
Chantix Starting Month Box 0.5 mg (11)-1 mg (42) tablets in dose pack 185
Charlotte 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet 190
Chateal (28) 0.15 mg-0.03 mg tablet 190
Chateal EQ (28) 0.15 mg-0.03 mg tablet 190
Chemet 100 mg capsule 36
Chenodal 250 mg tablet 294
Cheratussin AC 10 mg-100 mg/5 mL oral liquid 438
Chest Congestion Relief 100 mg/5 mL oral liquid 430
Chewable-Vite tablet 245
Child Chest Congestion-Cough 5 mg-100 mg/5 mL oral liquid.....435
Child Mucus Relief Cough 5 mg-100 mg/5 mL oral liquid 435
Child Mucus Relief Expectorant 100 mg/5 mL oral liquid 430
Child Multivitamins chewable tablet 245
Child Robitussin Cough-Chest DM 5 mg-100 mg/5 mL oral liquid.....435
Children Delsym Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid ...435
Children's Acetaminophen 160 mg/5 mL (5 mL) oral suspension 20
Children's Acetaminophen 160 mg/5 mL oral liquid 20
Children's Acetaminophen 160 mg/5 mL oral suspension 20
Children's Acetaminophen 80 mg chewable tablet 20
Children's All Day Allergy (cetirizine) 1 mg/mL oral solution.....418
Children's Allergy (cetirizine) 1 mg/mL oral solution 418
Children's Allergy (diphenhydramine) 12.5 mg/5 mL oral elixir 415
Children's Allergy (diphenhydramine) 12.5 mg/5 mL oral liquid.....415
Children's Allergy Complete 1 mg/mL oral solution 418
Children's Allergy Relief (cetirizine) 1 mg/mL oral solution.....418
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Children's Aurophen Pain-Fever 160 mg/5 mL oral suspension 20
Children's Cetirizine 1 mg/mL oral solution 418
Children's Cetirizine 10 mg chewable tablet.....418
Children's Cetirizine 5 mg chewable tablet 418
Children's Chest Congestion 100 mg/5 mL oral liquid 430
Children's Chew Multivitamin tablet 245
Children's Chewable Complete 9 mg iron-200 mcg tablet 246
Children's Chewable Multivitamin 300 mcg tablet 245
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Children's Claritin 5 mg/5 mL oral solution 419
Children's Cold-Allergy (phenylephrine) 1 mg-2.5 mg/5 mL oral solution.....411
Children's Cold-Cough Daytime 2.5 mg-5 mg/5 mL oral liquid.....434
Children's Cough 5 mg-100 mg/5 mL oral liquid 435
Children's Cough DM ER 30 mg/5 mL oral suspension,extended release 420
Children's Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid.....435
Children's Delsym Cough 30 mg/5 mL oral suspension,extended release 420

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Children's Fever Reducer-Pain Reliever 160 mg/5 mL oral suspension.....20
Children's Fever Reducing 120 mg rectal suppository.....20
Children's Ibuprofen 100 mg/5 mL oral suspension.....31
Children's Mapap 80 mg chewable tablet.....20
Children's Motrin 100 mg/5 mL oral suspension.....31
Children's Mucinex Chest Congestion 100 mg/5 mL oral liquid.....430
Children's Mucinex Cough 5 mg-100 mg/5 mL oral liquid.....435
Children's Multivitamin chewable tablet.....245
Children's Non-Aspirin 160 mg/5 mL oral suspension.....21
Children's Pain and Fever Relief 160 mg/5 mL oral liquid.....21
Children's Pain and Fever Relief 160 mg/5 mL oral suspension.....21
Children's Pain and Fever Relief 80 mg chewable tablet.....21
Children's Pain Relief 160 mg/5 mL oral elixir.....21
Children's Pain Relief 160 mg/5 mL oral suspension.....21
Children's Pain Reliever 160 mg/5 mL oral suspension.....21
Children's Pain Reliever 80 mg chewable tablet.....21
Children's Pain Reliever and Fever Reducer 120 mg rectal suppository...21
Children's Q-PAP 160 mg/5 mL oral suspension.....21
Children's Robitussin ER 30 mg/5 mL oral suspension,extended release.....420
Children's Saline Nasal Spray 0.65 % aerosol.....432
Children's Silfedrine 15 mg/5 mL oral liquid.....439
Children's Sudafed 15 mg/5 mL oral liquid.....439
Children's Tactinal 80 mg chewable tablet.....21
Children's Tylenol 160 mg/5 mL oral suspension.....21
Children's Wal-Dryl Allergy 12.5 mg/5 mL oral liquid.....415
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Children's Wal-Tap Cold-Allergy 1 mg-2.5 mg/5 mL oral solution.....411
Children's Wal-Zyr 1 mg/mL oral solution.....419
Children's Wal-Zyr 10 mg chewable tablet.....419
Childs Chew Vite tablet.....245
chlordiazepoxide 10 mg capsule.....126
chlordiazepoxide 25 mg capsule.....126
chlordiazepoxide 5 mg capsule.....126
chlordiazepoxide-clidinium 5 mg-2.5 mg capsule.....299
chlorhexidine gluconate 0.12 % mouthwash.....398
chlorhexidine gluconate 4 % topical liquid.....81
ChlorHist 4 mg tablet.....415
chloroquine 250 mg tablet.....43
chloroquine 500 mg tablet.....43
chlorpheniramine 4 mg tablet.....415
chlorpromazine 10 mg tablet.....159
chlorpromazine 100 mg tablet.....159
chlorpromazine 200 mg tablet.....159
chlorpromazine 25 mg tablet.....159
chlorpromazine 50 mg tablet.....159
ChlorTabs 4 mg tablet.....415
chlorthalidone 25 mg tablet.....120
chlorthalidone 50 mg tablet.....120
Chlor-Trimeton 4 mg tablet.....415
chlorzoxazone 250 mg tablet.....338
chlorzoxazone 375 mg tablet.....338
chlorzoxazone 500 mg tablet.....338
chlorzoxazone 750 mg tablet.....338
Cholbam 250 mg capsule.....292
Cholbam 50 mg capsule.....292
cholecalciferol (vitamin D3) 1,250 mcg (50,000 unit) capsule.....252
cholecalciferol (vitamin D3) 10 mcg/drop (400 unit/drop) oral drops.....252
cholecalciferol (vitamin D3) 10 mcg/mL (400 unit/mL) oral drops.....252
cholecalciferol (vitamin D3) 125 mcg/mL (5,000 unit/mL) oral drops.....252
cholecalciferol (vitamin D3) 25 mcg (1,000 unit) capsule.....252
cholecalciferol (vitamin D3) 25 mcg (1,000 unit) tablet.....252
cholestyramine (with sugar) 4 gram oral powder.....100
cholestyramine (with sugar) 4 gram powder for susp in a packet.....100
Cholestyramine Light 4 gram oral powder.....100
Cholestyramine Light 4 gram powder for susp in a packet.....100
Cialis 5 mg tablet.....224
Ciclodan 0.77 % topical cream.....209
Ciclodan 8 % topical solution.....209
Ciclodan Kit 0.77 % topical combo pack.....209
Ciclodan Kit 8 % topical solution.....209
ciclopirox 0.77 % topical cream.....209
ciclopirox 0.77 % topical gel.....209
ciclopirox 0.77 % topical suspension....209
ciclopirox 1 % shampoo.....209
ciclopirox 8 % topical solution.....209
ciclopirox 8 %-urea-camphor-menthol-eucalyptol topical solution.....209
cilostazol 100 mg tablet.....333
cilostazol 50 mg tablet.....333
Ciloxan 0.3 % eye drops.....409
Ciloxan 0.3 % eye ointment.....409
Cimduo 300 mg-300 mg tablet.....46
cimetidine 200 mg tablet.....294
cimetidine 300 mg tablet.....294
cimetidine 300 mg/5 mL oral solution..295
cimetidine 400 mg tablet.....295
cimetidine 800 mg tablet.....295
Cimzia 400 mg/2 mL (200 mg/mL x 2) subcutaneous syringe kit.....24
Cimzia Powder for Recon 400 mg (200 mg x 2 vials) subcutaneous kit.....24
Cimzia Starter Kit 400 mg/2 mL (200 mg/mL x2) subcutaneous syringe kit .24
cinacalcet 30 mg tablet.....264
cinacalcet 60 mg tablet.....264
cinacalcet 90 mg tablet.....265
Cinqair 10 mg/mL intravenous solution423
Cipro 250 mg tablet.....56
Cipro 250 mg/5 mL oral suspension.....56
Cipro 400 mg/200 mL in dextrose 5 % intravenous piggyback.....56
Cipro 500 mg tablet.....56
Cipro 500 mg/5 mL oral suspension.....56
Cipro HC 0.2 %-1 % ear drops,suspension.....410
Ciprodex 0.3 %-0.1 % ear drops,suspension.....410
ciprofloxacin 0.2 % ear drops in a dropperette.....411
ciprofloxacin 0.3 % eye drops.....409
ciprofloxacin 0.3 %-dexamethasone 0.1 % ear drops,suspension.....410
ciprofloxacin 0.3 %-fluocinolone 0.025 % (0.25 mL) ear solution.....410
ciprofloxacin 100 mg tablet.....56

P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

ciprofloxacin 200 mg/100 mL in 5 % dextrose intravenous piggyback 56
ciprofloxacin 200 mg/20 mL intravenous solution 56
ciprofloxacin 250 mg tablet 56
ciprofloxacin 250 mg/5 mL oral suspension 56
ciprofloxacin 400 mg/200 mL in 5 % dextrose intravenous piggyback 56
ciprofloxacin 400 mg/40 mL intravenous solution 56
ciprofloxacin 500 mg tablet 56
ciprofloxacin 500 mg/5 mL oral suspension 56
ciprofloxacin 750 mg tablet 56
citalopram 10 mg tablet 141
citalopram 10 mg/5 mL oral solution ...141
citalopram 20 mg tablet 141
citalopram 40 mg tablet 141
Citranatal B-Calm (Fe Gluc) 20 mg iron-1 mg-25 mg/25 mg tablets 248
Citrate of Magnesia oral 304
Citroma oral solution 304
Claravis 10 mg capsule.....200
Claravis 20 mg capsule.....200
Claravis 30 mg capsule.....200
Claravis 40 mg capsule.....200
clarithromycin 125 mg/5 mL oral suspension 61
clarithromycin 250 mg tablet 61
clarithromycin 250 mg/5 mL oral suspension 61
clarithromycin 500 mg tablet 61
clarithromycin ER 500 mg tablet,extended release 24 hr 61
Claritin 10 mg tablet 419
Claritin RediTabs 10 mg disintegrating tablet.....419
Claritin-D 12 Hour 5 mg-120 mg tablet,extended release.....413
Claritin-D 24 Hour 10 mg-240 mg tablet,extended release.....413
Cleansing Wash 10 %-4 %-10 % topical cleanser.....202
ClearLax 17 gram oral powder packet ..304
ClearLax 17 gram/dose oral powder.....304
Cleocin 100 mg vaginal suppository 440
Cleocin 150 mg/mL injection solution 60
Cleocin 2 % vaginal cream 440
Cleocin 300 mg/2 mL intravenous solution 60
Cleocin 300 mg/50 mL in 5 % dextrose intravenous piggyback 60
Cleocin 600 mg/4 mL intravenous solution 60
Cleocin 600 mg/50 mL in 5 % dextrose intravenous piggyback 60
Cleocin 900 mg/50 mL in 5 % dextrose intravenous piggyback 60
Cleocin 900 mg/6 mL intravenous solution 60
Cleocin HCl 150 mg capsule 60
Cleocin HCl 300 mg capsule 60
Cleocin HCl 75 mg capsule 60
Cleocin Pediatric 75 mg/5 mL oral solution 60
Cleocin T 1 % lotion 201
Cleocin T 1 % topical gel 201
Clever Chek Blood Glucose 349
Clever Chek Blood Glucose Syst kit.....349
Clever Choice Blood Glucose System....349
Clever Choice Holding Chamber-Large Mask 391
Clever Choice Holding Chamber-Medium Mask 391
Clever Choice Holding Chamber-Small Mask 391
Clever Choice Micro.....349
Clever Choice Micro Test Strip.....340
Clever Choice Mini Blood Glucose Monitor 349
Clever Choice Pro Blood Glucose Monitor 349
Clever Choice Pro Blood Glucose Monitor strips 340
Clever Choice Talk Blood Glucose System 349
Clever Choice Talk Test strips 340
Clever Choice Test Strips 340
Clever Choice Voice+ Test strips.....340
Clickfine Pen Needle 31 gauge x 1/4 367
Clickfine Pen Needle 31 gauge x 5/16 ..367
Clickfine Pen Needle 32 gauge x 5/32 ..367
Climara 0.025 mg/24 hr transdermal patch 266
Climara 0.0375 mg/24 hr transdermal patch 266
Climara 0.05 mg/24 hr transdermal patch 266
Climara 0.06 mg/24 hr transdermal patch 266
Climara 0.075 mg/24 hr transdermal patch 266
Climara 0.1 mg/24 hr transdermal patch 266
Climara Pro 0.045 mg-0.015 mg/24 hr transdermal patch 265
Clin Single Use 150 mg/mL injection kit .60
Clindacin ETZ 1 % topical kit 202
Clindacin ETZ 1 % topical swab 201
Clindacin P 1 % topical swab.....201
Clindacin Pac 1 % topical kit 202
Clindagel 1 % topical gel, once daily 201
clindamycin 1 % lotion.....201
clindamycin 1 % topical foam 201
clindamycin 1 % topical gel.....201
clindamycin 1 % topical gel, once daily.201
clindamycin 1 %-benzoyl peroxide 5 % topical gel.....202
clindamycin 1 %-benzoyl peroxide 5 % topical gel with pump 202
clindamycin 1.2 % (1 % base)-benzoyl peroxide 5 % topical gel.....202
clindamycin 1.2 %-benzoyl peroxide 2.5 % topical gel with pump 203
clindamycin 150 mg/mL injection solution 60
clindamycin 2 % vaginal cream 440
clindamycin 300 mg/2 mL intravenous solution 60
clindamycin 300 mg/50 mL in 0.9% sodium chloride intravenous piggyback 60
clindamycin 300 mg/50 mL in 5 % dextrose intravenous piggyback 60
clindamycin 600 mg/4 mL intravenous solution 60
clindamycin 600 mg/50 mL in 0.9% sodium chloride intravenous piggyback 60
clindamycin 600 mg/50 mL in 5 % dextrose intravenous piggyback 61
clindamycin 900 mg/50 mL in 0.9% sodium chloride intravenous piggyback 61
clindamycin 900 mg/50 mL in 5 % dextrose intravenous piggyback 61
clindamycin 900 mg/6 mL intravenous solution 61
clindamycin HCl 150 mg capsule 61
clindamycin HCl 300 mg capsule 61
clindamycin HCl 75 mg capsule 61
Clindamycin Pediatric 75 mg/5 mL oral solution 61
clindamycin phosphate 1 % topical solution 202
clindamycin phosphate 1 % topical swab 202
clindamycin-tretinoin 1.2 %-0.025 % topical gel.....204

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Clindesse 2 % vaginal cream,extended release 440
clobazam 10 mg tablet 128
clobazam 2.5 mg/mL oral suspension ..128
clobazam 20 mg tablet 128
clobetasol 0.05 % lotion 214
clobetasol 0.05 % scalp solution.....214
clobetasol 0.05 % shampoo.....214
clobetasol 0.05 % topical cream 214
clobetasol 0.05 % topical foam.....214
clobetasol 0.05 % topical gel 214
clobetasol 0.05 % topical ointment 214
clobetasol 0.05 % topical spray 214
clobetasol-emollient 0.05 % topical cream 214
clobetasol-emollient 0.05 % topical foam 214
Clobex 0.05 % shampoo.....214
Clobex 0.05 % topical spray 215
clocortolone pivalate 0.1 % topical cream 215
Clodan 0.05 % shampoo 215
Clodan Kit 0.05 % topical kit, shampoo and cleanser.....219
Cloderm 0.1 % topical cream.....215
clomipramine 25 mg capsule.....148
clomipramine 50 mg capsule.....148
clomipramine 75 mg capsule.....148
clonazepam 0.125 mg disintegrating tablet 128
clonazepam 0.25 mg disintegrating tablet 128
clonazepam 0.5 mg disintegrating tablet 128
clonazepam 0.5 mg tablet 128
clonazepam 1 mg disintegrating tablet 128
clonazepam 1 mg tablet 128
clonazepam 2 mg disintegrating tablet 128
clonazepam 2 mg tablet 128
clonidine 0.1 mg/24 hr weekly transdermal patch 117
clonidine 0.2 mg/24 hr weekly transdermal patch 117
clonidine 0.3 mg/24 hr weekly transdermal patch 117
clonidine HCl 0.1 mg tablet.....117
clonidine HCl 0.2 mg tablet.....117
clonidine HCl 0.3 mg tablet.....117
clonidine HCl ER 0.1 mg tablet,extended release,12 hr 164
clopidogrel 300 mg tablet.....333
clopidogrel 75 mg tablet.....333
clorazepate dipotassium 15 mg tablet .126
clorazepate dipotassium 3.75 mg tablet 126
clorazepate dipotassium 7.5 mg tablet 126
clotrimazole 1 % topical cream.....209
clotrimazole 1 % topical solution.....209
clotrimazole 10 mg troche.....397
clotrimazole 2 % vaginal cream 440
clotrimazole-betamethasone 1 %-0.05 % lotion.....210
clotrimazole-betamethasone 1 %-0.05 % topical cream 210
Clovique 250 mg capsule 35
clozapine 100 mg disintegrating tablet 157
clozapine 100 mg tablet 157
clozapine 12.5 mg disintegrating tablet157
clozapine 150 mg disintegrating tablet 157
clozapine 200 mg disintegrating tablet 158
clozapine 200 mg tablet 158
clozapine 25 mg disintegrating tablet ..158
clozapine 25 mg tablet 158
clozapine 50 mg tablet 158
Clozaril 100 mg tablet.....158
Clozaril 200 mg tablet.....158
Clozaril 25 mg tablet.....158
Clozaril 50 mg tablet.....158
C-Nate DHA 28 mg iron-1 mg-200 mg capsule.....248
Coagadex 250 (+/-) unit range intravenous solution 328
Coagadex 500 (+/-) unit range intravenous solution 328
Coartem 20 mg-120 mg tablet.....43
codeine 10 mg-guaifenesin 100 mg/5 mL oral liquid 438
codeine sulfate 15 mg tablet 5
codeine sulfate 30 mg tablet 5
codeine sulfate 60 mg tablet 5
codeine-butalbital-ASA-caffeine 30 mg-50 mg-325 mg-40 mg capsule.....16
Colace 100 mg capsule 309
Colace 2-In-1 8.6 mg-50 mg tablet 308
Colazal 750 mg capsule.....300
colchicine 0.6 mg capsule 317
colchicine 0.6 mg tablet.....317
Colcrys 0.6 mg tablet 317
Cold and Allergy (bromphen-PE) 1 mg-2.5 mg/5 mL oral solution.....411
Cold and Sinus Pain Relief 30 mg-200 mg tablet.....429
Cold-Flu Relief 12.5 mg-30 mg-1,000 mg/30 mL oral liquid.....433
Cold-Sinus Relief 30 mg-200 mg tablet.429
colesevelam 3.75 gram oral powder packet 100
colesevelam 625 mg tablet.....100
Colestid 1 gram tablet 100
Colestid 5 gram oral granules 100
Colestid 5 gram oral packet 100
Colestid Flavored 5 gram oral granules 100
Colestid Flavored 7.5 gram packet 100
colestipol 1 gram tablet 100
colestipol 5 gram oral granules.....100
colestipol 5 gram oral packet 100
Col-Rite 100 mg capsule 309
Col-Rite 250 mg capsule 309
Colyte with Flavor Packs 240 gram-22.72 g-6.72 g-5.84 g oral solution 306
Combigan 0.2 %-0.5 % eye drops 406
CombiPatch 0.05 mg-0.14 mg/24 hr transdermal 265
CombiPatch 0.05 mg-0.25 mg/24 hr transdermal 265
Combivent Respimat 20 mcg-100 mcg/actuation solution for inhalation 426
Combivir 150 mg-300 mg tablet 48
Cometriq 100 mg/day (80 mg x 1-20 mg x 1) capsules 77
Cometriq 140 mg/day (80 mg x 1-20 mg x 3) capsules 77
Cometriq 60 mg/day (20 mg x 3/day) capsules 77
Comfort EZ Insulin Syringe 0.3 mL 29 gauge x 1/2 367
Comfort EZ Insulin Syringe 0.3 mL 30 gauge x 1/2 367
Comfort EZ Insulin Syringe 0.3 mL 30 gauge x 5/16 367
Comfort EZ Insulin Syringe 0.3 mL 31 gauge x 5/16 367
Comfort EZ Insulin Syringe 0.5 mL 29 gauge x 1/2 367
Comfort EZ Insulin Syringe 0.5 mL 30 gauge x 1/2 367
Comfort EZ Insulin Syringe 0.5 mL 30 gauge x 5/16 367
Comfort EZ Insulin Syringe 0.5 mL 31 gauge x 5/16 367
Comfort EZ Insulin Syringe 1 mL 28 gauge x 1/2 367
Comfort EZ Insulin Syringe 1 mL 29 gauge x 1/2 367
Comfort EZ Insulin Syringe 1 mL 30 gauge x 1/2 367
Comfort EZ Insulin Syringe 1 mL 30 gauge x 5/16 367
Comfort EZ Insulin Syringe 1 mL 31 gauge x 5/16 367

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Comfort EZ Insulin Syringe 1/2 mL 28 gauge x 1/2 367
Comfort EZ Pen Needles 29 gauge x 1/2 367
Comfort EZ Pen Needles 31 gauge x 1/4 367
Comfort EZ Pen Needles 31 gauge x 3/16 368
Comfort EZ Pen Needles 31 gauge x 5/16 368
Comfort EZ Pen Needles 32 gauge x 1/4 368
Comfort EZ Pen Needles 32 gauge x 3/16 368
Comfort EZ Pen Needles 32 gauge x 5/32 368
Comfort Gel 200 mg-200 mg-20 mg/5 mL oral suspension 288
Comfort Lancets 349
Compact Space Chamber....391
Compact Space Chamber-Lrg Mask 391
Compact Space Chamber-Med Mask ...391
Compact Space Chamber-Sm Mask 391
Compete tablet....233
Complera 200 mg-25 mg-300 mg tablet.49
Complete 18 mg-500 mcg-300 mcg-250 mcg tablet 233
Complete 50 Plus 0.4 mg-300 mcg-250 mcg tablet 233
Complete Allergy 12.5 mg/5 mL oral liquid 415
Complete Allergy 25 mg capsule 415
Complete Allergy 25 mg tablet 415
Complete Allergy Medicine 25 mg capsule 415
Complete Allergy Medicine 25 mg tablet 415
Complete Men 50 Plus 300 mcg-600 mcg-300 mcg tablet 234
Complete Men 8 mg iron-200 mcg-600 mcg tablet 234
Complete Multi 18 mg-500 mcg-300 mcg-250 mcg tablet 234
Complete Multi 50+ 500 mcg-300 mcg-250 mcg tablet 234
Complete Multivitamin Adult 50 Plus 0.4 mg-300 mcg-250 mcg tablet 234
Complete Multivitamin tablet 234
Complete Multivitamin-Multimineral 18 mg-400 mcg tablet....243
Complete Natal DHA 29 mg-1 mg-250 mg-200 mg oral pack....248
Complete Premium Vitamin tablet....234
Complete Senior 0.4 mg-300 mcg-250 mcg tablet....234
Complete Senior tablet....227
Complete Women 18 mg-400 mcg tablet 243
CompleteNate 29 mg iron-1 mg chewable tablet....248
Compoz 25 mg tablet....180
Compro 25 mg rectal suppository 291
Comtan 200 mg tablet....151
Concept DHA 35 mg-1 mg-200 mg capsule 234
Concept OB 85 mg-1 mg capsule....234
Concerta 18 mg tablet,extended release 166
Concerta 27 mg tablet,extended release 167
Concerta 36 mg tablet,extended release 167
Concerta 54 mg tablet,extended release 167
Condoms-Prem Lubricated 387
Condylox 0.5 % topical gel 220
Constulose 10 gram/15 mL oral solution 305
Contac Cold-Flu Night 12.5 mg-30 mg-1,000 mg/30 mL oral liquid....433
Contour Link kit 349
Contour Meter....349
Contour Meter kit....349
Contour Next EZ Meter....349
Contour Next EZ Meter kit....349
Contour Next Glucose Meter kit....349
Contour Next Link 2.4 kit 350
Contour Next Link kit....350
Contour Next Meter 350
Contour Next One Meter....350
Contour Next Test Strips....340
Contour Test Strips 340
ConZip 100 mg capsule,extended release 5
ConZip 200 mg capsule,extended release 5
ConZip 300 mg capsule, extended release 5
Cool Blood Glucose Meter 350
Cool Blood Glucose Meter kit....350
Cool Glucose Test Strip 340
Copa Hydrophilic Foam 4....224
Copaxone 20 mg/mL subcutaneous syringe....400
Copaxone 40 mg/mL subcutaneous syringe....400
Copiktra 15 mg capsule 77
Copiktra 25 mg capsule 77
Cordran Tape Large Roll 4 mcg/cm2....215
Coreg 12.5 mg tablet 90
Coreg 25 mg tablet 90
Coreg 3.125 mg tablet 90
Coreg 6.25 mg tablet 90
Coreg CR 10 mg capsule, extended release 90
Coreg CR 20 mg capsule, extended release 91
Coreg CR 40 mg capsule, extended release 91
Coreg CR 80 mg capsule, extended release 91
Corgard 20 mg tablet....108
Corgard 40 mg tablet....108
Corgard 80 mg tablet....108
Corifact 1,000 unit-1,600 unit intravenous solution 328
Corlanor 5 mg tablet....120
Corlanor 5 mg/5 mL oral solution....120
Corlanor 7.5 mg tablet....120
Correctol 5 mg tablet....307
Cortef 10 mg tablet....269
Cortef 20 mg tablet....269
Cortef 5 mg tablet....269
Cortenema 100 mg/60 mL....301
Cortifoam 10 % (80 mg) rectal....301
cortisone 25 mg tablet....269
Cortisporin 1 % topical ointment....208
Cortisporin 3.5 mg/g-10,000 unit/g-0.5 % topical cream 208
Cortisporin-TC 3.3 mg-3 mg-10 mg-0.5 mg/mL ear drops,suspension....411
Corvite Free 1.25 mg-400 mcg-125 mcg-35 mg tablet....234
Cosentyx 150 mg/mL subcutaneous syringe....206
Cosentyx 300 mg/2 Syringes (150 mg/mL) subcutaneous....206
Cosentyx Pen 150 mg/mL subcutaneous 206
Cosentyx Pen 300 mg/2 Pens (150 mg/mL) subcutaneous....206
Cosopt (PF) 2 %-0.5 % eye drops in a dropperette 406
Cosopt 22.3 mg-6.8 mg/mL eye drops..406
Cotellic 20 mg tablet....76
Cotempla XR-ODT 17.3 mg extended release disintegrating tablet....167
Cotempla XR-ODT 25.9 mg extended release disintegrating tablet....167
Cotempla XR-ODT 8.6 mg extended release disintegrating tablet....167
Cough Control (guaifenesin) 100 mg/5 mL oral liquid....430

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Cough Control DM 10 mg-100 mg/5 mL oral liquid 435
Cough DM ER 30 mg/5 mL oral suspension,extended release 420
Cough Formula DM 10 mg-100 mg/5 mL oral syrup 435
Cough Suppressant-Expectorant 10 mg-100 mg/5 mL oral syrup 435
Cough Syrup 100 mg/5 mL oral liquid ..430
Cough Syrup DM 10 mg-100 mg/5 mL..435
Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid 435
Cough-Sore Throat Night 12.5 mg-30 mg-1,000 mg/30 mL oral liquid 433
Cozaar 100 mg tablet 95
Cozaar 25 mg tablet 95
Cozaar 50 mg tablet 95
Creon 12,000-38,000-60,000 unit capsule,delayed release 293
Creon 24,000-76,000-120,000 unit capsule,delayed release 293
Creon 3,000 unit-9,500 unit-15,000 unit capsule,delayed release 293
Creon 36,000 unit-114,000 unit-180,000 unit capsule,delayed release 293
Creon 6,000-19,000-30,000 unit capsule,delayed release 293
Cresemba 186 mg capsule 41
Crestor 10 mg tablet 102
Crestor 20 mg tablet 102
Crestor 40 mg tablet 102
Crestor 5 mg tablet 102
Crinone 4 % vaginal gel 441
Crinone 8 % vaginal gel 269
Crixivan 400 mg capsule 66
cromolyn 100 mg/5 mL oral concentrate 76
cromolyn 20 mg/2 mL solution for nebulization 422
cromolyn 4 % eye drops 408
cromolyn 5.2 mg/spray (4 %) nasal spray 432
Crotan 10 % lotion 223
Cryselle (28) 0.3 mg-30 mcg tablet 190
Cuprimine 250 mg capsule 35
Curity Alcohol Swabs 81
Curity AMD (with polyhexamethylene) 0.2 %-2 224
Curity Cover 3 347
Curity Cover 4 347
Curity Gauze 2 345
Curity Gauze 3 346
Curity Gauze 4 346
Curity Non-Adhering Dressing 3 347
Cutivate 0.05 % lotion 215
Cuvposa 1 mg/5 mL (0.2 mg/mL) oral solution 398
cyanocobalamin (vit B-12) 1,000 mcg/mL injection solution 251
Cyclafem 1/35 (28) 1 mg-35 mcg tablet190
Cyclafem 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet 197
Cyclessa (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet 197
cyclobenzaprine 10 mg tablet 338
cyclobenzaprine 5 mg tablet 338
cyclobenzaprine 7.5 mg tablet 338
cyclobenzaprine ER 15 mg capsule,extended release 24 hr 338
cyclobenzaprine ER 30 mg capsule,extended release 24 hr 338
Cyclogyl 0.5 % eye drops 404
Cyclogyl 1 % eye drops 404
Cyclogyl 2 % eye drops 404
Cyclomydril 0.2 %-1 % eye drops 403
cyclopentolate 0.5 % eye drops 404
cyclopentolate 1 % eye drops 404
cyclopentolate 2 % eye drops 404
cyclophosphamide 25 mg capsule 70
cyclophosphamide 25 mg tablet 70
cyclophosphamide 50 mg capsule 70
cyclophosphamide 50 mg tablet 70
cycloserine 250 mg capsule 49
Cycloset 0.8 mg tablet 257
cyclosporine 100 mg capsule 335
cyclosporine 25 mg capsule 335
cyclosporine modified 100 mg capsule.335
cyclosporine modified 100 mg/mL oral solution 335
cyclosporine modified 25 mg capsule...335
cyclosporine modified 50 mg capsule...335
Cymbalta 20 mg capsule,delayed release 144
Cymbalta 30 mg capsule,delayed release 144
Cymbalta 60 mg capsule,delayed release 144
cyproheptadine 2 mg/5 mL oral syrup .415
cyproheptadine 4 mg tablet 415
Cyred 0.15 mg-0.03 mg tablet 190
Cyred EQ 0.15 mg-0.03 mg tablet 190
Cystadane 1 gram/1.7 mL oral powder 395
Cystadrops 0.37 % eye drops 406
Cystagon 150 mg capsule 311
Cystagon 50 mg capsule 311
Cystaran 0.44 % eye drops 407
Cytomel 25 mcg tablet 283
Cytomel 5 mcg tablet 283
Cytomel 50 mcg tablet 283
Cytotec 100 mcg tablet 297
Cytotec 200 mcg tablet 297
Cytra K Crystals 3,300 mg-1,002 mg oral packet 313

D

Daily Fiber (psyllium-sucrose) 3.4 gram/7 gram oral powder 302
Daily Fiber 0.52 gram capsule 302
Daily Multiple 18 mg-400 mcg tablet ...243
Daily Multiple 400 mcg-120 mg tablet .234
Daily Multiple For Men 0.4 mg tablet...234
Daily Multiple For Men 50+ 400 mcg-600 mcg-120 mg tablet 243
Daily Multiple For Women 18 mg iron-400 mcg-500 mg Ca tablet 234
Daily Multiple For Women 50+ 0.4 mg tablet 234
Daily Multiple tablet 234
DAILY VITAMIN FORMULA-MINERALS tablet 234
Daily Vitamin with Iron and CA tablet ..234
Daily Vites/Iron tablet 234
Daily-Vite tablet 234
dalfampridine ER 10 mg tablet,extended release,12 hr 400
Daliresp 250 mcg tablet 423
Daliresp 500 mcg tablet 423
Dantrium 25 mg capsule 339
Dantrium 50 mg capsule 339
dantrolene 100 mg capsule 339
dantrolene 25 mg capsule 339
dantrolene 50 mg capsule 339
dapsone 100 mg tablet 43
dapsone 25 mg tablet 43
dapsone 5 % topical gel 202
dapsone 7.5 % topical gel with pump...202
Daraprim 25 mg tablet 43
darifenacin ER 15 mg tablet,extended release 24 hr 316
darifenacin ER 7.5 mg tablet,extended release 24 hr 316
Dasetta 1/35 (28) 1 mg-35 mcg tablet..190
Dasetta 7/7/7 (28) 0.5 mg(7)/0.75 mg(7)/1 mg(7)-35 mcg tablet 197
Daurismo 100 mg tablet 75
Daurismo 25 mg tablet 75
Day Time PE 5 mg-10 mg-325 mg capsule 434
Dayhist 1.34 mg tablet 415
Dayhist Allergy 1.34 mg tablet 415
Daypro 600 mg tablet 31

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Daysee 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack 188
DayTime 5 mg-10 mg-325 mg capsule..434
Daytime Cold and Flu Relief (phenylephrine) 5 mg-10 mg-325 mg capsule.....434
Daytrana 10 mg/9 hr daily patch.....167
Daytrana 15 mg/9 hr daily patch.....167
Daytrana 20 mg/9 hr daily patch.....167
Daytrana 30 mg/9 hr daily patch.....167
Dayvigo 10 mg tablet.....182
Dayvigo 5 mg tablet.....182
DDAVP 0.1 mg tablet 256
DDAVP 0.1 mg/mL (refrigerate) nasal solution.....256
DDAVP 0.2 mg tablet 256
DDAVP 10 mcg/spray (0.1 mL) nasal spray with pump.....256
Deblitane 0.35 mg tablet 196
Decara 1,250 mcg (50,000 unit) capsule 252
Deep Sea Nasal 0.65 % spray aerosol ...432
deferasirox 125 mg dispersible tablet 35
deferasirox 180 mg oral granules in packet 35
deferasirox 180 mg tablet.....35
deferasirox 250 mg dispersible tablet 35
deferasirox 360 mg oral granules in packet 35
deferasirox 360 mg tablet.....36
deferasirox 500 mg dispersible tablet 36
deferasirox 90 mg oral granules in packet 36
deferasirox 90 mg tablet.....36
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Diabetic Siltussin-DM 10 mg-100 mg/5 mL oral liquid 436
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Diabetic Tussin DM 10 mg-100 mg/5 mL oral liquid 436
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P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

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diltiazem ER 240 mg capsule,24 hr,extended release.....111
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diltiazem ER 420 mg capsule,24 hr,extended release.....111
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Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

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disopyramide phosphate 100 mg capsule....98
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disulfiram 250 mg tablet....184
disulfiram 500 mg tablet....184
Ditropan XL 10 mg tablet,extended release....316
Ditropan XL 5 mg tablet,extended release....316
Diuril 250 mg/5 mL oral suspension....120
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dorzolamide 22.3 mg-timolol 6.8 mg/mL eye drops....406
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Dotti 0.0375 mg/24 hr transdermal patch....267
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Dotti 0.075 mg/24 hr transdermal patch....267
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Dovonex 0.005 % topical cream....212
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doxepin 100 mg capsule....148
doxepin 150 mg capsule....148
doxepin 25 mg capsule....148
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doxepin 50 mg capsule....148
doxepin 6 mg tablet....182
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doxycycline monohydrate 25 mg/5 mL oral suspension....67
doxycycline monohydrate 40 mg capsule,immediate - delay release....222
doxycycline monohydrate 50 mg capsule....67
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dronabinol 2.5 mg capsule 290
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Droplet Insulin Syringe (half unit) 0.5 mL 29 gauge x 1/2 368
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 1/2 368
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 15/64 368
Droplet Insulin Syringe (half unit) 0.5 mL 30 gauge x 5/16 368
Droplet Insulin Syringe (half unit) 0.5 mL 31 gauge x 15/64 368
Droplet Insulin Syringe (half unit) 0.5 mL 31 gauge x 5/16 368
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Droplet Insulin Syringe 0.3 mL 30 gauge x 1/2.....368
Droplet Insulin Syringe 0.3 mL 30 gauge x 5/16.....368
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Droplet Insulin Syringe 1 mL 29 gauge x 1/2.....368
Droplet Insulin Syringe 1 mL 30 gauge x 1/2.....368
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drospiren-e.estrad-l.mefol 3 mg-0.02 mg-0.451 mg(24)/0.451 mg(4)tablet 191
drospiren-e.estrad-l.mefol 3 mg-0.03 mg-0.451 mg(21)/0.451 mg(7)tablet 191
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Duaklir Pressair 400 mcg-12 mcg/actuation breath activated 426
Duavee 0.45 mg-20 mg tablet 265
Ducodyl (bisacodyl) 5 mg tablet,delayed release 307
DUETACT 30 mg-2 mg tablet 261
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Duexis 800 mg-26.6 mg tablet.....29
DulcoEase 100 mg capsule 310
Dulcolax (bisacodyl) 10 mg rectal suppository 307
Dulcolax (bisacodyl) 5 mg tablet,delayed release 307
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Dulera 100 mcg-5 mcg/actuation HFA aerosol inhaler 427
Dulera 200 mcg-5 mcg/actuation HFA aerosol inhaler 427
Dulera 50 mcg-5 mcg/actuation HFA aerosol inhaler 427
duloxetine 20 mg capsule,delayed release 144
duloxetine 30 mg capsule,delayed release 144
duloxetine 40 mg capsule,delayed release 144
duloxetine 60 mg capsule,delayed release 144
Duobrii 0.01 %-0.045 % lotion 205
DuoCare strips 341
Dupixent 200 mg/1.14 mL subcutaneous syringe.....207
Dupixent 300 mg/2 mL subcutaneous pen injector.....207
Dupixent 300 mg/2 mL subcutaneous syringe.....207
Duragesic 100 mcg/hr transdermal patch 6
Duragesic 12 mcg/hr transdermal patch ..6
Duragesic 25 mcg/hr transdermal patch ..6
Duragesic 50 mcg/hr transdermal patch ..6
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Durezol 0.05 % eye drops 405
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D-Vita 10 mcg/mL (400 unit/mL) oral drops 252
Dyanavel XR 2.5 mg/mL oral 24 hr extended release suspension 168
Dyazide 37.5 mg-25 mg capsule 119
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Easy Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2 369
Easy Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16 369
Easy Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16 369
Easy Comfort Insulin Syringe 1 mL 30 gauge x 1/2 369
Easy Comfort Insulin Syringe 1 mL 30 gauge x 5/16 369
Easy Comfort Insulin Syringe 1 mL 31 gauge x 5/16 369
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Easy Step Blood Glucose Meter.....350
Easy Step Blood Glucose System kit 350
Easy Step strips 341

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Easy Talk Blood Glucose Meter 350
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Enablex 7.5 mg tablet,extended release 316
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Epogen 2,000 unit/mL injection solution 320
Epogen 20,000 unit/2 mL injection solution 320
Epogen 20,000 unit/mL injection solution 320
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erythromycin 5 mg/gram (0.5 %) eye ointment 409
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estazolam 1 mg tablet 181
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estradiol 0.0375 mg/24 hr semiweekly transdermal patch 267
estradiol 0.0375 mg/24 hr weekly transdermal patch 267
estradiol 0.05 mg/24 hr semiweekly transdermal patch 267

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estradiol 0.06 mg/24 hr weekly transdermal patch 267
estradiol 0.075 mg/24 hr semiweekly transdermal patch 267
estradiol 0.075 mg/24 hr weekly transdermal patch 267
estradiol 0.1 mg/24 hr semiweekly transdermal patch 268
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Exel Insulin 1 mL 30 gauge x 5/16.....371
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Exforge HCT 10 mg-160 mg-12.5 mg tablet 92
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Exforge HCT 10 mg-320 mg-25 mg tablet 92
Exforge HCT 5 mg-160 mg-12.5 mg tablet 92
Exforge HCT 5 mg-160 mg-25 mg tablet.92
Exjade 125 mg dispersible tablet.....36
Exjade 250 mg dispersible tablet.....36
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Expectorant 100 mg/5 mL oral liquid ...430
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Extavia 0.3 mg subcutaneous kit 399
Extavia 0.3 mg subcutaneous solution .399
Extina 2 % topical foam 210
Eye Drops (tetrahydrozoline) 0.05 %....407
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Eye Vitamin and Minerals 7,160 unit-113 mg-100 unit tablet 235
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Fanapt 1mg(2)-2 mg(2)-4mg(2)-6 mg(2) tablets in a dose pack 155
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Fasenra 30 mg/mL subcutaneous syringe 422
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Fayosim 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack 197
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Feiba NF 1,750 unit-3,250 unit intravenous solution 318
Feiba NF 350 unit-650 unit intravenous solution 318
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Feldene 10 mg capsule 30
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felodipine ER 2.5 mg tablet,extended release 24 hr 112
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Femara 2.5 mg tablet.....73
Femhrt Low Dose 0.5 mg-2.5 mcg tablet 265
Femring 0.05 mg/24 hr vaginal.....441
Femring 0.1 mg/24 hr vaginal.....441
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fenofibric acid (choline) 45 mg capsule,delayed release.....101
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fentanyl 100 mcg buccal tablet, effervescent 6
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fentanyl 12 mcg/hr transdermal patch.....6
fentanyl 200 mcg buccal tablet, effervescent 6
fentanyl 200 mcg lozenge on a handle 6
fentanyl 25 mcg/hr transdermal patch.....6
fentanyl 37.5 mcg/hour transdermal patch 6
fentanyl 400 mcg buccal tablet, effervescent 6
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fentanyl 50 mcg/hr transdermal patch.....6
fentanyl 600 mcg buccal tablet, effervescent 6
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fentanyl 62.5 mcg/hour transdermal patch 6
fentanyl 75 mcg/hr transdermal patch.....6
fentanyl 800 mcg buccal tablet, effervescent 6
fentanyl 800 mcg lozenge on a handle 7
fentanyl 87.5 mcg/hour transdermal patch 7
Fentora 100 mcg buccal tablet, effervescent 7
Fentora 200 mcg buccal tablet, effervescent 7
Fentora 400 mcg buccal tablet, effervescent 7
Fentora 600 mcg buccal tablet, effervescent 7
Fentora 800 mcg buccal tablet, effervescent 7
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Fiber (psyllium husk) 0.52 gram capsule 302
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Fiber Smooth oral powder 302
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finasteride 5 mg tablet 313
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Fioricet with Codeine 50 mg-300 mg-40 mg-30 mg capsule.....16
Fiorinal 50 mg-325 mg-40 mg capsule....34
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Firazyr 30 mg/3 mL subcutaneous syringe 109
Firdapse 10 mg tablet 400
First Aid ABX Pain Relief 3.5 mg-10,000 unit-10 mg/gram topical cream 208
First Aid Antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment 207
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Firvanq 25 mg/mL oral solution.....57
Firvanq 50 mg/mL oral solution.....57
Flac Otic (ear) Oil 0.01 % drops.....411
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Flagyl 375 mg capsule.....44
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Flarex 0.1 % eye drops,suspension 405
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Fluarix Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe.....85

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Flucelvax Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe.....85
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Flulaval Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe.....85
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flunisolide 25 mcg (0.025 %) nasal spray 432
fluocinolone 0.01 % scalp oil and shower cap 215
fluocinolone 0.01 % topical body oil.....215
fluocinolone 0.01 % topical cream 215
fluocinolone 0.01 % topical solution 215
fluocinolone 0.025 % topical cream 215
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fluocinonide 0.05 % topical gel.....216
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Fluor-a-day 2.5 mg fluoride (5.56 mg sodium fluoride)/mL oral drops.....397
fluorescein 0.3 %-benoxinate 0.4 % eye drops.....407
fluoride 0.25 mg (0.55 mg sodium fluoride) chewable tablet.....397
fluoride 0.5 mg (1.1 mg sodium fluoride) chewable tablet 397
fluoride 0.5 mg (1.1 mg sodium fluoride)/mL oral drops.....397
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Fluoritab 0.125 mg (0.275 mg sodium fluoride)/drop oral drops.....397
Fluoritab 0.5 mg fluoride (1.1 mg sodium fluoride) chewable tablet.....397
Fluoritab 1 mg fluoride (2.2 mg sodium fluoride) chewable tablet.....397
fluorometholone 0.1 % eye drops,suspension.....405
fluorouracil 0.5 % topical cream.....211
fluorouracil 2 % topical solution.....211
fluorouracil 5 % topical cream.....211
fluorouracil 5 % topical solution.....211
fluoxetine 10 mg capsule.....141
fluoxetine 10 mg tablet 142
fluoxetine 20 mg capsule.....142
fluoxetine 20 mg tablet 142
fluoxetine 20 mg/5 mL (4 mg/mL) oral solution.....142
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fluphenazine 10 mg tablet.....159
fluphenazine 2.5 mg tablet.....159
fluphenazine 2.5 mg/5 mL oral elixir 159
fluphenazine 5 mg tablet.....159
fluphenazine 5 mg/mL oral concentrate 159
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fluticasone 100 mcg-salmeterol 50 mcg/dose blistr powdr for inhalation 427
fluticasone 113 mcg-salmeterol 14 mcg/actuation breath activated powdr 427
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fluticasone propionate 0.005 % topical ointment 216
fluticasone propionate 0.05 % lotion ...216
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Fluzone High-Dose Quad 2020-21 (PF) 240 mcg/0.7 mL IM syringe 85
Fluzone Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM suspension 85
Fluzone Quad 2020-2021 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe.....85
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Fortaz 1 gram/50 mL in dextrose 5 % intravenous piggyback 54
Fortaz 2 gram solution for injection 54
Fortaz 2 gram/50 mL in dextrose 5 % intravenous piggyback 54
Fortesta 10 mg/0.5 gram/actuation transdermal gel pump 255
FortisCare blood glucose system kit 353
FortisCare glucose test strips....342
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furosemide 40 mg/5 mL (8 mg/mL) oral solution 119
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Gardasil 9 (PF) 0.5 mL intramuscular syringe.....84
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Gavilyte-C 240 gram-22.72 gram-6.72 gram-5.84 gram oral solution 306
GaviLyte-G 236 gram-22.74 gram-6.74 gram-5.86 gram oral solution 306
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Gelnique 10 % (100 mg/gram) transdermal gel packet 316
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Gemmily 1 mg-20 mcg (24)/75 mg (4) capsule 191
Gemtesa 75 mg tablet 311
Generess Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet 191
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Gengraf 100 mg capsule 335
Gengraf 100 mg/mL oral solution.....335
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Genotropin 12 mg/mL (36 unit/mL) subcutaneous cartridge 272
Genotropin 5 mg/mL (15 unit/mL) subcutaneous cartridge 272
Genotropin MiniQuick 0.2 mg/0.25 mL subcutaneous syringe 272
Genotropin MiniQuick 0.4 mg/0.25 mL subcutaneous syringe 272
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gentamicin 0.1 % topical ointment.....207
gentamicin 0.3 % eye drops.....409
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gentamicin 100 mg/50 mL in sodium chloride(iso) intravenous piggyback ..37
gentamicin 120 mg/100 mL in sodium chloride(iso) intravenous piggyback ..37
gentamicin 20 mg/2 mL injection solution 37
gentamicin 40 mg/mL injection solution 37
gentamicin 60 mg/50 mL in sodium chloride(iso) intravenous piggyback ..37
gentamicin 80 mg/100 mL in sodium chloride(iso) intravenous piggyback ..38
gentamicin 80 mg/50 mL in sodium chloride(iso) intravenous piggyback ..38
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Genteel Vacuum Lancing Device combo pack.....354
Gentle Laxative (bisacodyl) 10 mg rectal suppository 307
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GentleLax 17 gram/dose oral powder ..305

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Geri-Dryl 12.5 mg/5 mL oral liquid....416
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Geri-kot 8.6 mg tablet....307
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Gilotrif 30 mg tablet....70
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Giltuss Diabetic 10 mg-100 mg/5 mL oral liquid....436
Giltuss HBP 10 mg-100 mg/5 mL oral liquid....436
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Glucotrol XL 10 mg tablet,extended release....260
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Helidac 250 mg-500 mg-262.4 mg oral pack.....310
Hemady 20 mg tablet 270
Hemangeol 4.28 mg/mL oral solution ..108
Hemlibra 105 mg/0.7 mL subcutaneous solution 328
Hemlibra 150 mg/mL subcutaneous solution 328
Hemlibra 30 mg/mL subcutaneous solution 328
Hemlibra 60 mg/0.4 mL subcutaneous solution 328
Hemocyte 324 mg (106 mg iron) tablet229
Hemofil M High 801 unit-1,500 unit intravenous solution 325
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Hemorrhoidal (phenyleph-cocoa) 0.25 %-88.44 % rectal suppository 34
Hemorrhoidal 0.25 %-3 % rectal suppository 34
Hemorrhoidal H rectal suppository 34
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heparin (porcine) 10,000 unit/mL injection solution 330
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heparin, porcine (PF) 10 unit/mL intravenous syringe 330
heparin, porcine (PF) 5,000 unit/0.5 mL injection solution 331
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Humatrope 6 mg (18 unit) injection cartridge.....273
Humira 40 mg/0.8 mL subcutaneous syringe kit.....25
Humira Pen 40 mg/0.8 mL subcutaneous kit 25
Humira Pen Crohn's-Ulc Colitis-Hid Sup Starter 40 mg/0.8 mL subcut kit 25
Humira Pen Psoriasis-Uveitis-Adol Hid Sup Start 40 mg/0.8 mL subcut kt.....25
Humira(CF) 10 mg/0.1 mL subcutaneous syringe kit.....25
Humira(CF) 20 mg/0.2 mL subcutaneous syringe kit.....25
Humira(CF) 40 mg/0.4 mL subcutaneous syringe kit.....25
Humira(CF) Pedi Crohn's Start 80 mg/0.8 mL-40 mg/0.4 mL subcut syr kit.....25
Humira(CF) Pediatric Crohn's Starter 80 mg/0.8 mL subcut syringe kit.....25
Humira(CF) Pen 40 mg/0.4 mL subcutaneous kit.....25
Humira(CF) Pen 80 mg/0.8 mL subcutaneous kit.....25
Humira(CF) Pen Crohn's-Ulc Colitis-Hid Sup Strt 80 mg/0.8 mL subcut kt.....25
Humira(CF) Pen Pediatric Ulcer Colitis Starter 80 mg/0.8 mL subcut kit 25
Humira(CF) Pen Ps-Uv-Adol HS 80 mg/0.8 mL(1)-40 mg/0.4 mL(2)subcut kit 25
Humulin 70/30 U-100 Insulin 100 unit/mL subcutaneous suspension.....274
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Hyclodex 0.012 %-0.002 %-0.046 % topical spray 81
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P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
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hydrocodone 10 mg-acetaminophen 325 mg tablet....16
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hydrocodone 5 mg-acetaminophen 300 mg tablet....16
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hydrocodone 7.5 mg-acetaminophen 300 mg tablet....17
hydrocodone 7.5 mg-acetaminophen 325 mg tablet....17
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hydrocodone bitartrate ER 15 mg capsule, oral only, extended rel 12 hr....7
hydrocodone bitartrate ER 20 mg capsule, oral only, extended rel 12 hr....7
hydrocodone bitartrate ER 20 mg tablet,crush resist,extended rel. 24hr..7
hydrocodone bitartrate ER 30 mg capsule, oral only, extended rel 12 hr....7
hydrocodone bitartrate ER 30 mg tablet,crush resist,extended rel. 24hr..7
hydrocodone bitartrate ER 40 mg capsule, oral only, extended rel 12 hr....7
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hydrocortisone 1 % topical ointment....216
hydrocortisone 10 mg tablet....270
hydrocortisone 100 mg/60 mL enema .301
hydrocortisone 2.5 % lotion....216
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hydrocortisone butyrate 0.1 % topical ointment....217
hydrocortisone butyrate 0.1 % topical solution....217
hydrocortisone butyrate-emollient 0.1 % topical cream....217
hydrocortisone valerate 0.2 % topical cream....217
hydrocortisone valerate 0.2 % topical ointment....217
hydrocortisone-acetic acid 1 %-2 % ear drops....411
hydrocortisone-aloe vera 1 % topical cream....219
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hyoscyamine 0.125 mg/mL oral drops .299
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Hysingla ER 100 mg tablet, crush resistant, extended release....8
Hysingla ER 120 mg tablet, crush resistant, extended release....8
Hysingla ER 20 mg tablet, crush resistant, extended release....8
Hysingla ER 30 mg tablet, crush resistant, extended release....8
Hysingla ER 40 mg tablet, crush resistant, extended release....8
Hysingla ER 60 mg tablet, crush resistant, extended release....8
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IBU 600 mg tablet 31
IBU 800 mg tablet 31
IBU-200 200 mg tablet 32
Ibupak 600 mg oral kit 32
ibuprofen 100 mg tablet 32
ibuprofen 100 mg/5 mL oral suspension 32
ibuprofen 200 mg capsule 32
ibuprofen 200 mg tablet 32
ibuprofen 400 mg tablet 32
ibuprofen 50 mg/1.25 mL oral drops,suspension 32
ibuprofen 600 mg tablet 32
ibuprofen 800 mg tablet 32
Ibuprofen Cold-Sinus (with pseudoephedrine) 30 mg-200 mg tablet 429
Ibuprofen IB 200 mg tablet 32
ICaps AREDS 7,160 unit-113 mg-100 unit tablet,delayed release 235
ICaps AREDS2 (copper citrate) 250 mg-200 unit-12.5 mg-1 mg tablet 235
Icaps MV 100 mcg-1.66 mg-0.83 mg tablet,delayed release 236
icatibant 30 mg/3 mL subcutaneous syringe 109
Iclevia 0.15 mg-30 mcg (91) tablets,3 month dose pack 192
Iclusig 10 mg tablet 77
Iclusig 15 mg tablet 77
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Imitrex STATdose Pen 6 mg/0.5 mL subcutaneous pen injector 176
Imitrex STATdose Refill 4 mg/0.5 mL subcutaneous cartridge 176
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Impeklo 0.05 % topical lotion in pump .217
Imuran 50 mg tablet 337
Imvexxy Maintenance Pack 10 mcg vaginal insert 280
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Imvexxy Starter Pack 10 mcg vaginal insert, dose pack 280
Imvexxy Starter Pack 4 mcg vaginal insert, dose pack 280
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Incassia 0.35 mg tablet 196
inControl Alcohol Pads 81
inControl Lancing Device 355
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inControl Pen Needle 31 gauge x 1/4 ...372
inControl Pen Needle 31 gauge x 3/16 .372
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inControl Super Thin Lancets 30 gauge 355
inControl Ultra Thin Lancets 28 gauge..355
Increlex 10 mg/mL subcutaneous solution 279
Incruse Ellipta 62.5 mcg/actuation powder for inhalation 424
indapamide 1.25 mg tablet 120
indapamide 2.5 mg tablet 120
Inderal LA 120 mg capsule,extended release 108
Inderal LA 160 mg capsule,extended release 108
Inderal LA 60 mg capsule,extended release 108
Inderal LA 80 mg capsule,extended release 108
Inderal XL 120 mg capsule,extended release 108
Inderal XL 80 mg capsule,extended release 108
Indocin 25 mg/5 mL oral suspension 33
Indocin 50 mg rectal suppository 33
indomethacin 25 mg capsule 33
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Infanrix (DTaP) (PF) 25 Lf unit-58 mcg-10 Lf/0.5mL intramuscular susp 83
Infanrix (DTaP)(PF) 25 Lf unit-58mcg-10 Lf/0.5mL intramuscular syringe 83
Infant Fever Reducer-Pain Relief 160 mg/5 mL oral suspension 21
Infant Pain Reliever 160 mg/5 mL oral suspension 21
Infant's Acetaminophen 160 mg/5 mL oral suspension 21
Infants Gas Relief 40 mg/0.6 mL oral drops,suspension 298
Infant's Ibuprofen 50 mg/1.25 mL oral drops,suspension 32
Infants' Mylicon 40 mg/0.6 mL oral drops,suspension 298
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InnoPran XL 120 mg capsule,extended release 108
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Inqovi 35 mg-100 mg tablet.....81
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insulin syringe U-100 with needle 0.3 mL 31 gauge x 5/16 373
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insulin syringe U-100 with needle 0.5 mL 30 gauge x 1/2 373
insulin syringe U-100 with needle 0.5 mL 30 gauge x 5/16 373
insulin syringe U-100 with needle 0.5 mL 31 gauge x 5/16 373
insulin syringe U-100 with needle 1 mL 27 gauge x 1/2 373
insulin syringe U-100 with needle 1 mL 28 gauge 373
insulin syringe U-100 with needle 1 mL 28 gauge x 1/2 373
insulin syringe U-100 with needle 1 mL 29 gauge x 1/2 373
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insulin syringe U-100 with needle 1 mL 31 gauge x 15/64 373
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insulin syringe U-100 with needle 1/2 mL 28 gauge 374
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Lenvima 14 mg/day(10 mg x 1-4 mg x 1) capsule 78
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levofloxacin 25 mg/mL intravenous solution 56
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lidocaine 3 %-hydrocortisone 0.5 % rectal kit 35
lidocaine 3 %-hydrocortisone 0.5 % topical cream 219
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lidocaine 5 % topical ointment 223
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lidocaine-prilocaine 2.5 %-2.5 % topical cream 221
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Lipritin 100 mg capsule-2.5 %-2.5 % cream-6 cm X 7 cm dressing kit 131
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Lite Touch Insulin Syringe 0.3 mL 31 gauge x 5/16.....374
Lite Touch Insulin Syringe 0.5 mL 29 gauge x 1/2.....374
Lite Touch Insulin Syringe 0.5 mL 30 gauge x 5/16.....374
Lite Touch Insulin Syringe 0.5 mL 31 gauge x 5/16.....375
Lite Touch Insulin Syringe 1 mL 28 gauge 375
Lite Touch Insulin Syringe 1 mL 28 gauge x 1/2.....375
Lite Touch Insulin Syringe 1 mL 29 gauge 375
Lite Touch Insulin Syringe 1 mL 29 gauge x 1/2.....375
Lite Touch Insulin Syringe 1 mL 30 gauge x 5/16.....375
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Lite Touch Insulin Syringe 1 mL 31 gauge x 5/16.....375
Lite Touch Insulin Syringe 1/2 mL 28 gauge 375
Lite Touch Insulin Syringe 1/2 mL 28 gauge x 1/2.....375
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lithium citrate 8 mEq/5 mL oral solution 173
Lithobid 300 mg tablet,extended release 173
Lithostat 250 mg tablet.....313
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Little Remedies Fever and Pain Reliever 160 mg/5 mL oral liquid.....22
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Livalo 1 mg tablet.....103
Livalo 2 mg tablet.....103
Livalo 4 mg tablet.....103
Lo Loestrin Fe 1 mg-10 mcg (24)/10 mcg (2) tablet.....189
Locoid 0.1 % lotion.....217
Locoid Lipocream 0.1 % topical.....217
Lodosyn 25 mg tablet.....151
Loestrin 1.5/30 (21) 1.5 mg-30 mcg tablet 193
Loestrin 1/20 (21) 1 mg-20 mcg tablet .193
Loestrin Fe 1.5/30 (28-Day) 1.5 mg-30 mcg (21)/75 mg (7) tablet.....193
Loestrin Fe 1/20 (28-Day) 1 mg-20 mcg (21)/75 mg (7) tablet.....193
LoHist - D 2 mg-30 mg/5 mL oral liquid 412
LoJaimiess 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack.....189
Lokelma 10 gram oral powder packet..227
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Lomotil 2.5 mg-0.025 mg tablet.....290
Lonhala Magnair Refill 25 mcg/mL solution for nebulization.....424
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Lonsurf 15 mg-6.14 mg tablet.....72
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loperamide 1 mg/5 mL oral liquid.....289
loperamide 1 mg/7.5 mL oral liquid.....289
loperamide 2 mg capsule.....289
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Lopid 600 mg tablet.....102
lopinavir-ritonavir 400 mg-100 mg/5 mL oral solution.....48
Lopreeza 1 mg-0.5 mg tablet.....265
Lopressor 100 mg tablet.....107
Lopressor 50 mg tablet.....107
Loprox (as olamine) 0.77 % topical cream 209
Loprox (as olamine) 0.77 % topical suspension.....209
Loprox 1 % shampoo.....209
Loprox Kit 0.77 % topical combo pack..209
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Loradamed 10 mg tablet.....419
Lorata-D 10 mg-240 mg tablet,extended release.....413
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Loratadine-D 10 mg-240 mg tablet,extended release 24 hr.....413
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Lorbrena 100 mg tablet.....71
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Lorcet (hydrocodone) 5 mg-325 mg tablet 17
Lorcet HD 10 mg-325 mg tablet.....17
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Lorid 1 mg-200 mg-300 mcg tablet.....225
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LoSeasonique 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack..189
Lotemax 0.5 % eye drops,suspension...405
Lotemax 0.5 % eye gel drops.....405
Lotemax 0.5 % eye ointment.....405
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Lotensin 10 mg tablet.....89
Lotensin 20 mg tablet.....89
Lotensin 40 mg tablet.....89
Lotensin HCT 10 mg-12.5 mg tablet.....87
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Lotrel 10 mg-20 mg capsule.....86
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Lotrel 5 mg-10 mg capsule.....86
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Lotronex 0.5 mg tablet 301
Lotronex 1 mg tablet 301
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lovastatin 20 mg tablet 103
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Lovaza 1 gram capsule 104
Lovenox 100 mg/mL subcutaneous syringe 332
Lovenox 120 mg/0.8 mL subcutaneous syringe.....332
Lovenox 150 mg/mL subcutaneous syringe 332
Lovenox 30 mg/0.3 mL subcutaneous syringe.....332
Lovenox 300 mg/3 mL subcutaneous solution 332
Lovenox 40 mg/0.4 mL subcutaneous syringe.....332
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Low-Ogestrel (28) 0.3 mg-30 mcg tablet 193
loxapine succinate 10 mg capsule 158
loxapine succinate 25 mg capsule 158
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Lo-Zumandimine (28) 3 mg-0.02 mg tablet 193
lubiprostone 24 mcg capsule.....301
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Lubricant Eye 56.8 %-41.5 % ointment.401
Lubricant Eye 57.3 %-42.5 % ointment.402
Lubricant Eye 57.7 %-31.9 % ointment.402
Lubricant Eye 83 %-15 % ointment.....402
Lubrifresh PM 83 %-15 % eye ointment 402
Lucemyra 0.18 mg tablet 183
Ludent Fluoride 0.25 mg fluoride (0.55 mg sod.fluorid) chewable tablet.....397
Ludent Fluoride 0.5 mg fluoride (1.1 mg sod.fluoride) chewable tablet.....397
Ludent Fluoride 1 mg fluoride (2.2 mg sodium fluoride) chewable tablet....397
luliconazole 1 % topical cream 210
Lumigan 0.01 % eye drops 410
Lunesta 1 mg tablet 182
Lunesta 2 mg tablet 182
Lunesta 3 mg tablet 182
Lupkynis 7.9 mg capsule 335
Lutera (28) 0.1 mg-20 mcg tablet 193
Luxiq 0.12 % topical foam.....217
Luzu 1 % topical cream 210
Lyleq 0.35 mg tablet 197
Lyllana 0.025 mg/24 hr transdermal patch 268
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Lyllana 0.05 mg/24 hr transdermal patch 268
Lyllana 0.075 mg/24 hr transdermal patch 268
Lyllana 0.1 mg/24 hr transdermal patch 268
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Lyrica 20 mg/mL oral solution 131
Lyrica 200 mg capsule.....131
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Lyrica 25 mg capsule.....131
Lyrica 300 mg capsule.....131
Lyrica 50 mg capsule.....131
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Lyrica CR 165 mg tablet,extended release 179
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Lysiplex Plus tablet 225
Lysodren 500 mg tablet 71
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Lyumjev KwikPen U-100 Insulin 100 unit/mL subcutaneous 278
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Macrodantin 25 mg capsule 315
Macrodantin 50 mg capsule 315
Macuvite Eye Care 7,160 unit-113 mg-1 mg tablet.....236
Macuvite With Lutein 5,000 unit-60 mg-30 unit-2 mg tablet 5
mafenide 50 gram topical packet 213
Mag-Al Plus 200 mg-200 mg-20 mg/5 mL oral suspension 288
Magellan Insulin Safety Syringe 0.3 mL 29 x 1/2 375
Magellan Insulin Safety Syringe 0.5 mL 29 gauge x 1/2 375
Magellan Insulin Safety Syringe 1 mL 29 gauge x 1/2 375
Magellan Insulin Safety Syringe 1 mL 30 gauge x 5/16 375
Magellan Safety Syringe 1 mL 23 gauge x 1 389
Magellan Syringe 0.3 mL 30 x 5/16.....375
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magnesium 400 mg (as magnesium oxide) tablet.....229
magnesium citrate oral solution.....305
magnesium hydroxide 400 mg/5 mL oral suspension 305
magnesium oxide 400 mg (241.3 mg magnesium) tablet.....229
MagOx 400 mg (241.3 mg magnesium) tablet.....229
Makena (PF) 275 mg/1.1 mL subcutaneous auto-injector.....269
Makena 250 mg/mL (1 mL) intramuscular oil 269
Malarone 250 mg-100 mg tablet.....43
Malarone Pediatric 62.5 mg-25 mg tablet 43
malathion 0.5 % lotion.....224
Mapap (acetaminophen) 160 mg/5 mL oral liquid 22
Mapap (acetaminophen) 160 mg/5 mL oral suspension 22
Mapap (acetaminophen) 325 mg tablet.22
Mapap (acetaminophen) 500 mg capsule 22
Mapap Extra Strength 500 mg tablet 22
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Marinol 10 mg capsule 290
Marinol 2.5 mg capsule 290
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Marlissa (28) 0.15 mg-0.03 mg tablet...193
Marplan 10 mg tablet 141
Marten-Tab 50 mg-325 mg tablet 24

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
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Matulane 50 mg capsule 70
Matzim LA 180 mg tablet,extended release 111
Matzim LA 240 mg tablet,extended release 111
Matzim LA 300 mg tablet,extended release 111
Matzim LA 360 mg tablet,extended release 111
Matzim LA 420 mg tablet,extended release 111
Mavenclad (10 tablet pack) 10 mg tablet 400
Mavenclad (4 tablet pack) 10 mg tablet 401
Mavenclad (5 tablet pack) 10 mg tablet 401
Mavenclad (6 tablet pack) 10 mg tablet 401
Mavenclad (7 tablet pack) 10 mg tablet 401
Mavenclad (8 tablet pack) 10 mg tablet 401
Mavenclad (9 tablet pack) 10 mg tablet 401
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Maxalt 10 mg tablet.....177
Maxalt-MLT 10 mg disintegrating tablet 177
Maxicomfort II Pen Needle 31 gauge x 1/4 375
Maxicomfort Insulin Syringe 1 mL 27 gauge x 1/2 375
Maxi-Comfort Insulin Syringe 1 mL 28 gauge x 1/2 375
Maxicomfort Insulin Syringe 1/2 mL 27 gauge x 1/2 375
Maxi-Comfort Insulin Syringe 1/2 mL 28 gauge x 1/2 376
Maxicomfort Safety Pen Needle 29 gauge x 5/16.....376
Maxidex 0.1 % eye drops,suspension ...405
MAXIMUM DAILY GREEN 5 mg-133 mcg tablet.....236
Maximum Daily Multivitamin 18 mg-0.4 mg tablet.....236
Maxipime 1 gram intravenous solution ..55
Maxipime 1 gram solution for injection .55
Maxipime 2 gram intravenous solution ..55
Maxipime 2 gram solution for injection .55
Maxitrol 3.5 mg/g-10,000 unit/g-0.1 % eye ointment 403
Maxitrol 3.5 mg/mL-10,000 unit/mL-0.1% eye drops,suspension 403
Maxi-Tuss AC 10 mg-100 mg/5 mL oral liquid 438
Maxzide 75 mg-50 mg tablet 119
Maxzide-25mg 37.5 mg-25 mg tablet...119
Mayzent 0.25 mg tablet.....401
Mayzent 2 mg tablet.....401
Mayzent Starter Pack 0.25 mg (12 tabs) tablets 401
M-Dryl 12.5 mg/5 mL oral liquid.....416
meclizine 12.5 mg tablet.....290
meclizine 25 mg tablet.....290
meclofenamate 100 mg capsule.....30
meclofenamate 50 mg capsule.....30
Medisense Thin Lancets 28 gauge 356
Medrol (Pak) 4 mg tablets in a dose pack 270
Medrol 16 mg tablet.....270
Medrol 2 mg tablet.....270
Medrol 32 mg tablet.....270
Medrol 4 mg tablet.....270
Medrol 8 mg tablet.....270
medroxyprogesterone 10 mg tablet.....280
medroxyprogesterone 150 mg/mL intramuscular suspension.....188
medroxyprogesterone 150 mg/mL intramuscular syringe 188
medroxyprogesterone 2.5 mg tablet....280
medroxyprogesterone 5 mg tablet.....280
mefenamic acid 250 mg capsule.....30
mefloquine 250 mg tablet 43
Mega Multi for Women 13.5 mg-200 mcg-250 mcg tablet 236
Mega Multivitamin For Men 200 mcg-175 mcg-250 mcg tablet 236
Mega Multivitamin with Minerals 13.5 mg-200 mcg-250 mcg tablet.....236
Megavite 18 mg iron-800 mcg-150 mg tablet.....226
Megavite Golden Years 55+ 800 mcg-150 mg-25 mg tablet 226
megestrol 20 mg tablet 78
megestrol 40 mg tablet 78
megestrol 400 mg/10 mL (10 mL) oral suspension 225
megestrol 400 mg/10 mL (40 mg/mL) oral suspension 225
megestrol 625 mg/5 mL (125 mg/mL) oral suspension 225
megestrol 800 mg/20 mL (20 mL) oral suspension 225
Mekinist 0.5 mg tablet.....76
Mekinist 2 mg tablet.....76
Mektovi 15 mg tablet 76
Melodetta 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet 193
meloxicam 15 mg tablet 30
meloxicam 7.5 mg tablet 30
meloxicam submicronized 10 mg capsule 30
meloxicam submicronized 5 mg capsule 30
melphalan 2 mg tablet.....70
memantine 10 mg tablet 186
memantine 14 mg capsule sprinkle,extended release 24hr 186
memantine 2 mg/mL oral solution 186
memantine 21 mg capsule sprinkle,extended release 24hr 186
memantine 28 mg capsule sprinkle,extended release 24hr 186
memantine 5 mg tablet 186
memantine 5 mg-10 mg tablets in a dose pack.....186
memantine 7 mg capsule sprinkle,extended release 24hr 187
Men 50 Plus Advanced One Daily 400 mcg-20 mcg-370 mcg tablet 236
Men 50 Plus Multivitamin 300 mcg-600 mcg-300 mcg tablet 236
Menactra (PF) 4 mcg/0.5 mL intramuscular solution.....83
Menest 0.3 mg tablet 268
Menest 0.625 mg tablet 268
Menest 1.25 mg tablet 268
Menest 2.5 mg tablet 268
Menomune - A/C/Y/W-135 (PF) 50 mcg subcutaneous solution.....84
Menomune - A/C/Y/W-135 50 mcg subcutaneous solution.....84
Menostar 14 mcg/24 hr transdermal patch 268
Men-Phor 0.5 %-0.5 % lotion.....211
Men's 50 Plus Daily Formula 400 mcg-20 mcg-370 mcg tablet 236
Men's 50 Plus Multivitamin 400 mcg-20 mcg-370 mcg tablet 236
Men's Daily Formula 400 mcg-20 mcg-300 mcg tablet 236
Men's Daily Multivitamin-Mineral 0.4 mg-600 mcg tablet 236
Men's Multivitamin 400 mcg-20 mcg-300 mcg tablet 236
Mens Multivitamin High Potency 200 mcg-175 mcg-250 mcg tablet 236
Men's Multi-Vitamin tablet 243
Men's One Daily 400 mcg-20 mcg-300 mcg tablet.....236
Men's One Daily tablet 237

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Mentax 1 % topical cream 209
Menveo A-C-Y-W-135-Dip (PF) 10 mcg-5 mcg/0.5 mL intramuscular kit 84
meperidine 100 mg tablet 9
meperidine 50 mg tablet 9
meperidine 50 mg/5 mL oral solution 9
Mephyton 5 mg tablet 253
meprobamate 200 mg tablet.....127
meprobamate 400 mg tablet.....127
Mepron 750 mg/5 mL oral suspension ...44
mercaptopurine 50 mg tablet.....72
meropenem 1 gram intravenous solution 50
meropenem 1 gram/50 mL in 0.9% sodium chloride intravenous piggyback 50
meropenem 500 mg intravenous solution 50
meropenem 500 mg/50 mL in 0.9% sodium chloride intravenous piggyback 50
Merrem 1 gram intravenous solution.....50
Merrem 500 mg intravenous solution 50
Merzee 1 mg-20 mcg (24)/75 mg (4) capsule 194
mesalamine 1,000 mg rectal suppository 300
mesalamine 1.2 gram tablet,delayed release 300
mesalamine 4 gram/60 mL enema 300
mesalamine 400 mg capsule (with delayed release tablets inside) 300
mesalamine 800 mg tablet,delayed release 300
mesalamine ER 0.375 gram capsule,extended release 24 hr 300
mesalamine rectal susp enema with cleansing wipes 4 gram/60 mL kit....300
Mesnex 400 mg tablet 81
Mestinon 60 mg tablet 337
Mestinon 60 mg/5 mL oral syrup 337
Mestinon Timespan 180 mg tablet,extended release 337
Metamucil (sugar) oral powder 303
Metamucil (with sugar) 3.4 gram/12 gram oral powder 303
Metamucil (with sugar) 3.4 gram/7 gram oral powder 303
Metamucil 0.52 gram capsule 303
Metamucil MultiHealth Fiber 3.4 gram/5.8 gram oral powder 303
Metamucil Sugar-Free (aspartame) 3.4 gram/5.8 gram oral powder.....303
metaproterenol 10 mg/5 mL oral syrup 426
Metaxall 800 mg tablet.....338
metaxalone 400 mg tablet.....338
metaxalone 800 mg tablet.....338
metformin 1,000 mg tablet 278
metformin 500 mg tablet 278
metformin 500 mg/5 mL oral solution .278
metformin 850 mg tablet 278
metformin ER 1,000 mg 24 hr tablet,extended release 278
metformin ER 1,000 mg tablet,extended release 24hr 278
metformin ER 500 mg 24 hr tablet,extended release 279
metformin ER 500 mg tablet,extended release 24 hr 279
metformin ER 500 mg tablet,extended release 24hr 279
metformin ER 750 mg tablet,extended release 24 hr 279
methadone 10 mg tablet 9
methadone 10 mg/5 mL oral solution 9
methadone 10 mg/mL oral concentrate...9
methadone 40 mg soluble tablet.....9
methadone 5 mg tablet 9
methadone 5 mg/0.5 mL oral syringe (FOR ORAL USE ONLY) 9
methadone 5 mg/5 mL oral solution 9
Methadone Intensol 10 mg/mL oral concentrate.....9
Methadose 10 mg/mL oral concentrate .10
Methadose 40 mg soluble tablet.....10
methamphetamine 5 mg tablet.....174
methazolamide 25 mg tablet.....118
methazolamide 50 mg tablet.....118
methenamine 81.6 mg-sod phos 40.8 mg-methylene blue 0.12mg-hyos tablet316
methenamine hippurate 1 gram tablet 314
methenamine mandelate 0.5 g tablet ..314
methenamine mandelate 1 gram tablet 314
Methergine 0.2 mg tablet.....280
methimazole 10 mg tablet.....264
methimazole 5 mg tablet.....264
methocarbamol 500 mg tablet 338
methocarbamol 750 mg tablet 338
methotrexate sodium 2.5 mg tablet.....72
methoxsalen 10 mg liquid-filled,rapid release capsule 211
methscopolamine 2.5 mg tablet.....299
methscopolamine 5 mg tablet.....299
methyldopa 250 mg tablet 117
methyldopa 250 mg-hydrochlorothiazide 15 mg tablet.....116
methyldopa 250 mg-hydrochlorothiazide 25 mg tablet.....116
methyldopa 500 mg tablet 117
methylergonovine 0.2 mg tablet 280
Methylin 10 mg/5 mL oral solution 169
Methylin 5 mg/5 mL oral solution 169
methylphenidate 10 mg chewable tablet 169
methylphenidate 10 mg tablet 169
methylphenidate 10 mg/5 mL oral solution 169
methylphenidate 2.5 mg chewable tablet 169
methylphenidate 20 mg tablet 169
methylphenidate 5 mg chewable tablet 169
methylphenidate 5 mg tablet 169
methylphenidate 5 mg/5 mL oral solution 169
methylphenidate CD 10 mg biphasic 30-70 capsule,extended release 169
methylphenidate CD 20 mg biphasic 30-70 capsule,extended release 170
methylphenidate CD 30 mg biphasic 30-70 capsule,extended release 170
methylphenidate CD 40 mg biphasic 30-70 capsule,extended release 170
methylphenidate CD 50 mg biphasic 30-70 capsule,extended release 170
methylphenidate CD 60 mg biphasic 30-70 capsule,extended release 170
methylphenidate ER 10 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 10 mg tablet,extended release 170
methylphenidate ER 15 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 18 mg tablet,extended release 24 hr.....170
methylphenidate ER 20 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 20 mg tablet,extended release 170
methylphenidate ER 27 mg tablet,extended release 24 hr.....170
methylphenidate ER 30 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 36 mg tablet,extended release 24 hr.....170

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Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

methylphenidate ER 40 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 50 mg capsule,extended release (40-60) sprinkle 170
methylphenidate ER 54 mg tablet,extended release 24 hr.....171
methylphenidate ER 60 mg capsule,extended release (40-60) sprinkle 171
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Monoject Insulin Safety Syringe 0.5 mL 30 gauge x 5/16 376
Monoject Insulin Safety Syringe 29 gauge x 1/2 376
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MorphaBond ER 30 mg tablet,oral ONLY (not feeding tubes) 10
MorphaBond ER 60 mg tablet,oral ONLY (not feeding tubes) 10
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morphine 10 mg/5 mL oral solution 10
morphine 15 mg immediate release tablet 10
morphine 20 mg rectal suppository 10
morphine 20 mg/5 mL (4 mg/mL) oral solution 10
morphine 30 mg immediate release tablet 10
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Natazia 3 mg/2 mg-2 mg/2 mg-3 mg/1 mg tablet.....197
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Natural Fiber Laxative 0.52 gram capsule 304
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Nephro-Vite Rx 1 mg-60 mg-300 mcg tablet.....226
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Nesina 12.5 mg tablet.....257
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P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

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Ovace Plus 9.8 % lotion.....212
Oval Tape 358
Overnight Lubricating Eye 94 %-3 % ointment 402
Ovide 0.5 % lotion.....224
oxaprozin 600 mg tablet.....33
Oxaydo 5 mg tablet,oral ONLY (not feeding tubes).....12
Oxaydo 7.5 mg tablet,oral ONLY (not for feeding tubes).....12
oxazepam 10 mg capsule.....126

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

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oxcarbazepine 150 mg tablet 134
oxcarbazepine 300 mg tablet 134
oxcarbazepine 300 mg/5 mL (60 mg/mL) oral suspension 134
oxcarbazepine 600 mg tablet 134
Oxervate 0.002 % eye drops 407
oxiconazole 1 % topical cream.....210
Oxistat 1 % lotion.....210
Oxistat 1 % topical cream 210
Oxsoralen Ultra 10 mg liquid-filled,rapid release capsule 211
Oxtellar XR 150 mg tablet,extended release 134
Oxtellar XR 300 mg tablet,extended release 134
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oxybutynin chloride 5 mg/5 mL oral syrup 316
oxybutynin chloride ER 10 mg tablet,extended release 24 hr.....316
oxybutynin chloride ER 15 mg tablet,extended release 24 hr.....316
oxybutynin chloride ER 5 mg tablet,extended release 24 hr.....317
oxycodone 10 mg tablet 12
oxycodone 10 mg/0.5 mL oral syringe (FOR ORAL USE ONLY).....12
oxycodone 15 mg tablet 12
oxycodone 20 mg tablet 12
oxycodone 20 mg/mL oral concentrate..12
oxycodone 30 mg tablet 12
oxycodone 5 mg capsule 12
oxycodone 5 mg tablet 12
oxycodone 5 mg/5 mL oral solution 13
oxycodone ER 10 mg tablet,crush resistant,extended release 12 hr 13
oxycodone ER 15 mg tablet,crush resistant,extended release 12 hr 13
oxycodone ER 20 mg tablet,crush resistant,extended release 12 hr 13
oxycodone ER 30 mg tablet,crush resistant,extended release 12 hr 13
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oxycodone ER 80 mg tablet,crush resistant,extended release 12 hr 13
oxycodone-acetaminophen 10 mg-325 mg tablet.....18
oxycodone-acetaminophen 2.5 mg-325 mg tablet.....18
oxycodone-acetaminophen 5 mg-325 mg tablet.....18
oxycodone-acetaminophen 7.5 mg-325 mg tablet.....18
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OxyContin 10 mg tablet,crush resistant,extended release 13
OxyContin 15 mg tablet,crush resistant,extended release 13
OxyContin 20 mg tablet,crush resistant,extended release 13
OxyContin 30 mg tablet,crush resistant,extended release 13
OxyContin 40 mg tablet,crush resistant,extended release 13
OxyContin 60 mg tablet,crush resistant,extended release 13
OxyContin 80 mg tablet,crush resistant,extended release 13
oxymorphone 10 mg tablet 13
oxymorphone 5 mg tablet 13
oxymorphone ER 10 mg tablet,extended release,12 hr 13
oxymorphone ER 15 mg tablet,extended release,12 hr 13
oxymorphone ER 20 mg tablet,extended release,12 hr 14
oxymorphone ER 30 mg tablet,extended release,12 hr 14
oxymorphone ER 40 mg tablet,extended release,12 hr 14
oxymorphone ER 5 mg tablet,extended release,12 hr 14
oxymorphone ER 7.5 mg tablet,extended release,12 hr 14
Oxytrol 3.9 mg/24 hr transdermal patch 317
Ozempic 0.25 mg or 0.5 mg (2 mg/1.5 mL) subcutaneous pen injector 261
Ozempic 1 mg/dose (2 mg/1.5 mL) subcutaneous pen injector 261
Ozempic 1 mg/dose (4 mg/3 mL) subcutaneous pen injector 261
Ozobax 5 mg/5 mL oral solution.....339

P

Pacerone 100 mg tablet.....100
Pacerone 200 mg tablet.....100
Pacerone 400 mg tablet.....100
Pain and Fever 325 mg tablet 22
Pain and Fever 500 mg tablet 22
Pain Relief (acetaminophen) 160 mg/5 mL oral liquid 22
Pain Relief (acetaminophen) 500 mg tablet.....22
Pain Relief Extra Strength 500 mg tablet 22
Pain Relief Regular Strength 325 mg tablet 23
Pain Reliever (acetaminophen) 325 mg tablet.....23
Pain Reliever (acetaminophen) 500 mg capsule 23
Pain Reliever (acetaminophen) 500 mg tablet.....23
Pain Reliever Extra Strength 500 mg tablet 23
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paliperidone ER 6 mg tablet,extended release 24 hr 156
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Pamelor 10 mg capsule.....149
Pamelor 25 mg capsule.....149
Pamelor 50 mg capsule.....149
Pamelor 75 mg capsule.....149
Pancreaze 10,500 unit-35,500 unit-61,500 unit capsule,delayed release 293
Pancreaze 16,800 unit-56,800 unit-98,400 unit capsule,delayed release 293
Pancreaze 2,600 unit-6,200 unit-10,850 unit capsule,delayed release 293
Pancreaze 21,000 unit-54,700 unit-83,900 unit capsule,delayed release 293
Pancreaze 4,200 unit-14,200 unit-24,600 unit capsule,delayed release 293
Pandel 0.1 % topical cream.....217
Panlor (acetaminophen-caff-dihydrocodeine) 325 mg-30 mg-16 mg tablet.....16
Panretin 0.1 % topical gel 211
pantoprazole 20 mg tablet,delayed release 296
pantoprazole 40 mg tablet,delayed release 296
pantoprazole DR 40 mg granules delayed-release for susp in packet 296
Paradigm Real-Time Transmitter.....390
paregoric 2 mg/5 mL oral liquid.....289
Paremyd 1 %-0.25 % eye drops 403
Pari Baby Conversion Kit - Size 1.....393
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P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

Pari Baby Conversion Kit - Size 3.....393
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paricalcitol 2 mcg capsule.....394
paricalcitol 4 mcg capsule.....394
Parlodel 2.5 mg tablet 151
Parlodel 5 mg capsule.....151
paromomycin 250 mg capsule.....37
paroxetine 10 mg tablet 142
paroxetine 20 mg tablet 142
paroxetine 30 mg tablet 142
paroxetine 40 mg tablet 142
paroxetine ER 12.5 mg tablet,extended release 24 hr 142
paroxetine ER 25 mg tablet,extended release 24 hr 142
paroxetine ER 37.5 mg tablet,extended release 24 hr 142
paroxetine mesylate (menopausal symptoms suppressant) 7.5 mg capsule 280
Parvlex 29 mg iron-400 mcg tablet.....229
Paser 4 gram granules delayed-release packet 49
Patanase 0.6 % nasal spray.....432
Paxil 10 mg tablet 142
Paxil 10 mg/5 mL oral suspension 142
Paxil 20 mg tablet 142
Paxil 30 mg tablet 142
Paxil 40 mg tablet 142
Paxil CR 12.5 mg tablet,extended release 143
Paxil CR 25 mg tablet,extended release143
Paxil CR 37.5 mg tablet,extended release 143
Pazeo 0.7 % eye drops.....404
PCE 333 mg particles in tablet 62
PCE 500 mg particles in tablet 62
P-COL RITE 8.6 mg-50 mg tablet.....308
Pedia D-Vite 10 mcg/mL (400 unit/mL) oral drops.....252
Pedia Poly-Vite 750 unit-35 mg-400 unit/mL oral drops.....245
Pedia Poly-Vite with Iron 10 mg/mL oral drops.....246
Pedia Relief Cough-Cold 1 mg-15 mg-5 mg/5 mL oral liquid.....433
PediaCare Fever Reducer 160 mg/5 mL oral suspension.....23
Pediacare Multi-Symptom Cold 2.5 mg-5 mg/5 mL oral liquid.....434
Pedialyte Advanced Care oral solution .230
Pedialyte Freezer Pops oral solution 230
Pedialyte oral solution.....230
Pedialyte Singles oral solution.....230
Pediatric Cough and Cold 1 mg-15 mg-5 mg/5 mL oral liquid.....433
Pediatric Electrolyte oral solution 230
Pediatric Enema 9.5 gram-3.5 gram/59 mL 306
Pediatric Freezer Pops oral solution 230
Pediatric Mouthpieces.....388
pediatric multivitamin chewable tablet245
pediatric multivitamin-Fl 0.25 mg chewable tablet 247
pediatric multivitamin-Fl 1 mg chewable tablet.....247
pediatric vitamins A,C,and D-fluoride 0.25 mg-iron 10 mg/mL oral drops.....246
Pediatric-Small Mouth Adaptor misc....388
PediaVance 5.3 mEq-2.35 mEq-4.15 mEq oral concentrate in packet.....230
peg 3350 240 gram-electrolytes 22.72 gram-6.72 g-5.84 g powdr for soln ..306
peg 3350-electrolytes 236 gram-22.74 gram-6.74 gram-5.86 gram solution 306
Peganone 250 mg tablet.....132
Pegasys 180 mcg/0.5 mL subcutaneous syringe.....57
Pegasys 180 mcg/mL subcutaneous solution 58
peg-electrolyte solution 420 gram oral solution 306
PegIntron 50 mcg/0.5 mL subcutaneous kit 58
Pemazyre 13.5 mg tablet.....75
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Pen Needle 29 gauge x 1/2 377
Pen Needle 30 gauge x 5/16 377
Pen Needle 31 gauge x 1/4 377
Pen Needle 31 gauge x 3/16 377
Pen Needle 31 gauge x 5/16 377
Pen Needle 32 gauge x 5/32 377
pen needle, diabetic 29 gauge x 1/2.....377
pen needle, diabetic 31 gauge x 1/3.....377
pen needle, diabetic 31 gauge x 1/4.....377
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pen needle, diabetic 31 gauge x 5/16...377
pen needle, diabetic 32 gauge x 1/4.....377
pen needle, diabetic 32 gauge x 3/16...377
pen needle, diabetic 32 gauge x 5/32...377
penicillamine 250 mg capsule.....35
penicillamine 250 mg tablet 35
penicillin G benzathine 600,000 unit/mL intramuscular syringe 63
penicillin G pot 1 million unit/50 mL-dextrose intravenous piggyback 63
penicillin G pot 2 million unit/50 mL-dextrose intravenous piggyback 63
penicillin G pot 3 million unit/50 mL-dextrose intravenous piggyback 63
penicillin G potassium 20 million unit solution for injection.....63
penicillin G potassium 5 million unit solution for injection.....64
penicillin G procaine 1.2 million unit/2 mL intramuscular syringe 64
penicillin G procaine 600,000 unit/mL intramuscular syringe 64
penicillin G sodium 5 million unit solution for injection.....64
penicillin V potassium 125 mg/5 mL oral solution 64
penicillin V potassium 250 mg tablet.....64
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Pennsaid 2 % topical solution in packet221
Pennsaid 20 mg/gram/actuation (2 %) topical soln in metered-dose pump.221
pentamidine 300 mg solution for inhalation.....63
Pentasa 250 mg capsule,controlled release 300
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pentazocine 50 mg-naloxone 0.5 mg tablet.....19
Pentican 100 mg capsule and 5 % topical patch kit 131
Pentips 29 gauge x 1/2 377
Pentips 31 gauge x 1/4 377
Pentips 31 gauge x 3/16 377
Pentips 31 gauge x 5/16 377
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pentoxifylline ER 400 mg tablet,extended release 330
Pepcid 20 mg tablet.....295
Pepcid 40 mg tablet.....295
Peptic Relief 262 mg chewable tablet ..289
Pepto-Bismol 262 mg chewable tablet .289
Pepto-Bismol Max St 525 mg/15 mL oral suspension 289
Pepto-Bismol To-Go 262 mg chewable tablet.....289
Percocet 10 mg-325 mg tablet 18
Percocet 2.5 mg-325 mg tablet 18
Percocet 5 mg-325 mg tablet 18
Percocet 7.5 mg-325 mg tablet 18
Perforomist 20 mcg/2 mL solution for nebulization 424

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

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perindopril erbumine 2 mg tablet 89
perindopril erbumine 4 mg tablet 89
perindopril erbumine 8 mg tablet 89
permethrin 5 % topical cream 224
perphenazine 16 mg tablet.....159
perphenazine 2 mg tablet.....159
perphenazine 4 mg tablet.....159
perphenazine 8 mg tablet.....159
perphenazine-amitriptyline 2 mg-10 mg tablet.....146
perphenazine-amitriptyline 2 mg-25 mg tablet.....146
perphenazine-amitriptyline 4 mg-10 mg tablet.....146
perphenazine-amitriptyline 4 mg-25 mg tablet.....146
perphenazine-amitriptyline 4 mg-50 mg tablet.....146
Perseris 120 mg abdominal subcutaneous ext. release suspension syringe 156
Perseris 90 mg abdominal subcutaneous ext. release suspension syringe 156
Pertzye 16,000 unit-57,500 unit-60,500 unit capsule,delayed release 293
Pertzye 24,000-86,250-90,750 unit capsule,delayed release.....293
Pertzye 4,000 unit-14,375 unit-15,125 unit capsule,delayed release.....293
Pertzye 8,000 unit-28,750 unit-30,250 unit capsule,delayed release.....293
Pexeva 10 mg tablet 143
Pexeva 20 mg tablet 143
Pexeva 30 mg tablet 143
Pexeva 40 mg tablet 143
Pfizer-BioNTech COVID-19 Vaccine (PF) 30 mcg/0.3 mL IM suspension(EUA).....84
Pfizerpen-G 20 million unit solution for injection 64
Pfizerpen-G 5 million unit solution for injection 64
PFLEX Inspiratory Trainer device 393
Pharbechlor 4 mg tablet 416
Pharbedryl 25 mg capsule 416
Pharbedryl 50 mg capsule 416
Pharbetol 325 mg tablet.....23
Pharbetol 500 mg tablet.....23
Pharmacist Choice Blood Glucose System 358
Pharmacist Choice Glucose Test Strips .344
Phenadoz 12.5 mg rectal suppository ..291
Phenadoz 25 mg rectal suppository 291
phenazopyridine 100 mg tablet.....314
phenazopyridine 200 mg tablet.....314
phenelzine 15 mg tablet 141
Phenergan 12.5 mg rectal suppository .291
Phenergan 25 mg rectal suppository....291
Phenergan 50 mg rectal suppository....291
phenobarbital 100 mg tablet.....127
phenobarbital 15 mg tablet.....127
phenobarbital 16.2 mg tablet.....127
phenobarbital 20 mg/5 mL (4 mg/mL) oral elixir 128
phenobarbital 30 mg tablet.....128
phenobarbital 32.4 mg tablet.....128
phenobarbital 60 mg tablet.....128
phenobarbital 64.8 mg tablet.....128
phenobarbital 97.2 mg tablet.....128
phenoxybenzamine 10 mg capsule 121
phenylephrine 10 % eye drops 407
phenylephrine 2.5 % eye drops 407
Phenytek 200 mg capsule 132
Phenytek 300 mg capsule 132
phenytoin 100 mg/4 mL oral suspension 132
phenytoin 125 mg/5 mL oral suspension 132
phenytoin 50 mg chewable tablet 133
phenytoin sodium extended 100 mg capsule 133
phenytoin sodium extended 200 mg capsule 133
phenytoin sodium extended 300 mg capsule 133
Phexxi 1.8 %-1 %-0.4 % vaginal gel 187
Philith 0.4 mg-35 mcg tablet.....195
Phillips' Liqui-Gels 100 mg capsule 310
Phillips Milk of Magnesia 400 mg/5 mL oral suspension 305
Phoslyra 667 mg (169 mg calcium)/5 mL oral solution.....312
Phospha 250 Neutral 250 mg tablet.....313
Phosphasal 81.6 mg-10.8 mg-40.8 mg tablet.....315
Phospholine Iodide 0.125 % eye drops.402
Phosphorous 250 mg tablet.....313
Phospho-Trin 250 Neutral 250 mg tablet 313
PhytoMulti 3 mg-3 mg-200 mg tablet 5
phytonadione (vitamin K1) 5 mg tablet 253
Picato 0.015 % topical gel.....211
Picato 0.05 % topical gel.....211
Pifeltro 100 mg tablet.....46
Pillow Mask Adult 345
Pillow Mask Child.....393
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pilocarpine 1 % eye drops.....403
pilocarpine 2 % eye drops.....403
pilocarpine 4 % eye drops.....403
pilocarpine 5 mg tablet.....398
pilocarpine 7.5 mg tablet.....398
pimecrolimus 1 % topical cream.....213
pimozide 1 mg tablet 159
pimozide 2 mg tablet 159
Pimtrea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 189
pindolol 10 mg tablet.....108
pindolol 5 mg tablet.....108
Pink Bismuth 262 mg chewable tablet .289
Pink Bismuth 262 mg tablet.....289
Pink Bismuth 525 mg/15 mL oral suspension 289
Pink Bismuth Maximum Strength 525 mg/15 mL oral suspension.....289
pioglitazone 15 mg tablet 279
pioglitazone 15 mg-metformin 500 mg tablet.....260
pioglitazone 15 mg-metformin 850 mg tablet.....260
pioglitazone 30 mg tablet 279
pioglitazone 30 mg-glimepiride 2 mg tablet.....261
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Pip Lancet 28 gauge 358
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piperacillin-tazobactam 13.5 gram intravenous solution 64
piperacillin-tazobactam 2.25 gram intravenous solution 64
piperacillin-tazobactam 3.375 gram intravenous solution 64
piperacillin-tazobactam 4.5 gram intravenous solution 64
piperacillin-tazobactam 40.5 gram intravenous solution 64
Piqray 200 mg/day (200 mg x 1) tablet...77
Piqray 250 mg/day (200 mg x 1-50 mg x 1) tablet.....77
Piqray 300 mg/day (150 mg x 2) tablet...77
Pirmella 0.5/0.75/1 mg-35 mcg tablet..198
Pirmella 1 mg-35 mcg tablet.....195
piroxicam 10 mg capsule 31
piroxicam 20 mg capsule 31
Plan B One-Step 1.5 mg tablet.....200
Plavix 75 mg tablet 333
Plegridy 125 mcg/0.5 mL intramuscular syringe.....399
Plegridy 125 mcg/0.5 mL subcutaneous pen injector.....399

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Plegridy 125 mcg/0.5 mL subcutaneous syringe.....399
Plegridy 63 mcg/0.5 mL-94 mcg/0.5 mL subcutaneous pen injector 399
Plegridy 63 mcg/0.5 mL-94 mcg/0.5 mL subcutaneous syringe 399
Pliaglis 7 %-7 % topical cream.....223
Pneumovax-23 25 mcg/0.5 mL injection solution 84
Pneumovax-23 25 mcg/0.5 mL injection syringe.....84
PNV 29-1 29 mg iron-1 mg tablet 248
PNV OB+DHA 27 mg-1 mg-50 mg-250 mg oral pack 248
PNV-DHA 27 mg iron-1 mg-300 mg capsule.....244
PNV-Omega 28 mg-1 mg-300 mg capsule 239
PNV-Select 27 mg-1 mg tablet.....248
PNV-VP-U 106.5 mg-1 mg capsule.....244
POCKET CHAMBER spacer 393
PocketChem EZ kit 358
PocketChem EZ strips 344
Podocon 25 % topical liquid 220
podofilox 0.5 % topical solution 220
Pogo Automatic Blood Glucose System358
Polycin 500 unit-10,000 unit/gram eye ointment 408
polyethylene glycol 3350 17 gram oral powder packet 305
polyethylene glycol 3350 17 gram/dose oral powder 305
Poly-Iron 150 mg iron capsule 229
polymyxin B sulfate 10,000 unit-trimethoprim 1 mg/mL eye drops ...408
polysaccharide iron complex 150 mg iron capsule 229
Polytrim 10,000 unit-1 mg/mL eye drops 408
polyvinyl alcohol 1.4 % eye drops.....402
Poly-Vi-Sol 250 mcg-50 mg-10 mcg/mL oral drops.....245
Poly-Vi-Sol with Iron 11 mg iron/mL oral drops.....246
Poly-Vita (iron) 1,500 unit-400 unit-10 mg/mL oral drops 246
Poly-Vita 1,500 unit-35 mg-400 unit/mL oral drops.....245
Poly-Vita Drops 750 unit-35 mg-400 unit/mL oral 245
Poly-Vita With Iron 10 mg/mL oral drops 246
Poly-Vitamin 1,500 unit-35 mg-400 unit/mL oral drops 245
Poly-Vitamin with Iron 1,500 unit-400 unit-10 mg/mL oral drops 246
Poly-Vitamins chewable tablet 245
Pomalyst 1 mg capsule 80
Pomalyst 2 mg capsule 80
Pomalyst 3 mg capsule 80
Pomalyst 4 mg capsule 80
Ponvory 14-Day Starter Pack 2-3-4-5-6-7-8-9-10 mg tablets.....401
Ponvory 20 mg tablet 401
Portia 28 0.15 mg-0.03 mg tablet.....195
posaconazole 100 mg tablet,delayed release 42
potas and sod citrate-citric acid 550 mg-500 mg-334 mg/5 mL oral soln 314
potassium bicarbonate-citric acid 25 mEq effervescent tablet.....231
potassium chloride 20 mEq oral packet231
potassium chloride 20 mEq/15 mL oral liquid 231
potassium chloride 40 mEq/15 mL oral liquid 231
potassium chloride ER 10 mEq capsule,extended release 231
potassium chloride ER 10 mEq tablet,extended release.....231
potassium chloride ER 10 mEq tablet,extended release(part/cryst) 231
potassium chloride ER 20 mEq tablet,extended release(part/cryst) 231
potassium chloride ER 8 mEq capsule,extended release 231
potassium chloride ER 8 mEq tablet,extended release.....231
potassium citrate ER 10 mEq (1,080 mg) tablet,extended release.....314
potassium citrate ER 15 mEq (1,620 mg) tablet,extended release.....314
potassium citrate ER 5 mEq (540 mg) tablet,extended release.....314
potassium citrate-citric acid 1,100 mg-334 mg/5 mL oral solution.....314
potassium citrate-citric acid 3,300 mg-1,002 mg oral packet 314
Powderlax 17 gram oral powder packet 305
Powderlax 17 gram/dose oral 305
Pradaxa 110 mg capsule 334
Pradaxa 150 mg capsule 334
Pradaxa 75 mg capsule 334
Praluent Pen 150 mg/mL subcutaneous pen injector.....104
Praluent Pen 75 mg/mL subcutaneous pen injector.....104
pramipexole 0.125 mg tablet 153
pramipexole 0.25 mg tablet 153
pramipexole 0.5 mg tablet.....153
pramipexole 0.75 mg tablet 153
pramipexole 1 mg tablet.....153
pramipexole 1.5 mg tablet.....153
pramipexole ER 0.375 mg tablet,extended release 24 hr 153
pramipexole ER 0.75 mg tablet,extended release 24 hr 153
pramipexole ER 1.5 mg tablet,extended release 24 hr 153
pramipexole ER 2.25 mg tablet,extended release 24 hr 153
pramipexole ER 3 mg tablet,extended release 24 hr 153
pramipexole ER 3.75 mg tablet,extended release 24 hr 154
pramipexole ER 4.5 mg tablet,extended release 24 hr 154
pramoxine 1 % topical foam 223
Prandin 1 mg tablet 257
Prandin 2 mg tablet 257
prasugrel 10 mg tablet.....333
prasugrel 5 mg tablet.....333
Pravachol 20 mg tablet 103
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Precision Link kit 358
Precision PCX Plus Test strips 344
Precision PCX Test strips.....344
Precision Point Of Care Test strips.....344
Precision QID Monitor 358
Precision Q-I-D Test strips.....344
Precision Sof-Tact Monitor kit 358
Precision Sof-Tact Test strips.....344
Precision Xtra Ketone-Glucose Monitor kit 345
Precision Xtra Monitor.....358
Precision Xtra Test strips 344
Precose 100 mg tablet 256
Precose 25 mg tablet 256
Precose 50 mg tablet 256
Pred Forte 1 % eye drops,suspension...405
Pred Mild 0.12 % eye drops,suspension 405

P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

Pred-G 0.3 %-1 % eye drops,suspension 403
Pred-G S.O.P. 0.3 %-0.6 % eye ointment 403
prednicarbate 0.1 % topical cream.....217
prednicarbate 0.1 % topical ointment..217
prednisolone 10 mg disintegrating tablet 271
prednisolone 15 mg disintegrating tablet 271
prednisolone 15 mg/5 mL oral solution271
prednisolone 30 mg disintegrating tablet 271
prednisolone acetate 1 % eye drops,suspension.....405
prednisolone sodium phosphate 1 % eye drops.....405
prednisolone sodium phosphate 10 mg/5 mL oral solution 271
prednisolone sodium phosphate 15 mg/5 mL (3 mg/mL) oral solution.....271
prednisolone sodium phosphate 20 mg/5 mL (4 mg/mL) oral solution.....271
prednisolone sodium phosphate 25 mg/5 mL (5 mg/mL) oral solution.....271
prednisolone sodium phosphate 5 mg base/5 mL (6.7 mg/5 mL) oral soln ..271
prednisone 1 mg tablet 271
prednisone 10 mg tablet 271
prednisone 10 mg tablets in a dose pack 271
prednisone 2.5 mg tablet 271
prednisone 20 mg tablet 271
prednisone 5 mg tablet 271
prednisone 5 mg tablets in a dose pack271
prednisone 5 mg/5 mL oral solution.....271
prednisone 50 mg tablet 272
Prednisone Intensol 5 mg/mL oral concentrate.....272
Prefest 1 mg (15)/1 mg-0.09 mg (15) tablet.....266
pregabalin 100 mg capsule 131
pregabalin 150 mg capsule 131
pregabalin 20 mg/mL oral solution.....131
pregabalin 200 mg capsule 131
pregabalin 225 mg capsule 131
pregabalin 25 mg capsule 132
pregabalin 300 mg capsule 132
pregabalin 50 mg capsule 132
pregabalin 75 mg capsule 132
pregabalin ER 165 mg tablet, extended release 24 hr 179
pregabalin ER 330 mg tablet, extended release 24 hr 180
pregabalin ER 82.5 mg tablet, extended release 24 hr 180
Premarin 0.3 mg tablet.....268
Premarin 0.45 mg tablet.....268
Premarin 0.625 mg tablet.....269
Premarin 0.625 mg/gram vaginal cream 441
Premarin 0.9 mg tablet.....269
Premarin 1.25 mg tablet.....269
Premier BLU Glucose Meter 358
Premier Compact Glucose Meter kit 358
Premier Test Strip 344
Premier Voice Glucose Meter.....358
Premium Blood Glucose Monitoring System 358
Premium V10 358
Premium V10 strips 344
Premphase 0.625 mg(14)/0.625 mg-5mg(14) tablet 266
Prempro 0.3 mg-1.5 mg tablet 266
Prempro 0.45 mg-1.5 mg tablet 266
Prempro 0.625 mg-2.5 mg tablet 266
Prempro 0.625 mg-5 mg tablet 266
Prenatal 19 29 mg iron-1 mg chewable tablet.....248
Prenatal 28 mg iron-800 mcg tablet 248
Prenatal Multivitamins 28 mg iron-800 mcg tablet 249
Prenatal Plus 29 mg iron-1 mg tablet ...249
Prenatal Tablet 28 mg iron-800 mcg 249
Prenatal Vitamins Plus Low Iron 27 mg iron-1 mg tablet 249
Prenate AM 1 mg-500 mg tablet 244
Prenate Chewable 1 mg tablet 244
Prenate DHA (ferrous asparto glycinate) 18 mg iron-1 mg-300 mg capsule 249
Prenate Elite (iron asparto glycinate) 20 mg iron-1 mg tablet 249
Prenate Enhance 28 mg iron-1 mg-400 mg capsule.....249
Prenate Essential (iron asparto glycinate) 18 mg iron-1 mg-300 mg cap 244
Prenate Mini (ferrous asparto glycinate) 18 mg-1 mg-350 mg capsule.....249
Prenate Pixie 10 mg iron-1 mg-200 mg capsule.....249
Prenate Restore 27 mg iron-1 mg-400 mg capsule.....249
Preparation H(phenyleph,cocoa buttr) 0.25 %-88.44 % rectal suppository 35
PrePlus 27 mg iron-1 mg tablet 249
PreserVision AREDS 7,160 unit-113 mg-100 unit tablet 239
Presto Pro Blood Glucose Meter 358
PreTAB 29 mg-1 mg tablet.....249
pretomanid 200 mg tablet.....49
Prevacid 15 mg capsule,delayed release 297
Prevacid 30 mg capsule,delayed release 297
Prevacid SoluTab 15 mg delayed release,disintegrating tablet.....297
Prevacid SoluTab 30 mg delayed release,disintegrating tablet.....297
Prevalite 4 gram oral powder 100
Prevalite 4 gram powder for susp in a packet 101
Previfem 0.25 mg-35 mcg tablet 195
Prevnar 13 (PF) 0.5 mL intramuscular syringe.....84
Prevymis 240 mg tablet 55
Prevymis 480 mg tablet 55
Prezcobix 800 mg-150 mg tablet 65
Prezista 100 mg/mL oral suspension 65
Prezista 150 mg tablet 65
Prezista 600 mg tablet 65
Prezista 75 mg tablet 65
Prezista 800 mg tablet 65
Priftin 150 mg tablet.....49
Prilo Patch II 5 %-2.5 %-2.5 % kit, patch, medicated and cream 223
Prilosec 10 mg oral suspension,delayed release 297
Prilosec 2.5 mg oral suspension,delayed release 297
PrimaCare 30 mg-1 mg-300 mg capsule 249
primaquine 26.3 mg tablet 43
Primaxin 250 mg intravenous solution ...50
Primaxin 500 mg intravenous solution ...50
primidone 250 mg tablet.....128
primidone 50 mg tablet 128
Primlev 10 mg-300 mg tablet 18
Primlev 5 mg-300 mg tablet 18
Primlev 7.5 mg-300 mg tablet 18
Prinivil 20 mg tablet.....89
Pristiq 100 mg tablet,extended release145
Pristiq 25 mg tablet,extended release..145
Pristiq 50 mg tablet,extended release..145
Prizopak II 2.5 %-2.5 % topical kit 221
Prizotral-II 2.5 %-2.5 %-3.88 % topical cream 221
Pro Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2 378
Pro Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16 378
Pro Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16 378

P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

Pro Comfort Insulin Syringe 1 mL 30 gauge x 1/2 378
Pro Comfort Insulin Syringe 1 mL 30 gauge x 5/16 378
Pro Comfort Insulin Syringe 1 mL 31 gauge x 5/16 378
Pro Comfort Pen Needle 31 gauge x 5/16 378
Pro Comfort Pen Needle 32 gauge x 1/4 378
Pro Comfort Pen Needle 32 gauge x 3/16 378
Pro Comfort Pen Needle 32 gauge x 5/32 378
Pro Comfort Spacer-Adult Mask 393
Pro Comfort Spacer-Child Mask 393
Pro Voice V8 Glucose Monitor 358
Pro Voice V8-V9 Test Strip 344
Pro Voice V9 Glucose Monitor 358
Proair Digihaler 90 mcg/actuation aerosol powder breath act, sensor 425
ProAir HFA 90 mcg/actuation aerosol inhaler 425
ProAir RespiClick 90 mcg/actuation breath activated 425
probenecid 500 mg tablet 317
probenecid 500 mg-colchicine 0.5 mg tablet 317
Pro-Cal 187.5 mg-40 mg-7.5 mg tablet 228
Procardia 10 mg capsule 113
Procardia XL 30 mg tablet,extended release 113
Procardia XL 60 mg tablet,extended release 113
Procardia XL 90 mg tablet,extended release 114
Procare Spacer With Adult Mask 393
Procare Spacer With Child Mask 393
ProCentra 5 mg/5 mL oral solution 174
ProCerv HP 9 mg iron-300 mcg-50 mcg tablet 239
ProChamber 393
prochlorperazine 25 mg rectal suppository 291
prochlorperazine maleate 10 mg tablet 291
prochlorperazine maleate 5 mg tablet 291
Procrit 10,000 unit/mL injection solution 321
Procrit 2,000 unit/mL injection solution 321
Procrit 20,000 unit/2 mL injection solution 321
Procrit 20,000 unit/mL injection solution 321
Procrit 3,000 unit/mL injection solution 321
Procrit 4,000 unit/mL injection solution 321
Procrit 40,000 unit/mL injection solution 321
Proctofoam 1 % topical 223
Proctofoam HC 1 %-1 % 35
Procto-Med HC 2.5 % topical cream perineal applicator 34
Proctosol HC 2.5 % topical cream perineal applicator 34
Proctozone-HC 2.5 % topical cream perineal applicator 34
Procysbi 25 mg capsule,delayed release sprinkle 311
Procysbi 300 mg oral DR granules in packet 311
Procysbi 75 mg capsule,delayed release sprinkle 311
Procysbi 75 mg oral DR granules in packet 311
Prodigy Autocode Blood Glucose Monitoring System 359
Prodigy Autocode Meter kit 359
Prodigy Insulin Syringe 0.3 mL 31 gauge x 5/16 378
Prodigy Insulin Syringe 0.5 mL 31 gauge x 5/16 378
Prodigy Insulin Syringe 1 mL 28 gauge x 1/2 378
Prodigy Lancing Device 359
Prodigy No Coding strips 344
Prodigy Pocket Meter kit 359
Prodigy Twist Top Lancet 28 gauge 359
Prodigy Voice Glucose Meter kit 359
Profilnine 1,000 (+/-) unit intravenous solution 322
Profilnine 1,500 (+/-) unit intravenous solution 323
Profilnine 500 (+/-) unit intravenous solution 323
progesterone 50 mg/mL intramuscular oil 280
progesterone micronized 100 mg capsule 280
progesterone micronized 200 mg capsule 280
Proglycem 50 mg/mL oral suspension 254
Prograf 0.2 mg oral granules in packet 335
Prograf 0.5 mg capsule 335
Prograf 1 mg capsule 335
Prograf 1 mg oral granules in packet 335
Prograf 5 mg capsule 335
Prolensa 0.07 % eye drops 406
Promacta 12.5 mg oral powder packet 334
Promacta 12.5 mg tablet 334
Promacta 25 mg oral powder packet 334
Promacta 25 mg tablet 334
Promacta 50 mg tablet 334
Promacta 75 mg tablet 334
promethazine 12.5 mg rectal suppository 291
promethazine 12.5 mg tablet 416
promethazine 25 mg rectal suppository 291
promethazine 25 mg tablet 416
promethazine 50 mg rectal suppository 291
promethazine 50 mg tablet 416
promethazine 6.25 mg/5 mL oral syrup 417
promethazine 6.25 mg-codeine 10 mg/5 mL syrup 438
Promethazine VC 6.25 mg-5 mg/5 mL oral syrup 412
Promethazine VC-Codeine 6.25 mg-5 mg-10 mg/5 mL oral syrup 438
promethazine-DM 6.25 mg-15 mg/5 mL oral syrup 434
promethazine-phenylephrine 6.25 mg-5 mg/5 mL oral syrup 412
promethazine-phenylephrine-codeine 6.25 mg-5 mg-10 mg/5 mL oral syrup 438
Promethegan 12.5 mg rectal suppository 291
Promethegan 25 mg rectal suppository 291
Promethegan 50 mg rectal suppository 291
Prometrium 100 mg capsule 280
Prometrium 200 mg capsule 280
Promolaxin 100 mg tablet 310
Proneb Ultra Filter Set 393
Proneb Ultra II Filter Assembly 393
propafenone 150 mg tablet 98
propafenone 225 mg tablet 98
propafenone 300 mg tablet 98
propafenone ER 225 mg capsule,extended release 12 hr 98
propafenone ER 325 mg capsule,extended release 12 hr 98
propafenone ER 425 mg capsule,extended release 12 hr 99
propantheline 15 mg tablet 299
proparacaine 0.5 % eye drops 408
propranolol 10 mg tablet 108
propranolol 20 mg tablet 108

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

propranolol 20 mg/5 mL (4 mg/mL) oral solution 108
propranolol 40 mg tablet.....108
propranolol 40 mg/5 mL (8 mg/mL) oral solution 108
propranolol 40 mg-hydrochlorothiazide 25 mg tablet.....120
propranolol 60 mg tablet.....108
propranolol 80 mg tablet.....108
propranolol 80 mg-hydrochlorothiazide 25 mg tablet.....120
propranolol ER 120 mg capsule,24 hr,extended release.....109
propranolol ER 160 mg capsule,24 hr,extended release.....109
propranolol ER 60 mg capsule,24 hr,extended release.....109
propranolol ER 80 mg capsule,24 hr,extended release.....109
propylthiouracil 50 mg tablet.....264
ProRenal 8 mg iron-800 mcg-1,000 unit tablet.....225
Proscar 5 mg tablet.....313
Prosight 5,000 unit-60 mg-30 unit tablet .5
Protonix 20 mg tablet,delayed release.297
Protonix 40 mg granules delayed-release packet 297
Protonix 40 mg tablet,delayed release.297
Protopic 0.03 % topical ointment 213
Protopic 0.1 % topical ointment 213
protriptyline 10 mg tablet 149
protriptyline 5 mg tablet 149
Proventil HFA 90 mcg/actuation aerosol inhaler.....425
Provera 10 mg tablet 280
Provera 2.5 mg tablet 280
Provera 5 mg tablet 280
Provida OB 40 mg iron-1.25 mg capsule 249
Provigil 100 mg tablet.....179
Provigil 200 mg tablet.....179
Provil 200 mg tablet.....33
Prozac 10 mg capsule 143
Prozac 20 mg capsule 143
Prozac 40 mg capsule 143
Prudoxin 5 % topical cream 223
pseudoephedrine 30 mg tablet 439
pseudoephedrine 30 mg/5 mL oral liquid 439
pseudoephedrine 60 mg tablet 439
pseudoephedrine ER 120 mg tablet,extended release.....439
Psorcon 0.05 % topical cream.....217
psyllium husk 0.52 gram capsule.....304
PTS Panels strips 344
Pulmicort 0.25 mg/2 mL suspension for nebulization 422
Pulmicort 0.5 mg/2 mL suspension for nebulization 422
Pulmicort 1 mg/2 mL suspension for nebulization 422
Pulmicort Flexhaler 180 mcg/actuation breath activated.....422
Pulmicort Flexhaler 90 mcg/actuation breath activated.....422
Pulmozyme 1 mg/mL solution for inhalation.....431
Puralube 85 %-15 % eye ointment 402
Pure and Gentle Disposable 19 gram-7 gram/118 mL enema.....306
Pure Comfort Alcohol Pads.....81
Pure Comfort Lancets 30 gauge.....359
Pure Comfort Pen Needle 32 gauge x 1/4 378
Pure Comfort Pen Needle 32 gauge x 3/16 378
Pure Comfort Pen Needle 32 gauge x 5/32 378
Pure Comfort Safety Lancets 30 gauge.359
PureFe OB Plus 106 mg iron-1 mg capsule 239
Purelax 17 gram oral powder packet....305
Purelax 17 gram/dose oral powder 305
Purixan 20 mg/mL oral suspension.....72
Pylera 140 mg-125 mg-125 mg capsule310
pyrazinamide 500 mg tablet.....49
Pyridium 100 mg tablet 314
Pyridium 200 mg tablet 314
pyridostigmine bromide 30 mg tablet ..337
pyridostigmine bromide 60 mg tablet ..337
pyridostigmine bromide 60 mg/5 mL oral syrup 337
pyridostigmine bromide ER 180 mg tablet,extended release.....337
pyrimethamine 25 mg tablet.....43

Q

Qbrelis 1 mg/mL oral solution 89
Qbrexza 2.4 % towelette 208
Qdolo 5 mg/mL oral solution.....14
Q-Dryl 12.5 mg/5 mL oral liquid 417
Q-Dryl 25 mg capsule.....417
Qelbree 100 mg capsule,extended release 172
Qelbree 150 mg capsule,extended release 173
Qelbree 200 mg capsule,extended release 173
Qinlock 50 mg tablet.....79
Qmiiz ODT 15 mg disintegrating tablet...31
Qmiiz ODT 7.5 mg disintegrating tablet..31
QNASL 40 mcg/actuation nasal aerosol spray 432
QNASL 80 mcg/actuation nasal aerosol spray 432
Q-PAP 325 mg tablet 23
Q-PAP 500 mg tablet 23
Q-PAP Extra Strength 500 mg tablet.....23
Q-Tapp 1 mg-15 mg/5 mL oral liquid....412
Q-Tapp DM 1 mg-15 mg-5 mg/5 mL oral elixir 433
Qtern 10 mg-5 mg tablet 259
Qtern 5 mg-5 mg tablet 259
Q-Tussin 100 mg/5 mL oral liquid.....431
Q-Tussin DM 10 mg-100 mg/5 mL oral syrup 436
Qualaquin 324 mg capsule 43
Quartette 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack.....197
Qudexy XR 100 mg capsule sprinkle,extended release.....134
Qudexy XR 150 mg capsule sprinkle,extended release.....134
Qudexy XR 200 mg capsule sprinkle,extended release.....134
Qudexy XR 25 mg capsule sprinkle,extended release.....134
Qudexy XR 50 mg capsule sprinkle,extended release.....134
Quenalin 12.5 mg/5 mL oral syrup 417
Questran 4 gram oral powder 101
Questran 4 gram powder for susp in a packet 101
Questran Light 4 gram oral powder.....101
quetiapine 100 mg tablet 160
quetiapine 200 mg tablet 160
quetiapine 25 mg tablet 160
quetiapine 300 mg tablet 160
quetiapine 400 mg tablet 160
quetiapine 50 mg tablet 160
quetiapine ER 150 mg tablet,extended release 24 hr 160
quetiapine ER 200 mg tablet,extended release 24 hr 160
quetiapine ER 300 mg tablet,extended release 24 hr 160
quetiapine ER 400 mg tablet,extended release 24 hr 160
quetiapine ER 50 mg tablet,extended release 24 hr 160

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Quflora Pediatric 0.25mg fluoride (0.55 mg) chewable tablet 247
Quflora Pediatric 0.5 mg fluoride (1.1 mg) chewable tablet 247
Quflora Pediatric 1 mg fluoride (2.2 mg) chewable tablet 247
Quflora Pediatric Drops 0.25 mg fluoride (0.55 mg)/mL oral 247
Quflora Pediatric Drops 0.5 mg fluoride (1.1 mg)/mL oral 247
Quicktek kit.....359
Quicktek Test strips 344
QuilliChew ER 20 mg chewable tablet, extended release 171
QuilliChew ER 30 mg chewable tablet, extended release 171
QuilliChew ER 40 mg chewable, extended release tablet 171
Quillivant XR 5 mg/mL (25 mg/5 mL) oral suspension,extend release 24hr 171
Quin B Strong 500 mg-400 mcg-15 mg tablet.....225
quinapril 10 mg tablet 89
quinapril 10 mg-hydrochlorothiazide 12.5 mg tablet.....88
quinapril 20 mg tablet 89
quinapril 20 mg-hydrochlorothiazide 12.5 mg tablet.....88
quinapril 20 mg-hydrochlorothiazide 25 mg tablet.....88
quinapril 40 mg tablet 89
quinapril 5 mg tablet 89
quinidine gluconate ER 324 mg tablet,extended release.....98
quinidine sulfate 200 mg tablet.....98
quinidine sulfate 300 mg tablet.....98
quinine 324 mg capsule.....44
Quintabs-M 10 mg iron-400 mcg tablet239
Quintabs-M Iron Free 0.4 mg tablet 239
Quintet AC meter.....359
Quintet AC strips.....344
Quintet Blood Glucose Meter.....359
Quintet Glucose Test Strips 344
Qutenza 8 % topical kit 223
Qvar RediHaler 40 mcg/actuation HFA breath activated aerosol.....422
Qvar RediHaler 80 mcg/actuation HFA breath activated aerosol.....422

R

rabeprazole 20 mg tablet,delayed release 297
raloxifene 60 mg tablet.....281
ramelteon 8 mg tablet.....175
ramipril 1.25 mg capsule 89
ramipril 10 mg capsule 89
ramipril 2.5 mg capsule 89
ramipril 5 mg capsule 89
Ranexa 1,000 mg tablet,extended release 97
Ranexa 500 mg tablet,extended release 98
ranitidine 15 mg/mL oral syrup 295
ranitidine 150 mg capsule 295
ranitidine 150 mg tablet 295
ranitidine 300 mg capsule 295
ranitidine 300 mg tablet 295
ranolazine ER 1,000 mg tablet,extended release,12 hr 98
ranolazine ER 500 mg tablet,extended release,12 hr 98
Rapaflo 4 mg capsule.....313
Rapaflo 8 mg capsule.....313
Rapamune 0.5 mg tablet 336
Rapamune 1 mg tablet 336
Rapamune 1 mg/mL oral solution 336
Rapamune 2 mg tablet 336
rasagiline 0.5 mg tablet 152
rasagiline 1 mg tablet 152
Rasuvo (PF) 10 mg/0.2 mL subcutaneous auto-injector 26
Rasuvo (PF) 12.5 mg/0.25 mL subcutaneous auto-injector.....26
Rasuvo (PF) 15 mg/0.3 mL subcutaneous auto-injector 26
Rasuvo (PF) 17.5 mg/0.35 mL subcutaneous auto-injector.....26
Rasuvo (PF) 20 mg/0.4 mL subcutaneous auto-injector 26
Rasuvo (PF) 22.5 mg/0.45 mL subcutaneous auto-injector.....26
Rasuvo (PF) 25 mg/0.5 mL subcutaneous auto-injector 27
Rasuvo (PF) 30 mg/0.6 mL subcutaneous auto-injector 27
Rasuvo (PF) 7.5 mg/0.15 mL subcutaneous auto-injector 27
Ravicti 1.1 gram/mL oral liquid.....395
Rayaldee 30 mcg capsule,extended release 394
Rayos 1 mg tablet,delayed release 272
Rayos 2 mg tablet,delayed release 272
Rayos 5 mg tablet,delayed release 272
Razadyne ER 16 mg capsule,extended release 186
Razadyne ER 24 mg capsule,extended release 186
Razadyne ER 8 mg capsule,extended release 186
Ready-To-Use Enema 19 gram-7 gram/118 mL 306
Real-Time Starter Kit.....359
Rebif (with albumin) 22 mcg/0.5 mL subcutaneous syringe 399
Rebif (with albumin) 44 mcg/0.5 mL subcutaneous syringe 399
Rebif Rebidose 22 mcg/0.5 mL subcutaneous pen injector 399
Rebif Rebidose 44 mcg/0.5 mL subcutaneous pen injector 399
Rebif Rebidose 8.8 mcg/0.2 mL-22 mcg/0.5 mL (6) subcutaneous pen inj. 399
Rebif Titration Pack 8.8 mcg/0.2 mL-22 mcg/0.5 mL subcutaneous syringe ..399
Rebinyn 1,000 (+/-) unit intravenous solution 323
Rebinyn 2,000 (+/-) unit intravenous solution 323
Rebinyn 500 (+/-) unit intravenous solution 323
Reblozyl 25 mg subcutaneous solution 330
Reblozyl 75 mg subcutaneous solution 330
Reclipsen (28) 0.15 mg-0.03 mg tablet .195
Recombinate 1,000 (+/-) unit intravenous solution 327
Recombinate 1,500 (+/-) unit intravenous solution 327
Recombinate 2,000 (+/-) unit intravenous solution 327
Recombinate 250 (+/-) unit intravenous solution 327
Recombinate 500 (+/-) unit intravenous solution 327
Recombivax HB (PF) 10 mcg/mL intramuscular suspension 82
Recombivax HB (PF) 10 mcg/mL intramuscular syringe 82
Recombivax HB (PF) 40 mcg/mL intramuscular suspension 82
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular suspension 82
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular syringe 83
Rectiv 0.4 % (w/w) ointment 34
RediTrex (PF) 10 mg/0.4 mL subcutaneous syringe.....27
RediTrex (PF) 12.5 mg/0.5 mL subcutaneous syringe 27
RediTrex (PF) 15 mg/0.6 mL subcutaneous syringe.....27

P Preferred Drug	NP Non-Preferred	AL Age Limit	PA Prior Authorization	APA Advanced Prior Authorization	QL Quantity Limit	SP Specialty Drug	ST Step Therapy	RX/OTC Both RX and OTC NDCs	MT Maintenance Therapy

RediTrex (PF) 17.5 mg/0.7 mL subcutaneous syringe 27
RediTrex (PF) 20 mg/0.8 mL subcutaneous syringe.....27
RediTrex (PF) 22.5 mg/0.9 mL subcutaneous syringe 27
RediTrex (PF) 25 mg/mL subcutaneous syringe.....27
RediTrex (PF) 7.5 mg/0.3 mL subcutaneous syringe 27
Redness Reliever Eye Drops 0.05 %.....407
Refresh Lacri-Lube 56.8 %-42.5 % eye ointment 402
Refresh P.M. 57.3 %-42.5 % eye ointment 402
Refuah Plus Glucose Monitor kit 359
Refuah Plus strips 344
Reglan 10 mg tablet.....298
Reglan 5 mg tablet.....298
Reguloid (aspartame) 3 gram/5.8 gram oral powder 304
Reguloid (psyllium husk) 0.52 gram capsule.....304
Reguloid (psyllium husk-sucrose) 3 gram/12 gram oral powder.....304
Reguloid (psyllium husk-sucrose) 3 gram/7 gram oral powder 304
Reguloid (psyllium husk-sucrose) 3.4 gram/12 gram oral powder.....304
Reguloid (psyllium husk-sucrose) 3.4 gram/7 gram oral powder.....304
Reguloid, Sugar Free oral powder 304
Relafen DS 1,000 mg tablet 30
Relenza Diskhaler 5 mg/actuation powder for inhalation 59
Relexxii 72 mg tablet,extended release171
ReliaMed Lancet 28 gauge.....359
ReliaMed Mini Lancing Device.....359
ReliaMed Safety Seal Lancets 28 gauge359
ReliaMed Safety Seal Lancets 30 gauge359
ReliOn All-In-One Meter kit 359
Relion Confirm kit 359
Relion Confirm-Micro strips.....344
ReliOn Micro Glucose Monitor kit 359
ReliOn Needles 31 gauge x 1/4.....378
ReliOn Pen Needles 32 gauge x 5/32....378
ReliOn Prime Meter 359
ReliOn Prime Test Strips 344
ReliOn Thin Lancets 26 gauge.....359
Relion Ultima strips 344
ReliOn Ultra Thin Plus Lancets.....359
Relistor 12 mg/0.6 mL subcutaneous solution 36
Relistor 12 mg/0.6 mL subcutaneous syringe.....36
Relistor 150 mg tablet 36
Relistor 8 mg/0.4 mL subcutaneous syringe.....37
Relpax 20 mg tablet.....177
Relpax 40 mg tablet.....177
Reltone 200 mg capsule.....294
Reltone 400 mg capsule.....294
Remeron 15 mg tablet.....141
Remeron 30 mg tablet.....141
Remeron SolTab 15 mg disintegrating tablet.....141
Remeron SolTab 30 mg disintegrating tablet.....141
Remeron SolTab 45 mg disintegrating tablet.....141
Remicade 100 mg intravenous solution .25
Remodulin 1 mg/mL injection solution 122
Remodulin 10 mg/mL injection solution 122
Remodulin 2.5 mg/mL injection solution 122
Remodulin 5 mg/mL injection solution 123
Renagel 800 mg tablet.....312
Renal Caps 1 mg capsule 225
RenaPlex 800 mcg-12.5 mg tablet 225
RenaPlex-D 800 mcg-12.5 mg-2,000 unit tablet.....225
Rena-Vite Rx 1 mg-60 mg-300 mcg tablet 226
Renflexis 100 mg intravenous solution...25
Reno Caps 1 mg capsule 225
Renvela 0.8 gram oral powder packet..312
Renvela 2.4 gram oral powder packet..312
Renvela 800 mg tablet.....312
repaglinide 0.5 mg tablet.....257
repaglinide 1 mg tablet.....257
repaglinide 1 mg-metformin 500 mg tablet 257
repaglinide 2 mg tablet.....257
repaglinide 2 mg-metformin 500 mg tablet 257
Repatha Pushtronex 420 mg/3.5 mL subcutaneous wearable injector.....104
Repatha SureClick 140 mg/mL subcutaneous pen injector 104
Repatha Syringe 140 mg/mL subcutaneous syringe 105
Replacement Pediatric Monitor 359
Reprexain 10 mg-200 mg tablet 17
Reprexain 5 mg-200 mg tablet 17
REQ49+ 200 mcg-1.5 mg-1.5 mg tablet 239
Rescon-GG 5 mg-100 mg/5 mL oral liquid 430
Restasis 0.05 % eye drops in a dropperette 405
Restasis MultiDose 0.05 % eye drops ...406
Restfully Sleep 25 mg tablet 180
Restore 4.....224
Restore PM 57.3 %-42.5 % eye ointment 402
Restore Trio 3 339
Restoril 15 mg capsule.....181
Restoril 22.5 mg capsule.....181
Restoril 30 mg capsule.....181
Restoril 7.5 mg capsule.....181
Retacrit 10,000 unit/mL injection solution 321
Retacrit 2,000 unit/mL injection solution 321
Retacrit 20,000 unit/2 mL injection solution 321
Retacrit 20,000 unit/mL injection solution 321
Retacrit 3,000 unit/mL injection solution 321
Retacrit 4,000 unit/mL injection solution 321
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Retaine PM 80 %-20 % eye ointment ...402
Retevmo 40 mg capsule.....80
Retevmo 80 mg capsule.....80
Retin-A 0.01 % topical gel.....205
Retin-A 0.025 % topical cream.....205
Retin-A 0.025 % topical gel.....205
Retin-A 0.05 % topical cream.....205
Retin-A 0.1 % topical cream.....205
Retin-A Micro 0.04 % topical gel.....205
Retin-A Micro 0.1 % topical gel.....205
Retin-A Micro Pump 0.04 % topical gel 205
Retin-A Micro Pump 0.06 % topical gel 205
Retin-A Micro Pump 0.08 % topical gel 205
Retin-A Micro Pump 0.1 % topical gel ..205
Retrovir 10 mg/mL oral syrup.....47
Retrovir 100 mg capsule 47
Revatio 10 mg/12.5 mL intravenous solution 124
Revatio 10 mg/mL oral suspension.....124
Revatio 20 mg tablet.....124
Reveal Blood Glucose Meter kit 359
Reveal Test Strip 344
Revlimid 10 mg capsule 80
Revlimid 15 mg capsule 80
Revlimid 2.5 mg capsule 80
Revlimid 20 mg capsule 80

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Revlimid 25 mg capsule 80
Revlimid 5 mg capsule 80
Rexulti 0.25 mg tablet.....164
Rexulti 0.5 mg tablet.....164
Rexulti 1 mg tablet.....164
Rexulti 2 mg tablet.....164
Rexulti 3 mg tablet.....164
Rexulti 4 mg tablet.....164
Reyataz 150 mg capsule 66
Reyataz 200 mg capsule 66
Reyataz 300 mg capsule 66
Reyataz 50 mg oral powder packet 66
Reyvow 100 mg tablet 178
Reyvow 50 mg tablet 178
Rhofade 1 % topical cream 222
RhoGAM Ultra-Filtered PLUS 1,500 unit (300 mcg) intramuscular syringe 83
Rhopressa 0.02 % eye drops.....410
ribavirin 200 mg capsule.....58
ribavirin 200 mg tablet 58
ribavirin 6 gram solution for inhalation..66
Ridaura 3 mg capsule.....27
rifabutin 150 mg capsule 49
rifampin 150 mg capsule 49
rifampin 300 mg capsule 49
Rightest GD500 Lancing Device 359
Rightest GL300 Lancets 30 gauge 359
Rightest GM550 System kit 359
Rightest GS550 Test Strips.....344
Rilutek 50 mg tablet.....337
riluzole 50 mg tablet.....337
rimantadine 100 mg tablet 60
Rinvoq 15 mg tablet,extended release...28
Riomet 500 mg/5 mL oral solution 279
Riomet ER 500 mg/5 mL oral suspension,extended release 279
risedronate 150 mg tablet 264
risedronate 30 mg tablet 264
risedronate 35 mg tablet 264
risedronate 35 mg tablet,delayed release 264
risedronate 5 mg tablet 264
Risperdal 0.5 mg tablet.....156
Risperdal 1 mg tablet.....156
Risperdal 1 mg/mL oral solution.....156
Risperdal 2 mg tablet.....156
Risperdal 3 mg tablet.....157
Risperdal 4 mg tablet.....157
Risperdal Consta 12.5 mg/2 mL intramuscular susp,extended release 157
Risperdal Consta 25 mg/2 mL intramuscular susp,extended release 157
Risperdal Consta 37.5 mg/2 mL intramuscular susp,extended release 157
Risperdal Consta 50 mg/2 mL intramuscular susp,extended release 157
risperidone 0.25 mg disintegrating tablet 157
risperidone 0.25 mg tablet 157
risperidone 0.5 mg disintegrating tablet 157
risperidone 0.5 mg tablet 157
risperidone 1 mg disintegrating tablet .157
risperidone 1 mg tablet 157
risperidone 1 mg/mL oral solution 157
risperidone 2 mg disintegrating tablet .157
risperidone 2 mg tablet 157
risperidone 3 mg disintegrating tablet .157
risperidone 3 mg tablet 157
risperidone 4 mg disintegrating tablet .157
risperidone 4 mg tablet 157
Ritalin 10 mg tablet 171
Ritalin 20 mg tablet 172
Ritalin 5 mg tablet 172
Ritalin LA 10 mg capsule,extended release 172
Ritalin LA 20 mg capsule,extended release 172
Ritalin LA 30 mg capsule,extended release 172
Ritalin LA 40 mg capsule,extended release 172
RiteFlo Aerochamber.....393
ritonavir 100 mg tablet.....66
rivastigmine 1.5 mg capsule 186
rivastigmine 13.3 mg/24 hour transdermal patch 186
rivastigmine 3 mg capsule 186
rivastigmine 4.5 mg capsule 186
rivastigmine 4.6 mg/24 hour transdermal patch 186
rivastigmine 6 mg capsule 186
rivastigmine 9.5 mg/24 hour transdermal patch 186
Rivelsa 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack 197
Rixubis 1,000 unit intravenous solution323
Rixubis 2,000 unit intravenous solution323
Rixubis 250 unit intravenous solution ..323
Rixubis 3,000 unit intravenous solution323
Rixubis 500 unit intravenous solution ..323
rizatriptan 10 mg disintegrating tablet.177
rizatriptan 10 mg tablet.....177
rizatriptan 5 mg disintegrating tablet...177
rizatriptan 5 mg tablet.....177
Robafen 100 mg/5 mL oral liquid 431
Robafen AC 10 mg-100 mg/5 mL oral liquid 438
Robafen DM 10 mg-100 mg/5 mL oral syrup 437
Robafen DM Cough 10 mg-100 mg/5 mL oral liquid 437
Robafen DM Cough-Chest Congestion 10 mg-100 mg/5 mL oral syrup.....437
Robafen DM Peak Cold 10 mg-100 mg/5 mL oral liquid 437
Robitussin Cough-Chest Congestion DM 10 mg-200 mg/5 mL oral liquid.....437
Robitussin Cough-Chest Congestion DM 5 mg-100 mg/5 mL oral liquid.....437
Robitussin ER 30 mg/5 mL oral suspension,extended release 420
Rocaltrol 0.25 mcg capsule 252
Rocaltrol 0.5 mcg capsule 252
Rocaltrol 1 mcg/mL oral solution.....253
Rocklatan 0.02 %-0.005 % eye drops....408
ropinirole 0.25 mg tablet.....154
ropinirole 0.5 mg tablet.....154
ropinirole 1 mg tablet.....154
ropinirole 2 mg tablet.....154
ropinirole 3 mg tablet.....154
ropinirole 4 mg tablet.....154
ropinirole 5 mg tablet.....154
ropinirole ER 12 mg tablet,extended release 24 hr 154
ropinirole ER 2 mg tablet,extended release 24 hr 154
ropinirole ER 4 mg tablet,extended release 24 hr 154
ropinirole ER 6 mg tablet,extended release 24 hr 154
ropinirole ER 8 mg tablet,extended release 24 hr 154
Rosadan 0.75 % top,cleanser and cream kit 222
Rosadan 0.75 % topical cleanser and gel kit 222
Rosadan 0.75 % topical cream.....222
Rosadan 0.75 % topical gel 222
rosuvastatin 10 mg tablet.....103
rosuvastatin 20 mg tablet.....103
rosuvastatin 40 mg tablet.....103
rosuvastatin 5 mg tablet.....103
Rowasa rectal suspension enema 4 gram/60 mL kit.....300
Roweepra 500 mg tablet 139
Roxicodone 15 mg tablet.....14
Roxicodone 30 mg tablet.....14

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Roxicodone 5 mg tablet.....14
Rozerem 8 mg tablet 175
Rozlytrek 100 mg capsule 79
Rozlytrek 200 mg capsule 79
Rubraca 200 mg tablet.....77
Rubraca 250 mg tablet.....77
Rubraca 300 mg tablet.....77
rufinamide 40 mg/mL oral suspension .140
Rukobia 600 mg tablet,extended release 45
Rulox 200 mg-200 mg-20 mg/5 mL oral suspension 288
Ruzurgi 10 mg tablet.....400
Rybelsus 14 mg tablet.....261
Rybelsus 3 mg tablet.....261
Rybelsus 7 mg tablet.....261
Rydapt 25 mg capsule.....79
Rynex PE 1 mg-2.5 mg/5 mL oral solution 412
Rynex PSE 1 mg-15 mg/5 mL oral liquid 412
Rytary 23.75 mg-95 mg capsule,extended release 150
Rytary 36.25 mg-145 mg capsule,extended release 150
Rytary 48.75 mg-195 mg capsule,extended release 150
Rytary 61.25 mg-245 mg capsule,extended release 150
Rythmol SR 225 mg capsule,extended release 99
Rythmol SR 325 mg capsule,extended release 99
Rythmol SR 425 mg capsule,extended release 99

S

Sabril 500 mg oral powder packet.....132
Sabril 500 mg tablet.....132
Safe Tussin DM 10 mg-100 mg/5 mL oral liquid 437
SafeSnap Insulin Syringe 0.3 mL 30 gauge x 5/16.....378
SafeSnap Insulin Syringe 0.5 mL 29 gauge x 1/2.....378
SafeSnap Insulin Syringe 0.5 mL 30 gauge x 5/16.....378
SafeSnap Insulin Syringe 1 mL 28 gauge x 1/2.....379
SafeSnap Insulin Syringe 1 mL 29 gauge x 1/2.....379
Safety Pen Needle 31 gauge x 3/16 379
Safety Seal Lancets 28 gauge.....360
Safyral 3 mg-0.03 mg-0.451 mg (21)/0.451 mg (7) tablet 195
Saizen 5 mg subcutaneous solution.....274
Saizen 8.8 mg subcutaneous solution...274
Saizen saizenprep 8.8 mg/1.51 mL (final conc.) subcutaneous cartridge.....274
Salagen (pilocarpine) 5 mg tablet.....398
Salagen (pilocarpine) 7.5 mg tablet.....398
Salex 6 % shampoo 220
salicylic acid 27.5 % topical film-forming liquid 220
salicylic acid 6 % topical foam.....220
salicylic acid 6 % topical gel 220
Saline Mist 0.65 % nasal spray aerosol .433
Saline Nasal 0.65 % spray aerosol.....433
Saline Nasal Mist 0.65 % spray aerosol.433
Saline Nose 0.65 % spray aerosol 433
salsalate 500 mg tablet.....34
salsalate 750 mg tablet.....34
Sami The Seal Filter.....393
Sami The Seal Mask 393
Samsca 15 mg tablet.....119
Samsca 30 mg tablet.....120
Sancuso 3.1 mg/24 hour transdermal patch 292
Sandimmune 100 mg capsule.....335
Sandimmune 100 mg/mL oral solution 336
Sandimmune 25 mg capsule.....336
Sandostatin 100 mcg/mL injection solution 281
Sandostatin 50 mcg/mL injection solution 281
Sandostatin 500 mcg/mL injection solution 281
Sandostatin LAR Depot 10 mg intramuscular susp,extended release 281
Sandostatin LAR Depot 20 mg intramuscular susp,extended release 281
Sandostatin LAR Depot 30 mg intramuscular susp,extended release 281
Sani-Supp (Adult) rectal.....306
Saphris 10 mg sublingual tablet.....154
Saphris 2.5 mg sublingual tablet.....154
Saphris 5 mg sublingual tablet.....154
sapropterin 100 mg oral powder packet 396
sapropterin 100 mg soluble tablet 396
sapropterin 500 mg oral powder packet 396
Sarafem 10 mg tablet 143
Sarna Original 0.5 %-0.5 % lotion 211
Savaysa 15 mg tablet 319
Savaysa 30 mg tablet 319
Savaysa 60 mg tablet 319
Savella 100 mg tablet 175
Savella 12.5 mg (5)-25 mg(8)-50mg(42) tablets in a dose pack 175
Savella 12.5 mg tablet 175
Savella 25 mg tablet 175
Savella 50 mg tablet 175
SAVision tablet.....239
scopolamine 1 mg over 3 days transdermal patch 290
Scot-Tussin Expectorant 100 mg/5 mL oral liquid 431
Sea Soft Nasal Mist 0.65 % spray aerosol 433
Seasonique 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack ..189
Seconal Sodium 100 mg capsule.....181
Secuado 3.8 mg/24 hour transdermal 24 hour patch 154
Secuado 5.7 mg/24 hour transdermal 24 hour patch 154
Secuado 7.6 mg/24 hour transdermal 24 hour patch 154
Seebri Neohaler 15.6 mcg capsule with inhalation device.....424
Segluromet 2.5 mg-1,000 mg tablet.....258
Segluromet 2.5 mg-500 mg tablet.....258
Segluromet 7.5 mg-1,000 mg tablet.....258
Segluromet 7.5 mg-500 mg tablet.....258
Select-OB (folic acid) 29 mg iron-1 mg chewable tablet 249
Select-OB + DHA 29 mg iron-1 mg-250 mg oral pack 249
Select-OB 29 mg iron-1 mg chewable tablet.....249
selegiline 5 mg capsule 152
selegiline 5 mg tablet.....152
selenium sulfide 2.25 % shampoo 212
selenium sulfide 2.3 % shampoo 212
selenium sulfide 2.5 % lotion.....212
Selzentry 150 mg tablet.....44
Selzentry 20 mg/mL oral solution.....45
Selzentry 25 mg tablet.....45
Selzentry 300 mg tablet.....45
Selzentry 75 mg tablet.....45
Semglee Pen U-100 Insulin 100 unit/mL (3 mL) subcutaneous.....276
Semglee U-100 Insulin 100 unit/mL subcutaneous solution.....276
Se-Natal 19 Chewable 29 mg iron-1 mg tablet.....249
Se-Natal-19 29 mg iron-1 mg tablet 249

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Senexon 8.6 mg tablet 307
Senexon-S 8.6 mg-50 mg tablet 308
Senior Tabs 0.4 mg-300 mcg-250 mcg tablet 239
senna 8.6 mg tablet 308
senna 8.8 mg/5 mL oral syrup 308
Senna Lax 8.6 mg tablet 308
Senna Laxative 8.6 mg tablet 308
Senna Laxative-Stool Softener 8.6 mg-50 mg tablet 308
Senna Plus 8.6 mg-50 mg tablet 308
Senna with Docusate Sodium 8.6 mg-50 mg tablet 309
Sennalax-S 8.6 mg-50 mg tablet 309
Senna-S 8.6 mg-50 mg tablet 309
Senna-Time S 8.6 mg-50 mg tablet 309
Senno 8.6 mg tablet 308
sennosides 8.6 mg-docusate sodium 50 mg tablet 309
Senokot 8.6 mg tablet 308
Senokot-S 8.6 mg-50 mg tablet 309
Sensipar 30 mg tablet 265
Sensipar 60 mg tablet 265
Sensipar 90 mg tablet 265
Sentry (with lutein) 18 mg-500 mcg-300 mcg-250 mcg tablet 240
Sentry 18 mg-400 mcg tablet 244
Sentry Senior 0.4 mg-300 mcg-250 mcg tablet 240
Sentry Senior 500 mcg-300 mcg-250 mcg tablet 240
Serevent Diskus 50 mcg/dose powder for inhalation 424
Seroquel 100 mg tablet 160
Seroquel 200 mg tablet 160
Seroquel 25 mg tablet 160
Seroquel 300 mg tablet 160
Seroquel 400 mg tablet 160
Seroquel 50 mg tablet 160
Seroquel XR 150 mg tablet,extended release 160
Seroquel XR 200 mg tablet,extended release 160
Seroquel XR 300 mg tablet,extended release 161
Seroquel XR 400 mg tablet,extended release 161
Seroquel XR 50 mg tablet,extended release 161
Serostim 4 mg subcutaneous solution 274
Serostim 5 mg subcutaneous solution 274
Serostim 6 mg subcutaneous solution 274
sertraline 100 mg tablet 143
sertraline 20 mg/mL oral concentrate 143
sertraline 25 mg tablet 143
sertraline 50 mg tablet 143
Setlakin 0.15 mg-30 mcg (91) tablets,3 month dose pack 195
sevelamer carbonate 0.8 gram oral powder packet 312
sevelamer carbonate 2.4 gram oral powder packet 312
sevelamer carbonate 800 mg tablet 312
sevelamer HCl 400 mg tablet 312
sevelamer HCl 800 mg tablet 312
SF 1.1 % dental gel 397
SF 5000 Plus 1.1 % dental cream 397
sfRowasa 4 gram/60 mL enema 301
Shake That Ache 500 mg tablet 23
Sharobel 0.35 mg tablet 197
Shingrix (PF) 50 mcg/0.5 mL intramuscular suspension, kit 86
Sidekick Blood Glucose System kit 344
Siderol tablet 229
Sidestream Adult Face Mask 393
Sidestream Mask 393
Sidestream Pediatric Face Mask 393
Signifor 0.3 mg/mL (1 mL) subcutaneous solution 281
Signifor 0.6 mg/mL (1 mL) subcutaneous solution 282
Signifor 0.9 mg/mL (1 mL) subcutaneous solution 282
Signifor LAR 10 mg intramuscular suspension 282
Signifor LAR 20 mg intramuscular suspension 282
Signifor LAR 30 mg intramuscular suspension 282
Signifor LAR 40 mg intramuscular suspension 282
Signifor LAR 60 mg intramuscular suspension 282
Silace 50 mg/5 mL oral liquid 310
Silace 60 mg/15 mL oral syrup 310
Siladryl SA 12.5 mg/5 mL oral liquid 417
sildenafil (pulmonary hypertension) 10 mg/12.5 mL intravenous solution 124
sildenafil (pulmonary hypertension) 10 mg/mL oral suspension 124
sildenafil (pulmonary hypertension) 20 mg tablet 124
Silenor 3 mg tablet 183
Silenor 6 mg tablet 183
Silicone Mask 393
Silicone Mask - Infant 393
Silicone Mask - Pediatric 393
Siliq 210 mg/1.5 mL subcutaneous syringe 206
silodosin 4 mg capsule 313
silodosin 8 mg capsule 313
Silphen Cough 12.5 mg/5 mL oral syrup 417
Siltussin DM DAS 10 mg-100 mg/5 mL oral liquid 437
Siltussin SA 100 mg/5 mL oral liquid 431
Siltussin-DM 10 mg-100 mg/5 mL oral syrup 437
Silvadene 1 % topical cream 213
silver nitrate 0.5 % topical solution 208
silver nitrate applicators 75 %-25 % topical stick 220
silver sulfadiazine 1 % topical cream 213
Simbrinza 1 %-0.2 % eye drops,suspension 403
simethicone 40 mg/0.6 mL oral drops,suspension 298
simethicone 80 mg chewable tablet 298
Simliya (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 189
Simpesse 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack 189
Simply Sleep 25 mg tablet 180
Simponi 100 mg/mL subcutaneous pen injector 26
Simponi 100 mg/mL subcutaneous syringe 26
Simponi 50 mg/0.5 mL subcutaneous pen injector 26
Simponi 50 mg/0.5 mL subcutaneous syringe 26
Simponi ARIA 12.5 mg/mL intravenous solution 26
simvastatin 10 mg tablet 103
simvastatin 20 mg tablet 103
simvastatin 40 mg tablet 103
simvastatin 5 mg tablet 103
simvastatin 80 mg tablet 103
Sinemet 10 mg-100 mg tablet 151
Sinemet 25 mg-100 mg tablet 151
Singulair 10 mg tablet 422
Singulair 4 mg chewable tablet 422
Singulair 4 mg oral granules in packet 422
Singulair 5 mg chewable tablet 422
Sinus 12 Hour 120 mg tablet,extended release 439
Sinus Decongestant (PE) 10 mg tablet 439
Sinus PE Decongestant 10 mg tablet 439
Sinuva 1,350 mcg sinus implant 433
sirolimus 0.5 mg tablet 337
sirolimus 1 mg tablet 337

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Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

sirolimus 1 mg/mL oral solution 337
sirolimus 2 mg tablet 337
Sirturo 100 mg tablet.....49
Sirturo 20 mg tablet.....49
Sitavig 50 mg buccal tablet 59
Sivextro 200 mg tablet.....63
Skelaxin 800 mg tablet.....339
Sklice 0.5 % lotion 224
Skyrizi 150 mg/1.66 mL(75 mg/0.83 mL x 2) subcutaneous syringe kit 206
Sleep 25 mg tablet.....180
Sleep Aid (diphenhydramine) 25 mg tablet 180
Sleep Aid (diphenhydramine) 50 mg capsule.....180
Sleep Aid (doxylamine) 25 mg tablet....180
Sleep Aid Max Strength (diphenhydramine) 50 mg capsule ..180
Sleep II 25 mg tablet 180
Sleep Tablet (diphenhydramine) 25 mg tablet.....180
Sleep-Tabs 25 mg tablet 180
Slynd 4 mg (28) tablet.....197
Smart Sense Lancets 21 gauge 360
Smart Sense Lancets 26 gauge 360
Smart Sense Lancets 33 gauge 360
Smart Sense Monitoring System.....360
Smart Sense Test Strips 344
SmartDiabetes Vantage 360
Smartest Eject kit.....360
Smartest Persona Starter kit.....360
Smartest Pronto Starter kit.....360
Smartest Protege kit.....360
Smartest Test strips 344
SmoothLax 17 gram oral powder packet 306
SmoothLax 17 gram/dose oral powder 306
sodium bicarbonate 325 mg tablet.....287
sodium bicarbonate 650 mg tablet.....287
sodium chloride 0.65 % nasal spray aerosol 433
sodium chloride 0.9 % (flush) injection syringe.....251
sodium chloride 0.9 % (flush) injection syringe with alcohol swab cap 251
sodium chloride 0.9 % for nebulization 185
sodium chloride 0.9 % injection solution 227
sodium chloride 0.9 % injection syringe 227
sodium chloride 0.9 % intravenous piggyback 251
sodium chloride 0.9 % intravenous solution 251
sodium chloride 0.9 % irrigation solution 228
sodium chloride 3 % for nebulization ...185
sodium citrate-citric acid 500 mg-334 mg/5 mL oral solution.....314
sodium fluoride 1.1 % dental cream.....397
sodium fluoride 1.1 % dental gel 397
sodium fluoride 1.1 %-potassium nitrate 5 % dental paste 397
Sodium Fluoride 5000 Plus 1.1 % dental cream 397
sodium phenylbutyrate 0.94 gram/gram oral powder 395
sodium phenylbutyrate 500 mg tablet .395
sodium polystyrene sulfonate (sorbitol free) 15 gram/60 mL oral susp.....227
sodium polystyrene sulfonate oral powder 227
Sof-Lax 100 mg capsule 310
sofosbuvir 400 mg-velpatasvir 100 mg tablet.....58
Sof-Sensor device 360
solifenacin 10 mg tablet 316
solifenacin 5 mg tablet 316
Soliqua 100/33 100 unit-33 mcg/mL subcutaneous insulin pen 263
Solo 400 mcg-80 mcg tablet 240
Solodyn 105 mg tablet,extended release 69
Solodyn 115 mg tablet,extended release 69
Solodyn 55 mg tablet,extended release .69
Solodyn 65 mg tablet,extended release .69
Solodyn 80 mg tablet,extended release .69
Solosec 2 gram oral DR granules in packet 44
Soltamox 20 mg/10 mL oral solution.....80
Solus V2 Audible Meter 360
Solus V2 Audible Meter kit 360
Solus V2 Lancing Device kit.....360
Solus V2 Test Strips.....344
Soma 250 mg tablet.....339
Soma 350 mg tablet.....339
Somatuline Depot 120 mg/0.5 mL subcutaneous syringe 282
Somatuline Depot 60 mg/0.2 mL subcutaneous syringe 282
Somatuline Depot 90 mg/0.3 mL subcutaneous syringe 282
Soolantra 1 % topical cream 223
Soothe (bismuth subsalicylate) 262 mg chewable tablet 290
Soothe Night Time Lubricant 80 %-20 % eye ointment 402
SootheNeb NBL100 Adult Mask.....393
SootheNeb NBL100 Child Mask 394
SootheNeb NBL100 Med Cup misc 394
SootheNeb NBL100 Mesh Cap.....394
Sorbugen NR 10 mg-100 mg/5 mL oral liquid 437
Soriatane 10 mg capsule.....212
Soriatane 25 mg capsule.....212
Sorilux 0.005 % topical foam 212
Sorine 120 mg tablet 99
Sorine 160 mg tablet 99
Sorine 240 mg tablet 99
Sorine 80 mg tablet 99
sotalol 120 mg tablet.....99
sotalol 160 mg tablet.....99
sotalol 240 mg tablet.....99
sotalol 80 mg tablet.....99
Sotalol AF 120 mg tablet.....99
Sotalol AF 160 mg tablet.....99
Sotalol AF 80 mg tablet.....99
Sotylize 5 mg/mL oral solution 99
Sovaldi 150 mg oral pellets in packet 58
Sovaldi 200 mg oral pellets in packet 58
Sovaldi 200 mg tablet 58
Sovaldi 400 mg tablet 58
Spectravite Adult 50 Plus 0.4 mg-300 mcg-250 mcg tablet 240
Spectravite Advanced Formula 18 mg-400 mcg tablet 244
Spectravite Men's 8 mg iron-200 mcg-600 mcg tablet 240
Spectravite Senior 500 mcg-300 mcg-250 mcg tablet 240
Spectravite Senior tablet 228
Spectravite Ultra Men 50+ 300 mcg-600 mcg-300 mcg tablet 240
Spectravite Ultra Men's Senior 300 mcg-600 mcg-300 mcg tablet 240
Spectravite Ultra Women 18 mg-400 mcg tablet.....244
Spectravite Ultra Women's Senior 8 mg iron-400 mcg-300 mcg tablet.....240
spinosad 0.9 % topical suspension 224
Spiriva Respimat 1.25 mcg/actuation solution for inhalation 424
Spiriva Respimat 2.5 mcg/actuation solution for inhalation 424
Spiriva with HandiHaler 18 mcg and inhalation capsules 424
spironolactone 100 mg tablet.....118
spironolactone 25 mg tablet.....118
spironolactone 25 mg-hydrochlorothiazide 25 mg tablet.....119
spironolactone 50 mg tablet.....118

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Sporanox 10 mg/mL oral solution 42
Sporanox 100 mg capsule 42
Sporanox Pulsepak 100 mg capsule.....42
Spravato 56 mg (28 mg x 2) nasal spray 141
Spravato 84 mg (28 mg x 3) nasal spray 141
Sprintec (28) 0.25 mg-35 mcg tablet 195
Spritam 1,000 mg tablet for oral suspension 139
Spritam 250 mg tablet for oral suspension 139
Spritam 500 mg tablet for oral suspension 139
Spritam 750 mg tablet for oral suspension 139
Sprix 15.75 mg/spray nasal spray 30
Sprycel 100 mg tablet 79
Sprycel 140 mg tablet 79
Sprycel 20 mg tablet 79
Sprycel 50 mg tablet 79
Sprycel 70 mg tablet 79
Sprycel 80 mg tablet 79
SPS (with sorbitol) 15 gram-20 gram/60 mL oral suspension 227
SPS (with sorbitol) 30 gram-40 gram/120 mL enema 227
Sronyx 0.1 mg-20 mcg tablet 195
SSD 1 % topical cream 213
SSS 10-5 10 %-5 % (w/w) topical cream203
SSS 10-5 10 %-5 % topical foam.....203
Stalevo 100 25 mg-100 mg-200 mg tablet 150
Stalevo 125 31.25 mg-125 mg-200 mg tablet.....150
Stalevo 150 37.5 mg-150 mg-200 mg tablet.....150
Stalevo 200 50 mg-200 mg-200 mg tablet 150
Stalevo 50 12.5 mg-50 mg-200 mg tablet 150
Stalevo 75 18.75 mg-75 mg-200 mg tablet 150
Starlix 120 mg tablet.....257
Starlix 60 mg tablet.....257
stavudine 15 mg capsule 47
stavudine 20 mg capsule 47
stavudine 30 mg capsule 47
stavudine 40 mg capsule 47
Steglatro 15 mg tablet 259
Steglatro 5 mg tablet 259
Steglujan 15 mg-100 mg tablet.....259
Steglujan 5 mg-100 mg tablet.....259
Stelara 130 mg/26 mL intravenous solution 300
Stelara 45 mg/0.5 mL subcutaneous solution 206
Stelara 45 mg/0.5 mL subcutaneous syringe.....206
Stelara 90 mg/mL subcutaneous syringe 206
Sterilance TL 30 gauge 360
Sterilance TL 32 gauge 360
Sterile Eye Drops 0.05 % 407
Sterile Pads 2 346
Sterile Pads 3 346
Sterile Pads 4 346
Sterile Saline 0.9 % irrigation solution ..228
Stimate 150 mcg/spray (0.1 mL) nasal spray 256
Stimulant Laxative Plus 8.6 mg-50 mg tablet.....309
Stiolto Respimat 2.5 mcg-2.5 mcg/actuation solution for inhalation 426
Stivarga 40 mg tablet.....77
Stomach Relief 262 mg chewable tablet 290
Stomach Relief 262 mg tablet.....290
Stomach Relief 525 mg/15 mL oral suspension 290
Stomach Relief Max Strength 525 mg/15 mL oral suspension 290
Stool Softener 100 mg capsule 310
Stool Softener 100 mg tablet.....310
Stool Softener 250 mg capsule 310
Stool Softener 50 mg/5 mL oral liquid ..310
Stool Softener 60 mg/15 mL oral syrup 310
Stool Softener-Laxative 8.6 mg-50 mg tablet.....309
Stool Softener-Stimulant Laxative 8.6 mg-50 mg tablet.....309
Strattera 10 mg capsule.....173
Strattera 100 mg capsule.....173
Strattera 18 mg capsule.....173
Strattera 25 mg capsule.....173
Strattera 40 mg capsule.....173
Strattera 60 mg capsule.....173
Strattera 80 mg capsule.....173
Stress Formula tablet.....229
Stribild 150 mg-150 mg-200 mg-300 mg tablet.....48
Striverdi Respimat 2.5 mcg/actuation solution for inhalation 424
Stromectol 3 mg tablet 40
Strovite Forte 10 mg-1 mg tablet 240
Strovite One 1 mg-1,000 unit-15 mg-5 mg tablet.....240
Stye Lubricant 57.7 %-31.9 % eye ointment 402
Sublocade 100 mg/0.5 mL solution,extended release subcutaneous syringe 183
Sublocade 300 mg/1.5 mL solution,extended release subcutaneous syringe 183
Suboxone 12 mg-3 mg sublingual film..183
Suboxone 2 mg-0.5 mg sublingual film.183
Suboxone 4 mg-1 mg sublingual film....183
Suboxone 8 mg-2 mg sublingual film....183
Subvenite 100 mg tablet.....138
Subvenite 150 mg tablet.....138
Subvenite 200 mg tablet.....138
Subvenite 25 mg tablet.....138
Subvenite Starter (Blue) Kit 25 mg (35) tablets in a dose pack 138
Subvenite Starter (Green) Kit 25 mg (84)-100 mg (14) tablet, dose pack 138
Subvenite Starter (Orange) Kit 25 mg (42)-100 mg (7) tablet, dose pack 138
sucralfate 1 gram tablet.....310
sucralfate 100 mg/mL oral suspension .310
Sudafed 12 Hour 120 mg tablet,extended release 440
Sudafed 30 mg tablet.....440
Sudafed PE 10 mg tablet.....440
Sudogest 12-hour 120 mg tablet,extended release 440
Sudogest 30 mg tablet 440
Sudogest 60 mg tablet 440
Sudogest PE 10 mg tablet 440
Sular 17 mg tablet,extended release....114
Sular 34 mg tablet,extended release....114
Sular 8.5 mg tablet,extended release...114
sulfacetamide sodium (acne) 10 % lotion (suspension).....202
sulfacetamide sodium 10 % eye drops .409
sulfacetamide sodium 10 % eye ointment 409
sulfacetamide sodium 10 % topical cleanser.....212
sulfacetamide sodium 10 % topical cleanser, gel 212
sulfacetamide sodium 9.8 %-sulfur 4.8 % topical cleanser.....203
sulfacetamide sodium-sulfur 10 %-2 % topical cleanser.....203
sulfacetamide sodium-sulfur 10 %-2 % topical cream 203

P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

sulfacetamide sodium-sulfur 10 %-4 % topical pads.....203
sulfacetamide sodium-sulfur 10 %-5 % (w/w) topical cleanser 203
sulfacetamide sodium-sulfur 10 %-5 % (w/w) topical cream.....203
sulfacetamide sodium-sulfur 8 %-4 % topical suspension 203
sulfacetamide sodium-sulfur 9 %-4 % topical cleanser.....203
sulfacetamide sodium-sulfur 9 %-4.5 % topical cleanser.....203
sulfacetamide sodium-sulfur-urea 10 %-5 %-10 % topical cleanser 203
sulfacetamide-prednisolone 10 %-0.23 % (0.25 %) eye drops 404
sulfadiazine 500 mg tablet.....66
sulfamethoxazole 200 mg-trimethoprim 40 mg/5 mL oral suspension.....40
sulfamethoxazole 400 mg-trimethoprim 80 mg tablet.....40
sulfamethoxazole 800 mg-trimethoprim 160 mg tablet.....40
Sulfamylon 50 gram topical packet 213
Sulfamylon 85 mg/g topical cream.....213
sulfasalazine 500 mg tablet 301
sulfasalazine 500 mg tablet,delayed release 301
Sulfatrim 200 mg-40 mg/5 mL oral suspension 40
sulindac 150 mg tablet 30
sulindac 200 mg tablet 30
Sumadan 9 %-4.5 % topical cleanser 203
Sumadan 9 %-4.5 % topical kit.....203
Sumadan XLT 9 %-4.5 %-SPF 25 topical pack,cleanser and cream 204
sumatriptan 100 mg tablet 177
sumatriptan 20 mg/actuation nasal spray 177
sumatriptan 25 mg tablet 177
sumatriptan 4 mg/0.5 mL subcutaneous cartridge (refill) 177
sumatriptan 4 mg/0.5 mL subcutaneous pen injector.....177
sumatriptan 5 mg/actuation nasal spray 177
sumatriptan 50 mg tablet 177
sumatriptan 6 mg/0.5 mL subcutaneous cartridge (refill) 177
sumatriptan 6 mg/0.5 mL subcutaneous pen injector.....177
sumatriptan 6 mg/0.5 mL subcutaneous solution 177
sumatriptan 6 mg/0.5 mL subcutaneous syringe.....177
sumatriptan 85 mg-naproxen 500 mg tablet.....178
Sumaxin 10 %-4 % topical pads 204
Sumaxin 9 %-4 % topical cleanser.....204
Sumaxin CP 10 %-4 % topical kit.....204
Sumaxin TS 8 %-4 % topical suspension204
Sunosi 150 mg tablet 179
Sunosi 75 mg tablet 179
Sunvite 18 mg iron-400 mcg-25 mcg tablet 240
Super Antioxidant capsule 240
Super Multiple - Low Iron 400 mcg tablet 240
Super Thera Vite M tablet 240
Super Thin Lancets.....360
Super Thin Lancets 28 gauge 360
Super Thin Lancets 30 gauge 360
Super Thin Lancets 33 gauge 360
Suphedrin 12 Hour 120 mg tablet,extended release.....440
Suphedrin 15 mg/5 mL oral liquid 440
Suphedrin 30 mg tablet 440
Suphedrine 12 Hour 120 mg tablet,extended release.....440
Suphedrine 30 mg tablet 440
Suphedrine PE 10 mg tablet 440
Suppository Adult rectal 306
Suprax 100 mg chewable tablet 54
Suprax 100 mg/5 mL oral suspension.....54
Suprax 200 mg chewable tablet 54
Suprax 200 mg/5 mL oral suspension.....54
Suprax 400 mg capsule 54
Suprax 500 mg/5 mL oral suspension.....54
Supreme Test strips 344
Sure Comfort Insulin Syringe 0.3 mL 29 gauge x 1/2 379
Sure Comfort Insulin Syringe 0.3 mL 30 gauge x 1/2 379
Sure Comfort Insulin Syringe 0.3 mL 30 gauge x 5/16 379
Sure Comfort Insulin Syringe 0.3 mL 31 gauge x 5/16 379
Sure Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2 379
Sure Comfort Insulin Syringe 0.5 mL 30 gauge x 5/16 379
Sure Comfort Insulin Syringe 0.5 mL 31 gauge x 5/16 379
Sure Comfort Insulin Syringe 1 mL 28 gauge x 1/2 379
Sure Comfort Insulin Syringe 1 mL 29 gauge x 1/2 379
Sure Comfort Insulin Syringe 1 mL 30 gauge x 1/2 379
Sure Comfort Insulin Syringe 1 mL 30 gauge x 5/16 379
Sure Comfort Insulin Syringe 1 mL 31 gauge x 5/16 379
Sure Comfort Insulin Syringe 1/2 mL 28 gauge x 1/2 379
Sure Comfort Insulin Syringe U-100 0.5 mL 29 gauge x 1/2 379
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Sure Comfort Lancing Pen 360
Sure Comfort Pen Needle 29 gauge x 1/2 379
Sure Comfort Pen Needle 30 gauge x 5/16 379
Sure Comfort Pen Needle 31 gauge x 3/16 379
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Sure Comfort Pen Needle 32 gauge x 1/4 380
Sure Comfort Pen Needle 32 gauge x 5/32 380
Sure Edge Blood Glucose Meter 360
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Sure-Fine Pen Needles 29 gauge x 1/2 .380
Sure-Fine Pen Needles 31 gauge x 3/16 380
Sure-Fine Pen Needles 31 gauge x 5/16 380
Sureflex Lancing Device 360
Sureflex Lancing Device with Lancets kit 360
Sure-Ject Insulin Syringe 0.3 mL 29 gauge x 1/2.....380
Sure-Ject Insulin Syringe 0.3 mL 30 gauge x 5/16.....380
Sure-Ject Insulin Syringe 0.5 mL 29 gauge x 1/2.....380
Sure-Ject Insulin Syringe 0.5 mL 30 gauge x 5/16.....380
Sure-Ject Insulin Syringe 1 mL 28 gauge x 1/2.....380
Sure-Ject Insulin Syringe 1 mL 29 gauge x 1/2.....380
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Syeda 3 mg-0.03 mg tablet 195
Symbicort 160 mcg-4.5 mcg/actuation HFA aerosol inhaler.....428
Symbicort 80 mcg-4.5 mcg/actuation HFA aerosol inhaler 428
Symbyax 3 mg-25 mg capsule.....146
Symbyax 6 mg-25 mg capsule.....146
Symdeko 100 mg-150 mg (day)/150 mg (night) tablets 429
Symdeko 50 mg-75 mg (day)/75 mg (night) tablets 429
Symfi 600 mg-300 mg-300 mg tablet 49
Symfi Lo 400 mg-300 mg-300 mg tablet.49
Symjepi 0.15 mg/0.3 mL injection syringe (for 33 lb to 66 lb patients) 116
Symjepi 0.3 mg/0.3 mL injection syringe 116
SymlinPen 120 2,700 mcg/2.7 mL subcutaneous pen injector 261
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Sympazan 10 mg oral film.....129
Sympazan 20 mg oral film.....129
Sympazan 5 mg oral film.....129
Symproic 0.2 mg tablet.....37
Symtuza 800 mg-150 mg-200 mg-10 mg tablet.....48
Synalar 0.01 % topical solution.....217
Synalar 0.025 % topical cream.....217
Synalar 0.025 % topical ointment.....218
Synalar Cream Kit 0.025 % topical 219
Synalar Ointment Kit 0.025 % topical pack,ointment and cream.....219
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Synarel 2 mg/mL nasal spray 279
Synera 70 mg-70 mg patch 223
Synjardy 12.5 mg-1,000 mg tablet.....258
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Synthroid 112 mcg tablet 285
Synthroid 125 mcg tablet 285
Synthroid 137 mcg tablet 285
Synthroid 150 mcg tablet 285
Synthroid 175 mcg tablet 285
Synthroid 200 mcg tablet 285
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Systane Nighttime 94 %-3 % eye ointment 402

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Taclonex 0.005 %-0.064 % topical ointment 206
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Tactinal 325 mg tablet 23
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tadalafil 20 mg tablet (pulmonary hypertension).....124
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Tagrisso 40 mg tablet.....70
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Takhzyro 300 mg/2 mL (150 mg/mL) subcutaneous solution.....122
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Tamiflu 30 mg capsule 59
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Tamiflu 6 mg/mL oral suspension.....59
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Tapazole 10 mg tablet 264
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TaperDex 1.5 mg (21 tabs) tablets in a dose pack 272
TaperDex 1.5 mg (27 tabs) tablets in a dose pack 272
TaperDex 1.5 mg (49 tabs) tablets in a dose pack 272
Tarceva 100 mg tablet 69
Tarceva 150 mg tablet 69
Tarceva 25 mg tablet 69
Targretin 1 % topical gel 211
Targretin 75 mg capsule 80
Tarina 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet.....195
Tarina Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet 195
Tarina Fe 1-20 EQ (28) 1 mg-20 mcg (21)/75 mg (7) tablet 196
Tarka 2 mg-180 mg tablet, extended release 86
Tarka 2 mg-240 mg tablet, extended release 86
Tarka 4 mg-240 mg tablet, extended release 86
Taron-C DHA 35 mg-1 mg-200 mg capsule 240
Taron-Crystals 3,300 mg-1,002 mg oral packet 314
Tasigna 150 mg capsule 79
Tasigna 200 mg capsule 79
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Tasmar 100 mg tablet.....151
Tasoprol 0.05 %-4 218
tavaborole 5 % topical solution with applicator.....210
Tavalisse 100 mg tablet 319
Tavalisse 150 mg tablet 319
Taytulla 1 mg-20 mcg (24)/75 mg (4) capsule.....196
tazarotene 0.1 % topical cream 222
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Tazicef 1 gram intravenous solution.....54
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Tazicef 2 gram intravenous solution.....54
Tazicef 2 gram solution for injection 55
Tazicef 6 gram solution for injection 55
Tazorac 0.05 % topical cream 212
Tazorac 0.05 % topical gel 212
Tazorac 0.1 % topical cream 212
Tazorac 0.1 % topical gel 212
Taztia XT 120 mg capsule,extended release 111
Taztia XT 180 mg capsule,extended release 111
Taztia XT 240 mg capsule,extended release 111
Taztia XT 300 mg capsule,extended release 112
Taztia XT 360 mg capsule,extended release 112
Tazverik 200 mg tablet 75
TDVAX 2 Lf unit-2 Lf unit/0.5 mL intramuscular suspension.....83
Tears Again (PVA) 1.4 % eye drops 402
Tears Again 80 %-20 % eye ointment ...402
Tears Naturale PM 94 %-3 % eye ointment 402
Tecfidera 120 mg (14)-240 mg (46) capsule,delayed release.....400
Tecfidera 120 mg capsule,delayed release 400
Tecfidera 240 mg capsule,delayed release 400
TechLITE Insulin Syringe (half unit) 0.3 mL 29 gauge x 1/2 380
TechLITE Insulin Syringe (half unit) 0.3 mL 30 gauge x 1/2 380
TechLITE Insulin Syringe (half unit) 0.3 mL 30 gauge x 5/16 380
TechLITE Insulin Syringe (half unit) 0.3 mL 31 gauge x 15/64 380
TechLITE Insulin Syringe (half unit) 0.3 mL 31 gauge x 5/16 380
TechLITE Insulin Syringe (half unit) 0.5 mL 29 gauge x 1/2 380
TechLITE Insulin Syringe (half unit) 0.5 mL 30 gauge x 1/2 381
TechLITE Insulin Syringe (half unit) 0.5 mL 30 gauge x 5/16 381
TechLITE Insulin Syringe (half unit) 0.5 mL 31 gauge x 15/64 381
TechLITE Insulin Syringe (half unit) 0.5 mL 31 gauge x 5/16 381
TechLITE Insulin Syringe 1 mL 29 gauge x 1/2.....381
TechLITE Insulin Syringe 1 mL 30 gauge x 1/2.....381
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TechLITE Insulin Syringe 1 mL 31 gauge x 15/64.....381
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TechLITE Lancets 25 gauge 360
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TechLITE Pen Needle 29 gauge x 1/2....381
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TechLITE Pen Needle 31 gauge x 5/16..381
TechLITE Pen Needle 32 gauge x 1/4....381
TechLITE Pen Needle 32 gauge x 5/32..381
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Tegretol 100 mg/5 mL oral suspension 134
Tegretol 200 mg tablet 134
Tegretol XR 100 mg tablet,extended release 134
Tegretol XR 200 mg tablet,extended release 134
Tegretol XR 400 mg tablet,extended release 134
Tegsedi 284 mg/1.5 mL subcutaneous syringe.....254
Tekturna 150 mg tablet 124
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Tekturna HCT 150 mg-12.5 mg tablet...124
Tekturna HCT 150 mg-25 mg tablet.....124
Tekturna HCT 300 mg-12.5 mg tablet...124
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telmisartan 40 mg-hydrochlorothiazide 12.5 mg tablet.....94
telmisartan 80 mg tablet 96
telmisartan 80 mg-amlodipine 10 mg tablet.....92
telmisartan 80 mg-amlodipine 5 mg tablet 92
telmisartan 80 mg-hydrochlorothiazide 12.5 mg tablet.....94
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temazepam 15 mg capsule 181
temazepam 22.5 mg capsule 181
temazepam 30 mg capsule 181
temazepam 7.5 mg capsule 181
Temixys 300 mg-300 mg tablet 46
Temodar 100 mg capsule.....70
Temodar 140 mg capsule.....70
Temodar 180 mg capsule.....70
Temodar 250 mg capsule.....70
Temovate 0.05 % topical cream 218
Temovate 0.05 % topical ointment.....218
temozolomide 100 mg capsule.....70
temozolomide 140 mg capsule.....71
temozolomide 180 mg capsule.....71
temozolomide 20 mg capsule.....71
temozolomide 250 mg capsule.....71
temozolomide 5 mg capsule.....71
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular suspension.....83
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular syringe 83
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Tenoretic 100 100 mg-25 mg tablet 115
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Tenormin 100 mg tablet 107
Tenormin 25 mg tablet 107
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Tera-Gel Tar Shampoo 0.5 % 220
terazosin 1 mg capsule 121
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terbinafine HCl 250 mg tablet 41
terbutaline 2.5 mg tablet.....426
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terconazole 0.4 % vaginal cream 441
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Tessalon Perles 100 mg capsule 420
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Testim 50 mg/5 gram (1 %) transdermal gel 255
testosterone 1 % (25 mg/2.5 gram) transdermal gel packet 255
testosterone 1 % (50 mg/5 gram) transdermal gel packet 255
testosterone 1.62 % (40.5 mg/2.5 gram) transdermal gel packet 255
testosterone 10 mg/0.5 gram/actuation transdermal gel pump 255
testosterone 12.5 mg/1.25 gram per actuation (1%) transdermal gel pump 255
testosterone 20.25 mg/1.25 gram (1.62 %) transdermal gel pump 255
testosterone 30 mg/actuation (1.5 mL) transderm solution metered pump .255
testosterone 50 mg/5 gram (1 %) transdermal gel.....255
testosterone cypionate 100 mg/mL intramuscular oil 255
testosterone cypionate 200 mg/mL intramuscular oil 255
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tetanus,diphtheria toxoid ped (PF) 5 Lf unit-25 Lf unit/0.5 mL IM susp.....83
tetanus-diphtheria toxoids-Td 2 Lf unit-2 Lf unit/0.5 mL IM suspension.....83
tetrabenazine 12.5 mg tablet 178
tetrabenazine 25 mg tablet 178
tetracaine 0.5 % eye drops 408
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Tetrix topical cream 222
Texacort 2.5 % topical solution.....218
Thalomid 100 mg capsule 43
Thalomid 150 mg capsule 43
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Thera tablet 244
Thera-Gel 0.5 % shampoo.....220
Theragran-M Premier 50 Plus 400 mcg-250 mcg-375 mcg tablet 240
Theralogix Companion 0.4 mg tablet....240
Thera-M 27 mg-0.4 mg tablet.....240
Thera-M 9 mg iron-400 mcg tablet.....241
Thera-M tablet.....241
Therapeutic M + beta-Carotene 18 mg-0.4 mg tablet.....241
Therapeutic Shampoo 0.5 %.....221
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Thera-Tabs M 27 mg iron-400 mcg tablet 241
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Theratrum Complete 50 Plus(lycopene,lutein) 0.4 mg-300 mcg-250 mcg tab 241
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Therems Multivitamin 400 mcg tablet .244
Therems-H 27 mg-0.33 mg tablet.....241
Therems-M 27 mg-0.4 mg tablet.....241
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Thiola 100 mg tablet.....311
Thiola EC 100 mg tablet,delayed release 311
Thiola EC 300 mg tablet,delayed release 311
thioridazine 10 mg tablet 160
thioridazine 100 mg tablet 160
thioridazine 25 mg tablet 160
thioridazine 50 mg tablet 160
thiothixene 1 mg capsule.....160
thiothixene 10 mg capsule.....160
thiothixene 2 mg capsule.....160
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Threshold IMT Trainer device.....394
Thrivite Rx 29 mg iron-1 mg tablet 249
Thyquidity 20 mcg/mL oral solution.....285
thyroid (pork) 120 mg tablet 282
thyroid (pork) 15 mg tablet 282
thyroid (pork) 30 mg tablet 283
thyroid (pork) 60 mg tablet 283
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Tiadylt ER 120 mg capsule,extended release 112
Tiadylt ER 180 mg capsule,extended release 112
Tiadylt ER 240 mg capsule,extended release 112
Tiadylt ER 300 mg capsule,extended release 112
Tiadylt ER 360 mg capsule,extended release 112
Tiadylt ER 420 mg capsule,extended release 112
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Tiazac 120 mg capsule,extended release 112
Tiazac 180 mg capsule,extended release 112
Tiazac 240 mg capsule,extended release 112
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Tibsovo 250 mg tablet 77
Tigan 300 mg capsule 291
Tiglutik 50 mg/10 mL oral suspension ..337
Tikosyn 125 mcg capsule 100
Tikosyn 250 mcg capsule 100
Tikosyn 500 mcg capsule 100
Tilia Fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet.....198
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timolol 20 mg tablet 109
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timolol maleate (PF) 0.5 % eye drops in a dropperette 407
timolol maleate 0.25 % eye drops 407
timolol maleate 0.25 % eye gel forming solution 407
timolol maleate 0.5 % eye drops 407
timolol maleate 0.5 % eye gel forming solution 407
timolol maleate 0.5 % once daily eye drops.....407

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Timoptic 0.25 % eye drops 407
Timoptic 0.5 % eye drops 407
Timoptic Ocudose (PF) 0.25 % eye drops in a dropperette.....408
Timoptic Ocudose (PF) 0.5 % eye drops in a dropperette.....408
Timoptic-XE 0.25 % eye gel.....408
Timoptic-XE 0.5 % eye gel.....408
tinidazole 250 mg tablet.....44
tinidazole 500 mg tablet.....44
Tirosint 100 mcg capsule 285
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Tirosint 137 mcg capsule 285
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Tirosint 200 mcg capsule 285
Tirosint 25 mcg capsule 286
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Tirosint-Sol 150 mcg/mL oral solution..286
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Tirosint-Sol 200 mcg/mL oral solution..286
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Tirosint-Sol 50 mcg/mL oral solution....286
Tirosint-Sol 75 mcg/mL oral solution....286
Tirosint-Sol 88 mcg/mL oral solution....286
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Tivicay 25 mg tablet.....45
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Tivorbex 20 mg capsule 33
Tivorbex 40 mg capsule 33
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tizanidine 2 mg tablet.....339
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Tobi 300 mg/5 mL solution for nebulization 428
Tobi Podhaler 28 mg capsule with inhalation device.....428
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TobraDex 0.3 %-0.1 % eye drops,suspension.....404
TobraDex 0.3 %-0.1 % eye ointment 404
Tobradex ST 0.3 %-0.05 % eye drops,suspension.....404
tobramycin 0.3 % eye drops 409
tobramycin 0.3 %-dexamethasone 0.1 % eye drops,suspension 404
tobramycin 1.2 gram solution for injection 38
tobramycin 10 mg/mL injection solution38
tobramycin 300 mg/4 mL solution for nebulization 429
tobramycin 300 mg/5 mL in 0.225 % sodium chloride for nebulization.....429
tobramycin 40 mg/mL injection solution38
tobramycin with nebulizer 300 mg/5 mL solution for nebulization.....429
Tobrex 0.3 % eye drops 409
Tobrex 0.3 % eye ointment.....409
Tofranil 10 mg tablet 149
Tofranil 25 mg tablet 149
Tofranil 50 mg tablet 149
tolbutamide 500 mg tablet.....260
tolcapone 100 mg tablet.....151
tolmetin 200 mg tablet 30
tolmetin 400 mg capsule 30
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Tolsura 65 mg oral solid dispersion capsule 42
tolterodine 1 mg tablet.....317
tolterodine 2 mg tablet.....317
tolterodine ER 2 mg capsule,extended release 24 hr 317
tolterodine ER 4 mg capsule,extended release 24 hr 317
tolvaptan 15 mg tablet 120
tolvaptan 30 mg tablet 120
Topamax 100 mg tablet.....135
Topamax 15 mg sprinkle capsule.....135
Topamax 200 mg tablet.....135
Topamax 25 mg sprinkle capsule.....135
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Topcare Clickfine 31 gauge x 1/4.....381
Topcare Clickfine 31 gauge x 5/16.....381
Topcare Ultra Comfort 0.3 mL 29 gauge x 1/2.....381
Topcare Ultra Comfort 0.3 mL 30 gauge x 5/16.....381
Topcare Ultra Comfort 0.3 mL 31 gauge x 5/16.....381
Topcare Ultra Comfort 0.5 mL 29 gauge x 1/2.....382
Topcare Ultra Comfort 0.5 mL 30 gauge x 5/16.....382
Topcare Ultra Comfort 0.5 mL 31 gauge x 5/16.....382
Topcare Ultra Comfort 1 mL 29 gauge x 1/2.....382
Topcare Ultra Comfort 1 mL 30 gauge x 5/16.....382
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Topicort 0.05 % topical cream 218
Topicort 0.05 % topical gel 218
Topicort 0.05 % topical ointment 218
Topicort 0.25 % topical cream 218
Topicort 0.25 % topical ointment 218
Topicort 0.25 % topical spray 218
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topiramate 15 mg sprinkle capsule 135
topiramate 200 mg tablet.....135
topiramate 25 mg sprinkle capsule 135
topiramate 25 mg tablet.....135
topiramate 50 mg tablet.....135
topiramate XR 100 mg capsule sprinkle,extended release 24 hr 135
topiramate XR 150 mg capsule sprinkle,extended release 24 hr 135
topiramate XR 200 mg capsule sprinkle,extended release 24 hr 135
topiramate XR 25 mg capsule sprinkle,extended release 24 hr 135
topiramate XR 50 mg capsule sprinkle,extended release 24 hr 135
Toprol XL 100 mg tablet,extended release 107
Toprol XL 200 mg tablet,extended release 107
Toprol XL 25 mg tablet,extended release 107
Toprol XL 50 mg tablet,extended release 107
toremifene 60 mg tablet.....80
torsemide 10 mg tablet 119
torsemide 100 mg tablet 119
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Tosymra 10 mg/actuation nasal spray..177
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Toujeo Max U-300 SoloStar 300 unit/mL (3 mL) subcutaneous insulin pen 276
Toujeo SoloStar U-300 Insulin 300 unit/mL (1.5 mL) subcutaneous pen.....276
Tovet Emollient 0.05 % topical foam....218
Tovet Kit 0.05 % foam and cream, topical pack.....219
Toviaz 4 mg tablet,extended release....317

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Toviaz 8 mg tablet,extended release....317
T-Plus 0.5 % shampoo.....221
Tracleer 125 mg tablet.....124
Tracleer 32 mg tablet for oral suspension 124
Tracleer 62.5 mg tablet.....124
Tradjenta 5 mg tablet 257
tramadol 100 mg tablet 14
tramadol 37.5 mg-acetaminophen 325 mg tablet.....19
tramadol 50 mg tablet 14
tramadol ER 100 mg capsule 24h,extended release(25-75).....14
tramadol ER 100 mg tablet,extended release 24 hr 14
tramadol ER 100 mg tablet,extended release 24hr mphase 14
tramadol ER 200 mg capsule 24h,extended release(25-75).....14
tramadol ER 200 mg tablet,extended release 24 hr 14
tramadol ER 200 mg tablet,extended release 24hr mphase 14
tramadol ER 300 mg capsule 24 hr,extended release.....14
tramadol ER 300 mg tablet,extended release 24 hr 14
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trandolapril 1 mg tablet.....89
trandolapril 1 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr 86
trandolapril 2 mg tablet.....90
trandolapril 2 mg-verapamil ER 180 mg tablet,immed-exten release 24 hr 86
trandolapril 2 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr 87
trandolapril 4 mg tablet.....90
trandolapril 4 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr 87
tranexamic acid 650 mg tablet 330
Transderm-Scop 1.5 mg transdermal patch (1 mg over 3 days) 290
Tranxene T-Tab 7.5 mg tablet.....126
tranylcypromine 10 mg tablet 141
Travatan Z 0.004 % eye drops.....410
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trazodone 100 mg tablet 143
trazodone 150 mg tablet 143
trazodone 300 mg tablet 143
trazodone 50 mg tablet 144
Trecator 250 mg tablet 50
Trelegy Ellipta 100 mcg-62.5 mcg-25 mcg powder for inhalation 428
Trelegy Ellipta 200 mcg-62.5 mcg-25 mcg powder for inhalation 428
Tremfya 100 mg/mL subcutaneous auto-injector.....206
Tremfya 100 mg/mL subcutaneous syringe 206
treprostinil sodium 1 mg/mL injection solution 123
treprostinil sodium 10 mg/mL injection solution 123
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Tri-Linyah (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet.....198
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verapamil ER (SR) 240 mg tablet,extended release 114
verapamil ER 120 mg 24 hr capsule,extended release 115
verapamil ER 180 mg 24 hr capsule,extended release 115
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P	NP	AL	PA	APA	QL	SP	ST	RX/OTC	MT
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Verelan PM 200 mg capsule, extended release 115
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Verzenio 200 mg tablet 74
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Vesicare LS 1 mg/mL oral suspension...316
Vestura (28) 3 mg-0.02 mg tablet.....196
Vfend 200 mg tablet 42
Vfend 200 mg/5 mL (40 mg/mL) oral suspension 42
Vfend 50 mg tablet 42
V-GO 20 device 394
V-GO 30 device 394
V-GO 40 device 394
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Vicks DayQuil Cold and Flu Relief 5 mg-10 mg-325 mg capsule.....434
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Victory Glucose Test strips 345
Victoza 2-Pak 0.6 mg/0.1 mL (18 mg/3 mL) subcutaneous pen injector 262
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Videx EC 125 mg capsule,delayed release 47
Videx EC 200 mg capsule,delayed release 47
Videx EC 250 mg capsule,delayed release 47
Videx EC 400 mg capsule,delayed release 47
Viekira Pak 12.5 mg-75 mg-50 mg/250 mg tablets in a dose pack 58
Vienva 0.1 mg-20 mcg tablet.....196
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vigabatrin 500 mg tablet.....132
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Vigamox 0.5 % eye drops.....409
Viibryd 10 mg (7)-20 mg (23) tablets in a dose pack 146
Viibryd 10 mg tablet 146
Viibryd 20 mg tablet 146
Viibryd 40 mg tablet 146
Vimovo 375 mg-20 mg tablet,immediate and delay release 29
Vimovo 500 mg-20 mg tablet,immediate and delay release 29
Vimpat 10 mg/mL oral solution 130
Vimpat 100 mg tablet 130
Vimpat 150 mg tablet 130
Vimpat 200 mg tablet 130
Vimpat 50 mg tablet 130
Vinate DHA RF 27 mg iron-1.13 mg-581.28 mg capsule 244
Viokace 10,440 unit-39,150 unit-39,150 unit tablet 294
Viokace 20,880 unit-78,300 unit-78,300 unit tablet 294
Viorele (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 189
Viracept 250 mg tablet 66
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Viramune 200 mg tablet.....46
Viramune 50 mg/5 mL oral suspension ..46
Viramune XR 400 mg tablet,extended release 46
Virazole 6 gram solution for inhalation ..66
Viread 150 mg tablet 48
Viread 200 mg tablet 48
Viread 250 mg tablet 48
Viread 300 mg tablet 48
Viread 40 mg/scoop (40 mg/gram) oral powder.....48
Virt-C DHA 35 mg-1 mg-200 mg capsule 241
Virt-Caps 1 mg capsule 226
Virt-Nate 28 mg iron-1 mg tablet 250
Virt-Nate DHA 28 mg iron-1 mg-200 mg capsule.....250
Virt-Phos 250 Neutral 250 mg tablet....313
Virt-PN 27 mg-1 mg tablet.....250
Virt-PN DHA 27 mg iron-1 mg-300 mg capsule.....244
Virt-PN Plus 28 mg-1 mg-300 mg capsule 241
VirtPrex 26 mg-1.2 mg-55 mg-300 mg capsule.....250
Virt-Select 29 mg-1.25 mg-55 mg-325 mg capsule.....250
Virtussin AC 10 mg-100 mg/5 mL oral liquid 438
Virtussin DAC 30 mg-10 mg-100 mg/5 mL oral syrup 438
Visine 0.05 % eye drops 407
Vision Formula (with lutein) 1,000 unit-200 mg-60 unit-2mg tablet 241
Vision Formula(A-C-E-Zn-Se-Cu) 1,000 unit-60 mg-30 unit tablet.....241
Vision Formula-2 250 mg-90 mg-40 mg-1 mg capsule 5
Vision Plus Lutein tablet 228
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Vistaril 25 mg capsule.....125
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Vitabex Plus 500 mcg-25 mg-10 mg capsule.....241
Vitacel (with Lutein) 800 mcg-250 mcg-750 mcg tablet 241
Vitafol Fe Plus 90 mg iron-1 mg-200 mg capsule.....250
Vitafol Gummies 3.33 mg iron-0.33 mg chewable tablet 250
Vitafol Nano 18 mg iron-1 mg tablet 250
Vitafol Ultra 29 mg iron-1 mg-200 mg capsule.....250
Vitafol-OB 65 mg-1 mg tablet.....250
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Vitafol-One 29 mg iron-1 mg-200 mg capsule.....250
Vitamin D2 1,250 mcg (50,000 unit) capsule.....253
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Vitamin D3 Complete 18 mg iron-800 mcg-150 mg tablet.....227

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Vitamins A-D-E with selenium 10,000 unit-400 unit tablet 241
Vitamins and Minerals tablet 242
Vitasure 1 mg-100 mg-300 mcg tablet .226
Vitatrum 18 mg-500 mcg-300 mcg-250 mcg tablet 242
Vitrakvi 100 mg capsule.....80
Vitrakvi 20 mg/mL oral solution 80
Vitrakvi 25 mg capsule.....80
Vitrum Senior 500 mcg-300 mcg-250 mcg tablet.....242
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VivaGuard Ino Test Strip 345
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Vivelle-Dot 0.025 mg/24 hr transdermal patch 269
Vivelle-Dot 0.0375 mg/24 hr transdermal patch 269
Vivelle-Dot 0.05 mg/24 hr transdermal patch 269
Vivelle-Dot 0.075 mg/24 hr transdermal patch 269
Vivelle-Dot 0.1 mg/24 hr transdermal patch 269
Vivitrol 380 mg intramuscular suspension,extended release 184
Vivlodex 10 mg capsule 31
Vivlodex 5 mg capsule 31
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Vizimpro 45 mg tablet 70
Vocabria 30 mg tablet.....45
Vocal Point strips 345
Vogelxo 1 % (50 mg/5 gram) transdermal gel packet.....255
Vogelxo 12.5 mg/1.25 gram per pump actuation (1 %) transdermal gel.....255
Vogelxo 50 mg/5 gram (1 %) transdermal gel 255
Vol-Care Rx 1 mg-60 mg-300 mcg tablet 226
Volnea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet 189
Voltaren 1 % topical gel 221
Vonvendi 1,300 (+/-) unit range intravenous solution 330
Vonvendi 650 (+/-) unit range intravenous solution 330
Vopac MDS 1.5 % topical kit 221
voriconazole 200 mg tablet 42
voriconazole 200 mg/5 mL (40 mg/mL) oral suspension 42
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Vortex Holding Chamber 394
Vortex VHC Frog Mask-Child.....394
Vosevi 400 mg-100 mg-100 mg tablet....58
Votrient 200 mg tablet 79
VP-CH Plus 29 mg iron-1 mg-50 mg-265 mg capsule 250
VP-GGR-B6 1.2 mg-40 mg-124.1 mg-100 mg tablet.....251
VP-Heme OB 28 mg-6 mg-1 mg tablet..250
VP-HEME One 22 mg-6 mg-1 mg-200 mg capsule 250
VP-PNV-DHA 28 mg iron-1 mg-200 mg capsule 250
VP-Vite Rx 1 mg-60 mg-300 mcg tablet 226
VP-Zel 600 mg-5 mg-10 mg-5 mg-1.5 mg tablet.....227
Vraylar 1.5 mg (1)-3 mg (6) capsules in a dose pack 164
Vraylar 1.5 mg capsule.....164
Vraylar 3 mg capsule.....164
Vraylar 4.5 mg capsule.....164
Vraylar 6 mg capsule.....164
Vtol LQ 50 mg-325 mg-40 mg/15 mL oral solution 24
Vumerity 231 mg capsule,delayed release 400
Vusion 0.25 %-15 %-81.35 % topical ointment 210
Vyepti 100 mg/mL intravenous solution 175
Vyfemla (28) 0.4 mg-35 mcg tablet 196
VyLibra 0.25 mg-35 mcg tablet.....196
Vyndamax 61 mg capsule 254
Vyndaqel 20 mg capsule 254
Vytorin 10 mg-10 mg tablet.....106
Vytorin 10 mg-20 mg tablet.....106
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Vyvanse 10 mg chewable tablet 172
Vyvanse 20 mg capsule.....172
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Wal-Fex Allergy 60 mg tablet.....419
Wal-Finate 4 mg tablet 417
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Wal-Mucil Fiber (sugar) 3.4 gram/7 gram oral powder 304
Wal-Mucil Fiber 0.52 gram capsule 304
Wal-Mucil Natural Fiber Laxative 3.4 gram/12 gram oral powder.....304
Wal-phed 12 hour 120 mg tablet,extended release 440
Wal-phed 30 mg tablet.....440
Wal-Phed D 120 mg tablet,extended release 440
Wal-phed PE 10 mg tablet.....440
Wal-Profen Cold-Sinus 30 mg-200 mg tablet.....430
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Wal-Tussin DM 10 mg-100 mg/5 mL oral syrup 438
Wal-Zyr (cetirizine) 1 mg/mL oral solution 419
Wal-Zyr (cetirizine) 10 mg tablet 419
Wal-Zyr D 5 mg-120 mg tablet,extended release 413
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warfarin 10 mg tablet 318
warfarin 2 mg tablet 318
warfarin 2.5 mg tablet 318
warfarin 3 mg tablet 318
warfarin 4 mg tablet 318

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warfarin 6 mg tablet 318
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WaveSense Jazz strips 345
WaveSense Presto 363
WaveSense Presto kit 363
WaveSense Presto strips 345
Webcol topical pads 81
Weekly-D 1,250 mcg (50,000 unit) capsule 253
WelChol 3.75 gram oral powder packet 101
WelChol 625 mg tablet 101
Wellbutrin SR 100 mg tablet, 12 hr sustained-release 147
Wellbutrin SR 150 mg tablet, 12 hr sustained-release 147
Wellbutrin SR 200 mg tablet, 12 hr sustained-release 147
Wellbutrin XL 150 mg 24 hr tablet, extended release 147
Wellbutrin XL 300 mg 24 hr tablet, extended release 147
Wera (28) 0.5 mg-35 mcg tablet 196
WesTab Plus 27 mg iron-1 mg tablet 250
WestGel DHA 31 mg iron-1 mg-200 mg capsule 250
Whole Source Multi-Vitamins tablet 242
Wilate 1,000 unit-1,000 unit intravenous solution 327
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WINDMILL TRAINER device 394
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Wixela Inhub 100 mcg-50 mcg/dose powder for inhalation 428
Wixela Inhub 250 mcg-50 mcg/dose powder for inhalation 428
Wixela Inhub 500 mcg-50 mcg/dose powder for inhalation 428
Woman's Laxative (bisacodyl) 5 mg tablet 308
Woman's Laxative (bisacodyl) 5 mg tablet,delayed release 308
Women's 50 Plus Daily Formula 400 mcg-500 mg calcium-20 mcg tablet 242
Women's 50 Plus Multivitamin 400 mcg-500 mg calcium-20 mcg tablet 242
Women's Active 18 mg iron-400 mcg-180 mg tablet 242
Women's Daily Caplet 27 mg iron-400 mcg 242
Women's Daily Formula 18 mg iron-400 mcg-500 mg Ca tablet 242
Women's Daily Formula 18 mg iron-400 mcg-500 mg tablet 242
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Women's Gentle Laxative (bisacodyl) 5 mg tablet,delayed release 308
Women's Laxative (bisacodyl) 5 mg tablet 308
Women's Laxative (bisacodyl) 5 mg tablet,delayed release 308
Women's Multivitamin 18 mg iron-400 mcg-500 mg tablet 242
Women's Multivitamin 18 mg-400 mcg-500 mg-50 mcg tablet 242
Womens Multivitamin High Potency 13.5 mg-200 mcg-250 mcg tablet 242
Women's One Daily 18 mg iron-400 mcg-500 mg Ca tablet 242
Wymzya Fe 0.4 mg-35 mcg (21)/75 mg (7) chewable tablet 196

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Xadago 100 mg tablet 152
Xadago 50 mg tablet 152
Xalatan 0.005 % eye drops 410
Xalkori 200 mg capsule 71
Xalkori 250 mg capsule 71
Xanax 0.25 mg tablet 126
Xanax 0.5 mg tablet 127
Xanax 1 mg tablet 127
Xanax 2 mg tablet 127
Xanax XR 0.5 mg tablet,extended release 127
Xanax XR 1 mg tablet,extended release 127
Xanax XR 2 mg tablet,extended release 127
Xanax XR 3 mg tablet,extended release 127
Xarelto 10 mg tablet 319
Xarelto 15 mg tablet 319
Xarelto 2.5 mg tablet 319
Xarelto 20 mg tablet 319
Xarelto DVT-PE Treatment 30-Day Starter 15 mg(42)-20 mg(9) tablet pack 319
Xatmep 2.5 mg/mL oral solution 72
Xcopri 100 mg tablet 140
Xcopri 150 mg tablet 140
Xcopri 200 mg tablet 140
Xcopri 50 mg tablet 140
Xcopri Maintenance Pack 250 mg/day (200 mg x 1 and 50 mg x 1) tablets 140
Xcopri Maintenance Pack 350 mg/day (200 mg x 1 and 150 mg x 1) tablets 140
Xcopri Titration Pack 12.5 mg (14)-25 mg (14) tablets in a dose pack 140
Xcopri Titration Pack 150 mg (14)-200 mg (14) tablets in a dose pack 140
Xcopri Titration Pack 50 mg (14)-100 mg (14) tablets in a dose pack 140
Xeljanz 1 mg/mL oral solution 28
Xeljanz 10 mg tablet 301
Xeljanz 5 mg tablet 28
Xeljanz XR 11 mg tablet,extended release 28
Xeljanz XR 22 mg tablet,extended release 301
Xeloda 150 mg tablet 72
Xeloda 500 mg tablet 72
Xelpros 0.005 % eye drop emulsion 410
Xenazine 12.5 mg tablet 178
Xenazine 25 mg tablet 178
Xenleta 600 mg tablet 65
Xepi 1 % topical cream 208
Xerac AC 6.25 % topical solution 211
Xerese 5 %-1 % topical cream 213
Xermelo 250 mg tablet 290
Xhance 93 mcg/actuation breath activated aerosol 432
Xifaxan 200 mg tablet 66
Xifaxan 550 mg tablet 66
Xigduo XR 10 mg-1,000 mg tablet,extended release 258
Xigduo XR 10 mg-500 mg tablet,extended release 258
Xigduo XR 2.5 mg-1,000 mg tablet,extended release 258
Xigduo XR 5 mg-1,000 mg tablet,extended release 258
Xigduo XR 5 mg-500 mg tablet,extended release 259
Xiidra 5 % eye drops in a dropperette 406
Ximino 135 mg capsule, extended release 69
Ximino 45 mg capsule, extended release 69
Ximino 90 mg capsule, extended release 69
Xofluza 20 mg tablet 59
Xofluza 40 mg tablet 59
Xolair 150 mg subcutaneous solution 423
Xolair 150 mg/mL subcutaneous syringe 423

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Xolair 75 mg/0.5 mL subcutaneous syringe 423
Xopenex 0.31 mg/3 mL solution for nebulization 425
Xopenex 0.63 mg/3 mL solution for nebulization 425
Xopenex 1.25 mg/3 mL solution for nebulization 425
Xopenex Concentrate 1.25 mg/0.5 mL solution for nebulization....425
Xopenex HFA 45 mcg/actuation aerosol inhaler....425
Xospata 40 mg tablet....75
Xpovio 100 mg/week (20 mg x 5) tablet.74
Xpovio 100 mg/week (50 mg x 2) tablet.74
Xpovio 40 mg twice week (40 mg x 2) tablet....74
Xpovio 40 mg twice weekly (80 mg/week) (20 mg x 4) tablet....74
Xpovio 40 mg/week (20 mg x 2) tablet...74
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Xpovio 80 mg/week (20 mg x 4) tablet...74
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Xtampza ER 13.5 mg capsule sprinkle 15
Xtampza ER 18 mg capsule sprinkle 15
Xtampza ER 27 mg capsule sprinkle 15
Xtampza ER 36 mg capsule sprinkle 15
Xtampza ER 9 mg capsule sprinkle 15
Xtandi 40 mg capsule....71
Xtandi 40 mg tablet 71
Xtandi 80 mg tablet 71
Xulane 150 mcg-35 mcg/24 hr transdermal patch 199
Xultophy 100/3.6 100 unit-3.6 mg/mL (3 mL) subcutaneous insulin pen 263
Xvite 1 mg-100 mg-300 mcg tablet....226
Xylon 10 10 mg-200 mg tablet....17
Xyntha 1,000 (+/-) unit intravenous solution 328
Xyntha 2,000 (+/-) unit intravenous solution 328
Xyntha 250 (+/-) unit intravenous solution 328
Xyntha 500 (+/-) unit intravenous solution 328
Xyntha Solofuse 1,000 (+/-) unit intravenous syringe 328
Xyntha Solofuse 2,000 (+/-) unit intravenous syringe 328
Xyntha Solofuse 250 (+/-) unit intravenous syringe....328
Xyntha Solofuse 3,000 (+/-) unit intravenous syringe 328
Xyntha Solofuse 500 (+/-) unit intravenous syringe....328
Xyrem 500 mg/mL oral solution 179
Xywav 0.5 gram/mL oral solution 179
Xyzal 5 mg tablet 419

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Yasmin (28) 3 mg-0.03 mg tablet....196
YAZ (28) 3 mg-0.02 mg tablet 196
Yelets 18 mg-400 mcg tablet 244
Yonsa 125 mg tablet 72
Yosprala 325 mg-40 mg tablet,immediate and delay release 333
Yupelri 175 mcg/3 mL solution for nebulization 424
Yuvafem 10 mcg vaginal tablet....441

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Zafemy 150 mcg-35 mcg/24 hr transdermal patch 199
zafirlukast 10 mg tablet 422
zafirlukast 20 mg tablet 422
zaleplon 10 mg capsule....182
zaleplon 5 mg capsule....182
Zanaflex 2 mg capsule 339
Zanaflex 4 mg capsule 339
Zanaflex 4 mg tablet 339
Zanaflex 6 mg capsule 339
Zarah 3 mg-0.03 mg tablet 196
Zarontin 250 mg capsule 139
Zarontin 250 mg/5 mL oral solution 139
Zarxio 300 mcg/0.5 mL injection syringe 329
Zarxio 480 mcg/0.8 mL injection syringe 329
Zatean-Pn DHA 27 mg iron-1 mg-300 mg capsule....245
Zatean-Pn Plus 28 mg-1 mg-300 mg capsule....242
Zebutal 50 mg-325 mg-40 mg capsule....24
Zegalogue 0.6 mg/0.6 mL subcutaneous auto-injector 254
Zegalogue 0.6 mg/0.6 mL subcutaneous syringe....254
Zegerid 20 mg-1,680 mg oral packet 297
Zegerid 20 mg-1.1 gram capsule....297
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Zegerid 40 mg-1.1 gram capsule....297
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Zelapar 1.25 mg disintegrating tablet...152
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Zenatane 10 mg capsule....201
Zenatane 20 mg capsule....201
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Zenpep 10,000 unit-32,000 unit-42,000 unit capsule,delayed release 294
Zenpep 15,000 unit-47,000 unit-63,000 unit capsule,delayed release 294
Zenpep 20,000 unit-63,000 unit-84,000 unit capsule,delayed release 294
Zenpep 25,000 unit-79,000 unit-105,000 unit capsule,delayed release 294
Zenpep 3,000 unit-10,000 unit-14,000 unit capsule,delayed release....294
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Zenzedi 10 mg tablet 174
Zenzedi 15 mg tablet 174
Zenzedi 2.5 mg tablet 174
Zenzedi 20 mg tablet 174
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Zepatier 50 mg-100 mg tablet 58
Zeposia 0.92 mg capsule....401
Zeposia Starter Kit 0.23 mg-0.46 mg-0.92 mg capsules in a dose pack....401
Zeposia Starter Pack 0.23 mg (4)-0.46 mg (3) capsules in a dose pack 401
Zerviate 0.24 % eye drops in a dropperette 404
Zestoretic 10 mg-12.5 mg tablet 88
Zestoretic 20 mg-12.5 mg tablet 88
Zestoretic 20 mg-25 mg tablet 88
Zestril 10 mg tablet....90
Zestril 2.5 mg tablet....90
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Zestril 40 mg tablet....90
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Preferred Drug	Non-Preferred	Age Limit	Prior Authorization	Advanced Prior Authorization	Quantity Limit	Specialty Drug	Step Therapy	Both RX and OTC NDCs	Maintenance Therapy

Zetonna 37 mcg/actuation nasal HFA inhaler....432
Ziac 10 mg-6.25 mg tablet....116
Ziac 2.5 mg-6.25 mg tablet....116
Ziac 5 mg-6.25 mg tablet....116
Ziagen 20 mg/mL oral solution....47
Ziagen 300 mg tablet....47
Ziana 1.2 %-0.025 % topical gel....204
zidovudine 10 mg/mL oral syrup....47
zidovudine 100 mg capsule....47
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Ziextenzo 6 mg/0.6 mL subcutaneous syringe....329
zileuton ER 600 mg tablet,extended release 12hr mphase....420
Zilxi 1.5 % topical foam....223
Zioptan (PF) 0.0015 % eye drops in a dropperette....410
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ziprasidone 20 mg/mL (final concentration) intramuscular solution....155
ziprasidone 40 mg capsule....155
ziprasidone 60 mg capsule....155
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Zirgan 0.15 % eye gel....410
Zithromax 1 gram oral packet....62
Zithromax 100 mg/5 mL oral suspension62
Zithromax 200 mg/5 mL oral suspension62
Zithromax 250 mg tablet....62
Zithromax 500 mg tablet....62
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Zocor 20 mg tablet....104
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Zohydro ER 15 mg capsule, oral only,extended release....15
Zohydro ER 20 mg capsule, oral only,extended release....15
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Zoloft 20 mg/mL oral concentrate....143
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Zoloft 50 mg tablet....143
Zolpak 1 %-6 cm X 7 cm topical kit....210
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zolpidem 3.5 mg sublingual tablet....182
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zolpidem ER 12.5 mg tablet,extended release,multiphase....182
zolpidem ER 6.25 mg tablet,extended release,multiphase....182
Zolpimist 5 mg/spray (0.1 mL) oral spray....182
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