Comprehensive

PREFERRED DRUG LIST

Pharmacy Program

YouthCare Health*Choice* 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 at 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.

Psychotropic Medication Consent (DCFS Rule 325)

For children in YouthCare for whom the Illinois Department of Children and Family Services (DCFS) is legally responsible, 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 Envolve Pharmacy Solutions and AcariaHealth to help oversee these drugs. Prior authorization request forms for specialty drugs are located on the YouthCare website at 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 (three-month) supply.

This preferred drug list was published on October 1, 2020, and is accurate as 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-200 unit-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	APA
Abstral 200 mcg sublingual tablet	NP	APA
Actiq 1,200 mcg lozenge on a handle	NP	APA
Actiq 1,600 mcg lozenge on a handle	NP	APA
Actiq 200 mcg lozenge on a handle	NP	APA
Actiq 400 mcg lozenge on a handle	NP	APA
Actiq 600 mcg lozenge on a handle	NP	APA

Drug Name	Tier	Drug Restriction
Actiq 800 mcg lozenge on a handle	NP	APA
Arymo ER 15 mg tablet,crush resistant, extended release	NP	APA
Arymo ER 30 mg tablet,crush resistant, extended release	NP	APA
Arymo ER 60 mg tablet,crush resistant, extended release	NP	APA
codeine sulfate 15 mg tablet	P	QL(Allowed 2 per 1 day)
codeine sulfate 30 mg tablet	P	AL(Minimum Age 12); QL(Allowed 2 per 1 day); APA
codeine sulfate 60 mg tablet	P	AL(Minimum Age 12); QL(Allowed 2 per 1 day); APA
ConZip 100 mg capsule,extended release	NP	APA
ConZip 200 mg capsule,extended release	NP	APA
ConZip 300 mg capsule, extended release	NP	APA
Dilaudid 1 mg/mL oral liquid	NP	APA
Dilaudid 2 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA

Drug Name	Tier	Drug Restriction
Dilaudid 4 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Dilaudid 8 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Diskets 40 mg soluble tablet	NP	PA
Duragesic 100 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
Duragesic 12 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
Duragesic 25 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
Duragesic 50 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
Duragesic 75 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
Embeda 100 mg-4 mg capsule, extend release, oral only	P	PA
Embeda 20 mg-0.8 mg capsule, extend release, oral only	P	PA
Embeda 30 mg-1.2 mg capsule, extend release, oral only	P	PA
Embeda 50 mg-2 mg capsule, extend release, oral only	P	PA

Drug Name	Tier	Drug Restriction
Embeda 60 mg-2.4 mg capsule, extend release, oral only	P	PA
Embeda 80 mg-3.2 mg capsule, extend release, oral only	P	PA
fentanyl 1,200 mcg lozenge on a handle	NP	APA
fentanyl 1,600 mcg lozenge on a handle	NP	PA
fentanyl 100 mcg buccal tablet, effervescent	NP	PA
fentanyl 100 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
fentanyl 12 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
fentanyl 200 mcg buccal tablet, effervescent	NP	APA
fentanyl 200 mcg lozenge on a handle	NP	APA
fentanyl 25 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
fentanyl 37.5 mcg/hour transdermal patch	NP	APA
fentanyl 400 mcg buccal tablet, effervescent	NP	APA
fentanyl 400 mcg lozenge on a handle	NP	APA

Drug Name	Tier	Drug Restriction
fentanyl 50 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
fentanyl 600 mcg buccal tablet, effervescent	NP	APA
fentanyl 600 mcg lozenge on a handle	NP	APA
fentanyl 62.5 mcg/hour transdermal patch	NP	APA
fentanyl 75 mcg/hr transdermal patch	NP	QL(Allowed 10 per 30 days); APA
fentanyl 800 mcg buccal tablet, effervescent	NP	APA
fentanyl 800 mcg lozenge on a handle	NP	APA
fentanyl 87.5 mcg/hour transdermal patch	NP	APA
Fentora 100 mcg buccal tablet, effervescent	NP	APA
Fentora 200 mcg buccal tablet, effervescent	NP	APA
Fentora 400 mcg buccal tablet, effervescent	NP	APA
Fentora 600 mcg buccal tablet, effervescent	NP	APA

Drug Name	Tier	Drug Restriction
Fentora 800 mcg buccal tablet, effervescent	NP	APA
hydrocodone bitartrate ER 10 mg capsule, oral only, extended rel 12 hr	NP	PA
hydrocodone bitartrate ER 15 mg capsule, oral only, extended rel 12 hr	NP	PA
hydrocodone bitartrate ER 20 mg capsule, oral only, extended rel 12 hr	NP	PA
hydrocodone bitartrate ER 30 mg capsule, oral only, extended rel 12 hr	NP	PA
hydrocodone bitartrate ER 40 mg capsule, oral only, extended rel 12 hr	NP	PA
hydrocodone bitartrate ER 50 mg capsule, oral only, extended rel 12 hr	NP	PA
hydromorphone 1 mg/mL oral liquid	P	APA
hydromorphone 2 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
hydromorphone 3 mg rectal suppository	P	QL(Allowed 12 per Rx); APA
hydromorphone 4 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA

Drug Name	Tier	Drug Restriction
hydromorphone 8 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
hydromorphone ER 12 mg tablet,extended release 24 hr	NP	APA
hydromorphone ER 16 mg tablet,extended release 24 hr	NP	APA
hydromorphone ER 32 mg tablet,extended release 24 hr	NP	APA
hydromorphone ER 8 mg tablet,extended release 24 hr	NP	APA
Hysingla ER 100 mg tablet, crush resistant, extended release	NP	APA
Hysingla ER 120 mg tablet, crush resistant, extended release	NP	APA
Hysingla ER 20 mg tablet, crush resistant, extended release	NP	APA
Hysingla ER 30 mg tablet, crush resistant, extended release	NP	APA

Drug Name	Tier	Drug Restriction
Hysingla ER 40 mg tablet, crush resistant, extended release	NP	APA
Hysingla ER 60 mg tablet, crush resistant, extended release	NP	APA
Hysingla ER 80 mg tablet, crush resistant, extended release	NP	APA
Kadian 10 mg capsule,extended release	NP	APA
Kadian 100 mg capsule,extended release	NP	APA
Kadian 20 mg capsule,extended release	NP	APA
Kadian 200 mg capsule,extended release	NP	APA
Kadian 30 mg capsule,extended release	NP	APA
Kadian 40 mg capsule,extended release	NP	APA
Kadian 50 mg capsule,extended release	NP	APA
Kadian 60 mg capsule,extended release	NP	APA

Drug Name	Tier	Drug Restriction
Kadian 80 mg capsule,extended release	NP	APA
levorphanol tartrate 2 mg tablet	NP	APA
levorphanol tartrate 3 mg tablet	NP	APA
meperidine 100 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
meperidine 50 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
meperidine 50 mg/5 mL oral solution	NP	QL(Allowed 500 per Rx); APA
methadone 10 mg tablet	NP	QL(Allowed 10 per 1 day); APA
methadone 10 mg/5 mL oral solution	NP	APA
methadone 10 mg/mL oral concentrate	NP	APA
methadone 40 mg soluble tablet	NP	APA
methadone 5 mg tablet	NP	QL(Allowed 4 per 1 day); APA
methadone 5 mg/5 mL oral solution	NP	APA
Methadone Intensol 10 mg/mL oral concentrate	NP	APA
Methadose 10 mg/mL oral concentrate	NP	APA

Drug Name	Tier	Drug Restriction
Methadose 40 mg soluble tablet	NP	APA
MorphaBond ER 100 mg tablet,oral ONLY (not feeding tubes)	NP	APA
MorphaBond ER 15 mg tablet,oral ONLY (not feeding tubes)	NP	APA
MorphaBond ER 30 mg tablet,oral ONLY (not feeding tubes)	NP	APA
MorphaBond ER 60 mg tablet,oral ONLY (not feeding tubes)	NP	APA
morphine 10 mg rectal suppository	P	QL(Allowed 24 per Rx); APA
morphine 10 mg/5 mL oral solution	P	QL(QL Overtime: Allowed 500 over 23 days); APA
morphine 15 mg immediate release tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
morphine 20 mg rectal suppository	P	QL(Allowed 24 per Rx); APA
morphine 20 mg/5 mL (4 mg/mL) oral solution	P	QL(QL Overtime: Allowed 500 over 23 days); APA
morphine 30 mg immediate release tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
morphine 30 mg rectal suppository	P	QL(Allowed 24 per Rx); APA

Drug Name	Tier	Drug Restriction
morphine 5 mg rectal suppository	P	QL(Allowed 24 per Rx); APA
morphine concentrate 10 mg/0.5 mL oral syringe (FOR ORAL USE ONLY)	P	APA
morphine concentrate 100 mg/5 mL (20 mg/mL) oral solution	P	QL(Allowed 240 per Rx); APA
morphine ER 10 mg capsule,extended release pellets	NP	APA
morphine ER 100 mg capsule,extended release pellets	NP	APA
morphine ER 100 mg tablet,extended release	P	QL(Allowed 3 per 1 day); APA
morphine ER 120 mg capsule,extended release 24 hr multiphase	NP	APA
morphine ER 15 mg tablet,extended release	P	QL(Allowed 3 per 1 day); APA
morphine ER 20 mg capsule,extended release pellets	NP	APA

Drug Name	Tier	Drug Restriction
morphine ER 200 mg tablet,extended release	P	QL(Allowed 3 per 1 day); APA
morphine ER 30 mg capsule,extended release 24 hr multiphase	NP	APA
morphine ER 30 mg capsule,extended release pellets	NP	APA
morphine ER 30 mg tablet,extended release	P	QL(Allowed 3 per 1 day); APA
morphine ER 40 mg capsule,extended release pellets	NP	APA
morphine ER 45 mg capsule,extended release 24 hr multiphase	NP	APA
morphine ER 50 mg capsule,extended release pellets	NP	APA
morphine ER 60 mg capsule,extended release 24 hr multiphase	NP	APA
morphine ER 60 mg capsule,extended release pellets	NP	APA

Drug Name	Tier	Drug Restriction
morphine ER 60 mg tablet,extended release	P	QL(Allowed 3 per 1 day); APA
morphine ER 75 mg capsule,extended release 24 hr multiphase	NP	APA
morphine ER 80 mg capsule,extended release pellets	NP	APA
morphine ER 90 mg capsule,extended release 24 hr multiphase	NP	APA
MS Contin 100 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); APA
MS Contin 15 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); APA
MS Contin 200 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); APA
MS Contin 30 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); APA
MS Contin 60 mg tablet,extended release	NP	QL(Allowed 3 per 1 day); APA
Nucynta 100 mg tablet	NP	APA
Nucynta 50 mg tablet	NP	APA

Drug Name	Tier	Drug Restriction
Nucynta 75 mg tablet	NP	APA
Nucynta ER 100 mg tablet,extended release	NP	APA
Nucynta ER 150 mg tablet,extended release	NP	APA
Nucynta ER 200 mg tablet,extended release	NP	APA
Nucynta ER 250 mg tablet,extended release	NP	APA
Nucynta ER 50 mg tablet,extended release	NP	APA
Oxaydo 5 mg tablet,oral ONLY (not feeding tubes)	NP	APA
Oxaydo 7.5 mg tablet,oral ONLY (not for feeding tubes)	NP	APA
oxycodone 10 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone 10 mg/0.5 mL oral syringe (FOR ORAL USE ONLY)	P	APA
oxycodone 15 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone 20 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA

Drug Name	Tier	Drug Restriction
oxycodone 20 mg/mL oral concentrate	P	QL(Allowed 6 per 1 day); APA
oxycodone 30 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone 5 mg capsule	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone 5 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone 5 mg/5 mL oral solution	P	APA
oxycodone ER 10 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
oxycodone ER 15 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
oxycodone ER 20 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
oxycodone ER 30 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
oxycodone ER 40 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
oxycodone ER 60 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA

Drug Name	Tier	Drug Restriction
oxycodone ER 80 mg tablet,crush resistant,extended release 12 hr	NP	QL(Allowed 2 per 1 day); APA
OxyContin 10 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); APA
OxyContin 15 mg tablet,crush resistant,extended release	NP	APA
OxyContin 20 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); APA
OxyContin 30 mg tablet,crush resistant,extended release	NP	APA
OxyContin 40 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); APA
OxyContin 60 mg tablet,crush resistant,extended release	NP	APA
OxyContin 80 mg tablet,crush resistant,extended release	NP	QL(Allowed 2 per 1 day); APA
oxymorphone 10 mg tablet	NP	APA
oxymorphone 5 mg tablet	NP	APA

Drug Name	Tier	Drug Restriction
oxymorphone ER 10 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 15 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 20 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 30 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 40 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 5 mg tablet,extended release,12 hr	NP	APA
oxymorphone ER 7.5 mg tablet,extended release,12 hr	NP	APA
Roxicodone 15 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Roxicodone 30 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Roxicodone 5 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
tramadol 100 mg tablet	NP	PA

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

Drug Name	Tier	Drug Restriction
Xtampza ER 13.5 mg capsule sprinkle	NP	APA
Xtampza ER 18 mg capsule sprinkle	NP	APA
Xtampza ER 27 mg capsule sprinkle	NP	APA
Xtampza ER 36 mg capsule sprinkle	NP	APA
Xtampza ER 9 mg capsule sprinkle	NP	APA
Zohydro ER 10 mg capsule, oral only,extended release	NP	APA
Zohydro ER 15 mg capsule, oral only,extended release	NP	APA
Zohydro ER 20 mg capsule, oral only,extended release	NP	APA
Zohydro ER 30 mg capsule, oral only,extended release	NP	APA
Zohydro ER 40 mg capsule, oral only,extended release	NP	APA
Zohydro ER 50 mg capsule, oral only,extended release	NP	APA
ANALGESIC OPIOID CODEINE COMBINATIONS		

Drug Name	Tier	Drug Restriction
acetaminophen 120 mg-codeine 12 mg/5 mL (5 mL) oral solution	P	AL(Minimum Age 12); QL(Allowed 30 per 1 day); APA
acetaminophen 120 mg-codeine 12 mg/5 mL oral solution	P	AL(Minimum Age 12); QL(Allowed 30 per 1 day); APA
acetaminophen 300 mg-codeine 15 mg tablet	P	AL(Minimum Age 12); QL(QL Overtime: Allowed 180 over 27 days); APA
acetaminophen 300 mg-codeine 30 mg tablet	P	AL(Minimum Age 12); QL(QL Overtime: Allowed 180 over 27 days); APA
acetaminophen 300 mg-codeine 30 mg/12.5 mL (12.5 mL) oral solution	P	AL(Minimum Age 12); QL(Allowed 30 per 1 day); APA
acetaminophen 300 mg-codeine 60 mg tablet	P	AL(Minimum Age 12); QL(QL Overtime: Allowed 180 over 27 days); APA
Ascomp with Codeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12); QL(Allowed 4 per 1 day); APA
butalbital 50 mg-acetaminophen 300 mg-caffeine 40 mg-codeine 30 mg cap	NP	APA
butalbital 50 mg-acetaminophen 325 mg-caffeine 40 mg-codeine 30 mg cap	NP	AL(Minimum Age 12); QL(Allowed 4 per 1 day); APA

Drug Name	Tier	Drug Restriction
Butalbital Compound with Codeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12); QL(Allowed 4 per 1 day); APA
codeine-butalbital-ASA-caffeine 30 mg-50 mg-325 mg-40 mg capsule	P	AL(Minimum Age 12); QL(Allowed 4 per 1 day); APA
Fiorinal-Codeine #3 30 mg-50 mg-325 mg-40 mg capsule	NP	AL(Minimum Age 12); QL(Allowed 4 per 1 day); APA
ANALGESIC OPIOID DIHYDROCODEINE, NON-SALICYLATE ANALGESIC,XANTHINE		
acetaminophen 320.5 mg-caffeine 30 mg-dihydrocodeine 16 mg capsule	NP	APA
acetaminophen 325 mg-caffeine 30 mg-dihydrocodeine 16 mg tablet	NP	PA
Panlor (acetaminophen-caff-dihydrocodeine) 325 mg-30 mg-16 mg tablet	NP	PA
ANALGESIC OPIOID HYDROCODONE AND NON-SALICYLATE COMBINATIONS		
Apadaz 4.08 mg-325 mg tablet	NP	APA
Apadaz 6.12 mg-325 mg tablet	NP	APA
Apadaz 8.16 mg-325 mg tablet	NP	APA

Drug Name	Tier	Drug Restriction
benzhydrocodone 4.08 mg-acetaminophen 325 mg tablet	NP	APA
benzhydrocodone 6.12 mg-acetaminophen 325 mg tablet	NP	APA
benzhydrocodone 8.16 mg-acetaminophen 325 mg tablet	NP	APA
hydrocodone 10 mg-acetaminophen 300 mg tablet	P	APA
hydrocodone 10 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
hydrocodone 5 mg-acetaminophen 300 mg tablet	P	APA
hydrocodone 5 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
hydrocodone 7.5 mg-acetaminophen 300 mg tablet	P	APA
hydrocodone 7.5 mg-acetaminophen 325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
hydrocodone 7.5 mg-acetaminophen 325 mg/15 mL oral solution	P	QL(Allowed 180 per 1 day); APA

Drug Name	Tier	Drug Restriction
Lorcet (hydrocodone) 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Lorcet HD 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Lorcet Plus 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Lortab Elixir 10 mg-300 mg/15 mL oral solution	NP	APA
Norco 10 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Norco 5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Norco 7.5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Verdrocet 2.5 mg-325 mg tablet	NP	PA
ANALGESIC OPIOID HYDROCODONE AND NSAID COMBINATIONS		
hydrocodone 10 mg-ibuprofen 200 mg tablet	P	APA
hydrocodone 5 mg-ibuprofen 200 mg tablet	P	APA
hydrocodone 7.5 mg-ibuprofen 200 mg tablet	P	APA
Reprexain 10 mg-200 mg tablet	P	
Reprexain 5 mg-200 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Xylon 10 10 mg-200 mg tablet	P	
ANALGESIC OPIOID OXYCODONE AND NON-SALICYLATE COMBINATIONS		
Endocet 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Endocet 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Endocet 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Nalocet 2.5 mg-300 mg tablet	NP	APA
oxycodone-acetaminophen 10 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone-acetaminophen 2.5 mg-325 mg tablet	P	APA
oxycodone-acetaminophen 5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
oxycodone-acetaminophen 7.5 mg-325 mg tablet	P	QL(QL Overtime: Allowed 180 over 27 days); APA
Percocet 10 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Percocet 2.5 mg-325 mg tablet	NP	APA
Percocet 5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA
Percocet 7.5 mg-325 mg tablet	NP	QL(QL Overtime: Allowed 180 over 27 days); APA

Drug Name	Tier	Drug Restriction
Primlev 10 mg-300 mg tablet	NP	APA
Primlev 5 mg-300 mg tablet	NP	APA
Primlev 7.5 mg-300 mg tablet	NP	APA
Prolate 10 mg-300 mg tablet	NP	PA
Prolate 5 mg-300 mg tablet	NP	PA
Prolate 7.5 mg-300 mg tablet	NP	PA
ANALGESIC OPIOID OXYCODONE AND NSAID COMBINATIONS		
ibuprofen-oxycodone 400 mg-5 mg tablet	NP	APA
ANALGESIC OPIOID OXYCODONE AND SALICYLATE COMBINATIONS		
oxycodone-aspirin 4.8355 mg-325 mg tablet	NP	QL(Allowed 6 per 1 day); APA
ANALGESIC OPIOID PARTIAL-MIXED AGONISTS		
Belbuca 150 mcg buccal film	NP	APA
Belbuca 300 mcg buccal film	NP	APA
Belbuca 450 mcg buccal film	NP	APA
Belbuca 600 mcg buccal film	NP	APA
Belbuca 75 mcg buccal film	NP	APA

Drug Name	Tier	Drug Restriction
Belbuca 750 mcg buccal film	NP	APA
Belbuca 900 mcg buccal film	NP	APA
buprenorphine 10 mcg/hour weekly transdermal patch	NP	APA
buprenorphine 15 mcg/hour weekly transdermal patch	NP	APA
buprenorphine 20 mcg/hour weekly transdermal patch	NP	APA
buprenorphine 5 mcg/hour weekly transdermal patch	NP	APA
buprenorphine 7.5 mcg/hour weekly transdermal patch	NP	APA
butorphanol 10 mg/mL nasal spray	NP	APA
Butrans 10 mcg/hour transdermal patch	NP	APA
Butrans 15 mcg/hour transdermal patch	NP	APA
Butrans 20 mcg/hour transdermal patch	NP	APA
Butrans 5 mcg/hour transdermal patch	NP	APA

Drug Name	Tier	Drug Restriction
Butrans 7.5 mcg/hour transdermal patch	NP	APA
pentazocine 50 mg-naloxone 0.5 mg tablet	NP	APA
ANALGESIC OPIOID TRAMADOL AND NON-SALICYLATE COMBINATIONS		
tramadol 37.5 mg-acetaminophen 325 mg tablet	NP	AL(Minimum Age 18); QL(Allowed 4 per 1 day); APA
Ultracet 37.5 mg-325 mg tablet	NP	AL(Minimum Age 18); QL(Allowed 4 per 1 day); APA
ANALGESIC OR ANTIPYRETIC NON-OPIOID		
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	
Athenol 325 mg tablet	P	

Drug Name	Tier	Drug Restriction
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	
Children's Non-Aspirin 160 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
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 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	
Children's Silapap 160 mg/5 mL oral liquid	P	
Children's Tactinal 80 mg chewable tablet	P	
Children's Tylenol 160 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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 Extra Strength 500 mg tablet	P	
M-PAP 160 mg/5 mL oral liquid	P	
Non-Aspirin 160 mg/5 mL oral suspension	P	
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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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		
Bupap 50 mg-300 mg tablet	P	

Drug Name	Tier	Drug Restriction
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)
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
Humira 10 mg/0.2 mL subcutaneous syringe kit	P	PA; SP
Humira 20 mg/0.4 mL subcutaneous syringe kit	P	PA; SP
Humira 40 mg/0.8 mL subcutaneous syringe kit	P	PA; SP
Humira Pen 40 mg/0.8 mL subcutaneous kit	P	PA; SP

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Humira(CF) Pen Crohn's-Ulc Colitis-Hid Sup Strt 80 mg/0.8 mL subcut kt	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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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
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

Drug Name	Tier	Drug Restriction
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)		
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

Drug Name	Tier	Drug Restriction
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 5 mg tablet	P	PA; SP

Drug Name	Tier	Drug Restriction
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); MT
Arava 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
leflunomide 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
leflunomide 20 mg tablet	P	QL(Allowed 1 per 1 day); MT
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		

Drug Name	Tier	Drug Restriction
Arthrotec 50 mg-200 mcg tablet,film-coated	NP	PA
Arthrotec 75 75 mg-200 mcg tablet,film-coated	NP	PA
diclofenac 50 mg-misoprostol 200 mcg tablet,immed.and delayed release	NP	PA
diclofenac 75 mg-misoprostol 200 mcg tablet,immediate,delayed release	NP	PA
NSAID ANALGESIC AND PROTON PUMP INHIBITOR COMBINATIONS		
naproxen 375 mg-esomeprazole 20 mg tablet,immediate and delay release	NP	PA
naproxen 500 mg-esomeprazole 20 mg tablet,immediate and delay release	NP	PA
Vimovo 375 mg-20 mg tablet,immediate and delay release	NP	PA
Vimovo 500 mg-20 mg tablet,immediate and delay release	NP	PA
NSAID ANALGESIC, CYCLOOXYGENASE-2 (COX-2) SELECTIVE INHIBITORS		

Drug Name	Tier	Drug Restriction
Celebrex 100 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
Celebrex 200 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
Celebrex 400 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
Celebrex 50 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
celecoxib 100 mg capsule	P	QL(Allowed 2 per 1 day)
celecoxib 200 mg capsule	P	QL(Allowed 2 per 1 day)
celecoxib 400 mg capsule	P	QL(Allowed 2 per 1 day)
celecoxib 50 mg capsule	P	QL(Allowed 2 per 1 day)
NSAID ANALGESICS (COX NON-SPECIFIC) - ANTHRANILIC ACID DERIVATIVES		
meclofenamate 100 mg capsule	NP	PA
meclofenamate 50 mg capsule	NP	PA
mefenamic acid 250 mg capsule	NP	PA
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

Drug Name	Tier	Drug Restriction
nabumetone 750 mg tablet	P	MT
Relafen DS 1,000 mg tablet	NP	PA
Sprix 15.75 mg/spray nasal spray	NP	PA
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
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
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
fenoprofen 600 mg tablet	NP	PA
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	MT
ibuprofen 100 mg/5 mL oral suspension	NP	PA; MT
ibuprofen 400 mg tablet	P	MT
ibuprofen 50 mg/1.25 mL oral drops,suspension	P	MT
ibuprofen 600 mg tablet	P	MT
ibuprofen 800 mg tablet	P	MT
Ibuprofen IB 200 mg tablet	P	MT
Infant's Ibuprofen 50 mg/1.25 mL oral drops,suspension	P	MT
ketoprofen 25 mg capsule	P	
ketoprofen 50 mg capsule	P	MT
ketoprofen 75 mg capsule	P	MT
ketoprofen ER 200 mg 24 hr capsule,extended release	NP	PA
Nalfon 400 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Nalfon 600 mg tablet	NP	PA
Naprelan CR 375 mg tab,extended release 24 hr mphase	NP	PA
Naprelan CR 500 mg tab,extended release 24 hr mphase	NP	PA
Naprelan CR 750 mg tab,extended release 24 hr mphase	NP	PA
naproxen 125 mg/5 mL oral suspension	P	
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
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

Drug Name	Tier	Drug Restriction
naproxen sodium ER (CR) 375 mg tablet,extended release 24 hr mphase	NP	PA
naproxen sodium ER (CR) 500 mg tablet,extended release 24 hr mphase	NP	PA
oxaprozin 600 mg tablet	NP	PA; MT
NSAID ANALGESICS, (COX NON-SPECIFIC) - INDOLE ACETIC ACID DERIVATIVES		
etodolac 200 mg capsule	P	MT
etodolac 300 mg capsule	P	MT
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

Drug Name	Tier	Drug Restriction
indomethacin 25 mg capsule	P	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		
butalbital-aspirin-caffeine 50 mg-325 mg-40 mg capsule	P	QL(Allowed 4 per 1 day)
butalbital-aspirin-caffeine 50 mg-325 mg-40 mg tablet	P	MT
Fiorinal 50 mg-325 mg-40 mg capsule	NP	PA; QL(Allowed 4 per 1 day)
SALICYLATE ANALGESICS		
diflunisal 500 mg tablet	P	MT
salsalate 500 mg tablet	P	
salsalate 750 mg tablet	P	
SALICYLATE ANALGESICS, BUFFERED		
aspirin,buffered (calcium carbonate-magnesium) 325 mg tablet	P	

Drug Name	Tier	Drug Restriction
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
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)

Drug Name	Tier	Drug Restriction
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)
Hemorrhoidal(phenyleph-min oil-petrolat)0.25 %-14 %-74.9 % rectal oint	P	QL(QL Overtime: Allowed 31 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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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
Exjade 125 mg dispersible tablet	NP	PA; SP
Exjade 250 mg dispersible tablet	NP	PA; SP
Exjade 500 mg dispersible tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
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		
Entereg 12 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
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
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		

Drug Name	Tier	Drug Restriction
paromomycin 250 mg capsule	P	
AMINOGLYCOSIDE ANTIBIOTIC		
amikacin 1,000 mg/4 mL injection solution	P	QL(Limit 14 days supply(ies) per fill)
amikacin 500 mg/2 mL injection solution	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)
gentamicin 100 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
gentamicin 120 mg/100 mL in sodium chloride(iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
gentamicin 20 mg/2 mL injection solution	P	QL(Limit 14 days supply(ies) per fill)
gentamicin 40 mg/mL injection solution	P	QL(Limit 14 days supply(ies) per fill)

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

Drug Name	Tier	Drug Restriction
tobramycin 40 mg/mL injection solution	P	QL(Limit 14 days supply(ies) per fill)
AMINOPENICILLIN ANTIBIOTIC		
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(Limit 14 days supply(ies) per fill)
ampicillin 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
ampicillin 10 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin 125 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin 2 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
ampicillin 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin 250 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin 500 mg capsule	P	
ampicillin 500 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
ampicillin-sulbactam 1.5 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin-sulbactam 15 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ampicillin-sulbactam 3 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
ampicillin-sulbactam 3 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
Augmentin 125 mg-31.25 mg/5 mL oral suspension	P	
Augmentin 250 mg-62.5 mg/5 mL oral suspension	P	QL(Allowed 150 per Rx)
Unasyn 1.5 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Unasyn 15 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Unasyn 3 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
ANTHELMINTIC AGENTS - BENZIMIDAZOLE DERIVATIVES		
albendazole 200 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
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)
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	

Drug Name	Tier	Drug Restriction
sulfamethoxazole 800 mg-trimethoprim 160 mg tablet	P	
Sulfatrim 200 mg-40 mg/5 mL oral suspension	P	
ANTIBACTERIAL FOLATE ANTAGONIST OTHERS		
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(Limit 14 days supply(ies) per fill)
micafungin 50 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Mycamine 100 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Mycamine 50 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
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)

Drug Name	Tier	Drug Restriction
fluconazole 100 mg/50 mL in sodium chloride(iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
fluconazole 150 mg tablet	P	QL(Allowed 2 per Rx)
fluconazole 200 mg tablet	P	QL(Allowed 2 per 1 day)
fluconazole 200 mg/100 mL in dextrose (iso-osm) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
fluconazole 200 mg/100 mL in sod. chloride (iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)
fluconazole 400 mg/200 mL in sod. chloride(iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
fluconazole 50 mg tablet	P	QL(Allowed 7 per Rx)

Drug Name	Tier	Drug Restriction
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
Onmel 200 mg tablet	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

Drug Name	Tier	Drug Restriction
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		
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	

Drug Name	Tier	Drug Restriction
dapsone 25 mg tablet	P	
ANTIMALARIAL COMBINATIONS		
atovaquone 250 mg-proguanil 100 mg tablet	P	
atovaquone-proguanil (pediatric) 62.5 mg-25 mg tablet	P	
Coartem 20 mg-120 mg tablet	NP	PA; QL(Allowed 24 per Rx)
Malarone 250 mg-100 mg tablet	NP	PA
Malarone Pediatric 62.5 mg-25 mg tablet	NP	PA
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	
primaquine 26.3 mg tablet	P	

Drug Name	Tier	Drug Restriction
pyrimethamine 25 mg tablet	NP	PA; SP
Qualaquin 324 mg capsule	NP	PA
quinine 324 mg capsule	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-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
Metro I.V. 500 mg/100 mL intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
metronidazole 250 mg tablet	P	

Drug Name	Tier	Drug Restriction
metronidazole 375 mg capsule	NP	PA
metronidazole 500 mg tablet	P	
metronidazole 500 mg/100 mL-sodium chloride(iso) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
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
ANTIRETROVIRAL - CCR5 CO-RECEPTOR ANTAGONIST		
Selzentry 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Selzentry 20 mg/mL oral solution	NP	PA; QL(Allowed 35 per 1 day)
Selzentry 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Selzentry 300 mg tablet	NP	PA; QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
Selzentry 75 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
ANTIRETROVIRAL - CD4 ATTACHMENT INHIBITORS		
Rukobia 600 mg tablet,extended release	NP	PA
ANTIRETROVIRAL - HIV-1 FUSION INHIBITORS		
Fuzeon 90 mg subcutaneous solution	NP	PA; SP
ANTIRETROVIRAL - HIV-1 INTEGRASE STRAND TRANSFER INHIBITORS		
Isentress 100 mg chewable tablet	P	QL(Allowed 6 per 1 day)
Isentress 100 mg oral powder packet	P	QL(Allowed 2 per 1 day)
Isentress 25 mg chewable tablet	P	QL(Allowed 12 per 1 day)
Isentress 400 mg tablet	P	QL(Allowed 2 per 1 day)
Isentress HD 600 mg tablet	P	QL(Allowed 2 per 1 day)
Tivicay 10 mg tablet	P	
Tivicay 25 mg tablet	P	
Tivicay 50 mg tablet	P	
Tivicay PD 5 mg tablet for oral suspension	P	
ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NNRTI COMBINATIONS		

Drug Name	Tier	Drug Restriction
Juluca 50 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
ANTIRETROVIRAL - INTEGRASE INHIBITOR AND NRTI COMBINATIONS		
Dovato 50 mg-300 mg tablet	P	
ANTIRETROVIRAL - NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIB (NNRTI)		
Edurant 25 mg tablet	P	QL(Allowed 1 per 1 day)
efavirenz 200 mg capsule	P	QL(Allowed 1 per 1 day)
efavirenz 50 mg capsule	P	QL(Allowed 2 per 1 day)
efavirenz 600 mg tablet	P	QL(Allowed 1 per 1 day)
Intelence 100 mg tablet	P	QL(Allowed 4 per 1 day)
Intelence 200 mg tablet	P	QL(Allowed 2 per 1 day)
Intelence 25 mg tablet	P	QL(Allowed 4 per 1 day)
nevirapine 200 mg tablet	P	QL(Allowed 2 per 1 day)
nevirapine 50 mg/5 mL oral suspension	P	QL(Allowed 40 per 1 day)
nevirapine ER 100 mg tablet,extended release 24 hr	P	QL(Allowed 3 per 1 day)
nevirapine ER 400 mg tablet,extended release 24 hr	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Pifeltro 100 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Sustiva 200 mg capsule	P	QL(Allowed 1 per 1 day)
Sustiva 50 mg capsule	P	QL(Allowed 2 per 1 day)
Sustiva 600 mg tablet	P	QL(Allowed 1 per 1 day)
Viramune 200 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Viramune 50 mg/5 mL oral suspension	P	
Viramune XR 400 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day)
ANTIRETROVIRAL - NUCLEOSIDE AND NUCLEOTIDE ANALOG RTIS COMBINATIONS		
Cimduo 300 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Descovy 200 mg-25 mg tablet	P	QL(Allowed 1 per 1 day)
Temixys 300 mg-300 mg tablet	NP	PA
Truvada 100 mg-150 mg tablet	P	
Truvada 133 mg-200 mg tablet	P	
Truvada 167 mg-250 mg tablet	P	
Truvada 200 mg-300 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
ANTIRETROVIRAL - NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI)		
abacavir 20 mg/mL oral solution	P	QL(Allowed 30 per 1 day)
abacavir 300 mg tablet	P	QL(Allowed 2 per 1 day)
didanosine 250 mg capsule,delayed release	P	QL(Allowed 1 per 1 day)
didanosine 400 mg capsule,delayed release	P	QL(Allowed 1 per 1 day)
Emtriva 10 mg/mL oral solution	P	QL(Allowed 24 per 1 day)
Emtriva 200 mg capsule	P	QL(Allowed 1 per 1 day)
Epivir 10 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day)
Epivir 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Epivir 300 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
lamivudine 10 mg/mL oral solution	P	QL(Allowed 30 per 1 day)
lamivudine 150 mg tablet	P	QL(Allowed 2 per 1 day)
lamivudine 300 mg tablet	P	QL(Allowed 1 per 1 day)
Retrovir 10 mg/mL oral syrup	NP	PA; QL(Allowed 60 per 1 day)

Drug Name	Tier	Drug Restriction
Retrovir 100 mg capsule	NP	PA; QL(Allowed 6 per 1 day)
stavudine 15 mg capsule	P	QL(Allowed 2 per 1 day)
stavudine 20 mg capsule	P	QL(Allowed 2 per 1 day)
stavudine 30 mg capsule	P	QL(Allowed 2 per 1 day)
stavudine 40 mg capsule	P	QL(Allowed 2 per 1 day)
Videx 2 gram Pediatric 10 mg/mL (Final Conc.) oral solution	P	QL(Allowed 20 per 1 day)
Videx EC 125 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day)
Videx EC 200 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day)
Videx EC 250 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day)
Videx EC 400 mg capsule,delayed release	NP	PA; QL(Allowed 1 per 1 day)
Ziagen 20 mg/mL oral solution	P	QL(Allowed 30 per 1 day)
Ziagen 300 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
zidovudine 10 mg/mL oral syrup	P	QL(Allowed 60 per 1 day)

Drug Name	Tier	Drug Restriction
zidovudine 100 mg capsule	P	QL(Allowed 6 per 1 day)
zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day)
ANTIRETROVIRAL - NUCLEOTIDE ANALOG REVERSE TRANSCRIPTASE INHIBITORS		
tenofovir disoproxil fumarate 300 mg tablet	P	QL(Allowed 1 per 1 day)
Viread 150 mg tablet	P	QL(Allowed 1 per 1 day)
Viread 200 mg tablet	P	QL(Allowed 1 per 1 day)
Viread 250 mg tablet	P	QL(Allowed 1 per 1 day)
Viread 300 mg tablet	P	QL(Allowed 1 per 1 day)
Viread 40 mg/scoop (40 mg/gram) oral powder	P	QL(Allowed 8 per 1 day)
ANTIRETROVIRAL COMBINATIONS - PROTEASE INHIBITORS		
Kaletra 100 mg-25 mg tablet	P	QL(Allowed 4 per 1 day)
Kaletra 200 mg-50 mg tablet	P	QL(Allowed 6 per 1 day)
Kaletra 400 mg-100 mg/5 mL oral solution	NP	PA; QL(Allowed 10.67 per 1 day)
lopinavir-ritonavir 400 mg-100 mg/5 mL oral solution	P	QL(Allowed 10.67 per 1 day)
ANTIRETROVIRAL- NUCLEOSIDE AND NUCLEOTIDE ANALOGS,PROTEASE INHIBITORS		

Drug Name	Tier	Drug Restriction
Symtuza 800 mg-150 mg-200 mg-10 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
ANTIRETROVIRAL-INTEGRASE INHIBITOR,NUCLEOSIDE AND NUCLEOTIDE RTIS COMB		
Biktarvy 50 mg-200 mg-25 mg tablet	P	QL(Allowed 1 per 1 day)
Genvoya 150 mg-150 mg-200 mg-10 mg tablet	P	QL(Allowed 1 per 1 day)
Stribild 150 mg-150 mg-200 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
ANTIRETROVIRAL-NUCLEOSIDE ANALOGS AND INTEGRASE INHIBITOR COMBINATIONS		
Triumeq 600 mg-50 mg-300 mg tablet	P	
ANTIRETROVIRAL-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI) COMB		
abacavir 300 mg-lamivudine 150 mg-zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day)
abacavir 600 mg-lamivudine 300 mg tablet	P	QL(Allowed 1 per 1 day)
Combivir 150 mg-300 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Epzicom 600 mg-300 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
lamivudine 150 mg-zidovudine 300 mg tablet	P	QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Trizivir 300 mg-150 mg-300 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
ANTIRETROVIRAL-NUCLEOSIDE, NUCLEOTIDE ANALOGS AND NON-NUCLEOSIDE RTI		
Atripla 600 mg-200 mg-300 mg tablet	P	QL(Allowed 1 per 1 day)
Complera 200 mg-25 mg-300 mg tablet	P	QL(Allowed 1 per 1 day)
Delstrigo 100 mg-300 mg-300 mg tablet	P	QL(Allowed 1 per 1 day)
Odefsey 200 mg-25 mg-25 mg tablet	P	QL(Allowed 1 per 1 day)
Symfi 600 mg-300 mg-300 mg tablet	P	QL(Allowed 1 per 1 day)
Symfi Lo 400 mg-300 mg-300 mg tablet	P	
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		

Drug Name	Tier	Drug Restriction
isoniazid 100 mg tablet	P	MT
isoniazid 300 mg tablet	P	MT
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	
Rifadin 150 mg capsule	NP	PA
Rifadin 300 mg capsule	NP	PA
rifampin 150 mg capsule	P	
rifampin 300 mg capsule	P	
ANTITUBERCULAR AGENTS OTHER		
ethambutol 100 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
ethambutol 400 mg tablet	P	MT
Myambutol 400 mg tablet	NP	PA; MT
Trecator 250 mg tablet	P	
ANTITUBERCULAR COMBINATIONS		
Rifamate 300 mg-150 mg capsule	P	
Rifater 50 mg-120 mg-300 mg tablet	P	
CARBAPENEM ANTIBIOTIC COMBINATIONS		
imipenem-cilastatin 250 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
imipenem-cilastatin 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Primaxin 250 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Primaxin 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
CARBAPENEM ANTIBIOTICS (THIENAMYCINS)		
Doribax 250 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Doribax 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
doripenem 250 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
doripenem 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
ertapenem 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); SP
Invanz 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Invanz 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); SP; Use Generic Products
meropenem 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
meropenem 1 gram/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
meropenem 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
meropenem 500 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
Merrem 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Merrem 500 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
CEPHALOSPORIN ANTIBIOTIC AND BETA-LACTAMASE INHIBITOR COMBINATIONS		

Drug Name	Tier	Drug Restriction
Avycaz 2.5 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)
cefazolin 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 1 gram/10 mL in 0.9 % sodium chloride intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 1 gram/10 mL in sterile water intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 1 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
cefazolin 10 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 100 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/10 mL in 0.9 % sodium chloride intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/100 mL in 0.9 % sodium chloride intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/100 mL in dextrose(iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/20 mL in sterile water intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/50 mL in 0.9 % sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 2 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
cefazolin 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 20 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 3 gram/100 mL in 0.9 % sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 300 g solution for injection	P	QL(Limit 14 days supply(ies) per fill)
cefazolin 500 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
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	

Drug Name	Tier	Drug Restriction
cephalexin 750 mg capsule	P	
Keflex 250 mg capsule	NP	PA
Keflex 500 mg capsule	NP	PA
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(Limit 14 days supply(ies) per fill)
cefoxitin 1 gram/50 mL in dextrose, iso-osmotic intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
cefoxitin 10 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
cefoxitin 2 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
cefoxitin 2 gram/50 mL in dextrose(iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
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

Drug Name	Tier	Drug Restriction
cefixime 400 mg capsule	P	
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(Limit 14 days supply(ies) per fill)
ceftazidime 1 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
ceftazidime 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftazidime 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
ceftazidime 6 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
ceftriaxone 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 1 gram/50 mL in dextrose (iso-osmot) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 10 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 100 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 2 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 2 gram/50 mL in dextrose (iso-osm) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 250 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
ceftriaxone 500 mg solution for injection	P	QL(Limit 14 days supply(ies) per fill)
Fortaz 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Fortaz 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Fortaz 1 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
Fortaz 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Fortaz 2 gram/50 mL in dextrose 5 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)
Tazicef 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products

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

Drug Name	Tier	Drug Restriction
Maxipime 1 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Maxipime 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Maxipime 2 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Maxipime 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); 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(Limit 14 days supply(ies) per fill); 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(Limit 14 days supply(ies) per fill)
ciprofloxacin 200 mg/20 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
ciprofloxacin 400 mg/40 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill)
levofloxacin 250 mg tablet	P	QL(Allowed 1 per 1 day); QL(Limit 14 days supply(ies) per fill)
levofloxacin 250 mg/10 mL oral solution	P	
levofloxacin 250 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
levofloxacin 500 mg tablet	P	QL(Allowed 1 per 1 day); QL(Limit 14 days supply(ies) per fill)
levofloxacin 500 mg/100 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
levofloxacin 750 mg tablet	P	QL(Allowed 1 per 1 day); QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
levofloxacin 750 mg/150 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
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)		
Baraclude 0.05 mg/mL oral solution	NP	PA

Drug Name	Tier	Drug Restriction
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
Pegasys 180 mcg/mL subcutaneous solution	NP	PA; SP

Drug Name	Tier	Drug Restriction
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 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		

Drug Name	Tier	Drug Restriction
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
Ribasphere 200 mg capsule	P	SP
Ribasphere 200 mg tablet	P	SP
Ribasphere 600 mg tablet	P	SP
Ribasphere RibaPak 200 mg (28)-400 mg (28) tablets in a dose pack	NP	PA
Ribasphere RibaPak 200 mg (7)-400 mg (7) tablets in a dose pack	NP	PA

Drug Name	Tier	Drug Restriction
Ribasphere RibaPak 400 mg (28)-400 mg (28) tablets in a dose pack	NP	PA
Ribasphere RibaPak 400 mg (7)-400 mg (7) tablets in a dose pack	NP	PA
Ribasphere RibaPak 600 mg (28)-400 mg (28) tablets in a dose pack	NP	PA
Ribasphere RibaPak 600 mg (28)-600 mg (28) tablets in a dose pack	NP	PA
Ribasphere RibaPak 600 mg (7)-400 mg (7) tablets in a dose pack	NP	PA
Ribasphere RibaPak 600 mg (7)-600 mg (7) tablets in a dose pack	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		

Drug Name	Tier	Drug Restriction
Viekira Pak 12.5 mg-75 mg-50 mg/250 mg tablets in a dose pack	NP	PA; SP
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

Drug Name	Tier	Drug Restriction
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		
Cleocin 150 mg/mL injection solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Cleocin 300 mg/2 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Cleocin 300 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Cleocin 600 mg/4 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Cleocin 600 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Cleocin 900 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Cleocin 900 mg/6 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Cleocin HCl 150 mg capsule	NP	PA
Cleocin HCl 300 mg capsule	NP	PA
Cleocin HCl 75 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
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(Limit 14 days supply(ies) per fill)
clindamycin 150 mg/mL injection solution	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 300 mg/2 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 300 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 300 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 600 mg/4 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 600 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 600 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
clindamycin 75 mg/5 mL oral solution	P	QL(Allowed 300 per Rx)
clindamycin 900 mg/50 mL in 0.9% sodium chloride intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 900 mg/50 mL in 5 % dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
clindamycin 900 mg/6 mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
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)

Drug Name	Tier	Drug Restriction
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
E.E.S. 400 mg tablet	P	
E.E.S. Granules 200 mg/5 mL oral suspension	P	
EryPed 200 200 mg/5 mL oral suspension	P	
EryPed 400 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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)
MISC ANTI-INFECTIVE		
Nebupent 300 mg solution for inhalation	P	

Drug Name	Tier	Drug Restriction
pentamidine 300 mg solution for inhalation	P	
MONOBACTAM ANTIBIOTICS		
Azactam 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Azactam 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
aztreonam 1 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
aztreonam 2 gram solution for injection	P	QL(Limit 14 days supply(ies) per fill)
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		
Bicillin L-A 1,200,000 unit/2 mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Bicillin L-A 2,400,000 unit/4 mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
Bicillin L-A 600,000 unit/mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
penicillin G benzathine 600,000 unit/mL intramuscular syringe	P	
penicillin G pot 1 million unit/50 mL-dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
penicillin G pot 2 million unit/50 mL-dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
penicillin G pot 3 million unit/50 mL-dextrose intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
penicillin G potassium 20 million unit solution for injection	P	QL(Limit 14 days supply(ies) per fill)
penicillin G potassium 5 million unit solution for injection	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
penicillin G procaine 1.2 million unit/2 mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
penicillin G procaine 600,000 unit/mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
penicillin G sodium 5 million unit solution for injection	P	QL(Limit 14 days supply(ies) per fill)
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(Limit 14 days supply(ies) per fill); Use Generic Products
Pfizerpen-G 5 million unit solution for injection	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
PENICILLIN ANTIBIOTIC - PENICILLINASE-RESISTANT		

Drug Name	Tier	Drug Restriction
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(Limit 14 days supply(ies) per fill)
piperacillin-tazobactam 2.25 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
piperacillin-tazobactam 3.375 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
piperacillin-tazobactam 4.5 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
piperacillin-tazobactam 40.5 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Zosyn 2.25 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Zosyn 2.25 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Zosyn 3.375 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Zosyn 3.375 gram/50 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
Zosyn 4.5 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
Zosyn 4.5 gram/100 mL in dextrose (iso-osmotic) intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
Zosyn 40.5 gram intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
PENICILLIN NATURAL ANTIBIOTIC COMBINATIONS - EXTENDED RELEASE		
Bicillin C-R 1,200,000 unit/2 mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
Bicillin C-R 900,000 unit-300k unit/2 mL intramuscular syringe	P	QL(Limit 14 days supply(ies) per fill)
PLEUROMUTILIN ANTIBIOTICS		
Xenleta 600 mg tablet	NP	PA; SP
PROTEASE INHIBITORS (NON-PEPTIDIC) ANTIRETROVIRAL		

Drug Name	Tier	Drug Restriction
Aptivus (with vitamin E) 100 mg/mL oral solution	P	QL(Allowed 10 per 1 day)
Aptivus 250 mg capsule	P	QL(Allowed 4 per 1 day)
Prezcobix 800 mg-150 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Prezista 100 mg/mL oral suspension	P	QL(Allowed 12 per 1 day)
Prezista 150 mg tablet	P	QL(Allowed 3 per 1 day)
Prezista 600 mg tablet	P	QL(Allowed 2 per 1 day)
Prezista 75 mg tablet	P	QL(Allowed 2 per 1 day)
Prezista 800 mg tablet	P	QL(Allowed 1 per 1 day)
PROTEASE INHIBITORS (PEPTIDIC) ANTIRETROVIRAL		
atazanavir 150 mg capsule	P	QL(Allowed 2 per 1 day)
atazanavir 200 mg capsule	P	QL(Allowed 2 per 1 day)
atazanavir 300 mg capsule	P	QL(Allowed 2 per 1 day)
Crixivan 200 mg capsule	P	QL(Allowed 9 per 1 day)
Crixivan 400 mg capsule	P	QL(Allowed 6 per 1 day)
Evotaz 300 mg-150 mg tablet	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
fosamprenavir 700 mg tablet	P	QL(Allowed 4 per 1 day)
Invirase 500 mg tablet	P	QL(Allowed 4 per 1 day)
Lexiva 50 mg/mL oral suspension	P	QL(Allowed 56 per 1 day)
Lexiva 700 mg tablet	P	QL(Allowed 4 per 1 day)
Norvir 100 mg oral powder packet	P	
Norvir 100 mg tablet	P	QL(Allowed 12 per 1 day)
Norvir 80 mg/mL oral solution	P	QL(Allowed 15 per 1 day)
Reyataz 150 mg capsule	P	QL(Allowed 2 per 1 day)
Reyataz 200 mg capsule	P	QL(Allowed 2 per 1 day)
Reyataz 300 mg capsule	P	QL(Allowed 2 per 1 day)
Reyataz 50 mg oral powder packet	P	QL(Allowed 6 per 1 day)
ritonavir 100 mg tablet	P	QL(Allowed 12 per 1 day)
Viracept 250 mg tablet	P	QL(Allowed 9 per 1 day)
Viracept 625 mg tablet	P	QL(Allowed 4 per 1 day)
RESPIRATORY SYNCYTIAL VIRUS (RSV) ANTIVIRAL AGENTS		

Drug Name	Tier	Drug Restriction
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 MPC 120 mg tablet, delayed release	NP	PA
Doxy-100 100 mg intravenous solution	P	QL(Limit 14 days supply(ies) per fill); Use Generic Products
doxycycline hyclate 100 mg capsule	P	

Drug Name	Tier	Drug Restriction
doxycycline hyclate 100 mg intravenous powder for solution	P	QL(Limit 14 days supply(ies) per fill)
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

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
Morgidox 50 mg capsule	P	
Nuzyra (7 Day) 150 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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		
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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	
cyclophosphamide 50 mg capsule	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 20 mg capsule	NP	PA; SP
Temodar 250 mg capsule	NP	PA; QL(Allowed 2 per 1 day); SP
Temodar 5 mg capsule	NP	PA; SP
temozolomide 100 mg capsule	P	SP
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

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
Nubeqa 300 mg tablet	NP	PA; SP
Xtandi 40 mg capsule	NP	PA; SP
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	MT
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

Drug Name	Tier	Drug Restriction
Tabloid 40 mg tablet	P	SP
ANTINEOPLASTIC - ANTIMETABOLITE - PYRIMIDINE ANALOGS		
capecitabine 150 mg tablet	NP	PA; SP
capecitabine 500 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	MT
Arimidex 1 mg tablet	NP	PA; MT
Aromasin 25 mg tablet	NP	PA
exemestane 25 mg tablet	P	

Drug Name	Tier	Drug Restriction
Femara 2.5 mg tablet	NP	PA; MT
letrozole 2.5 mg tablet	P	MT
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
Calquence 100 mg capsule	NP	PA; SP
Imbruvica 140 mg capsule	NP	PA; SP

Drug Name	Tier	Drug Restriction
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
Kisqali 400 mg/day (200 mg x 2) tablet	NP	PA; SP
Kisqali 600 mg/day (200 mg x 3) tablet	NP	PA; SP

Drug Name	Tier	Drug Restriction
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 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

Drug Name	Tier	Drug Restriction
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 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
ANTINEOPLASTIC - EZH2 HISTONE METHYLTRANSFERASE (HMT) INHIBITOR		
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		

Drug Name	Tier	Drug Restriction
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		
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

Drug Name	Tier	Drug Restriction
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
Kisqali Femara Co-Pack 600 mg/day(200 mg x 3)-2.5 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

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
Cabometyx 20 mg tablet	NP	PA; SP
Cabometyx 40 mg tablet	NP	PA; SP
Cabometyx 60 mg tablet	NP	PA; SP
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 15 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
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

Drug Name	Tier	Drug Restriction
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
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
Lenvima 18 mg/day (10 mg x 1 and 4 mg x 2) capsule	NP	PA; SP

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
Turalio 200 mg capsule	NP	PA; SP
Votrient 200 mg tablet	P	SP
ANTINEOPLASTIC - RETINOIDS		
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	

Drug Name	Tier	Drug Restriction
tamoxifen 10 mg tablet	P	MT
tamoxifen 20 mg tablet	P	MT
toremifene 60 mg tablet	P	
ANTINEOPLASTIC - SELECTIVE RET KINASE INHIBITOR		
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

Drug Name	Tier	Drug Restriction
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
ANTINEOPLASTIC-PYRIMIDINE ANALOG AND CYTIDINE DEAMINASE INHIBITOR COMB		
Inqovi 35 mg-100 mg tablet	NP	PA
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	

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); APA
alcohol swabs	P	QL(Limit 90 days supply(ies) per fill); APA
BD Alcohol Swabs	P	QL(Limit 90 days supply(ies) per fill); APA
CareTouch Alcohol Prep Pad topical pads	P	QL(Limit 90 days supply(ies) per fill); APA
Curity Alcohol Swabs	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Comfort Alcohol Pad topical pads	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Alcohol Prep Pads	P	QL(Limit 90 days supply(ies) per fill); APA
inControl Alcohol Pads	P	QL(Limit 90 days supply(ies) per fill); APA
Pure Comfort Alcohol Pads	P	QL(Limit 90 days supply(ies) per fill); APA
Ultilet Alcohol Swab	P	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
Webcol topical pads	P	QL(Limit 90 days supply(ies) per fill); 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)
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)
Havrix (PF) 1,440 ELISA unit/mL intramuscular syringe	P	AL(Minimum Age 19)

Drug Name	Tier	Drug Restriction
Havrix (PF) 720 ELISA unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Havrix (PF) 720 ELISA unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
Vaqta (PF) 25 unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Vaqta (PF) 25 unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
Vaqta (PF) 50 unit/mL intramuscular suspension	P	AL(Minimum Age 19)
Vaqta (PF) 50 unit/mL intramuscular syringe	P	AL(Minimum Age 19)
HEPATITIS B VACCINES - SINGLE AGENTS		
Engerix-B (PF) 20 mcg/mL intramuscular suspension	P	AL(Minimum Age 19)
Engerix-B (PF) 20 mcg/mL intramuscular syringe	P	AL(Minimum Age 19)
Engerix-B Pediatric (PF) 10 mcg/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)

Drug Name	Tier	Drug Restriction
Engerix-B Pediatric (PF) 10 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
Recombivax HB (PF) 10 mcg/mL intramuscular suspension	P	AL(Minimum Age 19)
Recombivax HB (PF) 10 mcg/mL intramuscular syringe	P	AL(Minimum Age 19)
Recombivax HB (PF) 40 mcg/mL intramuscular suspension	P	AL(Minimum Age 19)
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Recombivax HB (PF) 5 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
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		

Drug Name	Tier	Drug Restriction
Adacel (Tdap Adolesn/Adult)(PF)2 Lf-(2.5-5-3-5)-5 Lf/0.5 mL IM syringe	P	AL(Minimum Age 19)
Adacel (Tdap Adolesn/Adult)(PF)2Lf-(2.5-5-3-5mcg)-5 Lf/0.5 mL IM susp	P	AL(Minimum Age 19)
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Boostrix Tdap 2.5 Lf unit-8 mcg-5 Lf/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
Infanrix (DTaP) (PF) 25 Lf unit-58 mcg-10 Lf/0.5mL intramuscular susp	P	AL(Minimum Age 19)
Infanrix (DTaP)(PF) 25 Lf unit-58mcg-10 Lf/0.5mL intramuscular syringe	P	AL(Minimum Age 19)
TDVAX 2 Lf unit-2 Lf unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular suspension	P	AL(Minimum Age 19)

Drug Name	Tier	Drug Restriction
Tenivac (PF) 5 Lf unit-2 Lf unit/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
tetanus,diphtheria toxoid ped (PF) 5 Lf unit-25 Lf unit/0.5 mL IM susp	P	AL(Minimum Age 19)
tetanus-diphtheria toxoids-Td 2 Lf unit-2 Lf unit/0.5 mL IM suspension	P	AL(Minimum Age 19)
VACCINE BACTERIAL - GRAM NEGATIVE COCCI		
Menactra (PF) 4 mcg/0.5 mL intramuscular solution	P	AL(Minimum Age 19)
Menomune - A/C/Y/W-135 (PF) 50 mcg subcutaneous solution	P	AL(Minimum Age 19)
Menomune - A/C/Y/W-135 50 mcg subcutaneous solution	P	AL(Minimum Age 19)
Menveo A-C-Y-W-135-Dip (PF) 10 mcg-5 mcg/0.5 mL intramuscular kit	P	AL(Minimum Age 19)
VACCINE BACTERIAL - GRAM POSITIVE COCCI		
Pneumovax-23 25 mcg/0.5 mL injection solution	P	AL(Minimum Age 19)
Pneumovax-23 25 mcg/0.5 mL injection syringe	P	AL(Minimum Age 19)

Drug Name	Tier	Drug Restriction
Prevnar 13 (PF) 0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
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)
Trumenba 120 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
VACCINE VIRAL - HUMAN PAPILLOMAVIRUS (HPV) VACCINES		
Cervarix Vaccine (PF) 20 mcg-20 mcg/0.5 mL intramuscular syringe	P	AL(Minimum Age 19)
Gardasil (PF) 20mcg-40mcg-40mcg-20mcg/0.5mL intramuscular suspension	P	AL(Minimum Age 19)
Gardasil (PF) 20mcg-40mcg-40mcg-20mcg/0.5mL intramuscular syringe	P	AL(Minimum Age 19)
Gardasil 9 (PF) 0.5 mL intramuscular suspension	P	AL(Minimum Age 19)
Gardasil 9 (PF) 0.5 mL intramuscular syringe	P	AL(Minimum Age 19)

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); 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); 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); 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); 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); 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); 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); 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); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)

Drug Name	Tier	Drug Restriction
Flucelvax Quad 2020-2021 60 mcg (15 mcg x 4)/0.5 mL intramuscular susp	P	AL(Minimum Age 10); 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); 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 And 49); 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); 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); 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); 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); QL(Allowed 0.5 per Rx); QL(Limit 1 fill(s) per 180 days)
VACCINE VIRAL - VARICELLA		
Shingrix (PF) 50 mcg/0.5 mL intramuscular suspension, kit	P	AL(Minimum Age 50)

Drug Name	Tier	Drug Restriction
Varivax (PF) 1,350 unit/0.5 mL subcutaneous suspension	P	AL(Minimum Age 19)
Zostavax (PF) 19,400 unit/0.65 mL subcutaneous suspension	P	AL(Minimum Age 19)
VACCINE VIRAL COMBINATIONS		
M-M-R II (PF) 1,000-12,500 TCID50/0.5 mL subcutaneous solution	P	AL(Minimum Age 19)
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

Drug Name	Tier	Drug Restriction
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
Tarka 2 mg-240 mg tablet, extended release	NP	PA
Tarka 4 mg-240 mg tablet, extended release	NP	PA
trandolapril 1 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	
trandolapril 2 mg-verapamil ER 180 mg tablet,immed-exten release 24 hr	P	
trandolapril 2 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	
trandolapril 4 mg-verapamil ER 240 mg tablet,immed-exten release 24 hr	P	
ACE INHIBITOR AND DIURETIC COMBINATIONS		
Accuretic 10 mg-12.5 mg tablet	NP	PA; QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
Accuretic 20 mg-12.5 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
Accuretic 20 mg-25 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
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

Drug Name	Tier	Drug Restriction
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
quinapril 10 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 3 per 1 day)
quinapril 20 mg-hydrochlorothiazide 12.5 mg tablet	P	QL(Allowed 4 per 1 day)
quinapril 20 mg-hydrochlorothiazide 25 mg tablet	P	QL(Allowed 2 per 1 day)
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

Drug Name	Tier	Drug Restriction
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
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)

Drug Name	Tier	Drug Restriction
captopril 12.5 mg tablet	P	QL(Allowed 3 per 1 day)
captopril 25 mg tablet	P	QL(Allowed 3 per 1 day)
captopril 50 mg tablet	P	QL(Allowed 3 per 1 day)
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
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

Drug Name	Tier	Drug Restriction
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	
moexipril 7.5 mg tablet	P	
perindopril erbumine 2 mg tablet	NP	PA
perindopril erbumine 4 mg tablet	NP	PA
perindopril erbumine 8 mg tablet	NP	PA
Prinivil 10 mg tablet	NP	PA; MT
Prinivil 20 mg tablet	NP	PA; MT
Qbrelis 1 mg/mL oral solution	NP	PA
quinapril 10 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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.release24hr multiphase	NP	PA; QL(Allowed 1 per 1 day)
carvedilol phosphate ER 20 mg capsule,ext.release24hr multiphase	NP	PA; QL(Allowed 1 per 1 day)
carvedilol phosphate ER 40 mg capsule,ext.release24hr multiphase	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
carvedilol phosphate ER 80 mg capsule,ext.release24hr multiphase	NP	PA; QL(Allowed 1 per 1 day)
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)
Coreg CR 20 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day)
Coreg CR 40 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day)
Coreg CR 80 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day)
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.		

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

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

Drug Name	Tier	Drug Restriction
amlodipine 5 mg-valsartan 160 mg-hydrochlorothiazide 25 mg tablet	NP	ST
Exforge HCT 10 mg-160 mg-12.5 mg tablet	NP	ST
Exforge HCT 10 mg-160 mg-25 mg tablet	NP	ST
Exforge HCT 10 mg-320 mg-25 mg tablet	NP	ST
Exforge HCT 5 mg-160 mg-12.5 mg tablet	NP	ST
Exforge HCT 5 mg-160 mg-25 mg tablet	NP	ST
olmesartan 20 mg-amlodipine 5 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST
olmesartan 40 mg-amlodipine 10 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST
olmesartan 40 mg-amlodipine 10 mg-hydrochlorothiazide 25 mg tablet	NP	ST
olmesartan 40 mg-amlodipine 5 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST

Drug Name	Tier	Drug Restriction
olmesartan 40 mg-amlodipine 5 mg-hydrochlorothiazide 25 mg tablet	NP	ST
Tribenzor 20 mg-5 mg-12.5 mg tablet	NP	ST
Tribenzor 40 mg-10 mg-12.5 mg tablet	NP	ST
Tribenzor 40 mg-10 mg-25 mg tablet	NP	ST
Tribenzor 40 mg-5 mg-12.5 mg tablet	NP	ST
Tribenzor 40 mg-5 mg-25 mg tablet	NP	ST
ANGIOTENSIN II RECEPTOR BLOCKER (ARB)-DIURETIC COMBINATIONS		
Atacand HCT 16 mg-12.5 mg tablet	NP	PA
Atacand HCT 32 mg-12.5 mg tablet	NP	PA
Atacand HCT 32 mg-25 mg tablet	NP	PA
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
Benicar HCT 40 mg-12.5 mg tablet	NP	ST

Drug Name	Tier	Drug Restriction
Benicar HCT 40 mg-25 mg tablet	NP	ST
candesartan 16 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA
candesartan 32 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA
candesartan 32 mg-hydrochlorothiazide 25 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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
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)
Micardis HCT 80 mg-12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Micardis HCT 80 mg-25 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
olmesartan 20 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST
olmesartan 40 mg-hydrochlorothiazide 12.5 mg tablet	NP	ST
olmesartan 40 mg-hydrochlorothiazide 25 mg tablet	NP	ST
telmisartan 40 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
telmisartan 80 mg-hydrochlorothiazide 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
telmisartan 80 mg-hydrochlorothiazide 25 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
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
Atacand 32 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Atacand 4 mg tablet	NP	PA
Atacand 8 mg tablet	NP	PA
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
Benicar 40 mg tablet	NP	ST
Benicar 5 mg tablet	NP	ST
candesartan 16 mg tablet	NP	PA
candesartan 32 mg tablet	NP	PA
candesartan 4 mg tablet	NP	PA
candesartan 8 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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
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)
Micardis 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
Micardis 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
olmesartan 20 mg tablet	NP	ST
olmesartan 40 mg tablet	NP	ST
olmesartan 5 mg tablet	NP	ST
telmisartan 20 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
telmisartan 40 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
telmisartan 80 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
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
Isordil Titradose 5 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
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	
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	MT
Minitran 0.2 mg/hr transdermal 24 hour patch	P	MT

Drug Name	Tier	Drug Restriction
Minitran 0.4 mg/hr transdermal 24 hour patch	P	MT
Minitran 0.6 mg/hr transdermal 24 hour patch	P	MT
Nitro-Bid 2 % transdermal ointment	P	
Nitro-Dur 0.1 mg/hr transdermal 24 hour patch	NP	PA; MT
Nitro-Dur 0.2 mg/hr transdermal 24 hour patch	NP	PA; MT
Nitro-Dur 0.3 mg/hr transdermal 24 hour patch	NP	PA
Nitro-Dur 0.4 mg/hr transdermal 24 hour patch	NP	PA; MT
Nitro-Dur 0.6 mg/hr transdermal 24 hour patch	NP	PA; MT
Nitro-Dur 0.8 mg/hr transdermal 24 hour patch	NP	PA
nitroglycerin 0.1 mg/hr transdermal 24 hour patch	P	MT
nitroglycerin 0.2 mg/hr transdermal 24 hour patch	P	MT

Drug Name	Tier	Drug Restriction
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	MT
nitroglycerin 0.6 mg sublingual tablet	P	MT
nitroglycerin 0.6 mg/hr transdermal 24 hour patch	P	MT
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

Drug Name	Tier	Drug Restriction
Ranexa 500 mg tablet,extended release	NP	PA
ranolazine ER 1,000 mg tablet,extended release,12 hr	NP	PA
ranolazine ER 500 mg tablet,extended release,12 hr	NP	PA
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	
quinidine sulfate 200 mg tablet	P	

Drug Name	Tier	Drug Restriction
quinidine sulfate 300 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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
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	
dofetilide 250 mcg capsule	P	

Drug Name	Tier	Drug Restriction
dofetilide 500 mcg capsule	P	
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
Tikosyn 250 mcg capsule	NP	PA
Tikosyn 500 mcg capsule	NP	PA
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	
Cholestyramine Light 4 gram oral powder	P	MT

Drug Name	Tier	Drug Restriction
Cholestyramine Light 4 gram powder for susp in a packet	P	
colesevelam 3.75 gram oral powder packet	NP	PA
colesevelam 625 mg tablet	NP	PA
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; MT
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
Prevalite 4 gram powder for susp in a packet	P	
Questran 4 gram oral powder	NP	PA; MT

Drug Name	Tier	Drug Restriction
Questran 4 gram powder for susp in a packet	NP	PA
Questran Light 4 gram oral powder	NP	PA; MT
WelChol 3.75 gram oral powder packet	NP	PA
WelChol 625 mg tablet	NP	PA
ANTIHYPERLIPIDEMIC - FIBRIC ACID DERIVATIVES		
Antara 30 mg capsule	NP	PA
Antara 90 mg capsule	NP	PA
fenofibrate 120 mg tablet	P	
fenofibrate 150 mg capsule	P	MT
fenofibrate 160 mg tablet	P	QL(Allowed 1 per 1 day); MT
fenofibrate 40 mg tablet	P	
fenofibrate 50 mg capsule	P	MT
fenofibrate 54 mg tablet	P	QL(Allowed 3 per 1 day); MT
fenofibrate micronized 130 mg capsule	P	
fenofibrate micronized 134 mg capsule	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
fenofibrate micronized 200 mg capsule	P	QL(Allowed 1 per 1 day); MT
fenofibrate micronized 43 mg capsule	P	
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	
fenofibric acid (choline) 45 mg capsule,delayed release	P	
Fenoglide 120 mg tablet	NP	PA
Fenoglide 40 mg tablet	NP	PA
Fibricor 105 mg tablet	NP	PA
Fibricor 35 mg tablet	NP	PA
gemfibrozil 600 mg tablet	P	QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
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
Triglide 160 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
Trilipix 135 mg capsule,delayed release	NP	PA
Trilipix 45 mg capsule,delayed release	NP	PA
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

Drug Name	Tier	Drug Restriction
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
fluvastatin 20 mg capsule	NP	PA
fluvastatin 40 mg capsule	NP	PA
fluvastatin ER 80 mg tablet,extended release 24 hr	NP	PA
Lescol XL 80 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
niacin ER 500 mg tablet,extended release 24 hr	NP	PA
niacin ER 750 mg tablet,extended release 24 hr	NP	PA
Niaspan 1,000 mg tablet,extended release	NP	PA
Niaspan 500 mg tablet,extended release	NP	PA
Niaspan 750 mg tablet,extended release	NP	PA
ANTIHYPERLIPIDEMIC - OMEGA-3 FATTY ACID TYPE		
Lovaza 1 gram capsule	NP	PA
omega-3 acid ethyl esters 1 gram capsule	NP	PA
Vascepa 0.5 gram capsule	NP	PA
Vascepa 1 gram capsule	NP	PA

Drug Name	Tier	Drug Restriction
ANTIHYPERLIPIDEMIC - SELECTIVE CHOLESTEROL ABSORPTION INHIBITOR		
ezetimibe 10 mg tablet	P	
Zetia 10 mg tablet	NP	PA
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
amlodipine 10 mg-atorvastatin 20 mg tablet	NP	PA
amlodipine 10 mg-atorvastatin 40 mg tablet	NP	PA
amlodipine 10 mg-atorvastatin 80 mg tablet	NP	PA
amlodipine 2.5 mg-atorvastatin 10 mg tablet	NP	PA
amlodipine 2.5 mg-atorvastatin 20 mg tablet	NP	PA
amlodipine 2.5 mg-atorvastatin 40 mg tablet	NP	PA
amlodipine 5 mg-atorvastatin 10 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
amlodipine 5 mg-atorvastatin 20 mg tablet	NP	PA
amlodipine 5 mg-atorvastatin 40 mg tablet	NP	PA
amlodipine 5 mg-atorvastatin 80 mg tablet	NP	PA
Caduet 10 mg-10 mg tablet	NP	PA
Caduet 10 mg-20 mg tablet	NP	PA
Caduet 10 mg-40 mg tablet	NP	PA
Caduet 10 mg-80 mg tablet	NP	PA
Caduet 5 mg-10 mg tablet	NP	PA
Caduet 5 mg-20 mg tablet	NP	PA
Caduet 5 mg-40 mg tablet	NP	PA
Caduet 5 mg-80 mg tablet	NP	PA
ANTIHYPERLIPIDEMIC-HMG COA REDUCT INHIB AND CHOLESTEROL ABSORP INHIBIT		
ezetimibe 10 mg-simvastatin 10 mg tablet	NP	ST
ezetimibe 10 mg-simvastatin 20 mg tablet	NP	ST
ezetimibe 10 mg-simvastatin 40 mg tablet	NP	ST
ezetimibe 10 mg-simvastatin 80 mg tablet	NP	ST
Vytorin 10 mg-10 mg tablet	NP	ST
Vytorin 10 mg-20 mg tablet	NP	ST
Vytorin 10 mg-40 mg tablet	NP	ST
Vytorin 10 mg-80 mg tablet	NP	ST
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
ANTI-PCSK9 MONOCLONAL ANTIBODIES		
Praluent Pen 150 mg/mL subcutaneous pen injector	NP	PA; SP

Drug Name	Tier	Drug Restriction
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
Repatha Syringe 140 mg/mL subcutaneous syringe	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	
betaxolol 20 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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	
metoprolol tartrate 50 mg tablet	P	QL(Allowed 4 per 1 day); MT
metoprolol tartrate 75 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
propranolol 40 mg/5 mL (8 mg/mL) oral solution	P	MT
propranolol 60 mg tablet	P	MT
propranolol 80 mg tablet	P	MT
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		

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
Cardizem LA 300 mg tablet,extended release	NP	PA; MT
Cardizem LA 360 mg tablet,extended release	NP	PA; MT
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

Drug Name	Tier	Drug Restriction
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 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
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

Drug Name	Tier	Drug Restriction
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
DILT-XR 120 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
DILT-XR 180 mg capsule, extended release	NP	PA; QL(Allowed 1 per 1 day); MT
DILT-XR 240 mg capsule, extended release	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
Adalat CC 30 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Adalat CC 60 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
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
isradipine 5 mg capsule	NP	PA
Katerzia 1 mg/mL oral suspension	NP	PA
nicardipine 20 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
nicardipine 30 mg capsule	NP	PA
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
nisoldipine ER 20 mg tablet,extended release 24 hr	NP	PA
nisoldipine ER 25.5 mg tablet,extended release 24 hr	NP	PA

Drug Name	Tier	Drug Restriction
nisoldipine ER 30 mg tablet,extended release 24 hr	NP	PA
nisoldipine ER 34 mg tablet,extended release 24 hr	NP	PA
nisoldipine ER 40 mg tablet,extended release 24 hr	NP	PA
nisoldipine ER 8.5 mg tablet,extended release 24 hr	NP	PA
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
Procardia XL 90 mg tablet,extended release	NP	PA; QL(Allowed 1 per 1 day); MT
Sular 17 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Sular 34 mg tablet,extended release	NP	PA
Sular 8.5 mg tablet,extended release	NP	PA
CALCIUM CHANNEL BLOCKERS - DIHYDROPYRIDINES - CEREBROVASCULAR SPECIFIC		
nimodipine 30 mg capsule	P	
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
CARDIOVASCULAR SYMPATHOMIMETIC - ANAPHYLAXIS THERAPY SINGLE AGENTS		
Adrenaclick (child) 0.15 mg/0.15 mL injection,auto-injector	P	
Adrenaclick 0.3 mg/0.3 mL injection, auto-injector	P	
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

Drug Name	Tier	Drug Restriction
CARDIOVASCULAR SYMPATHOMIMETICS		
midodrine 10 mg tablet	P	
midodrine 2.5 mg tablet	P	
midodrine 5 mg tablet	P	
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	
methyldopa 250 mg-hydrochlorothiazide 25 mg tablet	P	
CENTRAL ALPHA-2 RECEPTOR AGONISTS		
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-2 0.2 mg/24 hr transdermal patch	NP	PA; MT
Catapres-TTS-3 0.3 mg/24 hr transdermal patch	NP	PA; MT
clonidine 0.1 mg/24 hr weekly transdermal patch	P	MT
clonidine 0.2 mg/24 hr weekly transdermal patch	P	MT
clonidine 0.3 mg/24 hr weekly transdermal patch	P	MT
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
CaroSpir 25 mg/5 mL oral suspension	NP	PA
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
eplerenone 50 mg tablet	NP	PA
Inspra 25 mg tablet	NP	PA
Inspra 50 mg tablet	NP	PA
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	
methazolamide 50 mg tablet	P	
DIURETIC - LOOP		

Drug Name	Tier	Drug Restriction
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
ethacrynic acid 25 mg tablet	P	
furosemide 10 mg/mL oral solution	P	MT
furosemide 20 mg tablet	P	MT
furosemide 40 mg tablet	P	MT
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

Drug Name	Tier	Drug Restriction
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)
triamterene 100 mg capsule	P	
triamterene 50 mg capsule	P	
DIURETIC - POTASSIUM SPARING-THIAZIDE AND RELATED COMBINATIONS		
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)
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

Drug Name	Tier	Drug Restriction
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		
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
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

Drug Name	Tier	Drug Restriction
Samsca 15 mg tablet	NP	PA; SP
Samsca 30 mg tablet	NP	PA; SP
tolvaptan 30 mg tablet	NP	PA; SP
DIURETIC - THIAZIDES AND RELATED		
chlorothiazide 250 mg tablet	P	QL(Allowed 2 per 1 day); MT
chlorothiazide 500 mg tablet	P	QL(Allowed 4 per 1 day); MT
chlorthalidone 25 mg tablet	P	MT
chlorthalidone 50 mg tablet	P	MT
Diuril 250 mg/5 mL oral suspension	P	
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

Drug Name	Tier	Drug Restriction
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	
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

Drug Name	Tier	Drug Restriction
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
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		
Demser 250 mg capsule	P	SP

Drug Name	Tier	Drug Restriction
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
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
aliskiren 300 mg tablet	NP	PA
Tekturna 150 mg tablet	NP	PA
Tekturna 300 mg tablet	NP	PA
RENIN INHIBITOR, DIRECT AND DIURETIC COMBINATIONS		

Drug Name	Tier	Drug Restriction
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		
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	
hydroxyzine HCl 25 mg tablet	P	MT
hydroxyzine HCl 50 mg tablet	P	MT
hydroxyzine pamoate 100 mg capsule	P	
hydroxyzine pamoate 25 mg capsule	P	

Drug Name	Tier	Drug Restriction
hydroxyzine pamoate 50 mg capsule	P	MT
Vistaril 25 mg capsule	NP	PA
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

Drug Name	Tier	Drug Restriction
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	
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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
meprobamate 400 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
phenobarbital 15 mg tablet	P	
phenobarbital 16.2 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
Epidiolex 100 mg/mL oral solution	NP	SP; APA
ANTICONVULSANT - CARBAMATES		
felbamate 400 mg tablet	NP	APA
felbamate 600 mg tablet	NP	APA
felbamate 600 mg/5 mL oral suspension	NP	APA
Felbatol 400 mg tablet	NP	APA
Felbatol 600 mg tablet	NP	APA
Felbatol 600 mg/5 mL oral suspension	NP	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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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	APA
Lyrica 150 mg capsule	NP	APA
Lyrica 20 mg/mL oral solution	NP	APA
Lyrica 200 mg capsule	NP	APA
Lyrica 225 mg capsule	NP	APA
Lyrica 25 mg capsule	NP	APA
Lyrica 300 mg capsule	NP	APA
Lyrica 50 mg capsule	NP	APA
Lyrica 75 mg capsule	NP	APA

Drug Name	Tier	Drug Restriction
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	APA
pregabalin 150 mg capsule	P	APA
pregabalin 20 mg/mL oral solution	P	APA
pregabalin 200 mg capsule	P	APA
pregabalin 225 mg capsule	P	
pregabalin 25 mg capsule	P	APA
pregabalin 300 mg capsule	P	APA

Drug Name	Tier	Drug Restriction
pregabalin 50 mg capsule	P	APA
pregabalin 75 mg capsule	P	APA
ANTICONVULSANT - GABA RE-UPTAKE INHIBITOR, NIPECOTIC ACID DERIVATIVES		
Gabitril 12 mg tablet	NP	APA
Gabitril 16 mg tablet	NP	APA
Gabitril 2 mg tablet	NP	MT; APA
Gabitril 4 mg tablet	NP	MT; APA
tiagabine 12 mg tablet	NP	APA
tiagabine 16 mg tablet	NP	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; APA
Sabril 500 mg tablet	NP	SP; APA
vigabatrin 500 mg oral powder packet	NP	SP; APA
vigabatrin 500 mg tablet	NP	SP; APA

Drug Name	Tier	Drug Restriction
Vigadrone 500 mg oral powder packet	NP	SP; 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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
ANTICONVULSANT - MONOSACCHARIDE DERIVATIVES		
Qudexy XR 100 mg capsule sprinkle,extended release	NP	APA
Qudexy XR 150 mg capsule sprinkle,extended release	NP	APA
Qudexy XR 200 mg capsule sprinkle,extended release	NP	APA
Qudexy XR 25 mg capsule sprinkle,extended release	NP	APA
Qudexy XR 50 mg capsule sprinkle,extended release	NP	APA
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

Drug Name	Tier	Drug Restriction
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	APA
topiramate XR 150 mg capsule sprinkle,extended release 24 hr	NP	APA
topiramate XR 200 mg capsule sprinkle,extended release 24 hr	NP	APA
topiramate XR 25 mg capsule sprinkle,extended release 24 hr	NP	APA
topiramate XR 50 mg capsule sprinkle,extended release 24 hr	NP	APA
Trokendi XR 100 mg capsule, extended release	NP	APA

Drug Name	Tier	Drug Restriction
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
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	APA
Lamictal ODT 200 mg disintegrating tablet	NP	APA
Lamictal ODT 25 mg disintegrating tablet	NP	APA

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

Drug Name	Tier	Drug Restriction
Lamictal XR 250 mg tablet,extended release	NP	ST; APA
Lamictal XR 300 mg tablet,extended release	NP	ST; APA
Lamictal XR 50 mg tablet,extended release	NP	ST; APA
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	APA
lamotrigine 100 mg tablet	P	MT; APA
lamotrigine 150 mg tablet	P	MT; APA
lamotrigine 200 mg disintegrating tablet	NP	APA
lamotrigine 200 mg tablet	P	MT; APA

Drug Name	Tier	Drug Restriction
lamotrigine 25 mg (21)-50 mg (7) tablet,disintegrating, pack	NP	PA
lamotrigine 25 mg (35) tablets in a dose pack	NP	APA
lamotrigine 25 mg (42)-100 mg (7) tablets in a dose pack	NP	APA
lamotrigine 25 mg (84)-100 mg (14) tablets in a dose pack	NP	APA
lamotrigine 25 mg chewable dispersible tablet	P	MT; APA
lamotrigine 25 mg disintegrating tablet	NP	APA
lamotrigine 25 mg tablet	P	MT; APA
lamotrigine 25 mg(14)-50 mg(14)-100 mg(7) tablet,disintegrating, pack	NP	PA
lamotrigine 5 mg chewable dispersible tablet	P	MT; APA
lamotrigine 50 mg (42)-100 mg (14) tablet,disintegrating, pack	NP	PA
lamotrigine 50 mg disintegrating tablet	NP	APA

Drug Name	Tier	Drug Restriction
lamotrigine ER 100 mg tablet,extended release 24 hr	NP	ST; APA
lamotrigine ER 200 mg tablet,extended release 24 hr	NP	ST; APA
lamotrigine ER 25 mg tablet,extended release 24 hr	NP	ST; APA
lamotrigine ER 250 mg tablet,extended release 24 hr	NP	ST; APA
lamotrigine ER 300 mg tablet,extended release 24 hr	NP	ST; APA
lamotrigine ER 50 mg tablet,extended release 24 hr	NP	ST; 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	APA
Subvenite Starter (Green) Kit 25 mg (84)-100 mg (14) tablet, dose pack	NP	APA

Drug Name	Tier	Drug Restriction
Subvenite Starter (Orange) Kit 25 mg (42)-100 mg (7) tablet, dose pack	NP	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
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

Drug Name	Tier	Drug Restriction
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
Banzel 400 mg tablet	NP	SP; APA

Drug Name	Tier	Drug Restriction
ANTICONVULSANT OTHERS		
Diacomit 250 mg capsule	NP	APA
Diacomit 250 mg oral powder packet	NP	APA
Diacomit 500 mg capsule	NP	APA
Diacomit 500 mg oral powder packet	NP	APA
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

Drug Name	Tier	Drug Restriction
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); QL(Limit 90 days supply(ies) per fill)
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)
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)
mirtazapine 45 mg tablet	P	QL(Allowed 1 per 1 day); MT
mirtazapine 7.5 mg tablet	P	QL(Allowed 1 per 1 day)
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); QL(Limit 90 days supply(ies) per fill)
Remeron SolTab 30 mg disintegrating tablet	NP	PA; QL(Allowed 1.5 per 1 day)

Drug Name	Tier	Drug Restriction
Remeron SolTab 45 mg disintegrating tablet	NP	PA; QL(Allowed 1 per 1 day)
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
phenelzine 15 mg tablet	P	
tranylcypromine 10 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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)
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	
fluoxetine 10 mg capsule	P	QL(Allowed 4 per 1 day); MT
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
fluoxetine 20 mg/5 mL (4 mg/mL) oral solution	P	QL(QL Overtime: Allowed 600 over 30 days)

Drug Name	Tier	Drug Restriction
fluoxetine 40 mg capsule	P	QL(Allowed 4 per 1 day); MT
fluoxetine 60 mg tablet	P	
fluoxetine 90 mg capsule,delayed release	NP	PA
fluvoxamine 100 mg tablet	P	QL(Allowed 3 per 1 day)
fluvoxamine 25 mg tablet	P	QL(Allowed 2 per 1 day)
fluvoxamine 50 mg tablet	P	QL(Allowed 2 per 1 day)
fluvoxamine ER 100 mg capsule,extended release 24 hr	NP	PA
fluvoxamine ER 150 mg capsule,extended release 24 hr	NP	PA
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

Drug Name	Tier	Drug Restriction
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
paroxetine ER 25 mg tablet,extended release 24 hr	NP	PA
paroxetine ER 37.5 mg tablet,extended release 24 hr	NP	PA
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
Paxil CR 12.5 mg tablet,extended release	NP	PA
Paxil CR 25 mg tablet,extended release	NP	PA
Paxil CR 37.5 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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
Sarafem 20 mg tablet	NP	PA
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)
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)

Drug Name	Tier	Drug Restriction
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
nefazodone 150 mg tablet	NP	PA
nefazodone 200 mg tablet	NP	PA
nefazodone 250 mg tablet	NP	PA
nefazodone 50 mg tablet	NP	PA
trazodone 100 mg tablet	P	MT
trazodone 150 mg tablet	P	MT
trazodone 300 mg tablet	P	QL(Allowed 2 per 1 day)
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

Drug Name	Tier	Drug Restriction
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
desvenlafaxine ER 50 mg tablet,extended release 24 hr	NP	PA
desvenlafaxine fumarate ER 100 mg tablet, extended release 24 hr	NP	PA
desvenlafaxine fumarate ER 50 mg tablet, extended release 24 hr	NP	PA
desvenlafaxine succinate ER 100 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 4 per 1 day)
desvenlafaxine succinate ER 25 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 1 per 1 day)
desvenlafaxine succinate ER 50 mg tablet,extended release 24 hr	NP	ST; QL(Allowed 1 per 1 day)
Drizalma Sprinkle 20 mg capsule,delayed release	NP	PA

Drug Name	Tier	Drug Restriction
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	
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
Effexor XR 75 mg capsule,extended release	NP	PA; QL(Allowed 5 per 1 day); MT

Drug Name	Tier	Drug Restriction
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)
Pristiq 25 mg tablet,extended release	NP	ST; QL(Allowed 1 per 1 day)
Pristiq 50 mg tablet,extended release	NP	ST; QL(Allowed 1 per 1 day)
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

Drug Name	Tier	Drug Restriction
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
venlafaxine ER 225 mg tablet,extended release 24 hr	NP	PA
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
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
ANTIDEPRESSANT - SSRI AND 5HT1A PARTIAL AGONIST		
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)

Drug Name	Tier	Drug Restriction
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)
ANTIDEPRESSANT - TRICYCLIC-BENZODIAZEPINE COMBINATIONS		
amitriptyline-chlordiazepoxide 12.5 mg-5 mg tablet	P	
amitriptyline-chlordiazepoxide 25 mg-10 mg tablet	P	

Drug Name	Tier	Drug Restriction
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 12 mg-50 mg capsule	NP	PA
Symbyax 3 mg-25 mg capsule	NP	PA
Symbyax 6 mg-25 mg capsule	NP	PA
Symbyax 6 mg-50 mg capsule	NP	PA
ANTIDEPRESSANT-NOREPINEPHRINE AND DOPAMINE REUPTAKE INHIBITORS (NDRIS)		
Aplenzin 174 mg tablet,extended release	NP	PA
Aplenzin 348 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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	
Forfivo XL 450 mg tablet,extended release	NP	PA
Wellbutrin SR 100 mg tablet, 12 hr sustained-release	NP	PA; QL(Allowed 4 per 1 day); MT

Drug Name	Tier	Drug Restriction
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	
amitriptyline 100 mg tablet	P	
amitriptyline 150 mg tablet	P	
amitriptyline 25 mg tablet	P	
amitriptyline 50 mg tablet	P	
amitriptyline 75 mg tablet	P	
amoxapine 100 mg tablet	NP	PA
amoxapine 150 mg tablet	NP	PA
amoxapine 25 mg tablet	NP	PA

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

Drug Name	Tier	Drug Restriction
doxepin 100 mg capsule	P	
doxepin 150 mg capsule	P	
doxepin 25 mg capsule	P	
doxepin 50 mg capsule	P	
doxepin 75 mg capsule	P	
imipramine 10 mg tablet	P	
imipramine 25 mg tablet	P	
imipramine 50 mg tablet	P	
imipramine pamoate 100 mg capsule	NP	PA
imipramine pamoate 125 mg capsule	NP	PA
imipramine pamoate 150 mg capsule	NP	PA
imipramine pamoate 75 mg capsule	NP	PA
maprotiline 25 mg tablet	P	
maprotiline 50 mg tablet	P	

Drug Name	Tier	Drug Restriction
maprotiline 75 mg tablet	P	
Norpramin 10 mg tablet	NP	PA
Norpramin 25 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
nortriptyline 10 mg capsule	P	
nortriptyline 10 mg/5 mL oral solution	P	QL(Allowed 20 per 1 day)
nortriptyline 25 mg capsule	P	
nortriptyline 50 mg capsule	P	
nortriptyline 75 mg capsule	P	
Pamelor 10 mg capsule	NP	PA
Pamelor 25 mg capsule	NP	PA
Pamelor 50 mg capsule	NP	PA
Pamelor 75 mg capsule	NP	PA
protriptyline 10 mg tablet	P	
protriptyline 5 mg tablet	P	
Surmontil 100 mg capsule	NP	PA

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

Drug Name	Tier	Drug Restriction
carbidopa 37.5 mg-levodopa 150 mg-entacapone 200 mg tablet	NP	PA
carbidopa 50 mg-levodopa 200 mg-entacapone 200 mg tablet	NP	PA
Stalevo 100 25 mg-100 mg-200 mg tablet	NP	PA
Stalevo 125 31.25 mg-125 mg-200 mg tablet	NP	PA
Stalevo 150 37.5 mg-150 mg-200 mg tablet	NP	PA
Stalevo 200 50 mg-200 mg-200 mg tablet	NP	PA
Stalevo 50 12.5 mg-50 mg-200 mg tablet	NP	PA
Stalevo 75 18.75 mg-75 mg-200 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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
Sinemet 25 mg-250 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
tolcapone 100 mg tablet	NP	PA
ANTIPARKINSON ADJUVANT - PERIPHERAL COMT INHIBITORS		
Comtan 200 mg tablet	NP	PA
entacapone 200 mg tablet	P	
ANTIPARKINSON ADJUVANT - PERIPHERAL DOPA-DECARBOXYLASE INHIBITORS		
carbidopa 25 mg tablet	P	
Lodosyn 25 mg tablet	NP	PA
ANTIPARKINSON THERAPY - ANTICHOLINERGIC AGENTS		
benztropine 0.5 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
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	
bromocriptine 5 mg capsule	P	
Parlodel 2.5 mg tablet	NP	PA
Parlodel 5 mg capsule	NP	PA
ANTIPARKINSON THERAPY - MONOAMINE OXIDASE INHIBITOR(MAO-B)		
Azilect 0.5 mg tablet	NP	PA
Azilect 1 mg tablet	NP	PA
rasagiline 0.5 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
rasagiline 1 mg tablet	NP	PA
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
Kynmobi 10 mg sublingual film	NP	PA

Drug Name	Tier	Drug Restriction
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
Mirapex ER 0.75 mg tablet,extended release	NP	PA
Mirapex ER 1.5 mg tablet,extended release	NP	PA
Mirapex ER 2.25 mg tablet,extended release	NP	PA
Mirapex ER 3 mg tablet,extended release	NP	PA
Mirapex ER 3.75 mg tablet,extended release	NP	PA
Mirapex ER 4.5 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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
pramipexole 0.125 mg tablet	P	QL(Allowed 3 per 1 day)
pramipexole 0.25 mg tablet	P	QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
pramipexole 0.5 mg tablet	P	QL(Allowed 3 per 1 day)
pramipexole 0.75 mg tablet	P	QL(Allowed 3 per 1 day)
pramipexole 1 mg tablet	P	QL(Allowed 3 per 1 day)
pramipexole 1.5 mg tablet	P	QL(Allowed 3 per 1 day)
pramipexole ER 0.375 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 0.75 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 1.5 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 2.25 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 3 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 3.75 mg tablet,extended release 24 hr	NP	PA
pramipexole ER 4.5 mg tablet,extended release 24 hr	NP	PA

Drug Name	Tier	Drug Restriction
Requip XL 12 mg tablet,extended release	NP	PA
Requip XL 4 mg tablet,extended release	NP	PA
Requip XL 6 mg tablet,extended release	NP	PA
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
ropinirole ER 2 mg tablet,extended release 24 hr	NP	PA
ropinirole ER 4 mg tablet,extended release 24 hr	NP	PA

Drug Name	Tier	Drug Restriction
ropinirole ER 6 mg tablet,extended release 24 hr	NP	PA
ropinirole ER 8 mg tablet,extended release 24 hr	NP	PA
ANTIPSYCHOTIC - ATYP DOPAMINE-SEROTONIN ANTAG DIBENZO-OXEPINO PYRROLES		
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); PA; QL(Allowed 2 per 1 day)
Geodon 20 mg/mL (final concentration) intramuscular solution	NP	PA
Geodon 40 mg capsule	NP	AL(Minimum Age 8); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Geodon 60 mg capsule	NP	AL(Minimum Age 8); PA; QL(Allowed 2 per 1 day)
Geodon 80 mg capsule	NP	AL(Minimum Age 8); PA; QL(Allowed 2 per 1 day)
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); QL(Allowed 2 per 1 day)
ziprasidone 20 mg/mL (final concentration) intramuscular solution	NP	PA
ziprasidone 40 mg capsule	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
ziprasidone 60 mg capsule	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
ziprasidone 80 mg capsule	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
ANTIPSYCHOTIC - ATYPICAL DOPAMINE-SEROTONIN ANTAG- BENZISOXAZOLE DERIV		
Fanapt 1 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
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
Invega 3 mg tablet,extended release	NP	PA
Invega 6 mg tablet,extended release	NP	PA
Invega 9 mg tablet,extended release	NP	PA
Invega Sustenna 117 mg/0.75 mL intramuscular syringe	P	SP

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
paliperidone ER 3 mg tablet,extended release 24 hr	NP	PA
paliperidone ER 6 mg tablet,extended release 24 hr	NP	PA
paliperidone ER 9 mg tablet,extended release 24 hr	NP	PA
Perseris 120 mg abdominal subcutaneous extend release susp syringe kit	NP	PA; SP
Perseris 90 mg abdominal subcutaneous extend release susp syringe kit	NP	PA; SP
Risperdal 0.5 mg tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)
Risperdal 1 mg tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)
Risperdal 1 mg/mL oral solution	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)
Risperdal 2 mg tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)
Risperdal 3 mg tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)
Risperdal 4 mg tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
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); PA; QL(Allowed 2 per 1 day)
risperidone 0.25 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
risperidone 0.5 mg disintegrating tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 2 per 1 day)
risperidone 0.5 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
risperidone 1 mg disintegrating tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 2 per 1 day)
risperidone 1 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
risperidone 1 mg/mL oral solution	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)

Drug Name	Tier	Drug Restriction
risperidone 2 mg disintegrating tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 2 per 1 day)
risperidone 2 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
risperidone 3 mg disintegrating tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 2 per 1 day)
risperidone 3 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
risperidone 4 mg disintegrating tablet	NP	AL(Minimum Age 5); PA; QL(Allowed 2 per 1 day)
risperidone 4 mg tablet	P	AL(Minimum Age 5); QL(Allowed 4 per 1 day)
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
clozapine 100 mg tablet	P	AL(Minimum Age 8); QL(Allowed 9 per 1 day)
clozapine 12.5 mg disintegrating tablet	NP	PA
clozapine 150 mg disintegrating tablet	NP	PA
clozapine 200 mg disintegrating tablet	NP	PA
clozapine 200 mg tablet	P	AL(Minimum Age 8); QL(Allowed 3 per 1 day)
clozapine 25 mg disintegrating tablet	NP	PA

Drug Name	Tier	Drug Restriction
clozapine 25 mg tablet	P	AL(Minimum Age 8); QL(Allowed 3 per 1 day)
clozapine 50 mg tablet	P	AL(Minimum Age 8); QL(Allowed 3 per 1 day)
Clozaril 100 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 9 per 1 day)
Clozaril 200 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 3 per 1 day)
Clozaril 25 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 3 per 1 day)
Clozaril 50 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 3 per 1 day)
FazaClo 100 mg disintegrating tablet	NP	PA
FazaClo 12.5 mg disintegrating tablet	NP	PA
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)
haloperidol 1 mg tablet	P	QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
haloperidol 10 mg tablet	P	QL(Allowed 3 per 1 day)
haloperidol 2 mg tablet	P	
haloperidol 20 mg tablet	P	
haloperidol 5 mg tablet	P	
haloperidol decanoate 100 mg/mL intramuscular solution	P	
haloperidol decanoate 50 mg/mL intramuscular solution	P	
haloperidol lactate 2 mg/mL oral concentrate	P	
ANTIPSYCHOTIC - DIBENZOXAZEPINE DERIVATIVES		
Adasuve 10 mg breath activated	NP	PA
loxapine succinate 10 mg capsule	P	QL(Allowed 4 per 1 day)
loxapine succinate 25 mg capsule	P	QL(Allowed 4 per 1 day)
loxapine succinate 5 mg capsule	P	QL(Allowed 4 per 1 day)
loxapine succinate 50 mg capsule	P	QL(Allowed 4 per 1 day)
ANTIPSYCHOTIC - DIHYDROINDOLONES		

Drug Name	Tier	Drug Restriction
molindone 10 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
molindone 25 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
molindone 5 mg tablet	NP	PA; QL(Allowed 4 per 1 day)
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)
chlorpromazine 100 mg tablet	P	QL(Allowed 3 per 1 day)
chlorpromazine 200 mg tablet	P	QL(Allowed 3 per 1 day)
chlorpromazine 25 mg tablet	P	QL(Allowed 3 per 1 day)
chlorpromazine 50 mg tablet	P	QL(Allowed 3 per 1 day)
ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERAZINE		
fluphenazine 1 mg tablet	P	
fluphenazine 10 mg tablet	P	
fluphenazine 2.5 mg tablet	P	
fluphenazine 2.5 mg/5 mL oral elixir	P	

Drug Name	Tier	Drug Restriction
fluphenazine 5 mg tablet	P	
fluphenazine 5 mg/mL oral concentrate	P	
fluphenazine decanoate 25 mg/mL injection solution	P	
perphenazine 16 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine 2 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine 4 mg tablet	P	QL(Allowed 4 per 1 day)
perphenazine 8 mg tablet	P	QL(Allowed 4 per 1 day)
trifluoperazine 1 mg tablet	P	QL(Allowed 3 per 1 day)
trifluoperazine 10 mg tablet	P	QL(Allowed 3 per 1 day)
trifluoperazine 2 mg tablet	P	QL(Allowed 3 per 1 day)
trifluoperazine 5 mg tablet	P	QL(Allowed 3 per 1 day)
ANTIPSYCHOTIC - PHENOTHIAZINES, PIPERIDINE		
thioridazine 10 mg tablet	P	QL(Allowed 3 per 1 day)
thioridazine 100 mg tablet	P	QL(Allowed 3 per 1 day)
thioridazine 25 mg tablet	P	QL(Allowed 3 per 1 day)

Drug Name	Tier	Drug Restriction
thioridazine 50 mg tablet	P	QL(Allowed 3 per 1 day)
ANTIPSYCHOTIC - THIOXANTHENES		
thiothixene 1 mg capsule	P	QL(Allowed 3 per 1 day)
thiothixene 10 mg capsule	P	QL(Allowed 3 per 1 day)
thiothixene 2 mg capsule	P	QL(Allowed 3 per 1 day)
thiothixene 5 mg capsule	P	QL(Allowed 3 per 1 day)
ANTIPSYCHOTIC -ATYPICAL DOPAMINE-SEROTONIN ANTAG-DIBENZOTHIAZEPINE DER		
quetiapine 100 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
quetiapine 200 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
quetiapine 25 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
quetiapine 300 mg tablet	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
quetiapine 400 mg tablet	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
quetiapine 50 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
quetiapine ER 150 mg tablet,extended release 24 hr	P	
quetiapine ER 200 mg tablet,extended release 24 hr	P	

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

Drug Name	Tier	Drug Restriction
Seroquel XR 50 mg tablet,extended release	NP	PA
ANTIPSYCHOTIC -ATYPICAL DOPAMINE-SEROTONIN ANTAG-THIENOBENZODIAZEPINES		
olanzapine 10 mg disintegrating tablet	P	
olanzapine 10 mg intramuscular solution	NP	PA
olanzapine 10 mg tablet	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
olanzapine 15 mg disintegrating tablet	P	
olanzapine 15 mg tablet	P	AL(Minimum Age 8); QL(Allowed 1 per 1 day)
olanzapine 2.5 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
olanzapine 20 mg disintegrating tablet	P	
olanzapine 20 mg tablet	P	AL(Minimum Age 8); QL(Allowed 1 per 1 day)
olanzapine 5 mg disintegrating tablet	P	
olanzapine 5 mg tablet	P	AL(Minimum Age 8); QL(Allowed 4 per 1 day)
olanzapine 7.5 mg tablet	P	AL(Minimum Age 8); QL(Allowed 2 per 1 day)
Zyprexa 10 mg intramuscular solution	NP	PA

Drug Name	Tier	Drug Restriction
Zyprexa 10 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 2 per 1 day)
Zyprexa 15 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 1 per 1 day)
Zyprexa 2.5 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 4 per 1 day)
Zyprexa 20 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 1 per 1 day)
Zyprexa 5 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 4 per 1 day)
Zyprexa 7.5 mg tablet	NP	AL(Minimum Age 8); PA; QL(Allowed 2 per 1 day)
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
Zyprexa Zydis 15 mg disintegrating tablet	NP	PA
Zyprexa Zydis 20 mg disintegrating tablet	NP	PA

Drug Name	Tier	Drug Restriction
Zyprexa Zydis 5 mg disintegrating tablet	NP	PA
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); PA; QL(Allowed 1 per 1 day)
Abilify 15 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Abilify 2 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Abilify 20 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Abilify 30 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Abilify 5 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Abilify Maintena 300 mg intramuscular suspension,extended release	P	SP
Abilify Maintena 300 mg suspension,extended rel. intramuscular syringe	P	SP

Drug Name	Tier	Drug Restriction
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
Abilify MyCite 5 mg tablet with sensor and patch	NP	PA; SP
aripiprazole 1 mg/mL oral solution	NP	AL(Minimum Age 6); PA; QL(QL Overtime: Allowed 750 over 30 days)
aripiprazole 10 mg disintegrating tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
aripiprazole 10 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
aripiprazole 15 mg disintegrating tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
aripiprazole 15 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
aripiprazole 2 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
aripiprazole 20 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
aripiprazole 30 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
aripiprazole 5 mg tablet	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
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

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
clonidine HCl ER 0.1 mg tablet,extended release,12 hr	P	
guanfacine ER 1 mg tablet,extended release 24 hr	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
guanfacine ER 2 mg tablet,extended release 24 hr	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
guanfacine ER 3 mg tablet,extended release 24 hr	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
guanfacine ER 4 mg tablet,extended release 24 hr	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
Intuniv ER 1 mg tablet,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Intuniv ER 2 mg tablet,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Intuniv ER 3 mg tablet,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Intuniv ER 4 mg tablet,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
ATTENTION DEFICIT-HYPERACTIVITY (ADHD) THERAPY, STIMULANT-TYPE		
Adderall 10 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall 12.5 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Adderall 15 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall 20 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall 30 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall 5 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall 7.5 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 2 per 1 day)
Adderall XR 10 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adderall XR 15 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adderall XR 20 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adderall XR 25 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adderall XR 30 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adderall XR 5 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Adhansia XR 25 mg capsule,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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); QL(Allowed 1 per 1 day)
Concerta 27 mg tablet,extended release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
Concerta 36 mg tablet,extended release	P	AL(Minimum Age 6); QL(Allowed 2 per 1 day)
Concerta 54 mg tablet,extended release	P	AL(Minimum Age 6); 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

Drug Name	Tier	Drug Restriction
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); QL(Allowed 2 per 1 day)
dexmethylphenidate 2.5 mg tablet	P	AL(Minimum Age 6); QL(Allowed 2 per 1 day)
dexmethylphenidate 5 mg tablet	P	AL(Minimum Age 6); 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

Drug Name	Tier	Drug Restriction
dexmethylphenidate ER 35 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 40 mg capsule,extended release biphasic50-50	NP	PA
dexmethylphenidate ER 5 mg capsule,extended release biphasic50-50	NP	PA
dextroamphetamine-amphetamine 10 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 12.5 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 15 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 20 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 30 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 5 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)
dextroamphetamine-amphetamine 7.5 mg tablet	P	AL(Minimum Age 3); QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
dextroamphetamine -amphetamine ER 10 mg 24hr capsule,extend release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
dextroamphetamine -amphetamine ER 15 mg 24hr capsule,extend release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
dextroamphetamine -amphetamine ER 20 mg 24hr capsule,extend release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
dextroamphetamine -amphetamine ER 25 mg 24hr capsule,extend release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
dextroamphetamine -amphetamine ER 30 mg 24hr capsule,extend release	P	AL(Minimum Age 6); QL(Allowed 1 per 1 day)
dextroamphetamine -amphetamine ER 5 mg 24hr capsule,extend release	P	AL(Minimum Age 6); 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); PA; QL(Allowed 2 per 1 day)
Focalin 2.5 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
Focalin 5 mg tablet	NP	AL(Minimum Age 6); PA; QL(Allowed 2 per 1 day)
Focalin XR 10 mg capsule,extended release	P	
Focalin XR 15 mg capsule,extended release	P	
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

Drug Name	Tier	Drug Restriction
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); 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); QL(Allowed 3 per 1 day)
methylphenidate 5 mg chewable tablet	NP	PA
methylphenidate 5 mg tablet	P	AL(Minimum Age 3); QL(Allowed 6 per 1 day)

Drug Name	Tier	Drug Restriction
methylphenidate 5 mg/5 mL oral solution	NP	PA
methylphenidate CD 10 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 20 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 30 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 40 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 50 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate CD 60 mg biphasic 30-70 capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
methylphenidate ER 10 mg capsule,extended release (40-60) sprinkle	NP	PA

Drug Name	Tier	Drug Restriction
methylphenidate ER 10 mg tablet,extended release	P	AL(Minimum Age 6); 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); 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); QL(Allowed 1 per 1 day)
methylphenidate ER 27 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6); 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); PA; QL(Allowed 2 per 1 day)

Drug Name	Tier	Drug Restriction
methylphenidate ER 40 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 50 mg capsule,extended release (40-60) sprinkle	NP	PA
methylphenidate ER 54 mg tablet,extended release 24 hr	NP	AL(Minimum Age 6); 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

Drug Name	Tier	Drug Restriction
methylphenidate LA 40 mg biphasic 50-50 capsule,extended release	NP	PA
methylphenidate LA 60 mg biphasic 50-50 capsule,extended release	NP	PA
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

Drug Name	Tier	Drug Restriction
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); PA; QL(Allowed 3 per 1 day)
Ritalin 20 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 3 per 1 day)
Ritalin 5 mg tablet	NP	AL(Minimum Age 3); 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	

Drug Name	Tier	Drug Restriction
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); ST
atomoxetine 100 mg capsule	NP	AL(Minimum Age 6); ST
atomoxetine 18 mg capsule	NP	AL(Minimum Age 6); ST
atomoxetine 25 mg capsule	NP	AL(Minimum Age 6); ST
atomoxetine 40 mg capsule	NP	AL(Minimum Age 6); ST

Drug Name	Tier	Drug Restriction
atomoxetine 60 mg capsule	NP	AL(Minimum Age 6); ST
atomoxetine 80 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 10 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 100 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 18 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 25 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 40 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 60 mg capsule	NP	AL(Minimum Age 6); ST
Strattera 80 mg capsule	NP	AL(Minimum Age 6); ST
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	

Drug Name	Tier	Drug Restriction
lithium carbonate 300 mg capsule	P	
lithium carbonate 300 mg tablet	P	
lithium carbonate 600 mg capsule	P	
lithium carbonate ER 300 mg tablet,extended release	P	
lithium carbonate ER 450 mg tablet,extended release	P	
lithium citrate 8 mEq/5 mL (5 mL) oral solution	P	
lithium citrate 8 mEq/5 mL oral solution	P	
Lithobid 300 mg tablet,extended release	NP	PA
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); PA

Drug Name	Tier	Drug Restriction
Dexedrine Spansule 10 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 2 per 1 day)
Dexedrine Spansule 15 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 2 per 1 day)
Dexedrine Spansule 5 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
dextroamphetamine 10 mg tablet	NP	AL(Minimum Age 3); PA; QL(Allowed 3 per 1 day)
dextroamphetamine 5 mg tablet	NP	AL(Minimum Age 3); 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); PA; QL(Allowed 2 per 1 day)
dextroamphetamine ER 15 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 2 per 1 day)
dextroamphetamine ER 5 mg capsule,extended release	NP	AL(Minimum Age 6); PA; QL(Allowed 1 per 1 day)
Evekeo 10 mg tablet	NP	PA
Evekeo 5 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
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); 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); 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); 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
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

Drug Name	Tier	Drug Restriction
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		
dihydroergotamine 0.5 mg/pump act. (4 mg/mL) nasal spray	NP	PA

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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 6 mg/0.5 mL subcutaneous solution	NP	PA; QL(QL Overtime: Allowed 2.5 over 30 days); QL(Limit 1 fill(s) per 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)
Maxalt 10 mg tablet	NP	PA; QL(QL Overtime: Allowed 12 over 30 days)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
zolmitriptan 2.5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
zolmitriptan 2.5 mg tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)

Drug Name	Tier	Drug Restriction
zolmitriptan 5 mg disintegrating tablet	NP	PA; QL(QL Overtime: Allowed 6 over 30 days)
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
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

Drug Name	Tier	Drug Restriction
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		
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
NARCOLEPSY THERAPY AGENTS - DOPAMINE AND NE REUPTAKE INHIBITOR (DNRI)		

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
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
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
Intermezzo 1.75 mg sublingual 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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Dayvigo 5 mg tablet	NP	PA
SEDATIVE-HYPNOTIC - TRICYCLIC ANTIDEPRESSANT TYPE		
doxepin 3 mg tablet	NP	PA
doxepin 6 mg tablet	NP	PA
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 2.1 mg-0.3 mg buccal film	P	
Bunavail 4.2 mg-0.7 mg buccal film	P	
Bunavail 6.3 mg-1 mg buccal film	P	
buprenorphine 12 mg-naloxone 3 mg sublingual film	P	
buprenorphine 2 mg-naloxone 0.5 mg sublingual film	P	
buprenorphine 2 mg-naloxone 0.5 mg sublingual tablet	P	

Drug Name	Tier	Drug Restriction
buprenorphine 4 mg-naloxone 1 mg sublingual film	P	
buprenorphine 8 mg-naloxone 2 mg sublingual film	P	
buprenorphine 8 mg-naloxone 2 mg sublingual tablet	P	
buprenorphine HCl 2 mg sublingual tablet	P	
buprenorphine HCl 8 mg sublingual tablet	P	
Probuphine 74.2 mg subdermal implant	P	SP
Sublocade 100 mg/0.5 mL solution,extended release subcutaneous syringe	P	SP
Sublocade 300 mg/1.5 mL solution,extended release subcutaneous syringe	P	SP
Suboxone 12 mg-3 mg sublingual film	P	
Suboxone 2 mg-0.5 mg sublingual film	P	
Suboxone 4 mg-1 mg sublingual film	P	

Drug Name	Tier	Drug Restriction
Suboxone 8 mg-2 mg sublingual film	P	
Zubsolv 0.7 mg-0.18 mg sublingual tablet	P	
Zubsolv 1.4 mg-0.36 mg sublingual tablet	P	
Zubsolv 11.4 mg-2.9 mg sublingual tablet	P	
Zubsolv 2.9 mg-0.71 mg sublingual tablet	P	
Zubsolv 5.7 mg-1.4 mg sublingual tablet	P	
Zubsolv 8.6 mg-2.1 mg sublingual tablet	P	
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	

Drug Name	Tier	Drug Restriction
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(Limit 180 days supply(ies) per 365 days)
SMOKING DETERRENTS - NICOTINE-TYPE		
nicotine (polacrilex) 2 mg buccal lozenge	P	QL(Allowed 20 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
nicotine (polacrilex) 2 mg buccal mini lozenge	P	QL(Allowed 20 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
nicotine (polacrilex) 2 mg gum	P	QL(Allowed 24 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
nicotine (polacrilex) 4 mg buccal lozenge	P	QL(Allowed 20 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
nicotine (polacrilex) 4 mg buccal mini lozenge	P	QL(Allowed 20 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
nicotine (polacrilex) 4 mg gum	P	QL(Allowed 24 per 1 day); 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(Limit 180 days supply(ies) per 365 days)

Drug Name	Tier	Drug Restriction
nicotine 21 mg/24 hr daily transdermal patch	P	QL(Allowed 1 per 1 day); 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(Limit 180 days supply(ies) per 365 days)
nicotine 7 mg/24 hr daily transdermal patch	P	QL(Limit 180 days supply(ies) per 365 days)
Nicotrol 10 mg inhalation cartridge	P	QL(QL Overtime: Allowed 504 over 30 days); 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(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(Limit 180 days supply(ies) per 365 days)
Chantix 1 mg tablet	P	QL(Allowed 2 per 1 day); QL(Limit 180 days supply(ies) per 365 days)
Chantix Continuing Month Box 1 mg tablet	P	QL(Allowed 2 per 1 day); 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(Limit 180 days supply(ies) per 365 days)
CHEMICALS-PHARMACEUTICAL ADJUVANTS		
BULK CHEMICALS		

Drug Name	Tier	Drug Restriction
formaldehyde (bulk) 10 % solution	P	QL(Allowed 90 per Rx)
PHARMACEUTICAL ADJUVANT - INHALATION VEHICLES		
sodium chloride 0.9 % for nebulization	P	
COGNITIVE DISORDER THERAPY		
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
Aricept 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
donepezil 10 mg disintegrating tablet	P	
donepezil 10 mg tablet	P	QL(Allowed 1 per 1 day); MT
donepezil 23 mg tablet	P	
donepezil 5 mg disintegrating tablet	P	
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 hr transdermal	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Exelon Patch 9.5 mg/24 hr transdermal	NP	PA; QL(Allowed 1 per 1 day)
galantamine 12 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
galantamine 4 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
galantamine 4 mg/mL oral solution	NP	PA; QL(Allowed 6 per 1 day)
galantamine 8 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
galantamine ER 16 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
galantamine ER 24 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
galantamine ER 8 mg 24 hr capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
Razadyne 4 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Razadyne ER 16 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
Razadyne ER 24 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Razadyne ER 8 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
rivastigmine 1.5 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
rivastigmine 13.3 mg/24 hour transdermal patch	NP	PA
rivastigmine 3 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
rivastigmine 4.5 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
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)
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
memantine 2 mg/mL oral solution	NP	PA
memantine 21 mg capsule sprinkle,extended release 24hr	NP	PA

Drug Name	Tier	Drug Restriction
memantine 28 mg capsule sprinkle,extended release 24hr	NP	PA
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)
memantine 7 mg capsule sprinkle,extended release 24hr	NP	PA
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)
Namenda XR 14 mg capsule sprinkle,extended release	NP	PA
Namenda XR 21 mg capsule sprinkle,extended release	NP	PA
Namenda XR 28 mg capsule sprinkle,extended release	NP	PA

Drug Name	Tier	Drug Restriction
Namenda XR 7 mg capsule sprinkle,extended release	NP	PA
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 INJECTABLE - PROGESTIN		

Drug Name	Tier	Drug Restriction
Depo-Provera 150 mg/mL intramuscular suspension	P	QL(Allowed 1 per Rx)
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)
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)
Amethia Lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	
Ashlyna 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Bekyree (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
Camrese 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Camrese Lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	
Daysee 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
desogestrel-e.estradiol 0.15 mg-0.02 mg(21)/e.estrad 0.01 mg(5) tablet	P	QL(Allowed 1 per 1 day); MT
Jaimiess 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Kariva (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
L norgest/E estradiol-E estrad 0.10 mg-20 mcg (84)/10 mcg(7) tabs,3mos	P	
L norgest/E estradiol-E estrad 0.15 mg-30 mcg (84)/10 mcg(7) tabs,3mos	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Lo Loestrin Fe 1 mg-10 mcg (24)/10 mcg (2) tablet	P	
LoJaimiess 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	
LoSeasonique 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	
Mircette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
Pimtrea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
Seasonique 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Simliya (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
Simpesse 0.15 mg-30 mcg (84)/10 mcg(7) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Viorele (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Volnea (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet	P	QL(Allowed 1 per 1 day); MT
CONTRACEPTIVE ORAL - MONOPHASIC		
Afirmelle 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Altavera (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Alyacen 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Amethyst (28) 90 mcg-20 mcg tablet	P	
Apri 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Aubra 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Aubra EQ 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Aurovela 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Aurovela 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Aurovela 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Aurovela Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Aurovela Fe 1-20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Aviane 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Ayuna 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Balcoltra 0.1 mg-0.02 mg(21)/36.5 mg(7) tablet	P	
Balziva (28) 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Beyaz (28) 3 mg-0.02 mg-0.451 mg (24)/0.451 mg (4) tablet	P	
Blisovi 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Blisovi Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Blisovi Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Briellyn 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Charlotte 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	

Drug Name	Tier	Drug Restriction
Chateal (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Chateal EQ (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Cryselle (28) 0.3 mg-30 mcg tablet	P	QL(Allowed 2 per 1 day); MT
Cyclafem 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Cyred 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Cyred EQ 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Dasetta 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
desogestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
drospiren-e.estrad-l.mefol 3 mg-0.02 mg-0.451 mg(24)/0.451 mg(4)tablet	P	
drospiren-e.estrad-l.mefol 3 mg-0.03 mg-0.451 mg(21)/0.451 mg(7)tablet	P	
drospirenone 3 mg-ethinyl estradiol 0.02 mg tablet	P	QL(Allowed 1 per 1 day); MT
drospirenone 3 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Elinest 0.3 mg-30 mcg tablet	P	QL(Allowed 2 per 1 day); MT
Emoquette 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Enskyce 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Estarylla 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
ethynodiol diacetate-ethinyl estradiol 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
ethynodiol diacetate-ethinyl estradiol 1 mg-50 mcg tablet	P	MT
Falmina (28) 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Femynor 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Generess Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	
Gianvi (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); MT
Gildess 1.5/30 (21) 1.5 mg-30 mcg tablet	P	MT
Gildess 1/20 (21) 1 mg-20 mcg tablet	P	MT
Hailey 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Hailey 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Hailey Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Hailey Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Introvale 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Isibloom 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Jasmiel (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); MT
Jolessa 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Juleber 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Junel 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Junel 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Junel FE 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT

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); MT
Junel Fe 24 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Kaitlib Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	
Kalliga 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Kelnor 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Kelnor 1-50 1 mg-50 mcg tablet	P	MT
Kurvelo (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Larin 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Larin 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Larin 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Larin Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Larin Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Larissia 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Layolis Fe 0.8 mg-25 mcg (24)/75 mg (4) chewable tablet	P	
Lessina 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
levonorgestrel 0.15 mg-ethinyl estradiol 0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
levonorgestrel 0.15 mg-ethinyl estradiol 30 mcg tablets,3 mos pack(91)	P	QL(Allowed 1 per 1 day)
levonorgestrel-ethinyl estradiol 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
levonorgestrel-ethinyl estradiol 90 mcg-20 mcg (28) tablet	P	
Levora-28 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Lillow (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Loestrin 1.5/30 (21) 1.5 mg-30 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Loestrin 1/20 (21) 1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT

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

Drug Name	Tier	Drug Restriction
Microgestin Fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Microgestin FE 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	MT
Mili 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Minastrin 24 Fe 1 mg-20 mcg (24)/75 mg (4) chewable tablet	P	
Mono-Linyah 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Necon 0.5/35 (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Nikki (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); MT
norethindrone 1 mg-e. estradiol 20 mcg (24)-iron 75 mg (4) chew tablet	P	
norethindrone 1 mg-ethinyl estradiol 20 mcg (21)-iron 75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
norethindrone 1.5 mg-ethinyl estradiol 30 mcg(21)/iron 75 mg(7) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
norethindrone acetate 1 mg-ethinyl estradiol 20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
norethindrone acetate 1.5 mg-ethinyl estradiol 30 mcg tablet	P	QL(Allowed 1 per 1 day); MT
norethin-ethinyl estradiol-iron 0.4 mg-35 mcg(21)/75 mg(7) chew tablet	P	
norethin-ethinyl estradiol-iron 0.8 mg-25 mcg(24)/75 mg(4) chew tablet	P	
norgestimate 0.25 mg-ethinyl estradiol 35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Nortrel 0.5/35 (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Nortrel 1/35 (21) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Nortrel 1/35 (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Ocella 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Ogestrel (28) 0.5 mg-50 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Orsythia 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Philith 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Pirmella 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Portia 28 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Previfem 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Reclipsen (28) 0.15 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Safyral 3 mg-0.03 mg-0.451 mg (21)/0.451 mg (7) tablet	P	
Setlakin 0.15 mg-30 mcg (91) tablets,3 month dose pack	P	QL(Allowed 1 per 1 day)
Sprintec (28) 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Sronyx 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Syeda 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Tarina 24 Fe 1 mg-20 mcg (24)/75 mg (4) tablet	P	
Tarina Fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT
Tarina Fe 1-20 EQ (28) 1 mg-20 mcg (21)/75 mg (7) tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Taytulla 1 mg-20 mcg (24)/75 mg (4) capsule	P	
Tydemy 3 mg-0.03 mg-0.451 mg (21)(7) tablet	P	
Vienva 0.1 mg-20 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Vyfemla (28) 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
VyLibra 0.25 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Wera (28) 0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Wymzya Fe 0.4 mg-35 mcg (21)/75 mg (7) chewable tablet	P	
Yasmin (28) 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
YAZ (28) 3 mg-0.02 mg tablet	P	QL(Allowed 1 per 1 day); MT
Zarah 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
Zenchent (28) 0.4 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Zovia 1/35E (28) 1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Zumandimine (28) 3 mg-0.03 mg tablet	P	QL(Allowed 1 per 1 day); MT
CONTRACEPTIVE ORAL - PROGESTIN		

Drug Name	Tier	Drug Restriction
Camila 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Deblitane 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Errin 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Heather 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Incassia 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Jencycla 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Jolivette 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Lyza 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Nora-BE 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
norethindrone (contraceptive) 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Norlyda 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Ortho Micronor 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Sharobel 0.35 mg tablet	P	QL(Allowed 1 per 1 day)
Slynd 4 mg (28) tablet	P	
Tulana 0.35 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
CONTRACEPTIVE ORAL - QUADRAPHASIC		
Fayosim 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	
L norgest/E estradiol-E estrad 0.15 mg-20 mcg/0.15 mg-25 mcg tabs,3mos	P	
Natazia 3 mg/2 mg-2 mg/2 mg-3 mg/1 mg tablet	P	
Quartette 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	
Rivelsa 0.15 mg-20 mcg/0.15 mg-25 mcg tablets,3 month dose pack	P	
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); MT
Aranelle (28) 0.5 mg/1 mg/0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Caziant (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Cyclafem 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Cyclessa (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); MT
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); MT
Enpresse 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); MT
Estrostep Fe-28 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	
l.norgest-eth.estradiol triphasic 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); MT
Leena 28 0.5 mg/1 mg/0.5 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Levonest (28) 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); MT
norgestimate 0.18 mg/0.215 mg/0.25 mg-ethinyl estradiol 25 mcg tablet	P	MT
norgestimate-ethinyl estradiol 0.18 mg/0.215mg/0.25mg-35 mcg(28)tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
Nortrel 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Pirmella 0.5/0.75/1 mg-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
Tilia Fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	
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); MT
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); MT
Tri-Legest Fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet	P	
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); MT
Tri-Lo-Estarylla 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	MT
Tri-Lo-Marzia 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	MT
Tri-Lo-Mili 0.18/0.215/0.25 mg-25 mcg tablet	P	MT

Drug Name	Tier	Drug Restriction
Tri-Lo-Sprintec 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet	P	MT
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); MT
TriNessa (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet	P	QL(Allowed 1 per 1 day); MT
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); MT
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); MT
Trivora (28) 50-30 (6)/75-40(5)/125-30(10) tablet	P	QL(Allowed 1 per 1 day); MT
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); MT
Tri-VyLibra Lo 0.18/0.215/0.25 mg-25 mcg tablet	P	MT
Velivet Triphasic Regimen (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet	P	QL(Allowed 1 per 1 day); MT
CONTRACEPTIVE TRANSDERMAL COMBINATIONS - ESTROGEN AND PROGESTIN COMB.		

Drug Name	Tier	Drug Restriction
Xulane 150 mcg-35 mcg/24 hr transdermal patch	P	QL(QL Overtime: Allowed 3 over 28 days)
CONTRACEPTIVES - INTRAVAGINAL, SYSTEMIC - ESTROGEN AND PROGESTIN COMB.		
Annovera 0.15 mg-0.013 mg/24 hr vaginal ring	P	
EluRyng 0.12 mg-0.015 mg/24 hr vaginal ring	P	
etonogestrel 0.12 mg-ethinyl estradiol 0.015 mg/24 hr vaginal ring	P	
NuvaRing 0.12 mg-0.015 mg/24 hr vaginal	P	
EMERGENCY CONTRACEPTIVES		
Aftera 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
EContra EZ 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Econtra One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Ella 30 mg tablet	P	QL(QL Overtime: Allowed 4 over 365 days)
Fallback Solo 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
levonorgestrel 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
My Choice 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)

Drug Name	Tier	Drug Restriction
My Way 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
New Day 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Opcicon One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Option-2 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Plan B One-Step 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
Take Action 1.5 mg tablet	P	QL(QL Overtime: Allowed 1 over 21 days)
DERMATOLOGICAL		
ACNE THERAPY SYSTEMIC - RETINOIDS AND DERIVATIVES		
Absorica 10 mg capsule	NP	AL(Minimum Age 12); PA; QL(Allowed 2 per 1 day)
Absorica 20 mg capsule	NP	AL(Minimum Age 12); PA; QL(Allowed 2 per 1 day)
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); PA; QL(Allowed 2 per 1 day)
Absorica LD 16 mg capsule	NP	PA
Absorica LD 24 mg capsule	NP	PA

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

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

Drug Name	Tier	Drug Restriction
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)
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	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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 % topical foam	NP	PA

Drug Name	Tier	Drug Restriction
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 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

Drug Name	Tier	Drug Restriction
Sumadan 9 %-4.5 % topical kit	NP	PA
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 0.1 %-2.5 % topical gel with pump	NP	PA
Epiduo Forte 0.3 %-2.5 % topical gel with pump	NP	PA

Drug Name	Tier	Drug Restriction
ACNE THERAPY TOPICAL - RETINOIDS AND DERIVATIVES		
adapalene 0.1 % topical cream	NP	PA
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); QL(Allowed 20 per Rx)
Avita 0.025 % topical gel	P	AL(Maximum Age 35); 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

Drug Name	Tier	Drug Restriction
Fabior 0.1 % topical foam	NP	PA
Retin-A 0.01 % topical gel	NP	AL(Maximum Age 35); PA; QL(Allowed 45 per Rx)
Retin-A 0.025 % topical cream	NP	AL(Maximum Age 35); PA; QL(Allowed 20 per Rx)
Retin-A 0.025 % topical gel	NP	AL(Maximum Age 35); PA; QL(Allowed 45 per Rx)
Retin-A 0.05 % topical cream	NP	AL(Maximum Age 35); PA; QL(QL Overtime: Allowed 20 over 30 days)
Retin-A 0.1 % topical cream	NP	AL(Maximum Age 35); 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
tretinoin 0.01 % topical gel	P	AL(Maximum Age 35); QL(Allowed 45 per Rx)

Drug Name	Tier	Drug Restriction
tretinoin 0.025 % topical cream	P	AL(Maximum Age 35); QL(Allowed 20 per Rx)
tretinoin 0.025 % topical gel	P	AL(Maximum Age 35); QL(Allowed 45 per Rx)
tretinoin 0.05 % topical cream	P	AL(Maximum Age 35); QL(QL Overtime: Allowed 20 over 30 days)
tretinoin 0.05 % topical gel	P	
tretinoin 0.1 % topical cream	P	AL(Maximum Age 35); 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 0.0375 % topical cream	NP	PA
TRETIN-X 0.075 % topical cream	NP	PA
ANTIPSORIATIC - RETINOID (VITAMIN A DERIVATIVE) - GLUCOCORTICOID		
Duobrii 0.01 %-0.045 % lotion	NP	PA

Drug Name	Tier	Drug Restriction
ANTIPSORIATIC - VITAMIN D ANALOG - GLUCOCORTICOID COMBINATIONS		
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
silver nitrate 0.5 % topical solution	NP	PA

Drug Name	Tier	Drug Restriction
DERMATOLOGICAL - ANTIBACTERIAL QUINOLONES		
Xepi 1 % topical cream	NP	PA
DERMATOLOGICAL - ANTIBACTERIAL SULFONAMIDES		
SSS 10-5 10 %-5 % (w/w) topical cream	NP	PA
sulfacetamide sodium-sulfur 10 %-5 % (w/w) 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)

Drug Name	Tier	Drug Restriction
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 + 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 cream	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)

Drug Name	Tier	Drug Restriction
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)
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

Drug Name	Tier	Drug Restriction
ciclopirox 1 % shampoo	NP	PA
ciclopirox 8 % topical solution	NP	PA
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		
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)
Ertaczo 2 % topical cream	NP	PA

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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)
DERMATOLOGICAL - ANTINEOPLASTIC ALKYLATING AGENTS		
Valchlor 0.016 % topical gel	NP	PA; SP
DERMATOLOGICAL - ANTINEOPLASTIC ANTIMETABOLITES		

Drug Name	Tier	Drug Restriction
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)
Tolak 4 % topical cream	NP	PA
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		

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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 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

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
ammonium lactate 12 % lotion	P	QL(Allowed 1368 per Rx)
ammonium lactate 12 % topical cream	NP	PA; QL(Allowed 385 per Rx)
urea 39 % topical cream	P	
DERMATOLOGICAL - ENZYMES		
Santyl 250 unit/gram topical ointment	NP	PA
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
ApexiCon E 0.05 % topical cream	NP	PA; QL(Allowed 60 per Rx)
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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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 % lotion	NP	PA
Clobex 0.05 % shampoo	NP	PA
Clobex 0.05 % topical spray	NP	PA
clocortolone pivalate 0.1 % topical cream	NP	PA
Clodan 0.05 % shampoo	NP	PA

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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 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	
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)

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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)
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

Drug Name	Tier	Drug Restriction
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	
Kenalog 0.147 mg/gram topical aerosol	NP	PA
Lexette 0.05 % topical foam	NP	PA
Locoid 0.1 % lotion	NP	PA
Locoid 0.1 % topical cream	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)

Drug Name	Tier	Drug Restriction
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)
Sernivo 0.05 % topical spray with pump	NP	PA
Synalar 0.01 % topical solution	NP	PA
Synalar 0.025 % topical cream	NP	PA
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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-mineral oil-white petrolatum 1 % topical ointment	P	QL(Allowed 454 per Rx)

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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 5 % topical cream packet	P	QL(QL Overtime: Allowed 48 over 180 days)
Zyclara 2.5 % topical cream in a pump	NP	PA
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		

Drug Name	Tier	Drug Restriction
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
Salex 6 % topical combo pack	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 40 % lotion	P	QL(Allowed 325 per Rx)
urea 40 % topical cream	P	QL(Allowed 200 per Rx)
DERMATOLOGICAL - KERATOPLASTIC TAR PRODUCTS		
Anti-Dandruff (coal tar) 0.5 % shampoo	P	
DHS Tar 0.5 % shampoo	P	

Drug Name	Tier	Drug Restriction
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	
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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		
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

Drug Name	Tier	Drug Restriction
Finacea 15 % topical gel	NP	PA
ivermectin 1 % topical cream	NP	PA
MetroCream 0.75 % topical	NP	PA; QL(Allowed 45 per Rx)
Metrogel 1 % topical	NP	PA
Metrogel 1 % topical gel with pump	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

Drug Name	Tier	Drug Restriction
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)
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	NP	PA
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

Drug Name	Tier	Drug Restriction
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 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)
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	

Drug Name	Tier	Drug Restriction
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	
WOUND CARE - GROWTH FACTOR AGENTS		
Regranex 0.01 % topical gel	NP	PA
WOUND CARE COMBINATIONS OTHER		
BPCO topical ointment in packet	NP	PA
DRUGS TO TREAT ERECTILE DYSFUNCTION		
ERECTILE DYSFUNCTION (ED) DRUGS-SEL.CGMP PHOSPHODIESTERASE TYPE5 INHIB		

Drug Name	Tier	Drug Restriction
Cialis 5 mg tablet	NP	PA
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)
Triphrocaps 1 mg capsule	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
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(Limit 14 days supply(ies) per fill)
dextrose 5 % in water (D5W) intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
DIETARY PRODUCT - DIETARY SUPPLEMENTS		

Drug Name	Tier	Drug Restriction
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(Limit 14 days supply(ies) per fill)
sodium chloride 0.9 % injection syringe	P	QL(Limit 14 days supply(ies) per fill)
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)

Drug Name	Tier	Drug Restriction
SPS (with sorbitol) 15 gram-20 gram/60 mL oral suspension	P	
SPS (with sorbitol) 30 gram-40 gram/120 mL enema	P	
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)

Drug Name	Tier	Drug Restriction
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	MT
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	MT
ferrous fumarate 324 mg (106 mg iron) tablet	P	QL(Allowed 2 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)
ferrous sulfate 325 mg (65 mg iron) tablet	P	MT

Drug Name	Tier	Drug Restriction
FerrouSul 325 mg (65 mg iron) tablet	P	MT
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	MT
iron 325 mg (65 mg iron) tablet	P	MT
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	

Drug Name	Tier	Drug Restriction
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	
Oralyte oral solution	P	
Pedialyte Advanced Care oral solution	P	
Pedialyte Freezer Pops oral solution	P	
Pedialyte oral solution	P	

Drug Name	Tier	Drug Restriction
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	MT; Use Generic Products
Klor-Con 20 mEq oral packet	P	Use Generic Products
Klor-Con 8 mEq tablet,extended release	P	MT; Use Generic Products
Klor-Con M10 mEq tablet,extended release	P	MT; Use Generic Products
Klor-Con M15 mEq tablet,extended release	P	

Drug Name	Tier	Drug Restriction
Klor-Con M20 mEq tablet,extended release	P	MT; Use Generic Products
Klor-Con Sprinkle 10 mEq capsule,extended release	P	MT; Use Generic Products
Klor-Con Sprinkle 8 mEq capsule,extended release	P	QL(Allowed 1 per 1 day); MT; 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	MT; Use Generic Products
K-Tab 8 mEq tablet,extended release	P	MT
potassium bicarbonate-citric acid 25 mEq effervescent tablet	P	
potassium chloride 20 mEq oral packet	P	

Drug Name	Tier	Drug Restriction
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	MT
potassium chloride ER 10 mEq tablet,extended release	P	MT
potassium chloride ER 10 mEq tablet,extended release(part/cryst)	P	MT
potassium chloride ER 20 mEq tablet,extended release(part/cryst)	P	MT
potassium chloride ER 8 mEq capsule,extended release	P	QL(Allowed 1 per 1 day); MT
potassium chloride ER 8 mEq tablet,extended release	P	MT
MULTIVITAMIN AND MINERAL COMBINATIONS		
A Thru Z 18 mg-500 mcg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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-Antioxidant 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)
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	

Drug Name	Tier	Drug Restriction
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
Concept OB 85 mg-1 mg capsule	NP	PA
Corvite Free 1.25 mg-400 mcg-125 mcg-35 mg tablet	P	QL(Allowed 1 per 1 day)
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 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)

Drug Name	Tier	Drug Restriction
Daily Vites/Iron 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	
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)
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)
Folivane-OB 85 mg-1 mg capsule	NP	PA
Fosfree 175.5 mg-14.5 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
ICaps AREDS2 (copper citrate) 250 mg-200 unit-12.5 mg-1 mg tablet	P	QL(Allowed 1 per 1 day)
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)

Drug Name	Tier	Drug Restriction
Mega Multivitamin with Minerals 13.5 mg-200 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
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 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)
Men's One Daily tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
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-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)
Niva-Plus 27 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
Nutricap 1 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
OB Complete 50 mg iron-1.25 mg tablet	P	
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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-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)
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); 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)

Drug Name	Tier	Drug Restriction
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 Healthy Skin 18 mg iron-400 mcg-6 mg 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
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
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)

Drug Name	Tier	Drug Restriction
Senior Tabs 0.4 mg-300 mcg-250 mcg tablet	P	QL(Allowed 1 per 1 day)
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)

Drug Name	Tier	Drug Restriction
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
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)

Drug Name	Tier	Drug Restriction
Thera-M 27 mg-0.4 mg tablet	P	QL(Allowed 1 per 1 day)
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)
Therapeutic-M 9 mg iron-400 mcg 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)

Drug Name	Tier	Drug Restriction
Ultimate Women's Complete 50+ 8 mg iron-400 mcg-300 mcg tablet	P	QL(Allowed 1 per 1 day)
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
Virt-PN Plus 28 mg-1 mg-300 mg capsule	NP	PA
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)

Drug Name	Tier	Drug Restriction
Vitamins A-D-E with selenium 10,000 unit-400 unit tablet	P	QL(Allowed 1 per 1 day)
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)
Vol-Plus 27 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
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 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 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)

Drug Name	Tier	Drug Restriction
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)
Zatean-Pn Plus 28 mg-1 mg-300 mg capsule	NP	PA
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)
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)

Drug Name	Tier	Drug Restriction
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	
Daily Multiple For Women 18 mg iron-400 mcg-500 mg Ca tablet	P	QL(Allowed 1 per 1 day)
EnBrace HR 1.5 mg iron-8.73 mg-6.4 mg capsule,immed and delay release	NP	PA
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)

Drug Name	Tier	Drug Restriction
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
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)
One Daily Men's 50 Plus Memory Support 400 mcg-600 mcg-120 mg tablet	P	QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
One Daily Plus Iron 18 mg-400 mcg tablet	P	
One Daily 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 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 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)
One-A-Day Women's Petites 9 mg iron-200 mcg tablet	P	QL(Allowed 1 per 1 day)
PNV-DHA 27 mg iron-1 mg-300 mg capsule	NP	PA
PNV-VP-U 106.5 mg-1 mg capsule	P	
Prenate AM 1 mg-500 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Prenate Chewable 1 mg tablet	NP	PA
Prenate Essential (iron asparto glycinate) 18 mg iron-1 mg-300 mg cap	NP	PA
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

Drug Name	Tier	Drug Restriction
Virt-PN DHA 27 mg iron-1 mg-300 mg capsule	NP	PA
Women's Daily Formula 18 mg iron-400 mcg-500 mg Ca 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)
Yelets 18 mg-400 mcg tablet	P	QL(Allowed 1 per 1 day)
Zatean-Pn DHA 27 mg iron-1 mg-300 mg capsule	NP	PA
PEDIATRIC VITAMINS		
ANIMAL CHEWS tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Animal Shape Vitamins chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Chewable-Vite tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Child Multivitamins chewable tablet	P	AL(Maximum Age 13)
Children's Chew Multivitamin tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Children's Chewable Multivitamin 300 mcg tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)

Drug Name	Tier	Drug Restriction
Children's Chewable Vitamin tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Children's Chewables 300 mcg tablet	P	AL(Maximum Age 13); 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); QL(Allowed 1 per 1 day)
Childs Chew Vite tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Flintstones Gummies Omega-3 DHA 16 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Flintstones Multivitamin chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Pedia Poly-Vite 750 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
pediatric multivitamin chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Poly-Vita 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Poly-Vitamin 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)

Drug Name	Tier	Drug Restriction
Poly-Vitamins chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Tri-Vita 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Tri-Vitamin 1,500 unit-35 mg-400 unit/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Zoo Friends chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
PEDIATRIC VITAMINS AND MINERAL COMBINATIONS		
Animal Shapes Complete chewable tablet	P	AL(Maximum Age 13); 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); QL(Allowed 1 per 1 day)
NovaFerrum Pediatric 10 mg iron/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Pedia Poly-Vite with Iron 10 mg/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Poly-Vi-Sol with Iron 11 mg iron/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Poly-Vita (iron) 1,500 unit-400 unit-10 mg/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)

Drug Name	Tier	Drug Restriction
Poly-Vitamin with Iron 1,500 unit-400 unit-10 mg/mL oral drops	P	AL(Maximum Age 13); 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); 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); QL(Allowed 50 per Rx)
Tri-Vit with Fluoride and Iron 0.25 mg-10 mg/mL oral drops	P	AL(Maximum Age 13); 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); QL(Allowed 50 per Rx)
Floriva Plus 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Multi-Vitamin With Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Multi-Vitamin With Fluoride 0.25 mg/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Multivitamin With Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13); 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); QL(Allowed 1 per 1 day)
Multi-Vitamin With Fluoride 0.5 mg/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Multi-Vitamin With Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Multi-Vitamin-Fluoride (vit E acetate) 0.25 mg/mL oral drops	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
Multivitamins With Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Multivitamins With Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Multivitamins With Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Mvc-Fluoride 0.25 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Mvc-Fluoride 0.5 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
Mvc-Fluoride 1 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
pediatric multivitamin-Fl 0.25 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
pediatric multivitamin-Fl 1 mg chewable tablet	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)

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

Drug Name	Tier	Drug Restriction
Vitamins A,C,D and Fluoride 0.25 mg fluoride (0.55 mg)/mL oral drops	P	AL(Maximum Age 13); 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); 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
C-Nate DHA 28 mg iron-1 mg-200 mg capsule	NP	PA
Complete Natal DHA 29 mg-1 mg-250 mg-200 mg oral pack	NP	PA
CompleteNate 29 mg iron-1 mg chewable tablet	P	QL(Limit 100 days supply(ies) per fill)
Nestabs 32 mg-1,000 mcg tablet	NP	PA
Nestabs DHA 32 mg iron-1,000 mcg-230 mg oral pack	NP	PA
OB Complete One 40 mg-10 mg-1 mg-300 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
OB Complete Petite 35 mg iron-5 mg iron-1 mg capsule	NP	PA
OB Complete Premier 30 mg-20 mg-1 mg tablet	NP	PA
OB Complete With Dha 30 mg iron-10 mg iron-1 mg capsule	NP	PA
PNV 29-1 29 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
PNV OB+DHA 27 mg-1 mg-50 mg-250 mg oral pack	NP	PA
PNV-Select 27 mg-1 mg tablet	NP	PA
Prenatal 19 29 mg iron-1 mg chewable tablet	P	QL(Limit 100 days supply(ies) per fill)
Prenatal 28 mg iron-800 mcg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
Prenatal Plus 29 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
Prenatal Tablet 28 mg iron-800 mcg	P	QL(Limit 100 days supply(ies) per fill); MT
Prenatal Vitamins Plus Low Iron 27 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
Prenate DHA (ferrous asparto glycinate) 18 mg iron-1 mg-300 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
Prenate Elite (iron asparto glycinate) 20 mg iron-1 mg tablet	NP	PA
Prenate Enhance 28 mg iron-1 mg-400 mg capsule	NP	PA
Prenate Mini (ferrous asparto glycinate) 18 mg-1 mg-350 mg capsule	NP	PA
Prenate Pixie 10 mg iron-1 mg-200 mg capsule	NP	PA
Prenate Restore 27 mg iron-1 mg-400 mg capsule	NP	PA
Prenate Star 20 mg iron-1 mg tablet	NP	PA
PrePlus 27 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
PreTAB 29 mg-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill)
PrimaCare 30 mg-1 mg-300 mg capsule	NP	PA
Provida OB 40 mg iron-1.25 mg capsule	NP	PA
Select-OB (folic acid) 29 mg iron-1 mg chewable tablet	NP	PA
Select-OB + DHA 29 mg iron-1 mg-250 mg oral pack	NP	PA

Drug Name	Tier	Drug Restriction
Select-OB 29 mg iron-1 mg chewable tablet	NP	PA
Se-Natal 19 Chewable 29 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill)
Se-Natal-19 29 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill)
TriCare 27 mg iron-1 mg tablet	P	QL(Limit 100 days supply(ies) per fill); MT
Tricare Prenatal DHA ONE 27 mg iron-0.8 mg-215 mg capsule	NP	PA
Trinatal Rx 1 60 mg iron-1 mg tablet	P	QL(Allowed 1 per 1 day); QL(Limit 100 days supply(ies) per fill)
TriStart DHA 31 mg iron-1 mg-200 mg capsule	NP	PA
Tri-Tabs DHA 32 mg iron-1,000 mcg-230 mg oral pack	NP	PA
Triveen-Duo DHA 29 mg-1 mg-400 mg oral pack	NP	PA
Virt-Nate 28 mg iron-1 mg tablet	P	
Virt-Nate DHA 28 mg iron-1 mg-200 mg capsule	NP	PA
Virt-PN 27 mg-1 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
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
Vitafol Gummies 3.33 mg iron-0.33 mg chewable tablet	NP	PA
Vitafol Nano 18 mg iron-1 mg tablet	NP	PA
Vitafol Ultra 29 mg iron-1 mg-200 mg capsule	NP	PA
Vitafol-OB 65 mg-1 mg tablet	P	QL(Allowed 1 per 1 day); QL(Limit 100 days supply(ies) per fill)
Vitafol-OB+DHA 65 mg-1 mg-250 mg oral pack	NP	PA
Vitafol-One 29 mg iron-1 mg-200 mg capsule	NP	PA
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
VP-HEME One 22 mg-6 mg-1 mg-200 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
VP-PNV-DHA 28 mg iron-1 mg-200 mg capsule	NP	PA
SODIUM CHLORIDE FLUSHES		
BD PosiFlush Normal Saline 0.9 % injection syringe	P	QL(Limit 14 days supply(ies) per fill)
BD PosiFlush Saline with Blunt Plastic Cannula injection syringe	P	QL(Limit 14 days supply(ies) per fill)
BD Pre-Filled Normal Saline 0.9 % injection syringe	P	QL(Limit 14 days supply(ies) per fill)
Monoject 0.9% Sodium Chloride injection syringe	P	QL(Limit 14 days supply(ies) per fill)
Monoject Prefill 0.9 % Saline Flush injection syringe	P	QL(Limit 14 days supply(ies) per fill)
Monoject Prefill Advanced 0.9 % Sodium Chloride injection syringe	P	QL(Limit 14 days supply(ies) per fill)
Normal Saline Flush 0.9 % injection syringe	P	QL(Limit 14 days supply(ies) per fill)
sodium chloride 0.9 % (flush) injection syringe	P	QL(Limit 14 days supply(ies) per fill)
sodium chloride 0.9 % (flush) injection syringe with alcohol swab cap	P	QL(Limit 14 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
SwabFlush 0.9 % injection syringe with alcohol swab cap	P	QL(Limit 14 days supply(ies) per fill)
Syrex Sodium Chloride 0.9 % injection syringe	P	QL(Limit 14 days supply(ies) per fill)
SODIUM CHLORIDE, PARENTERAL		
sodium chloride 0.9 % intravenous piggyback	P	QL(Limit 14 days supply(ies) per fill)
sodium chloride 0.9 % intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
VITAMINS - B PREPARATION COMBINATIONS		
VP-GGR-B6 1.2 mg-40 mg-124.1 mg-100 mg tablet	NP	PA
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	

Drug Name	Tier	Drug Restriction
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	
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) 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	
Drisdol 1,250 mcg (50,000 unit) capsule	P	Use Generic Products

Drug Name	Tier	Drug Restriction
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
Rocaltrol 1 mcg/mL oral solution	NP	PA
Vitamin D2 1,250 mcg (50,000 unit) capsule	P	Use Generic Products
VITAMINS - FOLIC ACID AND DERIVATIVES		
Falessa 1 mg tablet	P	
folic acid 1 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
Glucagon (HCl) Emergency Kit 1 mg solution for injection	P	
Glucagon Emergency Kit (human-recomb) 1 mg solution for injection	P	QL(Allowed 1 per Rx)
Proglycem 50 mg/mL oral suspension	P	
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

Drug Name	Tier	Drug Restriction
AndroGel 20.25 mg/1.25 gram (1.62 %) transdermal gel pump	P	Use Generic Products
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
Vogelxo 50 mg/5 gram (1 %) transdermal gel	P	Use Generic Products
ANTIDIURETIC AND VASOPRESSOR HORMONES		
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

Drug Name	Tier	Drug Restriction
Stimate 150 mcg/spray (0.1 mL) nasal spray	P	SP
ANTIHYPERGLYCEMIC - ALPHA-GLUCOSIDASE INHIBITORS		
acarbose 100 mg tablet	P	
acarbose 25 mg tablet	P	
acarbose 50 mg tablet	P	
Glyset 100 mg tablet	NP	PA
Glyset 25 mg tablet	NP	PA
Glyset 50 mg tablet	NP	PA
miglitol 100 mg tablet	P	
miglitol 25 mg tablet	P	
miglitol 50 mg tablet	P	
Precose 100 mg tablet	NP	PA
Precose 25 mg tablet	NP	PA
Precose 50 mg tablet	NP	PA
ANTIHYPERGLYCEMIC - DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		

Drug Name	Tier	Drug Restriction
alogliptin 12.5 mg tablet	NP	PA; QL(Allowed 1 per 1 day); MT
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); MT
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

Drug Name	Tier	Drug Restriction
ANTIHYPERGLYCEMIC - MEGLITINIDE ANALOG AND BIGUANIDE COMBINATIONS		
repaglinide 1 mg-metformin 500 mg tablet	NP	PA
repaglinide 2 mg-metformin 500 mg tablet	NP	PA
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 0.5 mg tablet	NP	PA
Prandin 1 mg tablet	NP	PA
Prandin 2 mg tablet	NP	PA
repaglinide 0.5 mg tablet	NP	PA
repaglinide 1 mg tablet	NP	PA
repaglinide 2 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
Invokamet 150 mg-500 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
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	MT
Invokana 300 mg tablet	P	MT
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

Drug Name	Tier	Drug Restriction
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	
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
Actoplus Met XR 15 mg-1,000 mg tablet,extended release	NP	PA
pioglitazone 15 mg-metformin 500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT

Drug Name	Tier	Drug Restriction
pioglitazone 15 mg-metformin 850 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
ANTIHYPERGLYCEMIC - THIAZOLIDINEDIONE AND SULFONYLUREA COMBINATIONS		
DUETACT 30 mg-2 mg tablet	NP	PA
DUETACT 30 mg-4 mg tablet	NP	PA
pioglitazone 30 mg-glimepiride 2 mg tablet	NP	PA
pioglitazone 30 mg-glimepiride 4 mg tablet	NP	PA
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

Drug Name	Tier	Drug Restriction
Bydureon 2 mg subcutaneous extended release suspension	NP	PA; QL(QL Overtime: Allowed 4 over 30 days)
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
Rybelsus 14 mg tablet	NP	PA
Rybelsus 3 mg tablet	NP	PA
Rybelsus 7 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Tanzeum 30 mg/0.5 mL subcutaneous pen injector	NP	PA
Trulicity 0.75 mg/0.5 mL subcutaneous pen injector	NP	PA
Trulicity 1.5 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

Drug Name	Tier	Drug Restriction
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
Janumet XR 100 mg-1,000 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
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); MT
Jentadueto 2.5 mg-500 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Jentadueto 2.5 mg-850 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
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

Drug Name	Tier	Drug Restriction
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
ANTITHYROID AGENTS, THIONAMIDES - IMIDAZOLE DERIVATIVES		
methimazole 10 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
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	
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
Actonel 35 mg tablet	NP	PA; QL(QL Overtime: Allowed 4 over 28 days)
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 40 mg tablet	P	QL(Allowed 1 per 1 day); MT
alendronate 5 mg tablet	P	QL(Allowed 1 per 1 day); MT
alendronate 70 mg tablet	P	QL(Allowed 4 per 28 days); MT

Drug Name	Tier	Drug Restriction
alendronate 70 mg/75 mL oral solution	P	QL(Allowed 10.8 per 1 day); MT
Atelvia 35 mg tablet,delayed release	NP	PA
Binosto 70 mg effervescent tablet	NP	PA
Boniva 150 mg tablet	NP	PA
Fosamax 70 mg tablet	NP	PA; QL(Allowed 4 per 28 days); MT
ibandronate 150 mg tablet	NP	PA
risedronate 150 mg tablet	NP	PA
risedronate 30 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
risedronate 35 mg tablet	NP	PA; QL(QL Overtime: Allowed 4 over 28 days)
risedronate 35 mg tablet,delayed release	NP	PA
risedronate 5 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
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 0.5 mg-0.1 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
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 0.5 mg-0.1 mg tablet	P	QL(Allowed 1 per 1 day)
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); MT
Alora 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Alora 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Alora 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT

Drug Name	Tier	Drug Restriction
Climara 0.025 mg/24 hr transdermal patch	NP	PA; MT
Climara 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days); MT
Climara 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days); MT
Climara 0.06 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days); MT
Climara 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days); MT
Climara 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 4 per 28 days); MT
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); MT
Dotti 0.0375 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days); MT
Dotti 0.05 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days); MT
Dotti 0.075 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days); MT
Dotti 0.1 mg/24 hr transdermal patch	P	QL(Allowed 8 per 28 days); MT
Elestrin 0.87 gram/actuation (0.06%) transdermal gel pump	NP	PA
Estrace 0.5 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
Estrace 1 mg tablet	NP	PA; MT
Estrace 2 mg tablet	NP	PA; MT
estradiol 0.025 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days); MT
estradiol 0.025 mg/24 hr weekly transdermal patch	P	MT
estradiol 0.0375 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days); MT
estradiol 0.0375 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days); MT
estradiol 0.05 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days); MT
estradiol 0.05 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days); MT
estradiol 0.06 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days); MT
estradiol 0.075 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days); MT
estradiol 0.075 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days); MT

Drug Name	Tier	Drug Restriction
estradiol 0.1 mg/24 hr semiweekly transdermal patch	P	QL(Allowed 8 per 28 days); MT
estradiol 0.1 mg/24 hr weekly transdermal patch	P	QL(Allowed 4 per 28 days); MT
estradiol 0.5 mg tablet	P	MT
estradiol 1 mg tablet	P	MT
estradiol 2 mg tablet	P	MT
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
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

Drug Name	Tier	Drug Restriction
Minivelle 0.025 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Minivelle 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Minivelle 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Minivelle 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Minivelle 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Premarin 0.3 mg tablet	P	QL(Allowed 1 per 1 day)
Premarin 0.45 mg tablet	P	QL(Allowed 1 per 1 day)
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); MT
Vivelle-Dot 0.0375 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Vivelle-Dot 0.05 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT

Drug Name	Tier	Drug Restriction
Vivelle-Dot 0.075 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
Vivelle-Dot 0.1 mg/24 hr transdermal patch	NP	PA; QL(Allowed 8 per 28 days); MT
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; SP
hydroxyprogesterone caproate (pregnancy preserving) 250 mg/mL IM oil	NP	PA; SP
Makena (PF) 275 mg/1.1 mL subcutaneous auto-injector	P	PA; SP
Makena 250 mg/mL (1 mL) intramuscular oil	P	PA; SP
GLUCOCORTICOIDS		
Cortef 10 mg tablet	NP	PA
Cortef 20 mg tablet	NP	PA

Drug Name	Tier	Drug Restriction
Cortef 5 mg tablet	NP	PA
cortisone 25 mg tablet	NP	PA
Decadron 0.5 mg tablet	P	
Decadron 0.5 mg/5 mL oral elixir	P	
Decadron 0.75 mg tablet	P	
Decadron 4 mg tablet	P	
Decadron 6 mg tablet	P	
dexamethasone 0.5 mg tablet	P	
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	

Drug Name	Tier	Drug Restriction
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
hydrocortisone 10 mg tablet	P	
hydrocortisone 20 mg tablet	P	
hydrocortisone 5 mg tablet	P	

Drug Name	Tier	Drug Restriction
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
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	
Millipred DP 5 mg (21 tabs) tablets in a dose pack	P	
Millipred DP 5 mg (48 tabs) tablets in a dose pack	P	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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	
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

Drug Name	Tier	Drug Restriction
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		
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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); QL(Limit 90 days supply(ies) per fill)
Humulin 70/30 U-100 Insulin KwikPen 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin 70/30 U-100 Insulin 100 unit/mL subcutaneous suspension	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin 70-30 FlexPen U-100 Insulin 100 unit/mL (70-30) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
HUMAN INSULINS - INTERMEDIATE ACTING		

Drug Name	Tier	Drug Restriction
Humulin N NPH U-100 Insulin (isophane susp) 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humulin N NPH U-100 Insulin KwikPen 100 unit/mL (3 mL) subcutaneous	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin N Flexpen 100 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin N NPH U-100 Insulin isophane 100 unit/mL subcutaneous susp	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
HUMAN INSULINS - RAPID ACTING		
Afrezza (regular insulin) 8 unit (90)/12 unit (90) cartridge,inhaler	NP	PA
Afrezza 12 unit cartridge with inhaler	NP	PA
Afrezza 4 unit (60)/8 unit (60)/12 unit (60) cartridge with inhaler	NP	PA
Afrezza 4 unit (90)/8 unit (90) cartridge with inhaler	NP	PA
Afrezza 4 unit cartridge with inhaler	NP	PA

Drug Name	Tier	Drug Restriction
Afrezza 8 unit cartridge with inhaler	NP	PA
HUMAN INSULINS - SHORT ACTING		
Humulin R Regular U-100 Insulin 100 unit/mL injection solution	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humulin R U-500 (Conc) Insulin Kwikpen 500 unit/mL (3 mL) subcutaneous	P	QL(Allowed 0.6 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humulin R U-500 (Concentrated) Insulin 500 unit/mL subcutaneous soln	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin R Flexpen 100 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolin R Regular U-100 Insulin 100 unit/mL injection solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
INSULIN ANALOGS - FIXED COMBINATIONS		
Humalog Mix 50-50 (U-100) Insulin 100 unit/mL subcutaneous suspension	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog Mix 50-50 KwikPen U-100 Insulin 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Humalog Mix 75-25 (U-100) Insulin 100 unit/mL subcutaneous suspension	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog Mix 75-25 KwikPen U-100 insulin 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin aspar prot-insulin aspart 100 unit/mL (70-30) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin aspar prt-insulin aspart 100 unit/mL (70-30) subcutaneous soln	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin lispro protamine-lispro 100 unit/mL (75-25) subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolog Mix 70-30 FlexPen U-100 Insulin 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolog Mix 70-30 U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
INSULIN ANALOGS - LONG ACTING		
Basaglar KwikPen U-100 Insulin 100 unit/mL (3 mL) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Lantus Solostar U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Lantus U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Levemir FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Levemir U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Toujeo Max U-300 SoloStar 300 unit/mL (3 mL) subcutaneous insulin pen	NP	PA; QL(Allowed 0.4 per 1 day); QL(Limit 90 days supply(ies) per fill)
Toujeo SoloStar U-300 Insulin 300 unit/mL (1.5 mL) subcutaneous pen	NP	PA; QL(Allowed 0.45 per 1 day); QL(Limit 90 days supply(ies) per fill)
Tresiba FlexTouch U-100 insulin 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Tresiba FlexTouch U-200 insulin 200 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Tresiba U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
INSULIN ANALOGS - RAPID ACTING		
Admelog SoloStar U-100 Insulin lispro 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Admelog U-100 Insulin lispro 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Apidra SoloStar U-100 Insulin 100 unit/mL subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Apidra U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Fiasp FlexTouch U-100 Insulin 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Fiasp Penfill U-100 Insulin 100 unit/mL (3 mL) subcutaneous cartridge	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Fiasp U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)

Drug Name	Tier	Drug Restriction
Humalog Junior KwikPen (U-100) 100 unit/mL subcutaneous half-unit pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog KwikPen (U-100) Insulin 100 unit/mL subcutaneous	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog KwikPen U-200 Insulin 200 unit/mL (3 mL) subcutaneous	P	QL(Allowed 1 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog U-100 Insulin 100 unit/mL subcutaneous cartridge	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Humalog U-100 Insulin 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin aspart (U-100) 100 unit/mL (3 mL) subcutaneous pen	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin aspart U-100 100 unit/mL subcutaneous cartridge	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin aspart U-100 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin lispro (U-100) 100 unit/mL subcutaneous half-unit pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin lispro (U-100) 100 unit/mL subcutaneous pen	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
insulin lispro (U-100) 100 unit/mL subcutaneous solution	P	QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Lyumjev KwikPen U-100 Insulin 100 unit/mL subcutaneous	NP	PA
Lyumjev KwikPen U-200 Insulin 200 unit/mL (3 mL) subcutaneous	NP	PA
Lyumjev U-100 Insulin 100 unit/mL subcutaneous solution	NP	PA
Novolog Flexpen U-100 Insulin aspart 100 unit/mL (3 mL) subcutaneous	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolog PenFill U-100 Insulin aspart 100 unit/mL subcutaneous cartridg	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
Novolog U-100 Insulin aspart 100 unit/mL subcutaneous solution	NP	PA; QL(Allowed 2 per 1 day); QL(Limit 90 days supply(ies) per fill)
INSULIN RESPONSE ENHANCERS - BIGUANIDES		

Drug Name	Tier	Drug Restriction
Fortamet 1,000 mg tablet,extended release	NP	PA
Fortamet 500 mg tablet,extended release	NP	PA
Glucophage 1,000 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
Glucophage 500 mg tablet	NP	PA; QL(Allowed 5 per 1 day); MT
Glucophage XR 500 mg tablet,extended release	NP	PA; QL(Allowed 4 per 1 day); MT
Glucophage XR 750 mg tablet,extended release	NP	PA; QL(Allowed 2 per 1 day); MT
Glumetza 1,000 mg tablet,extended release	NP	PA
Glumetza 500 mg tablet,extended release	NP	PA
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
metformin 850 mg tablet	P	QL(Allowed 3 per 1 day); MT

Drug Name	Tier	Drug Restriction
metformin ER 1,000 mg 24 hr tablet,extended release	P	
metformin ER 1,000 mg tablet,extended release 24hr	P	
metformin ER 500 mg 24 hr tablet,extended release	P	
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	
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
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

Drug Name	Tier	Drug Restriction
Avandia 2 mg tablet	P	QL(Allowed 1 per 1 day); MT
Avandia 4 mg tablet	P	QL(Allowed 1 per 1 day); MT
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		

Drug Name	Tier	Drug Restriction
Brisdelle 7.5 mg capsule	NP	PA
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
Imvexxy Maintenance Pack 4 mcg vaginal insert	NP	PA
Imvexxy Starter Pack 10 mcg vaginal insert, dose pack	NP	PA
Imvexxy Starter Pack 4 mcg vaginal insert, dose pack	NP	PA
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		

Drug Name	Tier	Drug Restriction
Aygestin 5 mg tablet	NP	PA
medroxyprogesterone 10 mg tablet	P	MT
medroxyprogesterone 2.5 mg tablet	P	MT
medroxyprogesterone 5 mg tablet	P	MT
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; MT
Provera 2.5 mg tablet	NP	PA; MT
Provera 5 mg tablet	NP	PA; MT
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)
raloxifene 60 mg tablet	NP	PA; QL(Allowed 1 per 1 day)
SOMATOSTATIC AGENTS		
Bynfezia 2,500 mcg/mL subcutaneous pen injector	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

Drug Name	Tier	Drug Restriction
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
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)		
Armour Thyroid 120 mg tablet	P	
Armour Thyroid 15 mg tablet	P	

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

Drug Name	Tier	Drug Restriction
thyroid (pork) 90 mg tablet	P	
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

Drug Name	Tier	Drug Restriction
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
Levo-T 50 mcg tablet	P	MT
Levo-T 75 mcg tablet	P	MT

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

Drug Name	Tier	Drug Restriction
Levoxyl 125 mcg tablet	P	MT
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

Drug Name	Tier	Drug Restriction
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
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
Tirosint 25 mcg capsule	NP	PA

Drug Name	Tier	Drug Restriction
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
Tirosint-Sol 112 mcg/mL oral solution	NP	PA
Tirosint-Sol 125 mcg/mL oral solution	NP	PA
Tirosint-Sol 13 mcg/mL oral solution	NP	PA
Tirosint-Sol 137 mcg/mL oral solution	NP	PA
Tirosint-Sol 150 mcg/mL oral solution	NP	PA
Tirosint-Sol 175 mcg/mL oral solution	NP	PA
Tirosint-Sol 200 mcg/mL oral solution	NP	PA
Tirosint-Sol 25 mcg/mL oral solution	NP	PA

Drug Name	Tier	Drug Restriction
Tirosint-Sol 50 mcg/mL oral solution	NP	PA
Tirosint-Sol 75 mcg/mL oral solution	NP	PA
Tirosint-Sol 88 mcg/mL oral solution	NP	PA
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
Unithroid 50 mcg tablet	P	MT
Unithroid 75 mcg tablet	P	MT

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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	
Antacid Anti-Gas 200 mg-200 mg-20 mg/5 mL oral suspension	P	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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)
Anti-Diarrheal (loperamide) 2 mg capsule	P	QL(Allowed 8 per 1 day); Use Generic Products

Drug Name	Tier	Drug Restriction
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 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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
Phenadoz 12.5 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products
Phenadoz 25 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 12.5 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 25 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products
Phenergan 50 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx)
prochlorperazine 25 mg rectal suppository	P	
prochlorperazine maleate 10 mg tablet	P	
prochlorperazine maleate 5 mg tablet	P	
promethazine 12.5 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx)
promethazine 25 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx)
promethazine 50 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx)
Promethegan 12.5 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products
Promethegan 25 mg rectal suppository	P	AL(Minimum Age 2); QL(Allowed 12 per Rx); Use Generic Products

Drug Name	Tier	Drug Restriction
Promethegan 50 mg rectal suppository	P	AL(Minimum Age 2); 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)
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

Drug Name	Tier	Drug Restriction
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 40 mg capsule	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

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
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); MT
Chenodal 250 mg tablet	NP	PA; SP
URSO 250 250 mg tablet	NP	PA; QL(Allowed 7 per 1 day); MT
URSO Forte 500 mg tablet	NP	PA; MT
ursodiol 250 mg tablet	NP	PA; QL(Allowed 7 per 1 day); MT

Drug Name	Tier	Drug Restriction
ursodiol 300 mg capsule	P	QL(Allowed 3 per 1 day); MT
ursodiol 500 mg tablet	NP	PA; MT
GASTRIC ACID SECRETION REDUCERS - HISTAMINE H2-RECEPTOR ANTAGONISTS		
cimetidine 200 mg tablet	P	
cimetidine 300 mg tablet	P	
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	MT
famotidine 40 mg tablet	P	MT
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	

Drug Name	Tier	Drug Restriction
Pepcid 20 mg tablet	NP	PA; MT
Pepcid 40 mg tablet	NP	PA; MT
ranitidine 15 mg/mL oral syrup	NP	PA; QL(Allowed 40 per 1 day); MT
ranitidine 150 mg capsule	NP	PA; QL(Allowed 2 per 1 day)
ranitidine 150 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
ranitidine 300 mg capsule	NP	PA; QL(Allowed 1 per 1 day)
ranitidine 300 mg tablet	NP	PA; QL(Allowed 2 per 1 day); MT
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

Drug Name	Tier	Drug Restriction
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
esomeprazole magnesium DR 20 mg granules delayed release for susp	NP	PA
esomeprazole magnesium DR 40 mg granules delayed release for susp	NP	PA
esomeprazole strontium 24.65 mg capsule,delayed release	NP	PA
esomeprazole strontium 49.3 mg capsule,delayed release	NP	PA
lansoprazole 15 mg capsule,delayed release	NP	PA; QL(Allowed 2 per 1 day)
lansoprazole 15 mg delayed release,disintegrating tablet	P	

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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	
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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; MT

Drug Name	Tier	Drug Restriction
Azulfidine EN-tabs 500 mg tablet,delayed release	NP	PA; MT
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)

Drug Name	Tier	Drug Restriction
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	NP	PA
sfRowasa 4 gram/60 mL enema	P	
sulfasalazine 500 mg tablet	P	MT
sulfasalazine 500 mg tablet,delayed release	P	MT
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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
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	
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)

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
Natural Fiber Laxative (sugar) 3.4 gram/12 gram oral powder	P	
Natural Fiber Laxative (sugar) 3.4 gram/7 gram oral powder	P	
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 (psyllium husk) 0.52 gram capsule	P	
Reguloid (psyllium husk-sucrose) 3 gram/12 gram oral powder	P	
Reguloid (psyllium husk-sucrose) 3.4 gram/12 gram oral powder	P	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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)
Evac-U-Gen (sennosides) 8.6 mg tablet	P	

Drug Name	Tier	Drug Restriction
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	
senna 8.6 mg tablet	P	
Senna Lax 8.6 mg tablet	P	

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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
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		

Drug Name	Tier	Drug Restriction
dutasteride 0.5 mg-tamsulosin ER 0.4 mg capsule ext.release 24hr mphas	NP	PA
Jalyn 0.5 mg-0.4 mg capsule, extended release	NP	PA
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

Drug Name	Tier	Drug Restriction
Thiola EC 300 mg tablet,delayed release	NP	PA; SP
OVERACTIVE BLADDER AGENTS - BETA -3 ADRENERGIC RECEPTOR AGONIST		
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
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	

Drug Name	Tier	Drug Restriction
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
PROSTATIC HYPERTROPHY AGENT - ALPHA-1-ADRENOCEPTOR ANTAGONISTS		

Drug Name	Tier	Drug Restriction
alfuzosin ER 10 mg tablet,extended release 24 hr	P	
Flomax 0.4 mg capsule	NP	PA; QL(Allowed 2 per 1 day); MT
Rapaflo 4 mg capsule	NP	PA
Rapaflo 8 mg capsule	NP	PA
silodosin 4 mg capsule	NP	PA
silodosin 8 mg capsule	NP	PA
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
dutasteride 0.5 mg capsule	NP	PA
URINARY ACIDIFIER - BACTERIAL UREASE INHIBITOR		
Lithostat 250 mg tablet	NP	PA
URINARY ACIDIFIER - PHOSPHATES		

Drug Name	Tier	Drug Restriction
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	
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

Drug Name	Tier	Drug Restriction
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
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	

Drug Name	Tier	Drug Restriction
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	
URINARY ANTIBACTERIAL - NITROFURAN DERIVATIVES		
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)

Drug Name	Tier	Drug Restriction
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 ANTIBACTERIAL - QUINOLONES		
Cipro XR 1,000 mg tablet,extended release	NP	PA
Cipro XR 500 mg tablet,extended release	NP	PA
URINARY ANTIBACTERIALS OTHER		
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

Drug Name	Tier	Drug Restriction
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
Ustell 120 mg-0.12 mg capsule	NP	PA
URINARY ANTI-INFECTIVE METHENAMINE-ANTISPASMODIC COMBINATIONS		
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
darifenacin ER 7.5 mg tablet,extended release 24 hr	NP	PA
Enablex 15 mg tablet,extended release	NP	PA
Enablex 7.5 mg tablet,extended release	NP	PA
solifenacin 10 mg tablet	P	
solifenacin 5 mg tablet	P	

Drug Name	Tier	Drug Restriction
Vesicare 10 mg tablet	NP	PA
Vesicare 5 mg tablet	NP	PA
URINARY ANTISPASMODIC - SMOOTH MUSCLE RELAXANTS		
Detrol 1 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Detrol 2 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
Detrol LA 2 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
Detrol LA 4 mg capsule,extended release	NP	PA; QL(Allowed 1 per 1 day)
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
Gelnique 10 % (100 mg/gram) transdermal gel packet	NP	PA
Gelnique 100 mg/gram (10 %) transdermal gel pump	NP	PA
oxybutynin chloride 5 mg tablet	P	QL(Allowed 3 per 1 day); MT

Drug Name	Tier	Drug Restriction
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
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)
tolterodine 2 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
tolterodine ER 2 mg capsule,extended release 24 hr	NP	PA; QL(Allowed 1 per 1 day)
tolterodine ER 4 mg capsule,extended release 24 hr	NP	PA; QL(Allowed 1 per 1 day)
Toviaz 4 mg tablet,extended release	NP	PA
Toviaz 8 mg tablet,extended release	NP	PA

Drug Name	Tier	Drug Restriction
trospium 20 mg tablet	NP	PA; QL(Allowed 2 per 1 day)
trospium ER 60 mg capsule,extended release 24 hr	NP	PA
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
Urecholine 50 mg tablet	NP	PA; MT
GOUT AND HYPERURICEMIA THERAPY		
GOUT ACUTE THERAPY - ANTIMITOTICS		
colchicine 0.6 mg capsule	NP	PA
colchicine 0.6 mg tablet	NP	PA; QL(Allowed 6 per Rx)
Colcrys 0.6 mg tablet	NP	PA; QL(Allowed 6 per Rx)
Gloperba 0.6 mg/5 mL oral solution	NP	PA
Mitigare 0.6 mg capsule	NP	PA

Drug Name	Tier	Drug Restriction
GOUT AND HYPERURICEMIA - ANTIMITOTIC-URICOSURIC COMBINATIONS		
probenecid 500 mg-colchicine 0.5 mg tablet	P	
HYPERURICEMIA THERAPY - URICOSURICS		
probenecid 500 mg tablet	P	
HYPERURICEMIA THERAPY - XANTHINE OXIDASE INHIBITORS		
allopurinol 100 mg tablet	P	MT
allopurinol 300 mg tablet	P	MT
febuxostat 40 mg tablet	NP	PA
febuxostat 80 mg tablet	NP	PA
Uloric 40 mg tablet	NP	PA
Uloric 80 mg tablet	NP	PA
Zyloprim 300 mg tablet	NP	PA; MT
HEMATOLOGICAL AGENTS		
ANTICOAGULANTS - COUMARIN		
Coumadin 1 mg tablet	NP	PA; MT
Coumadin 2 mg tablet	NP	PA; MT
Coumadin 2.5 mg tablet	NP	PA; MT

Drug Name	Tier	Drug Restriction
Coumadin 3 mg tablet	NP	PA; MT
Coumadin 4 mg tablet	NP	PA; MT
Coumadin 5 mg tablet	NP	PA; MT
Jantoven 1 mg tablet	P	MT
Jantoven 10 mg tablet	P	MT
Jantoven 2 mg tablet	P	MT
Jantoven 2.5 mg tablet	P	MT
Jantoven 3 mg tablet	P	MT
Jantoven 4 mg tablet	P	MT
Jantoven 5 mg tablet	P	MT
Jantoven 6 mg tablet	P	MT
Jantoven 7.5 mg tablet	P	MT
warfarin 1 mg tablet	P	MT
warfarin 10 mg tablet	P	MT
warfarin 2 mg tablet	P	MT

Drug Name	Tier	Drug Restriction
warfarin 2.5 mg tablet	P	MT
warfarin 3 mg tablet	P	MT
warfarin 4 mg tablet	P	MT
warfarin 5 mg tablet	P	MT
warfarin 6 mg tablet	P	MT
warfarin 7.5 mg tablet	P	MT
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
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		

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Advate 3,000 (+/-) unit intravenous solution	P	PA; SP
Advate 4,000 (+/-) unit intravenous solution	P	PA; SP
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

Drug Name	Tier	Drug Restriction
Afstyla 1,000 (+/-) unit range intravenous solution	P	PA; SP
Afstyla 1,500 (+/-) unit range intravenous solution	P	PA; SP
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
Eloctate 6,000 unit intravenous solution	P	PA; SP
Eloctate 750 unit intravenous solution	P	PA; SP
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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
Koate 500 (+/-) unit intravenous solution	P	PA; SP
Kogenate FS 1,000 (+/-) unit intravenous solution	P	PA; SP
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

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

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

Drug Name	Tier	Drug Restriction
Wilate 1,000 unit-1,000 unit intravenous solution	P	PA; SP
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

Drug Name	Tier	Drug Restriction
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 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

Drug Name	Tier	Drug Restriction
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
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)		
Leukine 250 mcg solution for injection	P	SP
HEMATOPOIETIC AGENTS - ERYTHROID (RBC) MATURATION AGENTS		

Drug Name	Tier	Drug Restriction
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	MT
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); 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); 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		

Drug Name	Tier	Drug Restriction
Hep Flush-10 (PF) 10 unit/mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
Heparin Lock Flush (Porcine) (PF) 10 unit/mL intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
heparin lock flush (porcine) 10 unit/mL intravenous solution	P	QL(Limit 14 days supply(ies) per fill)
heparin, porcine (PF) 10 unit/mL intravenous syringe	P	QL(Limit 14 days supply(ies) per fill)
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	
heparin (porcine) 5,000 unit/mL injection solution	P	
heparin (porcine) 5,000 unit/mL injection syringe	P	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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(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(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(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(Limit 21 days supply(ies) per 180 days); SP
enoxaparin 300 mg/3 mL subcutaneous solution	P	QL(QL Overtime: Allowed 42 over 7 days); 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(Limit 21 days supply(ies) per 180 days); SP

Drug Name	Tier	Drug Restriction
enoxaparin 60 mg/0.6 mL subcutaneous syringe	P	QL(QL Overtime: Allowed 9 over 7 days); 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(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

Drug Name	Tier	Drug Restriction
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(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(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(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(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(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(Limit 21 days supply(ies) per 180 days); SP
Lovenox 60 mg/0.6 mL subcutaneous syringe	NP	PA; QL(QL Overtime: Allowed 9 over 7 days); 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(Limit 21 days supply(ies) per 180 days); SP
PLATELET AGGREGATION INHIB - CYCLOPENTYL-TRIAZOLO-PYRIMIDINES (CPTPS)		

Drug Name	Tier	Drug Restriction
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		
Aggrenox 25 mg-200 mg capsule, extended release	NP	PA
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); MT
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 - THIENOPYRIDINE AGENTS		
clopidogrel 300 mg tablet	P	
clopidogrel 75 mg tablet	P	QL(Allowed 1 per 1 day); MT

Drug Name	Tier	Drug Restriction
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); MT
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	MT
dipyridamole 75 mg tablet	P	MT
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	

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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		
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)

Drug Name	Tier	Drug Restriction
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)
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

Drug Name	Tier	Drug Restriction
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
Sandimmune 100 mg/mL oral solution	P	
Sandimmune 25 mg capsule	NP	PA
tacrolimus 0.5 mg capsule	P	QL(Allowed 3 per 1 day)
tacrolimus 1 mg capsule	P	QL(Allowed 3 per 1 day)
tacrolimus 5 mg capsule	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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Rapamune 1 mg tablet	NP	PA
Rapamune 1 mg/mL oral solution	NP	PA
Rapamune 2 mg tablet	NP	PA
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	

Drug Name	Tier	Drug Restriction
Imuran 50 mg tablet	NP	PA
LOCOMOTOR SYSTEM		
AGENTS TO TREAT PERIODIC PARALYSIS - CARBONIC ANHYDRASE INHIBITORS		
Keveyis 50 mg tablet	NP	PA
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 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		

Drug Name	Tier	Drug Restriction
guanidine 125 mg tablet	NP	PA
SKELETAL MUSCLE RELAXANT - ANALGESIC SALICYLATE COMBINATIONS		
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	MT
baclofen 20 mg tablet	P	MT
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
orphenadrine citrate ER 100 mg tablet,extended release	P	
Robaxin-750 750 mg tablet	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		

Drug Name	Tier	Drug Restriction
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
Accu-Chek Aviva Plus test strips	NP	APA
Accu-Chek Compact Plus Test Strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Accu-Chek Guide test strips	NP	APA
Accu-Chek SmartView Test Strips	NP	APA

Drug Name	Tier	Drug Restriction
Accutrend Glucose test strips	NP	APA
Advance Test strips	NP	APA
Advanced Glucose Meter Test Strips	NP	APA
Advocate Redi-Code Plus strips	NP	APA
Advocate Redi-Code strips	NP	APA
Advocate Test Strips	NP	APA
AgaMatrix Amp Test Strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Assure 3 Test strips	NP	APA
Assure 4 Strips	NP	APA
Assure II Test strips	NP	APA
Assure Platinum Test Strip	NP	QL(Limit 90 days supply(ies) per fill); APA
Assure Prism Multi Strip	NP	APA
Assure Pro Test Strips	NP	APA
Bionime Rightest Test Strips	NP	APA
Bioscanner Glucose Test strips	NP	APA

Drug Name	Tier	Drug Restriction
Blood Glucose Test strips	NP	QL(Limit 90 days supply(ies) per fill); APA
CareSens N Test Strips	NP	APA
CareTouch Test Strip	NP	APA
Clever Choice Micro Test Strip	NP	APA
Clever Choice Pro Blood Glucose Monitor strips	NP	APA
Clever Choice Talk Test strips	NP	APA
Clever Choice Test Strips	NP	APA
Clever Choice Voice+ Test strips	NP	APA
Contour Next Test Strips	NP	APA
Contour Test Strips	NP	APA
Cool Glucose Test Strip	NP	APA
Diatrue Plus Test Strip	NP	APA
DuoCare strips	NP	APA
Easy Plus II Test strips	NP	APA
Easy Plus strips	NP	APA

Drug Name	Tier	Drug Restriction
Easy Pro Plus Test Strips	NP	APA
Easy Step strips	NP	APA
Easy Talk Glucose Test strips	NP	APA
Easy Touch Test Strip	NP	APA
Easy Trak Glucose Test strips	NP	APA
Easy Trak II Test Strip	NP	PA
EasyGluco Plus strips	NP	APA
EasyGluco Test strips	NP	APA
Easymax 15 test strips	NP	APA
EasyMax strips	NP	APA
EasyPRO Test Strips	NP	APA
Element Compact Test Strips	NP	APA
Element Test Strips	NP	APA
Embrace Blood Glucose System strips	NP	APA
Embrace EVO test strips	NP	APA

Drug Name	Tier	Drug Restriction
Embrace PRO test strips	NP	APA
Embrace TALK test strips	NP	APA
EvenCare G2 strips	NP	APA
EvenCare G3 Test strips	NP	APA
EvenCare Mini Glucose Test Strips	NP	APA
Evencare ProView Test Strip	NP	PA
EvenCare Test strips	NP	APA
Evolution Test Strips	NP	APA
ExacTech R-S-G Test strips	NP	APA
ExacTech Test strips	NP	APA
EZ Smart Plus Test strips	NP	APA
Ez Smart Test strips	NP	APA
Fifty50 Test Strip	NP	APA
Fora D15g strips	NP	APA
Fora D20 strips	NP	APA

Drug Name	Tier	Drug Restriction
Fora D40-G31 Test Strips	NP	APA
Fora G20 strips	NP	APA
Fora G30-Premium V10 Test Strip	NP	APA
Fora GD50 Test Strips	NP	APA
Fora GTel Glucose Test Strip	NP	APA
Fora Test Strip	NP	APA
Fora TN'G Voice Test Strips	NP	APA
Fora V10 strips	NP	APA
Fora V10-V12-D10-D20 strips	NP	APA
Fora V12 Glucose strips	NP	APA
Fora V20 strips	NP	APA
Fora V30A strips	NP	APA
ForaCare GD20 strips	NP	APA
ForaCare GD40 test strips	NP	APA
FortisCare glucose test strips	NP	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
Freestyle InsuLinx strips	NP	APA
Freestyle InsuLinx Test Strips	NP	APA
FreeStyle Lite Strips	NP	APA
FreeStyle Precision Neo Strips	NP	APA
FreeStyle Test strips	NP	APA
GE100 Blood Glucose Test Strip	NP	APA
GenStrip Test Strip	NP	APA
Gluco Navii Test Strip	NP	QL(Limit 90 days supply(ies) per fill); APA
Glucocard 01 Sensor Plus strips	NP	APA
Glucocard Expression strips	NP	APA
Glucocard Shine Test Strips	NP	APA
Glucocard Vital Sensor strips	NP	APA
Glucocard Vital Test Strips	NP	APA
Glucocard X-Sensor strips	NP	APA
Glucocom Glucose strips	NP	APA

Drug Name	Tier	Drug Restriction
GM100 strips	NP	APA
Harmony Glucose Test Strip	NP	PA
HealthPro Test Strips	NP	APA
iGlucose Test Strip	NP	APA
Infinity Test strips	NP	APA
Infinity Voice Test Strip	NP	APA
Keynote strips	NP	APA
Liberty Test strips	NP	APA
Micro Blood Glucose strips	NP	APA
Microdot Blood Glucose Monitoring System strips	NP	APA
Microdot Xtra Blood Glucose strips	NP	PA
Myglucohealth strips	NP	APA
Neutek 2Tek Test Strips	NP	APA
Nova Max Glucose Test strips	NP	APA

Drug Name	Tier	Drug Restriction
On Call Express Test Strip	NP	APA
On Call Plus Test Strip	NP	APA
On Call Vivid Test Strip	NP	APA
OneTouch Ultra Blue Test Strip	P	QL(Limit 90 days supply(ies) per fill); APA
OneTouch Verio test strips	P	QL(Limit 90 days supply(ies) per fill); APA
Optium EZ strips	NP	APA
Optium Test strips	NP	APA
OptumRx strips	NP	APA
Pharmacist Choice Glucose Test Strips	NP	APA
PocketChem EZ strips	NP	APA
Precision PCX Plus Test strips	NP	APA
Precision PCX Test strips	NP	APA
Precision Point Of Care Test strips	NP	APA
Precision Q-I-D Test strips	NP	APA
Precision Sof-Tact Test strips	NP	APA

Drug Name	Tier	Drug Restriction
Precision Xtra Test strips	NP	APA
Premier Test Strip	NP	APA
Premium V10 strips	NP	APA
Pro Voice V8-V9 Test Strip	NP	APA
Prodigy No Coding strips	NP	APA
PTS Panels strips	NP	APA
Quicktek Test strips	NP	APA
Quintet AC strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Quintet Glucose Test Strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Refuah Plus strips	NP	APA
Relion Confirm-Micro strips	NP	APA
ReliOn Prime Test Strips	NP	APA
Relion Ultima strips	NP	APA
Reveal Test Strip	NP	APA
Rightest GS550 Test Strips	NP	APA

Drug Name	Tier	Drug Restriction
Sidekick Blood Glucose System kit	NP	PA
Smart Sense Test Strips	NP	APA
Smartest Test strips	NP	APA
Solus V2 Test Strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Supreme Test strips	NP	APA
Sure Edge strips	NP	APA
SureChek Test Strips	NP	APA
Sure-Test EasyPlus Mini strips	NP	APA
Telcare Test Strips	NP	APA
Test N'Go Test strips	NP	APA
True Metrix Glucose Test Strip	NP	QL(Limit 90 days supply(ies) per fill); APA
True Metrix Pro Test Strip	NP	PA
Truetest Test Strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Truetrack Test strips	NP	QL(Limit 90 days supply(ies) per fill); APA
Ultima Test Strips	NP	APA

Drug Name	Tier	Drug Restriction
UltraTRAK strips	NP	QL(Limit 90 days supply(ies) per fill); APA
UltraTrak Ultimate strips	NP	QL(Limit 90 days supply(ies) per fill); APA
UniStrip1 Test Strip	NP	APA
Verasens Test Strip	NP	APA
Victory Glucose Test strips	NP	APA
VivaGuard Ino Test Strip	NP	QL(Limit 90 days supply(ies) per fill); APA
Vocal Point strips	NP	APA
WaveSense Jazz strips	NP	QL(Limit 90 days supply(ies) per fill); APA
WaveSense Presto strips	NP	QL(Limit 90 days supply(ies) per fill); 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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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		
1st Tier Unilet ComforTouch Lancet 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
1st Tier Unilet ComforTouch Lancet 30 gauge	P	QL(Limit 90 days supply(ies) per fill); 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 Compact Plus Care kit	NP	PA
Accu-Chek Guide Glucose Meter	NP	PA
Accu-Chek Guide Me Glucose Meter	NP	PA

Drug Name	Tier	Drug Restriction
Accu-Chek Multiclix Lancet kit	P	QL(QL Overtime: Allowed 1 over 180 days)
Accu-Chek Nano	NP	PA
Acura Meter Kit	NP	PA
Acura Plus kit	NP	PA
Acura Starter Kit	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
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

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); 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)

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); APA
Bionime Rightest Gm300 System kit	NP	PA
Blood Glucose Monitor Kit	NP	PA
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(Limit 90 days supply(ies) per fill); APA
Careone Ultra Thin Lancet	P	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); APA
CareTouch Safety Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
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 Link kit	NP	PA
Contour Next Meter	NP	PA
Contour Next One Meter	NP	PA
Contour Next USB Meter	NP	PA
Control AST Monitoring System	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

Drug Name	Tier	Drug Restriction
Dexcom G4 Receiver with Share Kit	NP	PA
Dexcom G4 Transmitter device	NP	PA
Dexcom G5 Receiver	NP	PA
Dexcom G5 Transmitter device	NP	PA
Dexcom G5-G4 Sensor device	NP	PA
Dexcom G6 Receiver misc	P	PA
Dexcom G6 Sensor device	P	PA
Dexcom G6 Transmitter device	P	PA; QL(Limit 90 days supply(ies) per fill)
Dexcom Receiver	NP	PA
Diatrue Plus Blood Glucose Meter System	NP	PA
Droplet Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); 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)

Drug Name	Tier	Drug Restriction
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
Easy Talk Glucose System kit	NP	PA
Easy Touch Glucose Monitor	NP	PA
Easy Touch Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Lancets 32 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
Easy Touch Twist Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Twist Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Twist Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
Easy Touch Twist Lancets 32 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Easy Touch Twist Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); 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
EasyGluco Plus 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

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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
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
Evolution Blood Glucose Meter kit	NP	PA
E-Z Ject Lancets	P	QL(Limit 90 days supply(ies) per fill); APA
E-Z Ject Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
E-Z Ject Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
E-Z Ject Lancets 32 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
E-Z Ject Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
E-Z Ject Thin Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Ez Smart Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
EZ Smart Plus System kit	NP	PA
Ez Smart System kit	NP	PA
EZ-Lets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
First Choice Lancets Thin	P	QL(Limit 90 days supply(ies) per fill); 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

Drug Name	Tier	Drug Restriction
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
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(Limit 90 days supply(ies) per fill); APA
FortisCare blood glucose system kit	NP	PA
FortisCare HIGH solution	P	QL(QL Overtime: Allowed 1 over 72 days)

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
FreeStyle System Kit	NP	PA
G-4 kit	NP	PA
GE100 Blood Glucose System kit	NP	PA
Genteel Vacuum Lancing Device combo pack	P	QL(QL Overtime: Allowed 1 over 180 days)
Gluco Navii Glucose Monitor kit	NP	PA
Glucocard 01 Meter	NP	PA
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

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); APA
Glucocom Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
GM100 kit	NP	PA
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
Guardian Link 3 Transmitter device	NP	PA
Guardian Real-Time Glucose Monitor	NP	PA
Guardian RT Monitor System	NP	PA
Guardian RT Monitor System kit	NP	PA

Drug Name	Tier	Drug Restriction
Guardian RT Starter Kit	NP	PA
Guardian RT Transmitter misc	NP	PA
Guardian Sensor 3 device	NP	PA
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(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA
inControl Ultra Thin Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Infinity Meter Kit	NP	PA
Infinity Starter Kit	NP	PA
Infinity Voice Glucose Monitor	NP	PA

Drug Name	Tier	Drug Restriction
Invacare Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Jazz Wireless 2 Meter kit	NP	PA
Keynote Blood Glucose System	NP	PA
Keynote Pro Blood Glucose System	NP	PA
Kinney Brand Lancets 23 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
lancets	P	QL(Limit 90 days supply(ies) per fill); APA
lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Lancets, Super Thin	P	QL(Limit 90 days supply(ies) per fill); APA
Lancets,Thin	P	QL(Limit 90 days supply(ies) per fill); APA
Lancets,Thin 23 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Lancets,Thin 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Lancets,Ultra Thin 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
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(Limit 90 days supply(ies) per fill); APA
Micro Blood Glucose kit	NP	PA
Micro Thin Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); 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)

Drug Name	Tier	Drug Restriction
Monolet Lancets 21 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Myglucohealth kit	NP	PA
Nexgen Meter kit	NP	PA
Nova Max Blood Glucose Meter	NP	PA
Nova Sureflex Lancets	P	QL(Limit 90 days supply(ies) per fill); 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 Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
OneTouch Delica Plus Lancing Device kit	P	QL(QL Overtime: Allowed 1 over 180 days)
OneTouch Ultra2 Meter	P	
OneTouch UltraMini kit	P	
OneTouch Verio Flex Meter	P	
OneTouch Verio IQ Meter	P	
OneTouch Verio Meter	P	
OneTouch Verio Reflect Meter	P	
Optium Glucose Monitor System	NP	PA
Optium Glucose Monitor System kit	NP	PA
OptumRx kit	NP	PA
OptumRx meter	NP	PA
Pharmacist Choice Blood Glucose System	NP	PA

Drug Name	Tier	Drug Restriction
Pip Lancet 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Pip Lancet 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
PocketChem EZ kit	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(Limit 90 days supply(ies) per fill); APA
Prodigy Voice Glucose Meter kit	NP	PA
Pure Comfort Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Pure Comfort Safety Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
ReliaMed Mini Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)
ReliaMed Safety Seal Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
ReliaMed Safety Seal Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA
ReliOn Ultra Thin Plus Lancets	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA
Rightest GM550 System kit	NP	PA

Drug Name	Tier	Drug Restriction
Safety Seal Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Smart Sense Lancets 21 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Smart Sense Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Smart Sense Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA

Drug Name	Tier	Drug Restriction
Sterilance TL 32 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Super Thin Lancets	P	QL(Limit 90 days supply(ies) per fill); APA
Super Thin Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Super Thin Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Super Thin Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Sure Comfort Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA
TechLITE Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
TechLITE Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Telcare BGM kit	NP	PA

Drug Name	Tier	Drug Restriction
TelCare Blood Glucose kit	NP	PA
Test N'Go Blood Glucose System	NP	PA
Thin Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
Topcare Universal1 Lancet	P	QL(Limit 90 days supply(ies) per fill); 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)
TRUEdraw Lancing Device	P	QL(QL Overtime: Allowed 1 over 180 days)

Drug Name	Tier	Drug Restriction
TRUEplus Lancets 26 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
TRUEplus Lancets 28 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
TRUEplus Lancets 30 gauge	P	QL(Limit 90 days supply(ies) per fill); APA
TRUEplus Lancets 33 gauge	P	QL(Limit 90 days supply(ies) per fill); 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(Limit 90 days supply(ies) per fill); APA
Ultima Monitor	NP	PA

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

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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
BD Insulin Syringe Half Unit Ultra-Fine 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
BD Insulin Syringe Micro-Fine 0.3 mL 28	P	

Drug Name	Tier	Drug Restriction
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 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 15/64"	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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
Comfort EZ Pen Needles 32 gauge x 5/32"	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 Insulin Syringe Half Unit 0.5 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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 5/16"	P	QL(Allowed 5 per 1 day)
Droplet Insulin Syringe Half Unit 0.5 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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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	

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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 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)

Drug Name	Tier	Drug Restriction
Insupen 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
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)

Drug Name	Tier	Drug Restriction
Lite Touch Insulin Syringe 0.5 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)
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)
Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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)
Pro Comfort Insulin Syringe 0.5 mL 30 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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)
Prodigy Insulin Syringe 0.3 mL 31 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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 1 mL 29 gauge x 1/2"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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 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 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)
TechLITE Insulin Syringe Half Unit 0.5 mL 30 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 5/16"	P	QL(Allowed 5 per 1 day)
TechLITE Insulin Syringe Half Unit 0.5 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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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	

Drug Name	Tier	Drug Restriction
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)
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 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 Safe Pack 31 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
UltiGuard Safe Pack 31 gauge x 3/16" needle	P	QL(Allowed 5 per 1 day)
UltiGuard Safe Pack 31 gauge x 5/16" needle	P	QL(Allowed 5 per 1 day)
UltiGuard Safe Pack 32 gauge x 1/4" needle	P	QL(Allowed 5 per 1 day)
UltiGuard Safe Pack 32 gauge x 5/32" needle	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 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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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 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 Thin Pen Needle 32 gauge x 5/32"	P	QL(Allowed 5 per 1 day)
Ultracare Insulin Syringe 0.3 mL 30 gauge x 5/16"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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)
Ultracare Pen Needle 32 gauge x 1/4"	P	QL(Allowed 5 per 1 day)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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		
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

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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	
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	

Drug Name	Tier	Drug Restriction
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 - 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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
METABOLIC MODIFIER - CARNITINE REPLENISHER AGENTS		
Carnitor (sugar-free) 100 mg/mL oral solution	NP	PA; QL(Allowed 30 per 1 day)
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
PHARMACOLOGICAL CHAPERONE TX - ALPHA-GALACTOSIDASE A ENZYME STABILIZER		
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
MISCELLANEOUS		
OTHER		
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	P	AL(Maximum Age 13); QL(Allowed 1 per 1 day)
	NP	PA
	NP	PA
	NP	PA

Drug Name	Tier	Drug Restriction
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	NP	PA
	P	AL(Maximum Age 13); QL(Allowed 50 per Rx)
MOUTH-THROAT-DENTAL - PREPARATIONS		
DENTAL PRODUCT - FLUORIDE PREPARATIONS		
Denta 5000 Plus 1.1 % cream	NP	PA; QL(Allowed 102 per Rx)
DentaGel 1.1 %	NP	PA; QL(Allowed 672 per Rx)
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	

Drug Name	Tier	Drug Restriction
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	

Drug Name	Tier	Drug Restriction
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
sodium fluoride 1.1 % dental gel	NP	PA; QL(Allowed 672 per Rx)
sodium fluoride 1.1 % dental paste	NP	PA
sodium fluoride 1.1 %-potassium nitrate 5 % dental paste	NP	PA
MOUTH AND THROAT - ANTIFUNGALS		
clotrimazole 10 mg troche	P	
nystatin 100,000 unit/mL oral suspension	P	QL(Allowed 120 per Rx)
MOUTH AND THROAT - ANTISEPTICS		
chlorhexidine gluconate 0.12 % mouthwash	P	
Paroex Oral Rinse 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)

Drug Name	Tier	Drug Restriction
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 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		

Drug Name	Tier	Drug Restriction
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		
Ocrevus 30 mg/mL intravenous solution	NP	PA; SP
MULTIPLE SCLEROSIS AGENT - CD52 SPECIFIC MONOCLONAL ANTIBODY		
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

Drug Name	Tier	Drug Restriction
Extavia 0.3 mg subcutaneous kit	NP	PA; SP
Extavia 0.3 mg subcutaneous solution	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

Drug Name	Tier	Drug Restriction
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
MULTIPLE SCLEROSIS AGENT - OTHERS		
Bafiertam 95 mg capsule,delayed release	NP	PA
Copaxone 20 mg/mL subcutaneous syringe	P	SP
Copaxone 40 mg/mL subcutaneous syringe	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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
MULTIPLE SCLEROSIS AGENT - PURINE NUCLEOSIDE ANALOGS		
Mavenclad (10 tablet pack) 10 mg tablet	NP	PA; SP
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

Drug Name	Tier	Drug Restriction
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
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)
Lubricant Eye 57.3 %-42.5 % ointment	P	QL(Allowed 42 per Rx)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
Isopto Carpine 2 % eye drops	NP	PA
Isopto Carpine 4 % eye drops	NP	PA

Drug Name	Tier	Drug Restriction
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	
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)
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)

Drug Name	Tier	Drug Restriction
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
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
Pataday 0.2 % eye drops	NP	PA
Patanol 0.1 % eye drops	NP	PA
Pazeo 0.7 % eye drops	P	
Zerviate 0.24 % eye drops in a dropperette	NP	PA
OPHTHALMIC - ANTI-INFLAMMATORY, GLUCOCORTICOIDS		
Alrex 0.2 % eye drops,suspension	P	

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
loteprednol etabonate 0.5 % eye drops,suspension	P	
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
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		

Drug Name	Tier	Drug Restriction
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
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		

Drug Name	Tier	Drug Restriction
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)
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		
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)

Drug Name	Tier	Drug Restriction
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		
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
levobunolol 0.5 % eye drops	P	QL(Allowed 15 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)

Drug Name	Tier	Drug Restriction
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)
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		

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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		
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		
Baciguent 500 unit/gram eye ointment	NP	PA
bacitracin 500 unit/gram eye ointment	P	QL(Allowed 4 per Rx)
OPHTHALMIC ANTIBIOTIC - FLUOROQUINOLONES		
Besivance 0.6 % eye drops,suspension	NP	PA

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
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		
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)

Drug Name	Tier	Drug Restriction
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
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

Drug Name	Tier	Drug Restriction
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	
ciprofloxacin 0.3 %-fluocinolone 0.025 % (0.25 mL) ear solution	NP	PA
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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		

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
cetirizine 5 mg-pseudoephedrine ER 120 mg tablet,extended release,12hr	P	QL(Allowed 2 per 1 day)
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)

Drug Name	Tier	Drug Restriction
Wal-Zyr D 5 mg-120 mg tablet,extended release	P	QL(Allowed 2 per 1 day)
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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Banophen 25 mg capsule	P	QL(Allowed 4 per 1 day); Use Generic Products
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	MT
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)
Diphedryl 12.5 mg/5 mL oral liquid	P	QL(Allowed 240 per Rx); Use Generic Products

Drug Name	Tier	Drug Restriction
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 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

Drug Name	Tier	Drug Restriction
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)
promethazine 25 mg tablet	P	AL(Minimum Age 2)
promethazine 50 mg tablet	P	AL(Minimum Age 2)
promethazine 6.25 mg/5 mL oral syrup	P	AL(Minimum Age 2); 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

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
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)
benzonatate 200 mg capsule	P	AL(Minimum Age 10); QL(QL Overtime: Allowed 30 over 30 days); QL(Limit 1 fill(s) per 30 days)
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)

Drug Name	Tier	Drug Restriction
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); Use Generic Products
ASTHMA THERAPY - 5-LIPOXYGENASE INHIBITORS		
zileuton ER 600 mg tablet,extended release 12hr mphase	NP	PA
Zyflo 600 mg tablet	NP	PA
ASTHMA THERAPY - INHALED CORTICOSTEROIDS (GLUCOCORTICOIDS)		
Alvesco 160 mcg/actuation aerosol inhaler	NP	PA

Drug Name	Tier	Drug Restriction
Alvesco 80 mcg/actuation aerosol inhaler	NP	PA
Arnuity Ellipta 100 mcg/actuation powder for inhalation	NP	PA
Arnuity Ellipta 200 mcg/actuation powder for inhalation	NP	PA
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	

Drug Name	Tier	Drug Restriction
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); QL(QL Overtime: Allowed 120 over 30 days)
budesonide 0.5 mg/2 mL suspension for nebulization	P	AL(Maximum Age 8); QL(QL Overtime: Allowed 120 over 30 days)
budesonide 1 mg/2 mL suspension for nebulization	P	AL(Maximum Age 8); 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)

Drug Name	Tier	Drug Restriction
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)
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); PA; QL(QL Overtime: Allowed 120 over 30 days)
Pulmicort 0.5 mg/2 mL suspension for nebulization	NP	AL(Maximum Age 8); PA; QL(QL Overtime: Allowed 120 over 30 days)
Pulmicort 1 mg/2 mL suspension for nebulization	NP	AL(Maximum Age 8); 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		

Drug Name	Tier	Drug Restriction
Fasenra 30 mg/mL subcutaneous syringe	NP	PA; SP
Fasenra Pen 30 mg/mL subcutaneous auto-injector	NP	PA; SP
ASTHMA THERAPY - LEUKOTRIENE RECEPTOR ANTAGONISTS		
Accolate 10 mg tablet	NP	PA
Accolate 20 mg tablet	NP	PA
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)
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)
Singulair 5 mg chewable tablet	NP	PA; QL(Allowed 1 per 1 day); MT
zafirlukast 10 mg tablet	P	

Drug Name	Tier	Drug Restriction
zafirlukast 20 mg tablet	P	
ASTHMA THERAPY - MAST CELL STABILIZERS		
cromolyn 20 mg/2 mL solution for nebulization	P	QL(QL Overtime: Allowed 240 over 30 days)
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); MT

Drug Name	Tier	Drug Restriction
theophylline ER 100 mg tablet,extended release,12 hr	P	MT
theophylline ER 200 mg tablet,extended release,12 hr	P	MT
theophylline ER 300 mg tablet,extended release,12 hr	P	MT
theophylline ER 400 mg tablet,extended release 24 hr	P	MT
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

Drug Name	Tier	Drug Restriction
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		
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	

Drug Name	Tier	Drug Restriction
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		
Arcapta Neohaler 75 mcg capsule with inhalation device	NP	PA
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		

Drug Name	Tier	Drug Restriction
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)
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	

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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	MT
terbutaline 5 mg tablet	P	MT
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	

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
Advair HFA 115 mcg-21 mcg/actuation aerosol inhaler	NP	PA
Advair HFA 230 mcg-21 mcg/actuation aerosol inhaler	NP	PA
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

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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
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
tobramycin 300 mg/5 mL in 0.225 % sodium chloride for nebulization	NP	PA; SP

Drug Name	Tier	Drug Restriction
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-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

Drug Name	Tier	Drug Restriction
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	
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		

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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 0.03 % nasal spray	NP	PA; QL(Allowed 30 per Rx)

Drug Name	Tier	Drug Restriction
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		
Astepro 0.15 % (205.5 mcg) nasal spray	NP	PA
azelastine 0.15 % (205.5 mcg) nasal spray	P	
azelastine 137 mcg (0.1 %) nasal spray aerosol	P	QL(Allowed 1 per 1 day)
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)

Drug Name	Tier	Drug Restriction
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
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
NON-OPIOID ANTITUSSIVE-ANTIHISTAMINE COMBINATIONS		
Dimetapp Long-Acting(chlorphenir amine-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)

Drug Name	Tier	Drug Restriction
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		

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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)

Drug Name	Tier	Drug Restriction
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)

Drug Name	Tier	Drug Restriction
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)
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); 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); QL(Allowed 240 per Rx)
promethazine-phenylephrine-codeine 6.25 mg-5 mg-10 mg/5 mL oral syrup	P	AL(Minimum Age 18); 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); APA

Drug Name	Tier	Drug Restriction
hydrocodone-homatropine 5 mg-1.5 mg/5 mL oral syrup	P	AL(Minimum Age 18); APA
Hydromet 5 mg-1.5 mg/5 mL oral syrup	P	AL(Minimum Age 18); 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	
Robafen AC 10 mg-100 mg/5 mL oral liquid	P	

Drug Name	Tier	Drug Restriction
Virtussin AC 10 mg-100 mg/5 mL oral liquid	P	
PULMONARY FIBROSIS TREATMENT AGENTS - ANTIFIBROTIC THERAPY		
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	

Drug Name	Tier	Drug Restriction
Children's Sudafed 15 mg/5 mL oral liquid	P	
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)

Drug Name	Tier	Drug Restriction
Sinus PE Decongestant 10 mg tablet	P	QL(Allowed 24 per Rx)
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)

Drug Name	Tier	Drug Restriction
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

Drug Name	Tier	Drug Restriction
Miconazole-3 200 mg vaginal suppository	P	QL(Allowed 3 per Rx)
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)
estradiol 0.01% (0.1 mg/gram) vaginal cream	P	QL(QL Overtime: Allowed 43 over 30 days)
estradiol 10 mcg vaginal tablet	NP	PA

Drug Name	Tier	Drug Restriction
Estring 2 mg (7.5 mcg/24 hour) vaginal ring	NP	PA
Femring 0.05 mg/24 hr vaginal	NP	PA
Femring 0.1 mg/24 hr vaginal	NP	PA
Premarin 0.625 mg/gram vaginal cream	P	QL(QL Overtime: Allowed 43 over 30 days)
Vagifem 10 mcg vaginal tablet	NP	PA
Yuvafem 10 mcg vaginal tablet	NP	PA
VAGINAL PROGESTINS		
Crinone 4 % vaginal gel	NP	PA

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