Neighborhood Health Plan OF RHODE ISLAND™

Neighborhood INTEGRITY (Medicare-Medicaid Plan)

2019 Lista de medicamentos cubiertos (Formulario)

POR FAVOR LEA: ESTE DOCUMENTO CONTIENE INFORMACIÓN SOBRE LAS DROGAS QUE CUBRIMOS EN ESTE PLAN Si tiene preguntas, comuníquese con Neighborhood INTEGRITY llamando al 1-844-812-6896, de lunes a viernes de 8 a.m. a 8 p.m. y los sábados de 8 a.m. a 12 p.m. Los usuarios de TTY deben llamar al 711. La llamada es gratuita. Para obtener más información, visite www.nhpri.org/INTEGRITY.

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Neighborhood INTEGRITY| 2019 *Lista de medicamentos cubiertos* (Formulario)

Introducción

Este documento se denomina *Lista de medicamentos cubiertos* (también se lo llama “Lista de medicamentos”). Le informa cuáles son los medicamentos con receta y medicamentos de venta libre que cubre Neighborhood INTEGRITY. La Lista de medicamentos también le indica si se aplican normas o restricciones especiales a los medicamentos cubiertos por Neighborhood INTEGRITY. Los términos clave se definen en el último capítulo del *Manual para miembros*.

Índice

A. Avisos legales

Esta es una lista de los medicamentos que los miembros pueden obtener en Neighborhood INTEGRITY.

- Neighborhood Health Plan of Rhode Island es un plan de salud que tiene contrato con Medicare y Medicaid de Rhode Island para proporcionar los beneficios de ambos programas a los afiliados.
- Tanto los beneficios como la Lista de medicamentos cubiertos y las redes de farmacias y proveedores pueden sufrir modificaciones a lo largo del año. Le enviaremos un aviso antes de realizar un cambio que lo afecte.
- Es posible que se apliquen limitaciones y restricciones. Para obtener más información, llame a Servicios para Miembros de Neighborhood INTEGRITY o consulte el Manual para miembros de Neighborhood INTEGRITY.
- Puede consultar la *Lista de medicamentos cubiertos* de Neighborhood INTEGRITY actualizada en cualquier momento en el sitio web www.nhpri.org/INTEGRITY.
- ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call Member Services toll-free phone at 1-844-812-6896. Hours of operation are 8 am to 8 pm, Monday – Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and federal holidays, you may be asked to leave a message. Your call will be returned within the next business day. TTY users should callTTY 711. The call is free.
- ATENCIÓN: Si habla español, tenemos a su disposición servicios de asistencia gratuitos en su idioma. Llame al 1-844-812-6896 (para TTY, marque 711) de lunes a viernes, de 8:00 a. m. a 8:00 p. m., y los sábados de 8:00 a. m. a 12:00 p. m. Los sábados por la tarde, domingos y feriados nacionales puede dejar un mensaje y le devolveremos la llamada el siguiente día hábil. La llamada es gratuita.
- ATENÇÃO: Se falar Português, estão disponíveis para si serviços de apoio linguístico, gratuitamente. Ligue para o 1-844-812-6896 (TTY 711), das 8 am às 8 pm, de segunda a sexta-feira; das 8 am às 12 pm ao sábado. Aos sábados à tarde, domingos e feriados federais, poderá ser convidado a deixar uma mensagem. A sua chamada será devolvida no próximo dia útil. Achamada é gratis.
- Puede obtener este documento de forma gratuita en otros formatos, como en tamaño de letra grande, braille o audio. Llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711). El horario de atención es de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Los usuarios de TTY deben llamar al 711. Esta llamada es gratuita.
- El plan también puede proporcionarle los documentos en inglés y portugués, así como en formatos como tamaño de letra grande, braille o audio. Llame a Servicios para Miembros para informarnos que, en esta ocasión y en adelante, desea recibir los documentos en el idioma o formato alternativo que solicite.

B. Preguntas frecuentes

Aquí encontrará respuestas a sus preguntas sobre esta *Lista de medicamentos cubiertos*. Puede leer todas las preguntas frecuentes para obtener más información o buscar una pregunta y respuesta en particular.

B1. ¿Qué medicamentos con receta se incluyen en la *Lista de medicamentos cubiertos*? (A la *Lista de medicamentos cubiertos*, la denominamos "Lista de medicamentos" para abreviarla).

Los medicamentos que se incluyen en la *Lista de medicamentos cubiertos* que comienza en la página 1 son los que cubre Neighborhood INTEGRITY. Estos medicamentos están disponibles en farmacias dentro de nuestra red. Una farmacia está en nuestra red si hemos firmado un contrato con ella para que trabaje con nosotros y le brinde servicios. A estas farmacias las denominamos "farmacias de la red".

- Neighborhood INTEGRITY cubrirá todos los medicamentos médicamente necesarios de la Lista de medicamentos en los siguientes casos:
    - cuando su médico u otro profesional autorizado a dar recetas digan que los necesita para recuperarse o mantenerse sano, **y**
    - cuando obtenga su medicamento con receta en una farmacia de la red de Neighborhood INTEGRITY.
- Es posible que Neighborhood INTEGRITY le exija otros requisitos para acceder a ciertos medicamentos (consulte la pregunta B4 a continuación).

Puede consultar una lista actualizada de los medicamentos que cubrimos en nuestro sitio web www.nhpri.org/INTEGRITY o llamando a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711).

B2. ¿Se hacen cambios en la Lista de medicamentos?

Sí. Neighborhood INTEGRITY podrá agregar o quitar medicamentos durante el año. También podremos cambiar las normas que se aplican a los medicamentos. Estos son algunos ejemplos de lo que podríamos hacer:

- Decidir si exigimos o no una autorización previa para un medicamento. (La autorización previa es el permiso que Neighborhood INTEGRITY debe darle para que pueda obtener un medicamento).
- Agregar o cambiar normas sobre la cantidad de medicamento que puede obtener (esto se denomina "límites de cantidad").

- Agregar o cambiar las restricciones de tratamiento escalonado de un medicamento. (El tratamiento escalonado significa que debe probar un medicamento antes de que cubramos otro).

Si está tomando un medicamento que estaba cubierto al **comienzo** del año, generalmente no retiraremos ni cambiaremos la cobertura para ese medicamento **durante el resto del año** a menos que ocurra lo siguiente:

- aparezca un nuevo medicamento de menor costo con la misma eficacia que un medicamento incluido actualmente en la Lista de medicamentos;
- se detecte que un medicamento no es seguro, **o**
- se retire del mercado un medicamento.

Las preguntas B3 y B6 a continuación brindan más información sobre lo que sucede cuando se hacen cambios en la Lista de medicamentos.

- Puede consultar la Lista de medicamentos de Neighborhood INTEGRITY actualizada en cualquier momento en el sitio web www.nhpri.org/INTEGRITY.
- También puede llamar a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711) para consultar la Lista de medicamentos actualizada.

B3. ¿Qué sucede cuando se hacen cambios en la Lista de medicamentos?

Algunos cambios en la Lista de medicamentos se aplicarán **de inmediato**. Por ejemplo, en los siguientes casos:

- ***Está disponible un nuevo medicamento genérico.*** *A veces, aparece un medicamento nuevo de menor costo* con la misma eficacia que un medicamento incluido actualmente en la Lista de medicamentos. Cuando eso suceda, podremos quitar de la lista el medicamento actual, pero el costo que deberá pagar por el nuevo medicamento seguirá siendo el mismo. Cuando agreguemos el nuevo medicamento genérico, también podremos decidir mantener en la lista el medicamento que está incluido actualmente, pero cambiar sus normas o límites de cobertura.
    - Es posible que no le informemos antes de hacer este cambio, pero le enviaremos información sobre el cambio o los cambios específicos que hayamos aplicado.
    - Usted o su proveedor pueden solicitar una excepción a estos cambios. Le enviaremos un aviso con los pasos que debe seguir para solicitar una excepción.
- **Se retira un medicamento del mercado.** Si la Food and Drug Administration (FDA, Administración de Alimentos y Medicamentos) determina que un medicamento que usted toma no es seguro o si el fabricante del medicamento lo retira del mercado, lo

quitaremos de la Lista de medicamentos. Si está tomando el medicamento, le avisaremos. Le enviaremos una carta para asesorarlo sobre qué debe hacer a continuación con su proveedor y farmacéutico.

Podremos hacer otros cambios que afecten los medicamentos que toma. Le informaremos con anticipación sobre estos otros cambios en la Lista de medicamentos. Podrán hacerse cambios si ocurre lo siguiente:

- la FDA brinda nuevas pautas o hay nuevas pautas clínicas sobre un medicamento;
- agregamos un medicamento genérico que no es nuevo en el mercado, **y**
    - reemplazamos un medicamento de marca que está actualmente en la Lista de medicamentos, **o**
    - cambiamos las normas o los límites de cobertura para el medicamento de marca.

Cuando ocurran estos cambios, le informaremos por lo menos 30 días antes de aplicar la modificación a la Lista de medicamentos **o** cuando solicite el medicamento. Esto le dará tiempo para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción. Además, puede realizar lo siguiente:

- obtener un suministro del medicamento para 30 días antes de que se realice el cambio en la Lista de medicamentos, o
- solicitar una excepción a estos cambios. Consulte la pregunta B10 para obtener más información sobre las excepciones.

B4. ¿Se aplican restricciones o límites a la cobertura de medicamentos o requisitos especiales para obtener ciertos medicamentos?

Sí, algunos medicamentos tienen normas de cobertura o límites en cuanto a la cantidad que puede obtener. En algunos casos, usted, su médico o el profesional que le da la receta deben cumplir ciertos requisitos antes de que pueda obtener el medicamento. Por ejemplo, en los siguientes casos:

- **Autorización previa (o aprobación previa):** para algunos medicamentos, usted o su médico o el profesional que le da la receta deben obtener la autorización de Neighborhood INTEGRITY antes de solicitar el medicamento con receta. Es posible que Neighborhood INTEGRITY no cubra el medicamento si no consigue la autorización.
- **Límites de cantidad:** en ocasiones, Neighborhood INTEGRITY limita la cantidad de un medicamento que puede obtener.

Si tiene alguna pregunta, llame a Neighborhood INTEGRITY al 1-844-812-6896 (para TTY, marque 711), de 8:00 a. m. a 8:00 p. m., de lunes a viernes, y de 8:00 a. m. a 12:00 p. m., los sábados. Esta llamada es gratuita. **Para obtener más información**, visite www.nhpri.org/INTEGRITY.

- **Tratamiento escalonado:** a veces, Neighborhood INTEGRITY le exige que haga un tratamiento escalonado. Esto significa que tendrá que probar los medicamentos para su afección médica en un cierto orden. Es posible que deba probar un medicamento antes de que cubramos otro. Si su médico considera que el primer medicamento no le resulta eficaz, entonces cubriremos el segundo.

Para averiguar si su medicamento tiene límites o requisitos adicionales, consulte las tablas de las páginas 1-156. También puede obtener más información en nuestro sitio web www.nhpri.org/INTEGRITY. Hemos publicado documentos en línea que explican las restricciones de autorización previa y tratamiento escalonado. También puede pedirnos que le enviemos una copia.

Puede solicitar una excepción a estos límites. Esto le dará tiempo para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción. Consulte las preguntas B10 a B12 para obtener más información sobre las excepciones.

B5. ¿Cómo sabrá si el medicamento que desea tiene limitaciones o si hay requisitos especiales para obtenerlo?

La *Lista de medicamentos cubiertos* de la página 1 tiene una columna titulada “Requisitos especiales, restricciones o límites de uso”.

B6. ¿Qué sucede si cambiamos las normas para algunos medicamentos (por ejemplo, restricciones de autorización o aprobación previa, límites de cantidad o tratamiento escalonado)?

En algunos casos, le informaremos con anticipación si agregamos o modificamos las restricciones de autorización previa, límites de cantidad o tratamiento escalonado para un medicamento. Consulte la pregunta B3 para obtener más información sobre este aviso anticipado y las situaciones en las que es posible que no podamos informarle con anticipación cuando cambien nuestras normas para medicamentos en la Lista de medicamentos.

B7. ¿Cómo puede encontrar un medicamento en la Lista de medicamentos?

Hay dos formas de encontrar un medicamento:

- puede buscar por orden alfabético (si sabe cómo se escribe el medicamento), **o**
- puede buscarlo por afección médica.

Para buscar **por orden alfabético**, vaya a la sección “Índice de medicamentos cubiertos”. Para ello, ingrese en www.nhpri.org/INTEGRITY y haga clic en el vínculo Searchable List of Covered Drugs.

Para buscar **por afección médica**, vaya a la sección titulada “Lista de medicamentos por afección médica” de la página 1. En esta sección, los medicamentos se agrupan en categorías según el tipo de afecciones médicas que tratan. Por ejemplo, si tiene una afección cardíaca, debe buscar en la categoría Cardiovascular – Drugs to Treat Heart and Circulation Conditions. Allí encontrará los medicamentos que tratan las afecciones cardíacas.

B8. ¿Qué sucede si el medicamento que desea tomar no está en la Lista de medicamentos?

Si no encuentra el medicamento en la Lista de medicamentos, llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711) y pregunte si está incluido. Si le dicen que Neighborhood INTEGRITY no cubrirá el medicamento, puede hacer una de estas cosas:

- Solicitar a Servicios para Miembros una lista de medicamentos como el que desea tomar. Luego, mostrársela a su médico o al profesional que le da la receta. Ellos pueden recetar un medicamento de la Lista de medicamentos que sea como el que usted desea tomar. **O**
- Solicitar al plan de salud que haga una excepción para cubrir su medicamento. Consulte las preguntas B10 a B12 para obtener más información sobre la excepción.

B9. ¿Qué sucede si es un miembro nuevo de Neighborhood INTEGRITY y no encuentra su medicamento en la Lista de medicamentos o tiene problemas para obtenerlo?

Podemos ayudarlo. Podremos cubrir un suministro temporal para 30 días de su medicamento de la Parte D o un suministro para 90 días de su medicamento cubierto por Medicaid durante los primeros 90 días en que sea miembro de Neighborhood INTEGRITY. Esto le dará tiempo para hablar con su médico o el profesional que le da la receta. Ellos pueden ayudarlo a decidir si hay un medicamento similar en la Lista de medicamentos que puede tomar en su lugar o si debe solicitar una excepción.

Si la indicación de la receta es para menos días, permitiremos que retire varias veces el medicamento hasta alcanzar un suministro máximo para 30 días de un medicamento de la Parte D y para 90 días de un medicamento cubierto por Medicaid.

Cubriremos un suministro para 30 días de un medicamento de la Parte D o un suministro para 90 días de un medicamento cubierto por Medicaid en los siguientes casos:

- si toma un medicamento que no está en la Lista de medicamentos;
- si las normas del plan de salud no le permiten obtener la cantidad indicada por el profesional que le dio la receta;
- si el medicamento requiere la autorización previa de Neighborhood INTEGRITY, **o**
- si toma un medicamento que tiene una restricción de tratamiento escalonado.

Si está en un hogar de ancianos u otro centro de atención a largo plazo y necesita un medicamento que no está en la Lista de medicamentos o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarlo. Si ha estado en el plan por más de 90 días, reside en un centro de atención a largo plazo y necesita un suministro de inmediato:

- Cubriremos un suministro para 31 días del medicamento que necesita (a menos que tenga una receta para menos días), sea o no un miembro nuevo de Neighborhood INTEGRITY.
- Esto se suma al suministro temporal durante los primeros *90* días de membresía en Neighborhood INTEGRITY.

Si cambia el nivel de atención, entonces el miembro puede recibir un suministro para 30 días si la atención no es a largo plazo y un suministro para 31 días si recibe atención a largo plazo.

B10. ¿Puede solicitar una excepción para que cubramos su medicamento?

Sí. Puede solicitar a Neighborhood INTEGRITY que haga una excepción y cubra un medicamento que no está en la Lista de medicamentos.

También puede pedirnos que cambiemos las normas para su medicamento.

- Por ejemplo, Neighborhood INTEGRITY puede limitar la cantidad de medicamento que se cubrirá. Si su medicamento tiene un límite, puede solicitarnos que lo cambiemos y cubramos una cantidad mayor.
- Otros ejemplos: puede pedirnos que eliminemos las restricciones de tratamiento escalonado o los requisitos de autorización previa.

B11. ¿Cómo puede solicitar una excepción?

Para solicitar una excepción, llame a Servicios para Miembros. Servicios para Miembros asistirá a usted y a su proveedor para ayudarlos a solicitar una excepción. Además, puede consultar el capítulo 9 del *Manual para miembros*, donde encontrará más información sobre las excepciones.

B12. ¿Cuánto tiempo se tarda en obtener una excepción?

Primero, debemos obtener una declaración del profesional que le dio la receta que respalde su solicitud de excepción. Después de recibir la declaración, le comunicaremos la decisión respecto de su solicitud de excepción dentro de las 72 horas.

Si usted o el profesional que le dio la receta creen que su salud puede verse afectada si tiene que esperar 72 horas para conocer la decisión, puede solicitar una excepción acelerada. Esta es una decisión más rápida. Si el profesional que le dio la receta respalda su solicitud, le daremos una respuesta dentro de las 24 horas de haber recibido la declaración de respaldo del profesional.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos se componen de los mismos ingredientes activos que los medicamentos de marca. Por lo general, cuestan menos que los de marca y, normalmente, no tienen nombres conocidos. Los medicamentos genéricos están aprobados por la FDA.

Neighborhood INTEGRITY cubre tanto los medicamentos de marca como los genéricos.

B14. ¿Qué son los medicamentos de venta libre?

Los medicamentos de venta libre son medicamentos de venta sin receta. Neighborhood INTEGRITY cubre algunos medicamentos de venta libre si su proveedor se los receta, de manera que puede obtenerlos sin costo.

Puede consultar la Lista de medicamentos de Neighborhood INTEGRITY para conocer cuáles son los medicamentos de venta libre que están cubiertos.

B15. ¿Qué es el copago?

Como miembro de Neighborhood INTEGRITY, no paga copagos por los medicamentos con receta y de venta libre siempre y cuando cumpla las normas de Neighborhood INTEGRITY.

B16. ¿Qué son los niveles de medicamentos?

Los niveles son grupos de medicamentos en la Lista de medicamentos.

- Los medicamentos del nivel 1 son medicamentos genéricos.
- Los medicamentos del nivel 2 son medicamentos de marca.
- Los medicamentos del nivel 3 son medicamentos de venta libre.

En ninguno de los niveles se cobran copagos.

C. Descripción general de la *Lista de medicamentos cubiertos*

La Lista de medicamentos cubiertos le brinda información sobre los medicamentos cubiertos por Neighborhood INTEGRITY. Si tiene problemas para encontrar su medicamento en la lista, consulte la sección “Índice de medicamentos cubiertos” que comienza en la página 157. El índice enumera en orden alfabético todos los medicamentos cubiertos por Neighborhood INTEGRITY.

Nota: Si aparece **DP** junto al medicamento, significa que no es un “medicamento de la Parte D”. El importe que paga cuando obtiene este medicamento con receta no se considera para el costo total de sus medicamentos (es decir, el importe que paga no lo ayuda a calificar para la cobertura en situaciones catastróficas).

- Además, si recibe asistencia de Ayuda Adicional para pagar sus medicamentos con receta, no la recibirá para pagar estos medicamentos. Para obtener más información sobre Ayuda Adicional, consulte el cuadro informativo que se incluye a continuación.

Ayuda Adicional es un programa de Medicare que ayuda a las personas con ingresos y recursos limitados a reducir los costos de los medicamentos con receta de la Parte D de Medicare, como primas, deducibles y copagos. El programa Ayuda Adicional también se denomina “Subsidio por Bajos Ingresos” o “LIS”.

- Estos medicamentos también tienen diferentes normas para las apelaciones. Una apelación es una manera formal de solicitarnos que revisemos una decisión de cobertura y la modifiquemos si cree que cometimos un error. Por ejemplo, podríamos decidir que un medicamento que usted desea obtener no está cubierto o ya no está cubierto por Medicare o Medicaid.
- Si usted o su médico no están de acuerdo con nuestra decisión, pueden apelar. Para solicitar instrucciones sobre cómo presentar una apelación, llame a Servicios para Miembros al 1-844-812-6896 (para TTY, marque 711). Además, puede leer el capítulo 9 del *Manual para miembros* si desea conocer cómo apelar una decisión.

C1. Lista de medicamentos por afección médica

En esta sección, los medicamentos se agrupan en categorías según el tipo de afecciones médicas que tratan. Por ejemplo, si tiene una afección cardíaca, debe buscar en la categoría Cardiovascular – Drugs to Treat Heart and Circulation Conditions. Allí encontrará los medicamentos que tratan las afecciones cardíacas.

A continuación, se explican los significados de los códigos utilizados en la columna “Requisitos especiales, restricciones o límites de uso”:

B/D: este medicamento con receta tiene un requisito administrativo de autorización previa de la Parte B en comparación con la Parte D. Este medicamento puede estar cubierto por la Parte B o la Parte D de Medicare según las circunstancias. Es posible que deba presentar información que describa el uso y la indicación del medicamento para que tomemos la decisión.

DP: el medicamento no es un medicamento de la Parte D.

QL: límite de cantidad. Para ciertos medicamentos, Neighborhood INTEGRITY limita la cantidad que cubrirá.

ST: tratamiento escalonado. En algunos casos, Neighborhood INTEGRITY requiere que pruebe primero ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento que la trate. Por ejemplo, si el medicamento A y el medicamento B tratan su afección médica, es posible que Neighborhood INTEGRITY no cubra el medicamento B a menos que pruebe el medicamento A primero. Si el medicamento A no le resulta eficaz, Neighborhood INTEGRITY cubrirá el medicamento B.

PA: autorización previa. Neighborhood INTEGRITY requiere que usted o su médico obtengan una autorización previa para ciertos medicamentos. Esto significa que necesitará conseguir la aprobación de Neighborhood INTEGRITY antes de obtener su medicamento con receta. Si no recibe la aprobación, es posible que Neighborhood INTEGRITY no cubra el medicamento.

NDS: suministro de plazo no extendido. Este medicamento no está disponible para un suministro de más de 30 días.

LA: acceso limitado. Este medicamento solo está disponible a través de ciertas farmacias especializadas.

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Drug Name List of Covered Drugs by Medical Condition	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION		
GOUT - DRUGS TO TREAT GOUT		
allopurinol tab 100 mg	Tier 1	
allopurinol tab 300 mg	Tier 1	
colchicine w/ probenecid tab 0.5-500 mg	Tier 1	
COLCRYS TAB 0.6MG	Tier 2	QL (120 tabs / 30 days)
febuxostat tab 40 mg	Tier 1	ST
febuxostat tab 80 mg	Tier 1	ST
MITIGARE CAP 0.6MG	Tier 2	QL (60 caps / 30 days)
probenecid tab 500 mg	Tier 1	
ULORIC TAB 40MG	Tier 2	ST
ULORIC TAB 80MG	Tier 2	ST
MISCELLANEOUS		
acephen sup 120mg	Tier 3	DP
acephen sup 325mg	Tier 3	DP
acephen sup 650mg	Tier 3	DP
acetaminophen suppos 120 mg	Tier 3	DP
acetaminophen suppos 650 mg	Tier 3	DP
acetaminophen tab 325 mg	Tier 3	DP
acetaminophen tab 500 mg	Tier 3	DP
acetaminophen tab er 650 mg	Tier 3	DP
acetaminophn sus 160/5ml	Tier 3	DP
arthrts pain tab 650mg	Tier 3	DP
aspirin low tab 81mg ec	Tier 3	DP
ASPIRIN POW	Tier 3	DP
ASPIRIN SUP 600MG	Tier 3	DP
aspirin tab 325 mg	Tier 3	DP
aspirin tab 325mg	Tier 3	DP
aspirin tab 325mg ec	Tier 3	DP
aspirin tab delayed release 325 mg	Tier 3	DP
betatemp sus 160/5ml	Tier 3	DP
chld silapap liq 160/5ml	Tier 3	DP
ecpirin tab 325mg ec	Tier 3	DP
ed-apap liq 80mg/2.5	Tier 3	DP
eql menstrua tab complete	Tier 3	DP
eql menstrua tab relief	Tier 3	DP
FEVERALL INF SUP 80MG	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
feverall sup 120mg	Tier 3	DP
feverall sup 325mg	Tier 3	DP
feverall sup 650mg	Tier 3	DP
gnp aspirin tab 325mg ec	Tier 3	DP
hm aspirin tab 325mg	Tier 3	DP
8 hour pain tab 650mg	Tier 3	DP
mapap cap 500mg	Tier 3	DP
mapap chw 80mg	Tier 3	DP
mapap liq 160/5ml	Tier 3	DP
mapap tab 325mg	Tier 3	DP
mapap tab 500mg	Tier 3	DP
mapap tab 500mg/rr	Tier 3	DP
medi-tabs tab 500mg	Tier 3	DP
menstrual tab complete	Tier 3	DP
menstrual tab max st	Tier 3	DP
menstrual tab relief	Tier 3	DP
MIDOL MAX ST TAB MENSTRUA	Tier 3	DP
MIDOL TAB COMPLETE	Tier 3	DP
non-aspirin sus 160/5ml	Tier 3	DP
non-aspirin tab 325mg	Tier 3	DP
non-aspirin tab 500mg	Tier 3	DP
non-aspirin tab 500mg/rr	Tier 3	DP
pain & fever chw 80mg	Tier 3	DP
pain & fever sol 160/5ml	Tier 3	DP
pain & fever sus 160/5ml	Tier 3	DP
pain & fever tab 325mg	Tier 3	DP
pain & fever tab 500mg	Tier 3	DP
pain relief sus 160/5ml	Tier 3	DP
pain relief tab 500mg	Tier 3	DP
pain relief tab 500mg/rr	Tier 3	DP
pain relief tab 650mg	Tier 3	DP
pain relieve sus 160/5ml	Tier 3	DP
pain relieve tab 325mg	Tier 3	DP
pain relieve tab 500mg	Tier 3	DP
pain relieve tab 500mg/rr	Tier 3	DP
pharbetol tab 325mg	Tier 3	DP
pharbetol tab 500mg	Tier 3	DP
qc aspirin tab 325mg	Tier 3	DP
qc aspirin tab 325mg ec	Tier 3	DP
ra menstrual tab complete	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ra menstrual tab relief	Tier 3	DP
sm aspirin tab 325mg	Tier 3	DP
sm aspirin tab 325mg ec	Tier 3	DP
tactinal chw children	Tier 3	DP
tactinal tab 325mg	Tier 3	DP
tactinal tab 500mg	Tier 3	DP
tri-buff asa tab 325mg	Tier 3	DP
NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION		
celecoxib cap 50 mg	Tier 1	QL (240 caps / 30 days)
celecoxib cap 100 mg	Tier 1	QL (120 caps / 30 days)
celecoxib cap 200 mg	Tier 1	QL (60 caps / 30 days)
celecoxib cap 400 mg	Tier 1	QL (30 caps / 30 days)
diclofenac potassium tab 50 mg	Tier 1	QL (120 tabs / 30 days)
diclofenac sodium tab delayed release 25 mg	Tier 1	
diclofenac sodium tab delayed release 50 mg	Tier 1	
diclofenac sodium tab delayed release 75 mg	Tier 1	
diclofenac sodium tab er 24hr 100 mg	Tier 1	
diflunisal tab 500 mg	Tier 1	
etodolac cap 200 mg	Tier 1	
etodolac cap 300 mg	Tier 1	
etodolac tab 400 mg	Tier 1	
etodolac tab 500 mg	Tier 1	
etodolac tab er 24hr 400 mg	Tier 1	
etodolac tab er 24hr 500 mg	Tier 1	
etodolac tab er 24hr 600 mg	Tier 1	
flurbiprofen tab 50 mg	Tier 1	
flurbiprofen tab 100 mg	Tier 1	
ibu-drops dro 50/1.25	Tier 3	DP
ibuprofen dro 50/1.25	Tier 3	DP
ibuprofen ib chw 100mg	Tier 3	DP
ibuprofen jr chw 100mg	Tier 3	DP
ibuprofen sus 100/5ml	Tier 3	DP
ibuprofen susp 100 mg/5ml	Tier 1	
ibuprofen tab 400 mg	Tier 1	
ibuprofen tab 600 mg	Tier 1	
ibuprofen tab 800 mg	Tier 1	
medi-profen sus 40mg/ml	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
meloxicam tab 7.5 mg	Tier 1	
meloxicam tab 15 mg	Tier 1	
nabumetone tab 500 mg	Tier 1	
nabumetone tab 750 mg	Tier 1	
naproxen dr tab 375mg	Tier 1	
naproxen dr tab 500mg	Tier 1	
naproxen sodium tab 275 mg	Tier 1	
naproxen sodium tab 550 mg	Tier 1	
naproxen tab 250 mg	Tier 1	
naproxen tab 375 mg	Tier 1	
naproxen tab 500 mg	Tier 1	
piroxicam cap 10 mg	Tier 1	
piroxicam cap 20 mg	Tier 1	
sm ibuprofen tab 100mg jr	Tier 3	DP
sulindac tab 150 mg	Tier 1	
sulindac tab 200 mg	Tier 1	
OPIOID ANALGESICS - DRUGS TO TREAT PAIN		
acetaminophen w/ codeine soln 120-12 mg/5ml	Tier 1	QL (2700 mL / 30 days)
acetaminophen w/ codeine tab 300-15 mg	Tier 1	QL (400 tabs / 30 days)
acetaminophen w/ codeine tab 300-30 mg	Tier 1	QL (360 tabs / 30 days)
acetaminophen w/ codeine tab 300-60 mg	Tier 1	QL (180 tabs / 30 days)
buprenorphine td patch weekly 5 mcg/hr	Tier 1	QL (4 patches / 28 days), PA
buprenorphine td patch weekly 7.5 mcg/hr	Tier 1	QL (4 patches / 28 days), PA
buprenorphine td patch weekly 10 mcg/hr	Tier 1	QL (4 patches / 28 days), PA
buprenorphine td patch weekly 15 mcg/hr	Tier 1	QL (4 patches / 28 days), PA
buprenorphine td patch weekly 20 mcg/hr	Tier 1	QL (4 patches / 28 days), PA
butorphanol tartrate inj 1 mg/ml	Tier 2	
butorphanol tartrate inj 2 mg/ml	Tier 2	
BUTRANS DIS 5MCG/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 7.5/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 10MCG/HR	Tier 2	QL (4 patches / 28 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BUTRANS DIS 15MCG/HR	Tier 2	QL (4 patches / 28 days), PA
BUTRANS DIS 20MCG/HR	Tier 2	QL (4 patches / 28 days), PA
nalbuphine hcl inj 10 mg/ml	Tier 2	
nalbuphine hcl inj 20 mg/ml	Tier 2	
tramadol hcl tab 50 mg	Tier 1	QL (240 tabs / 30 days)
tramadol-acetaminophen tab 37.5-325 mg	Tier 1	QL (240 tabs / 30 days)
OPIOID ANALGESICS, CII - DRUGS TO TREAT PAIN		
fentanyl citrate buccal tab 200 mcg (base equiv)	Tier 2	QL (120 tabs / 30 days), PA
fentanyl citrate buccal tab 400 mcg (base equiv)	Tier 2	QL (120 tabs / 30 days), PA
fentanyl citrate buccal tab 600 mcg (base equiv)	Tier 2	QL (120 tabs / 30 days), PA
fentanyl citrate buccal tab 800 mcg (base equiv)	Tier 2	QL (120 tabs / 30 days), PA
fentanyl citrate lozenge on a handle 200 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 400 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 600 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 800 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 1200 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl citrate lozenge on a handle 1600 mcg	Tier 2	QL (120 lozenges / 30 days), PA
fentanyl td patch 72hr 12 mcg/hr	Tier 1	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 25 mcg/hr	Tier 1	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 50 mcg/hr	Tier 1	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 75 mcg/hr	Tier 1	QL (10 patches / 30 days), PA
fentanyl td patch 72hr 100 mcg/hr	Tier 1	QL (10 patches / 30 days), PA
FENTORA TAB 100MCG	Tier 2	QL (120 tabs / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FENTORA TAB 200MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 400MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 600MCG	Tier 2	QL (120 tabs / 30 days), PA
FENTORA TAB 800MCG	Tier 2	QL (120 tabs / 30 days), PA
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	Tier 1	QL (2700 mL / 30 days)
hydrocodone-acetaminophen tab 5-325 mg	Tier 1	QL (240 tabs / 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	Tier 1	QL (180 tabs / 30 days)
hydrocodone-acetaminophen tab 10-325 mg	Tier 1	QL (180 tabs / 30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	Tier 1	QL (150 tabs / 30 days)
hydromorphone hcl liqd 1 mg/ml	Tier 1	QL (600 mL / 30 days)
hydromorphone hcl preservative free (pf) inj 10 mg/ml	Tier 2	B/D
hydromorphone hcl tab 2 mg	Tier 1	QL (180 tabs / 30 days)
hydromorphone hcl tab 4 mg	Tier 1	QL (180 tabs / 30 days)
hydromorphone hcl tab 8 mg	Tier 1	QL (180 tabs / 30 days)
HYSINGLA ER TAB 20 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 30 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 40 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 60 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 80 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 100 MG	Tier 2	QL (30 tabs / 30 days), PA
HYSINGLA ER TAB 120 MG	Tier 2	QL (30 tabs / 30 days), PA
methadone con 10mg/ml	Tier 1	QL (90 mL / 30 days), PA
methadone hcl soln 5 mg/5ml	Tier 1	QL (450 mL / 30 days), PA
methadone hcl soln 10 mg/5ml	Tier 1	QL (450 mL / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
methadone hcl tab 5 mg	Tier 1	QL (90 tabs / 30 days), PA
methadone hcl tab 10 mg	Tier 1	QL (90 tabs / 30 days), PA
MORPHINE SUL INJ 2MG/ML	Tier 2	B/D
MORPHINE SUL INJ 4MG/ML	Tier 2	B/D
MORPHINE SUL INJ 5MG/ML	Tier 2	B/D
MORPHINE SUL INJ 8MG/ML	Tier 2	B/D
MORPHINE SUL INJ 10MG/ML	Tier 2	B/D
MORPHINE SUL INJ 150/30ML	Tier 2	B/D
morphine sulfate inj 8 mg/ml	Tier 2	B/D
morphine sulfate inj 10 mg/ml	Tier 2	B/D
morphine sulfate iv soln 1 mg/ml	Tier 2	B/D
morphine sulfate iv soln pf 4 mg/ml	Tier 2	B/D
morphine sulfate iv soln pf 8 mg/ml	Tier 2	B/D
morphine sulfate iv soln pf 10 mg/ml	Tier 2	B/D
morphine sulfate oral soln 10 mg/5ml	Tier 1	QL (900 mL / 30 days)
morphine sulfate oral soln 20 mg/5ml	Tier 1	QL (750 mL / 30 days)
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	Tier 1	QL (180 mL / 30 days)
morphine sulfate tab 15 mg	Tier 1	QL (180 tabs / 30 days)
morphine sulfate tab 30 mg	Tier 1	QL (90 tabs / 30 days)
morphine sulfate tab er 15 mg	Tier 1	QL (90 tabs / 30 days), PA
morphine sulfate tab er 30 mg	Tier 1	QL (90 tabs / 30 days), PA
morphine sulfate tab er 60 mg	Tier 1	QL (90 tabs / 30 days), PA
morphine sulfate tab er 100 mg	Tier 1	QL (90 tabs / 30 days), PA
morphine sulfate tab er 200 mg	Tier 1	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 50MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 100MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 150MG	Tier 2	QL (90 tabs / 30 days), PA
NUCYNTA ER TAB 200MG	Tier 2	QL (60 tabs / 30 days), PA
NUCYNTA ER TAB 250MG	Tier 2	QL (60 tabs / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
oxycodone hcl cap 5 mg	Tier 1	QL (180 caps / 30 days)
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	Tier 1	QL (180 mL / 30 days)
oxycodone hcl soln 5 mg/5ml	Tier 1	QL (900 mL / 30 days)
oxycodone hcl tab 5 mg	Tier 1	QL (180 tabs / 30 days)
oxycodone hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days)
oxycodone hcl tab 15 mg	Tier 1	QL (180 tabs / 30 days)
oxycodone hcl tab 20 mg	Tier 1	QL (180 tabs / 30 days)
oxycodone hcl tab 30 mg	Tier 1	QL (180 tabs / 30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg	Tier 1	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 5-325 mg	Tier 1	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	Tier 1	QL (240 tabs / 30 days)
oxycodone w/ acetaminophen tab 10-325 mg	Tier 1	QL (180 tabs / 30 days)
OXYCONTIN TAB 10MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 15MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 20MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 30MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 40MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 60MG CR	Tier 2	QL (60 tabs / 30 days), PA
OXYCONTIN TAB 80MG CR	Tier 2	QL (60 tabs / 30 days), PA
ANESTHETICS - DRUGS FOR NUMBING		
LOCAL ANESTHETICS		
lidocaine hcl local inj 0.5%	Tier 1	B/D
lidocaine hcl local inj 1%	Tier 1	B/D
lidocaine hcl local inj 2%	Tier 1	B/D
lidocaine hcl local preservative free (pf) inj 0.5%	Tier 1	B/D
lidocaine hcl local preservative free (pf) inj 1%	Tier 1	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
lidocaine hcl local preservative free (pf) inj 1.5%	Tier 1	B/D
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
ANTI-BACTERIALS - MISCELLANEOUS		
amikacin sulfate inj 1 gm/4ml (250 mg/ml)	Tier 1	
amikacin sulfate inj 500 mg/2ml (250 mg/ml)	Tier 1	
gentamicin in saline inj 0.8 mg/ml	Tier 1	
gentamicin in saline inj 1 mg/ml	Tier 1	
gentamicin in saline inj 1.2 mg/ml	Tier 1	
gentamicin in saline inj 1.6 mg/ml	Tier 1	
gentamicin in saline inj 2 mg/ml	Tier 1	
gentamicin sulfate inj 10 mg/ml	Tier 1	
gentamicin sulfate inj 40 mg/ml	Tier 1	
neomycin sulfate tab 500 mg	Tier 1	
paromomycin sulfate cap 250 mg	Tier 1	
streptomycin sulfate for inj 1 gm	Tier 2	
SULFADIAZINE TAB 500MG	Tier 2	
tobramycin nebu soln 300 mg/5ml	Tier 2	PA
tobramycin sulfate for inj 1.2 gm	Tier 2	
tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)	Tier 1	
tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)	Tier 1	
tobramycin sulfate inj 10 mg/ml (base equivalent)	Tier 1	
tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)	Tier 1	
ANTI-INFECTIVES - MISCELLANEOUS		
albendazole tab 200 mg	Tier 2	
ALINIA SUS 100/5ML	Tier 2	
ALINIA TAB 500MG	Tier 2	
atovaquone susp 750 mg/5ml	Tier 2	
AZACTAM INJ 1GM	Tier 2	
AZACTAM INJ 2GM	Tier 2	
aztreonam for inj 1 gm	Tier 1	
aztreonam for inj 2 gm	Tier 1	
CAYSTON INH 75MG	Tier 2	LA, PA
clindamycin hcl cap 75 mg	Tier 1	
clindamycin hcl cap 150 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
clindamycin hcl cap 300 mg	Tier 1	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	Tier 1	
clindamycin phosphate in d5w iv soln 300 mg/50ml	Tier 1	
clindamycin phosphate in d5w iv soln 600 mg/50ml	Tier 1	
clindamycin phosphate in d5w iv soln 900 mg/50ml	Tier 1	
clindamycin phosphate inj 9 gm/60ml	Tier 1	
clindamycin phosphate inj 300 mg/2ml	Tier 1	
clindamycin phosphate inj 600 mg/4ml	Tier 1	
clindamycin phosphate inj 900 mg/6ml	Tier 1	
clindamycin phosphate iv soln 300 mg/2ml	Tier 1	
clindamycin phosphate iv soln 900 mg/6ml	Tier 1	
CLINDMYC/NAC INJ 300/50ML	Tier 2	
CLINDMYC/NAC INJ 600/50ML	Tier 2	
CLINDMYC/NAC INJ 900/50ML	Tier 2	
colistimethate sod for inj 150 mg (colistin base activity)	Tier 1	
dapsone tab 25 mg	Tier 1	
dapsone tab 100 mg	Tier 1	
daptomycin for iv soln 350 mg	Tier 2	
daptomycin for iv soln 500 mg	Tier 2	
DAPTOMYCIN SOL 350MG	Tier 2	
EMVERM CHW 100MG	Tier 2	
ertapenem sodium for inj 1 gm (base equivalent)	Tier 1	
imipenem-cilastatin intravenous for soln 250 mg	Tier 1	
imipenem-cilastatin intravenous for soln 500 mg	Tier 1	
ivermectin tab 3 mg	Tier 1	
linezolid for susp 100 mg/5ml	Tier 2	
linezolid in sodium chloride iv soln 600 mg/300ml-0.9%	Tier 2	
linezolid iv soln 600 mg/300ml (2 mg/ml)	Tier 1	
linezolid tab 600 mg	Tier 2	
meropenem iv for soln 1 gm	Tier 1	
meropenem iv for soln 500 mg	Tier 1	
methenamine hippurate tab 1 gm	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
metronidazole in nacl 0.79% iv soln 500 mg/100ml	Tier 1	
metronidazole tab 250 mg	Tier 1	
metronidazole tab 500 mg	Tier 1	
NEBUPENT INH 300MG	Tier 2	B/D
nitrofurantoin macrocrystalline cap 50 mg	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
nitrofurantoin macrocrystalline cap 100 mg	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
nitrofurantoin monohydrate macrocrystalline cap 100 mg	Tier 2	PA; PA applies if 70 years and older after a 90 day supply in a calendar year
PENTAM 300 INJ 300MG	Tier 2	
pentamidine isethionate for soln 300 mg	Tier 1	
PINWORM TAB MEDICINE	Tier 3	DP
praziquantel tab 600 mg	Tier 1	
reeses med sus pinworm	Tier 3	DP
SIVEXTRO INJ 200MG	Tier 2	
SIVEXTRO TAB 200MG	Tier 2	
sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml	Tier 1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	Tier 1	
sulfamethoxazole-trimethoprim tab 400-80 mg	Tier 1	
sulfamethoxazole-trimethoprim tab 800-160 mg	Tier 1	
SYNERCID INJ 500MG	Tier 2	NDS
tigecycline for iv soln 50 mg	Tier 2	
trimethoprim tab 100 mg	Tier 1	
vancomycin hcl cap 125 mg (base equivalent)	Tier 1	
vancomycin hcl cap 250 mg (base equivalent)	Tier 2	
vancomycin hcl for iv soln 1 gm (base equivalent)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
vancomycin hcl for iv soln 5 gm (base equivalent)	Tier 1	
vancomycin hcl for iv soln 10 gm (base equivalent)	Tier 1	
vancomycin hcl for iv soln 500 mg (base equivalent)	Tier 1	
vancomycin hcl for iv soln 750 mg (base equivalent)	Tier 1	
VANCOMYCIN INJ 1 GM	Tier 2	
VANCOMYCIN INJ 500MG	Tier 2	
VANCOMYCIN INJ 750MG	Tier 2	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
ABELCET INJ 5MG/ML	Tier 2	B/D
AMBISOME INJ 50MG	Tier 2	B/D
amphotericin b for iv soln 50 mg	Tier 1	B/D
caspofungin acetate for iv soln 50 mg	Tier 2	
caspofungin acetate for iv soln 70 mg	Tier 2	
fluconazole for susp 10 mg/ml	Tier 1	
fluconazole for susp 40 mg/ml	Tier 1	
fluconazole in nacl 0.9% inj 200 mg/100ml	Tier 1	
fluconazole in nacl 0.9% inj 400 mg/200ml	Tier 1	
fluconazole tab 50 mg	Tier 1	
fluconazole tab 100 mg	Tier 1	
fluconazole tab 150 mg	Tier 1	
fluconazole tab 200 mg	Tier 1	
flucytosine cap 250 mg	Tier 2	
flucytosine cap 500 mg	Tier 2	
griseofulvin microsize susp 125 mg/5ml	Tier 1	
griseofulvin microsize tab 500 mg	Tier 1	
griseofulvin ultramicrosize tab 125 mg	Tier 1	
griseofulvin ultramicrosize tab 250 mg	Tier 1	
itraconazole cap 100 mg	Tier 1	PA
ketoconazole tab 200 mg	Tier 1	PA
MYCAMINE INJ 50MG	Tier 2	
MYCAMINE INJ 100MG	Tier 2	
NOXAFIL SUS 40MG/ML	Tier 2	QL (630 mL / 30 days)
NOXAFIL TAB 100MG	Tier 2	QL (93 tabs / 30 days)
nystatin tab 500000 unit	Tier 1	
posaconazole tab delayed release 100 mg	Tier 2	QL (93 tabs / 30 days)
terbinafine hcl tab 250 mg	Tier 1	QL (90 tabs / year)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
voriconazole for inj 200 mg	Tier 1	
voriconazole for susp 40 mg/ml	Tier 2	
voriconazole tab 50 mg	Tier 2	
voriconazole tab 200 mg	Tier 2	
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
atovaquone-proguanil hcl tab 62.5-25 mg	Tier 1	
atovaquone-proguanil hcl tab 250-100 mg	Tier 1	
chloroquine phosphate tab 250 mg	Tier 1	
chloroquine phosphate tab 500 mg	Tier 1	
COARTEM TAB 20-120MG	Tier 2	
mefloquine hcl tab 250 mg	Tier 1	
primaquine phosphate tab 26.3 mg (15 mg base)	Tier 1	
PRIMAQUINE TAB 26.3MG	Tier 2	
quinine sulfate cap 324 mg	Tier 1	PA
ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
abacavir sulfate soln 20 mg/ml (base equiv)	Tier 1	
abacavir sulfate tab 300 mg (base equiv)	Tier 1	
APTIVUS CAP 250MG	Tier 2	
APTIVUS SOL	Tier 2	
atazanavir sulfate cap 150 mg (base equiv)	Tier 2	
atazanavir sulfate cap 200 mg (base equiv)	Tier 2	
atazanavir sulfate cap 300 mg (base equiv)	Tier 2	
CRIXIVAN CAP 200MG	Tier 2	
CRIXIVAN CAP 400MG	Tier 2	
didanosine delayed release capsule 200 mg	Tier 1	
didanosine delayed release capsule 250 mg	Tier 1	
didanosine delayed release capsule 400 mg	Tier 1	
EDURANT TAB 25MG	Tier 2	
efavirenz cap 50 mg	Tier 1	
efavirenz cap 200 mg	Tier 2	
efavirenz tab 600 mg	Tier 2	
EMTRIVA CAP 200MG	Tier 2	
EMTRIVA SOL 10MG/ML	Tier 2	
fosamprenavir calcium tab 700 mg (base equiv)	Tier 2	
FUZEON INJ 90MG	Tier 2	
INTELENCE TAB 25MG	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
INTELENCE TAB 100MG	Tier 2	
INTELENCE TAB 200MG	Tier 2	
INVIRASE TAB 500MG	Tier 2	
ISENTRESS CHW 25MG	Tier 2	
ISENTRESS CHW 100MG	Tier 2	
ISENTRESS HD TAB 600MG	Tier 2	
ISENTRESS POW 100MG	Tier 2	
ISENTRESS TAB 400MG	Tier 2	
lamivudine oral soln 10 mg/ml	Tier 1	
lamivudine tab 150 mg	Tier 1	
lamivudine tab 300 mg	Tier 1	
LEXIVA SUS 50MG/ML	Tier 2	
nevirapine susp 50 mg/5ml	Tier 1	
nevirapine tab 200 mg	Tier 1	
nevirapine tab er 24hr 100 mg	Tier 1	
nevirapine tab er 24hr 400 mg	Tier 1	
NORVIR POW 100MG	Tier 2	
NORVIR SOL 80MG/ML	Tier 2	
PIFELTRO TAB 100MG	Tier 2	
PREZISTA SUS 100MG/ML	Tier 2	QL (400 mL / 30 days)
PREZISTA TAB 75MG	Tier 2	QL (480 tabs / 30 days)
PREZISTA TAB 150MG	Tier 2	QL (240 tabs / 30 days)
PREZISTA TAB 600MG	Tier 2	QL (60 tabs / 30 days)
PREZISTA TAB 800MG	Tier 2	QL (30 tabs / 30 days)
RESCRIPTOR TAB 200MG	Tier 2	
REYATAZ POW 50MG	Tier 2	
ritonavir tab 100 mg	Tier 1	
SELZENTRY SOL 20MG/ML	Tier 2	
SELZENTRY TAB 25MG	Tier 2	
SELZENTRY TAB 75MG	Tier 2	
SELZENTRY TAB 150MG	Tier 2	
SELZENTRY TAB 300MG	Tier 2	
stavudine cap 15 mg	Tier 1	
stavudine cap 20 mg	Tier 1	
stavudine cap 30 mg	Tier 1	
stavudine cap 40 mg	Tier 1	
tenofovir disoproxil fumarate tab 300 mg	Tier 2	
TIVICAY TAB 10MG	Tier 2	
TIVICAY TAB 25MG	Tier 2	
TIVICAY TAB 50MG	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TROGARZO INJ 150MG/ML	Tier 2	LA
TYBOST TAB 150MG	Tier 2	
VIDEX EC CAP 125MG	Tier 2	
VIDEX SOL 2GM	Tier 2	
VIDEX SOL 4GM	Tier 2	
VIRACEPT TAB 250MG	Tier 2	
VIRACEPT TAB 625MG	Tier 2	
VIRAMUNE SUS 50MG/5ML	Tier 2	
VIREAD POW 40MG/GM	Tier 2	
VIREAD TAB 150MG	Tier 2	
VIREAD TAB 200MG	Tier 2	
VIREAD TAB 250MG	Tier 2	
zidovudine cap 100 mg	Tier 1	
zidovudine syrup 10 mg/ml	Tier 1	
zidovudine tab 300 mg	Tier 1	
ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
abacavir sulfate-lamivudine tab 600-300 mg	Tier 1	NDS
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg	Tier 2	
ATRIPLA TAB	Tier 2	
BIKTARVY TAB	Tier 2	
CIMDUO TAB 300-300	Tier 2	
COMPLERA TAB	Tier 2	
DELSTRIGO TAB	Tier 2	
DESCOVY TAB 200/25	Tier 2	
DOVATO TAB 50-300MG	Tier 2	
EVOTAZ TAB 300-150	Tier 2	
GENVOYA TAB	Tier 2	
JULUCA TAB 50-25MG	Tier 2	
KALETRA TAB 100-25MG	Tier 2	
KALETRA TAB 200-50MG	Tier 2	
lamivudine-zidovudine tab 150-300 mg	Tier 1	
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	Tier 1	
ODEFSEY TAB	Tier 2	
PREZCOBIX TAB 800-150	Tier 2	
STRIBILD TAB	Tier 2	
SYMFI LO TAB	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SYMFI TAB	Tier 2	
SYMTUZA TAB	Tier 2	
TRIUMEQ TAB	Tier 2	
TRUVADA TAB 100-150	Tier 2	QL (60 tabs / 30 days)
TRUVADA TAB 133-200	Tier 2	QL (30 tabs / 30 days)
TRUVADA TAB 167-250	Tier 2	QL (30 tabs / 30 days)
TRUVADA TAB 200-300	Tier 2	QL (30 tabs / 30 days)
ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS		
cycloserine cap 250 mg	Tier 2	
ethambutol hcl tab 100 mg	Tier 1	
ethambutol hcl tab 400 mg	Tier 1	
isoniazid syrup 50 mg/5ml	Tier 1	
isoniazid tab 100 mg	Tier 1	
isoniazid tab 300 mg	Tier 1	
PASER GRA 4GM	Tier 2	
PRIFTIN TAB 150MG	Tier 2	
pyrazinamide tab 500 mg	Tier 1	
rifabutin cap 150 mg	Tier 1	
rifampin cap 150 mg	Tier 1	
rifampin cap 300 mg	Tier 1	
rifampin for inj 600 mg	Tier 1	
RIFATER TAB	Tier 2	
SIRTURO TAB 100MG	Tier 2	LA, PA
TRECATOR TAB 250MG	Tier 2	
ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS		
acyclovir cap 200 mg	Tier 1	
acyclovir sodium iv soln 50 mg/ml	Tier 1	B/D
acyclovir susp 200 mg/5ml	Tier 1	
acyclovir tab 400 mg	Tier 1	
acyclovir tab 800 mg	Tier 1	
adefovir dipivoxil tab 10 mg	Tier 2	
BARACLUDE SOL .05MG/ML	Tier 2	
entecavir tab 0.5 mg	Tier 2	
entecavir tab 1 mg	Tier 2	
EPCLUSA TAB 400-100	Tier 2	PA
EPIVIR HBV SOL 5MG/ML	Tier 2	
famciclovir tab 125 mg	Tier 1	
famciclovir tab 250 mg	Tier 1	
famciclovir tab 500 mg	Tier 1	
ganciclovir sodium for inj 500 mg	Tier 1	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
HARVONI TAB 90-400MG	Tier 2	PA
lamivudine tab 100 mg (hbv)	Tier 1	
MAVYRET TAB 100-40MG	Tier 2	PA
oseltamivir phosphate cap 30 mg (base equiv)	Tier 1	QL (168 caps / year)
oseltamivir phosphate cap 45 mg (base equiv)	Tier 1	QL (84 caps / year)
oseltamivir phosphate cap 75 mg (base equiv)	Tier 1	QL (84 caps / year)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	Tier 1	QL (1080 mL / year)
PEGASYS INJ	Tier 2	PA
PEGASYS INJ 180MCG/M	Tier 2	PA
PEGASYS INJ PROCLICK	Tier 2	PA
REBETOL SOL 40MG/ML	Tier 2	
RELENZA MIS DISKHALE	Tier 2	QL (6 inhalers / year)
ribavirin cap 200 mg	Tier 1	
ribavirin tab 200 mg	Tier 1	
ribavirin tab 600 mg	Tier 2	
rimantadine hydrochloride tab 100 mg	Tier 1	
valacyclovir hcl tab 1 gm	Tier 1	
valacyclovir hcl tab 500 mg	Tier 1	
valganciclovir hcl for soln 50 mg/ml (base equiv)	Tier 2	NDS
valganciclovir hcl tab 450 mg (base equivalent)	Tier 2	
VEMLIDY TAB 25MG	Tier 2	
VOSEVI TAB	Tier 2	PA
ZEPATIER TAB 50-100MG	Tier 2	PA
CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS		
cefaclor cap 250 mg	Tier 1	
cefaclor cap 500 mg	Tier 1	
CEFACLOR ER TAB 500MG	Tier 2	
cefaclor for susp 125 mg/5ml	Tier 1	
cefaclor for susp 250 mg/5ml	Tier 1	
cefaclor for susp 375 mg/5ml	Tier 1	
cefadroxil cap 500 mg	Tier 1	
cefadroxil for susp 250 mg/5ml	Tier 1	
cefadroxil for susp 500 mg/5ml	Tier 1	
cefadroxil tab 1 gm	Tier 1	
CEFAZOLIN INJ 1GM/50ML	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
cefazolin sodium for inj 1 gm	Tier 1	
cefazolin sodium for inj 10 gm	Tier 1	
cefazolin sodium for inj 20 gm	Tier 1	
cefazolin sodium for inj 500 mg	Tier 1	
cefazolin sodium for iv soln 1 gm	Tier 1	
CEFAZOLIN SOL	Tier 2	
cefdinir cap 300 mg	Tier 1	
cefdinir for susp 125 mg/5ml	Tier 1	
cefdinir for susp 250 mg/5ml	Tier 1	
cefepime hcl for inj 1 gm	Tier 1	
cefepime hcl for inj 2 gm	Tier 1	
cefixime cap 400 mg	Tier 1	
cefixime for susp 100 mg/5ml	Tier 1	
cefixime for susp 200 mg/5ml	Tier 1	
cefotaxime sodium for inj 1 gm	Tier 1	
cefotaxime sodium for inj 500 mg	Tier 1	
cefoxitin sodium for inj 10 gm	Tier 1	
cefoxitin sodium for iv soln 1 gm	Tier 1	
cefoxitin sodium for iv soln 2 gm	Tier 1	
cefpodoxime proxetil for susp 50 mg/5ml	Tier 1	
cefpodoxime proxetil for susp 100 mg/5ml	Tier 1	
cefpodoxime proxetil tab 100 mg	Tier 1	
cefpodoxime proxetil tab 200 mg	Tier 1	
cefprozil for susp 125 mg/5ml	Tier 1	
cefprozil for susp 250 mg/5ml	Tier 1	
cefprozil tab 250 mg	Tier 1	
cefprozil tab 500 mg	Tier 1	
ceftazidime for inj 1 gm	Tier 1	
ceftazidime for inj 2 gm	Tier 1	
ceftazidime for inj 6 gm	Tier 1	
CEFTAZIDIME/ SOL D5W 1GM	Tier 2	
CEFTAZIDIME/ SOL D5W 2GM	Tier 2	
ceftriaxone sodium for inj 1 gm	Tier 1	
ceftriaxone sodium for inj 2 gm	Tier 1	
ceftriaxone sodium for inj 10 gm	Tier 1	
ceftriaxone sodium for inj 250 mg	Tier 1	
ceftriaxone sodium for inj 500 mg	Tier 1	
ceftriaxone sodium for iv soln 1 gm	Tier 1	
ceftriaxone sodium for iv soln 2 gm	Tier 1	
cefuroxime axetil tab 250 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
cefuroxime axetil tab 500 mg	Tier 1	
cefuroxime sodium for inj 7.5 gm	Tier 1	
cefuroxime sodium for inj 750 mg	Tier 1	
cefuroxime sodium for iv soln 1.5 gm	Tier 1	
cephalexin cap 250 mg	Tier 1	
cephalexin cap 500 mg	Tier 1	
cephalexin for susp 125 mg/5ml	Tier 1	
cephalexin for susp 250 mg/5ml	Tier 1	
SUPRAX CHW 100MG	Tier 2	
SUPRAX CHW 200MG	Tier 2	
SUPRAX SUS 500/5ML	Tier 2	
tazicef inj 1gm	Tier 1	
tazicef inj 2gm	Tier 1	
tazicef inj 6gm	Tier 1	
TEFLARO INJ 400MG	Tier 2	
TEFLARO INJ 600MG	Tier 2	
ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS		
azithromycin for susp 100 mg/5ml	Tier 1	
azithromycin for susp 200 mg/5ml	Tier 1	
azithromycin iv for soln 500 mg	Tier 1	
azithromycin powd pack for susp 1 gm	Tier 1	
azithromycin tab 250 mg	Tier 1	
azithromycin tab 500 mg	Tier 1	
azithromycin tab 600 mg	Tier 1	
clarithromycin for susp 125 mg/5ml	Tier 1	
clarithromycin for susp 250 mg/5ml	Tier 1	
clarithromycin tab 250 mg	Tier 1	
clarithromycin tab 500 mg	Tier 1	
clarithromycin tab er 24hr 500 mg	Tier 1	
DIFICID TAB 200MG	Tier 2	
ery-tab tab 250mg ec	Tier 1	
ery-tab tab 333mg ec	Tier 1	
ery-tab tab 500mg ec	Tier 1	
ERYTHROCIN INJ 500MG	Tier 2	
erythrocin tab 250mg	Tier 1	
erythromycin ethylsuccinate tab 400 mg	Tier 1	
erythromycin tab 250 mg	Tier 1	
erythromycin tab 500 mg	Tier 1	
erythromycin tab delayed release 250 mg	Tier 1	
erythromycin tab delayed release 333 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
erythromycin tab delayed release 500 mg	Tier 1	
erythromycin w/ delayed release particles cap 250 mg	Tier 1	
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
ciprofloxacin 200 mg/100ml in d5w	Tier 1	
ciprofloxacin 400 mg/200ml in d5w	Tier 1	
ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	Tier 1	
ciprofloxacin hcl tab 100 mg (base equiv)	Tier 1	
ciprofloxacin hcl tab 250 mg (base equiv)	Tier 1	
ciprofloxacin hcl tab 500 mg (base equiv)	Tier 1	
ciprofloxacin hcl tab 750 mg (base equiv)	Tier 1	
levofloxacin in d5w iv soln 250 mg/50ml	Tier 1	
levofloxacin in d5w iv soln 500 mg/100ml	Tier 1	
levofloxacin in d5w iv soln 750 mg/150ml	Tier 1	
levofloxacin iv soln 25 mg/ml	Tier 1	
levofloxacin oral soln 25 mg/ml	Tier 1	
levofloxacin tab 250 mg	Tier 1	
levofloxacin tab 500 mg	Tier 1	
levofloxacin tab 750 mg	Tier 1	
moxifloxacin hcl tab 400 mg (base equiv)	Tier 1	
PENICILLINS - DRUGS TO TREAT INFECTIONS		
amoxicillin & k clavulanate chew tab 200-28.5 mg	Tier 1	
amoxicillin & k clavulanate chew tab 400-57 mg	Tier 1	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	Tier 1	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	Tier 1	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	Tier 1	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	Tier 1	
amoxicillin & k clavulanate tab 250-125 mg	Tier 1	
amoxicillin & k clavulanate tab 500-125 mg	Tier 1	
amoxicillin & k clavulanate tab 875-125 mg	Tier 1	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	Tier 1	
amoxicillin (trihydrate) cap 250 mg	Tier 1	
amoxicillin (trihydrate) cap 500 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
amoxicillin (trihydrate) chew tab 125 mg	Tier 1	
amoxicillin (trihydrate) chew tab 250 mg	Tier 1	
amoxicillin (trihydrate) for susp 125 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 200 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 250 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 400 mg/5ml	Tier 1	
amoxicillin (trihydrate) tab 500 mg	Tier 1	
amoxicillin (trihydrate) tab 875 mg	Tier 1	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm	Tier 1	
ampicillin & sulbactam sodium for inj 3 (2-1) gm	Tier 1	
ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	Tier 1	
ampicillin cap 500 mg	Tier 1	
ampicillin sodium for inj 1 gm	Tier 1	
ampicillin sodium for inj 2 gm	Tier 1	
ampicillin sodium for inj 125 mg	Tier 1	
ampicillin sodium for inj 250 mg	Tier 1	
ampicillin sodium for inj 500 mg	Tier 1	
ampicillin sodium for iv soln 1 gm	Tier 1	
ampicillin sodium for iv soln 2 gm	Tier 1	
ampicillin sodium for iv soln 10 gm	Tier 1	
BICILLIN L-A INJ 600000	Tier 2	
BICILLIN L-A INJ 1200000	Tier 2	
BICILLIN L-A INJ 2400000	Tier 2	
dicloxacillin sodium cap 250 mg	Tier 1	
dicloxacillin sodium cap 500 mg	Tier 1	
NAFCILLIN INJ 10GM	Tier 2	
nafcillin sodium for inj 1 gm	Tier 1	
nafcillin sodium for inj 2 gm	Tier 1	
nafcillin sodium for iv soln 1 gm	Tier 1	
nafcillin sodium for iv soln 2 gm	Tier 1	
nafcillin sodium for iv soln 10 gm	Tier 2	
oxacillin sodium for inj 1 gm (base equivalent)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
oxacillin sodium for inj 2 gm (base equivalent)	Tier 1	
oxacillin sodium for inj 10 gm (base equivalent)	Tier 2	
PEN G PROC INJ 600000	Tier 2	
PENICILL GK/ INJ DEX 2MU	Tier 2	
PENICILL GK/ INJ DEX 3MU	Tier 2	
penicillin g potassium for inj 5000000 unit	Tier 1	
penicillin g potassium for inj 20000000 unit	Tier 1	
penicillin g sodium for inj 5000000 unit	Tier 1	
penicillin v potassium for soln 125 mg/5ml	Tier 1	
penicillin v potassium for soln 250 mg/5ml	Tier 1	
penicillin v potassium tab 250 mg	Tier 1	
penicillin v potassium tab 500 mg	Tier 1	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	Tier 1	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)	Tier 1	
piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)	Tier 1	
piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)	Tier 1	
piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)	Tier 1	
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
doxy 100 inj 100mg	Tier 1	
doxycycline hyclate cap 50 mg	Tier 1	
doxycycline hyclate cap 100 mg	Tier 1	
doxycycline hyclate for inj 100 mg	Tier 1	
doxycycline hyclate tab 20 mg	Tier 1	
doxycycline hyclate tab 100 mg	Tier 1	
doxycycline monohydrate cap 50 mg	Tier 1	
doxycycline monohydrate cap 100 mg	Tier 1	
doxycycline monohydrate tab 50 mg	Tier 1	
doxycycline monohydrate tab 75 mg	Tier 1	
doxycycline monohydrate tab 100 mg	Tier 1	
doxycycline monohydrate tab 150 mg	Tier 1	
minocycline hcl cap 50 mg	Tier 1	
minocycline hcl cap 75 mg	Tier 1	
minocycline hcl cap 100 mg	Tier 1	
tetracycline hcl cap 250 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
tetracycline hcl cap 500 mg	Tier 1	
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER		
ALKYLATING AGENTS		
BENDEKA INJ 100/4ML	Tier 2	B/D
cyclophosphamide cap 25 mg	Tier 1	B/D
cyclophosphamide cap 50 mg	Tier 1	B/D
cyclophosphamide for inj 1 gm	Tier 2	B/D
cyclophosphamide for inj 2 gm	Tier 2	B/D
cyclophosphamide for inj 500 mg	Tier 2	B/D
dacarbazine for inj 100 mg	Tier 1	B/D
EMCYT CAP 140MG	Tier 2	
GLEOSTINE CAP 10MG	Tier 2	
GLEOSTINE CAP 40MG	Tier 2	
GLEOSTINE CAP 100MG	Tier 2	
IFEX INJ 3GM	Tier 2	B/D
IFOSFAMIDE INJ 3GM	Tier 2	B/D
ifosfamide iv inj 1 gm/20ml (50 mg/ml)	Tier 1	B/D
ifosfamide iv inj 3 gm/60ml (50 mg/ml)	Tier 1	B/D
LEUKERAN TAB 2MG	Tier 2	
ANTHRACYCLINES		
adriamycin inj 20mg	Tier 1	B/D
doxorubicin hcl for inj 50 mg	Tier 1	B/D
doxorubicin hcl inj 2 mg/ml	Tier 1	B/D
doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml	Tier 2	B/D
epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)	Tier 1	B/D
epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)	Tier 1	B/D
ANTIBIOTICS		
bleomycin sulfate for inj 15 unit	Tier 1	B/D
bleomycin sulfate for inj 30 unit	Tier 1	B/D
mitomycin for iv soln 5 mg	Tier 2	B/D
mitomycin for iv soln 20 mg	Tier 2	B/D
mitomycin for iv soln 40 mg	Tier 2	B/D
ANTIMETABOLITES		
adrucil inj 2.5g/50m	Tier 1	B/D
adrucil inj 5gm/100m	Tier 1	B/D
adrucil inj 500/10ml	Tier 1	B/D
ALIMTA INJ 100MG	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ALIMTA INJ 500MG	Tier 2	B/D
azacitidine for inj 100 mg	Tier 2	B/D
cytarabine inj 20 mg/ml	Tier 1	B/D
fluorouracil iv soln 1 gm/20ml (50 mg/ml)	Tier 1	B/D
fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)	Tier 1	B/D
fluorouracil iv soln 5 gm/100ml (50 mg/ml)	Tier 1	B/D
fluorouracil iv soln 500 mg/10ml (50 mg/ml)	Tier 1	B/D
gemcitabine hcl for inj 1 gm	Tier 1	B/D
gemcitabine hcl for inj 2 gm	Tier 1	B/D
gemcitabine hcl for inj 200 mg	Tier 1	B/D
gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)	Tier 1	B/D
gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)	Tier 1	B/D
gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)	Tier 1	B/D
mercaptopurine tab 50 mg	Tier 1	
methotrexate sodium for inj 1 gm	Tier 1	B/D
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	Tier 1	B/D
methotrexate sodium inj 250 mg/10ml (25 mg/ml)	Tier 1	B/D
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)	Tier 1	B/D
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)	Tier 1	B/D
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	Tier 1	B/D
PURIXAN SUS 20MG/ML	Tier 2	
TABLOID TAB 40MG	Tier 2	
ANTIMITOTIC, TAXOIDS		
ABRAXANE INJ 100MG	Tier 2	B/D
docetaxel for inj conc 20 mg/ml	Tier 2	B/D
docetaxel for inj conc 80 mg/4ml (20 mg/ml)	Tier 2	B/D
docetaxel for inj conc 160 mg/8ml (20 mg/ml)	Tier 2	B/D
DOCETAXEL INJ 20MG/2ML	Tier 2	B/D
DOCETAXEL INJ 80MG/4ML	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
DOCETAXEL INJ 80MG/8ML	Tier 2	B/D
DOCETAXEL INJ 160/8ML	Tier 2	B/D
DOCETAXEL INJ 160/16ML	Tier 2	B/D
DOCETAXEL INJ 200/10	Tier 2	B/D
docetaxel soln for iv infusion 20 mg/2ml	Tier 2	B/D
docetaxel soln for iv infusion 80 mg/8ml	Tier 2	B/D
docetaxel soln for iv infusion 160 mg/16ml	Tier 2	B/D
paclitaxel iv conc 30 mg/5ml (6 mg/ml)	Tier 1	B/D
paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)	Tier 1	B/D
paclitaxel iv conc 150 mg/25ml (6 mg/ml)	Tier 1	B/D
paclitaxel iv conc 300 mg/50ml (6 mg/ml)	Tier 1	B/D
TAXOTERE INJ 80MG/4ML	Tier 2	B/D
ANTIMITOTIC, VINCA ALKALOIDS		
vinblastine sulfate inj 1 mg/ml	Tier 1	B/D
vincristine sulfate iv soln 1 mg/ml	Tier 1	B/D
vinorelbine tartrate inj 10 mg/ml (base equiv)	Tier 1	B/D
vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)	Tier 1	B/D
BIOLOGIC RESPONSE MODIFIERS		
AVASTIN INJ	Tier 2	LA, PA
AVASTIN INJ 400/16ML	Tier 2	LA, PA
BORTEZOMIB INJ 3.5MG	Tier 2	PA
DAURISMO TAB 25MG	Tier 2	LA, PA
DAURISMO TAB 100MG	Tier 2	LA, PA
ERIVEDGE CAP 150MG	Tier 2	LA, PA
FARYDAK CAP 10MG	Tier 2	LA, PA
FARYDAK CAP 15MG	Tier 2	LA, PA
FARYDAK CAP 20MG	Tier 2	LA, PA
HERCEP HYLEC SOL 60-10000	Tier 2	PA
HERCEPTIN INJ 150MG	Tier 2	PA
HERCEPTIN INJ 440MG	Tier 2	PA
IBRANCE CAP 75MG	Tier 2	LA, PA
IBRANCE CAP 100MG	Tier 2	LA, PA
IBRANCE CAP 125MG	Tier 2	LA, PA
IDHIFA TAB 50MG	Tier 2	LA, PA
IDHIFA TAB 100MG	Tier 2	LA, PA
KADCYLA INJ 100MG	Tier 2	B/D
KADCYLA INJ 160MG	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
KEYTRUDA INJ 100MG/4M	Tier 2	PA
KEYTRUDA SOL 50MG	Tier 2	PA
KISQALI 200 PAK FEMARA	Tier 2	PA
KISQALI 400 PAK FEMARA	Tier 2	PA
KISQALI 600 PAK FEMARA	Tier 2	PA
KISQALI TAB 200DOSE	Tier 2	PA
KISQALI TAB 400DOSE	Tier 2	PA
KISQALI TAB 600DOSE	Tier 2	PA
LYNPARZA TAB 100MG	Tier 2	LA, PA
LYNPARZA TAB 150MG	Tier 2	LA, PA
MYLOTARG INJ 4.5MG	Tier 2	LA, PA
NINLARO CAP 2.3MG	Tier 2	PA
NINLARO CAP 3MG	Tier 2	PA
NINLARO CAP 4MG	Tier 2	PA
ODOMZO CAP 200MG	Tier 2	LA, PA
RITUXAN INJ 100MG	Tier 2	LA, PA
RITUXAN INJ 500MG	Tier 2	LA, PA
RITUXAN INJ HYCELA	Tier 2	LA, PA
RUBRACA TAB 200MG	Tier 2	LA, PA
RUBRACA TAB 250MG	Tier 2	LA, PA
RUBRACA TAB 300MG	Tier 2	LA, PA
TALZENNA CAP 0.25MG	Tier 2	LA, PA
TALZENNA CAP 1MG	Tier 2	LA, PA
TECENTRIQ INJ 840/14	Tier 2	LA, PA
TECENTRIQ INJ 1200/20	Tier 2	LA, PA
TIBSOVO TAB 250MG	Tier 2	LA, PA
VELCADE INJ 3.5MG	Tier 2	PA
VENCLEXTA TAB 10MG	Tier 2	LA, PA
VENCLEXTA TAB 50MG	Tier 2	LA, PA
VENCLEXTA TAB 100MG	Tier 2	LA, PA
VENCLEXTA TAB START PK	Tier 2	LA, PA
VERZENIO TAB 50MG	Tier 2	LA, PA
VERZENIO TAB 100MG	Tier 2	LA, PA
VERZENIO TAB 150MG	Tier 2	LA, PA
VERZENIO TAB 200MG	Tier 2	LA, PA
ZEJULA CAP 100MG	Tier 2	LA, PA
ZOLINZA CAP 100MG	Tier 2	PA
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate tab 250 mg	Tier 2	PA
anastrozole tab 1 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
bicalutamide tab 50 mg	Tier 1	
DEPO-PROVERA INJ 400/ML	Tier 2	B/D
ERLEADA TAB 60MG	Tier 2	LA, PA
exemestane tab 25 mg	Tier 1	
FASLODEX INJ 250/5ML	Tier 2	B/D
flutamide cap 125 mg	Tier 1	
fulvestrant inj 250 mg/5ml	Tier 2	B/D
letrozole tab 2.5 mg	Tier 1	
leuprolide acetate inj kit 5 mg/ml	Tier 1	PA
LUPRON DEPOT INJ 3.75MG	Tier 2	PA
LUPRON DEPOT INJ 11.25MG	Tier 2	PA
LYSODREN TAB 500MG	Tier 2	
megestrol acetate susp 40 mg/ml	Tier 2	
megestrol acetate susp 625 mg/5ml	Tier 2	PA
megestrol acetate tab 20 mg	Tier 2	
megestrol acetate tab 40 mg	Tier 2	
nilutamide tab 150 mg	Tier 2	
NUBEQA TAB 300MG	Tier 2	LA, PA
SOLTAMOX SOL 10MG/5ML	Tier 2	
tamoxifen citrate tab 10 mg (base equivalent)	Tier 1	
tamoxifen citrate tab 20 mg (base equivalent)	Tier 1	
toremifene citrate tab 60 mg (base equivalent)	Tier 2	
TRELSTAR MIX INJ 3.75MG	Tier 2	PA
TRELSTAR MIX INJ 11.25MG	Tier 2	PA
XTANDI CAP 40MG	Tier 2	LA, PA
ZYTIGA TAB 500MG	Tier 2	LA, PA
IMMUNOMODULATORS		
POMALYST CAP 1MG	Tier 2	LA, PA
POMALYST CAP 2MG	Tier 2	LA, PA
POMALYST CAP 3MG	Tier 2	LA, PA
POMALYST CAP 4MG	Tier 2	LA, PA
REVLIMID CAP 2.5MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 5MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 10MG	Tier 2	QL (28 caps / 28 days), LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
REVLIMID CAP 15MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 20MG	Tier 2	QL (28 caps / 28 days), LA, PA
REVLIMID CAP 25MG	Tier 2	QL (28 caps / 28 days), LA, PA
THALOMID CAP 50MG	Tier 2	QL (30 caps / 30 days), PA
THALOMID CAP 100MG	Tier 2	QL (30 caps / 30 days), PA
THALOMID CAP 150MG	Tier 2	QL (60 caps / 30 days), PA
THALOMID CAP 200MG	Tier 2	QL (60 caps / 30 days), PA
KINASE INHIBITORS		
AFINITOR DIS TAB 2MG	Tier 2	NDS, QL (150 tabs / 30 days), PA
AFINITOR DIS TAB 3MG	Tier 2	NDS, QL (90 tabs / 30 days), PA
AFINITOR DIS TAB 5MG	Tier 2	NDS, QL (60 tabs / 30 days), PA
AFINITOR TAB 2.5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 7.5MG	Tier 2	QL (30 tabs / 30 days), PA
AFINITOR TAB 10MG	Tier 2	QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	Tier 2	LA, PA
ALUNBRIG PAK	Tier 2	LA, PA
ALUNBRIG TAB 30MG	Tier 2	LA, PA
ALUNBRIG TAB 90MG	Tier 2	LA, PA
ALUNBRIG TAB 180MG	Tier 2	LA, PA
BALVERSA TAB 3MG	Tier 2	LA, PA
BALVERSA TAB 4MG	Tier 2	LA, PA
BALVERSA TAB 5MG	Tier 2	LA, PA
BOSULIF TAB 100MG	Tier 2	PA
BOSULIF TAB 400MG	Tier 2	PA
BOSULIF TAB 500MG	Tier 2	PA
BRAFTOVI CAP 75MG	Tier 2	LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CABOMETYX TAB 20MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 40MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CABOMETYX TAB 60MG	Tier 2	QL (30 tabs / 30 days), LA, PA
CALQUENCE CAP 100MG	Tier 2	LA, PA
CAPRELSA TAB 100MG	Tier 2	LA, PA
CAPRELSA TAB 300MG	Tier 2	LA, PA
COMETRIQ KIT 60MG	Tier 2	LA, PA
COMETRIQ KIT 100MG	Tier 2	LA, PA
COMETRIQ KIT 140MG	Tier 2	LA, PA
COPIKTRA CAP 15MG	Tier 2	LA, PA
COPIKTRA CAP 25MG	Tier 2	LA, PA
COTELLIC TAB 20MG	Tier 2	LA, PA
erlotinib hcl tab 25 mg (base equivalent)	Tier 2	QL (90 tabs / 30 days), PA
erlotinib hcl tab 100 mg (base equivalent)	Tier 2	QL (30 tabs / 30 days), PA
erlotinib hcl tab 150 mg (base equivalent)	Tier 2	QL (30 tabs / 30 days), PA
GILOTRIF TAB 20MG	Tier 2	LA, PA
GILOTRIF TAB 30MG	Tier 2	LA, PA
GILOTRIF TAB 40MG	Tier 2	LA, PA
ICLUSIG TAB 15MG	Tier 2	LA, PA
ICLUSIG TAB 45MG	Tier 2	LA, PA
imatinib mesylate tab 100 mg (base equivalent)	Tier 2	QL (90 tabs / 30 days), PA
imatinib mesylate tab 400 mg (base equivalent)	Tier 2	QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	Tier 2	LA, PA
IMBRUVICA CAP 140MG	Tier 2	LA, PA
IMBRUVICA TAB 140MG	Tier 2	LA, PA
IMBRUVICA TAB 280MG	Tier 2	LA, PA
IMBRUVICA TAB 420MG	Tier 2	LA, PA
IMBRUVICA TAB 560MG	Tier 2	LA, PA
INLYTA TAB 1MG	Tier 2	QL (180 tabs / 30 days), LA, PA
INLYTA TAB 5MG	Tier 2	QL (120 tabs / 30 days), LA, PA
INREBIC CAP 100MG	Tier 2	LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
IRESSA TAB 250MG	Tier 2	LA, PA
JAKAFI TAB 5MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 10MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 15MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 20MG	Tier 2	QL (60 tabs / 30 days), LA, PA
JAKAFI TAB 25MG	Tier 2	QL (60 tabs / 30 days), LA, PA
LENVIMA CAP 4MG	Tier 2	LA, PA
LENVIMA CAP 8 MG	Tier 2	LA, PA
LENVIMA CAP 10 MG	Tier 2	LA, PA
LENVIMA CAP 12MG	Tier 2	LA, PA
LENVIMA CAP 14 MG	Tier 2	LA, PA
LENVIMA CAP 18 MG	Tier 2	LA, PA
LENVIMA CAP 20 MG	Tier 2	LA, PA
LENVIMA CAP 24 MG	Tier 2	LA, PA
LORBRENA TAB 25MG	Tier 2	LA, PA
LORBRENA TAB 100MG	Tier 2	LA, PA
MEKINIST TAB 0.5MG	Tier 2	LA, PA
MEKINIST TAB 2MG	Tier 2	LA, PA
MEKTOVI TAB 15MG	Tier 2	LA, PA
NERLYNX TAB 40MG	Tier 2	LA, PA
NEXAVAR TAB 200MG	Tier 2	LA, PA
PIQRAY 200MG TAB DOSE	Tier 2	PA
PIQRAY 250MG TAB DOSE	Tier 2	PA
PIQRAY 300MG TAB DOSE	Tier 2	PA
RYDAPT CAP 25MG	Tier 2	PA
SPRYCEL TAB 20MG	Tier 2	PA
SPRYCEL TAB 50MG	Tier 2	PA
SPRYCEL TAB 70MG	Tier 2	PA
SPRYCEL TAB 80MG	Tier 2	PA
SPRYCEL TAB 100MG	Tier 2	PA
SPRYCEL TAB 140MG	Tier 2	PA
STIVARGA TAB 40MG	Tier 2	LA, PA
SUTENT CAP 12.5MG	Tier 2	PA
SUTENT CAP 25MG	Tier 2	PA
SUTENT CAP 37.5MG	Tier 2	PA
SUTENT CAP 50MG	Tier 2	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TAFINLAR CAP 50MG	Tier 2	LA, PA
TAFINLAR CAP 75MG	Tier 2	LA, PA
TAGRISSO TAB 40MG	Tier 2	LA, PA
TAGRISSO TAB 80MG	Tier 2	LA, PA
TARCEVA TAB 25MG	Tier 2	QL (90 tabs / 30 days), LA, PA
TARCEVA TAB 100MG	Tier 2	QL (30 tabs / 30 days), LA, PA
TARCEVA TAB 150MG	Tier 2	QL (30 tabs / 30 days), LA, PA
TASIGNA CAP 50MG	Tier 2	PA
TASIGNA CAP 150MG	Tier 2	PA
TASIGNA CAP 200MG	Tier 2	PA
TURALIO CAP 200MG	Tier 2	LA, PA
TYKERB TAB 250MG	Tier 2	LA, PA
VITRAKVI CAP 25MG	Tier 2	LA, PA
VITRAKVI CAP 100MG	Tier 2	LA, PA
VITRAKVI SOL 20MG/ML	Tier 2	LA, PA
VIZIMPRO TAB 15MG	Tier 2	LA, PA
VIZIMPRO TAB 30MG	Tier 2	LA, PA
VIZIMPRO TAB 45MG	Tier 2	LA, PA
VOTRIENT TAB 200MG	Tier 2	LA, PA
XALKORI CAP 200MG	Tier 2	LA, PA
XALKORI CAP 250MG	Tier 2	LA, PA
XOSPATA TAB 40MG	Tier 2	LA, PA
ZELBORAF TAB 240MG	Tier 2	LA, PA
ZYDELIG TAB 100MG	Tier 2	LA, PA
ZYDELIG TAB 150MG	Tier 2	LA, PA
ZYKADIA CAP 150MG	Tier 2	LA, PA
ZYKADIA TAB 150MG	Tier 2	LA, PA
MISCELLANEOUS		
bexarotene cap 75 mg	Tier 2	PA
hydroxyurea cap 500 mg	Tier 1	
LONSURF TAB 15-6.14	Tier 2	PA
LONSURF TAB 20-8.19	Tier 2	PA
MATULANE CAP 50MG	Tier 2	LA
SYLATRON KIT 200MCG	Tier 2	PA
SYLATRON KIT 300MCG	Tier 2	PA
SYLATRON KIT 600MCG	Tier 2	PA
SYNRIBO INJ 3.5MG	Tier 2	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
tretinoin cap 10 mg	Tier 2	
XPOVIO PAK 60MG	Tier 2	LA, PA
XPOVIO PAK 80MG	Tier 2	LA, PA
XPOVIO PAK 100MG	Tier 2	LA, PA
PLATINUM-BASED AGENTS		
carboplatin iv soln 50 mg/5ml	Tier 1	B/D
carboplatin iv soln 150 mg/15ml	Tier 1	B/D
carboplatin iv soln 450 mg/45ml	Tier 1	B/D
carboplatin iv soln 600 mg/60ml	Tier 1	B/D
cisplatin inj 50 mg/50ml (1 mg/ml)	Tier 1	B/D
cisplatin inj 100 mg/100ml (1 mg/ml)	Tier 1	B/D
cisplatin inj 200 mg/200ml (1 mg/ml)	Tier 1	B/D
oxaliplatin for iv inj 50 mg	Tier 2	B/D
oxaliplatin for iv inj 100 mg	Tier 2	B/D
oxaliplatin iv soln 50 mg/10ml	Tier 1	B/D
oxaliplatin iv soln 100 mg/20ml	Tier 1	B/D
PROTECTIVE AGENTS		
dexrazoxane hcl for inj 500 mg (base equivalent)	Tier 2	B/D
leucovorin calcium for inj 50 mg	Tier 1	B/D
leucovorin calcium for inj 100 mg	Tier 1	B/D
leucovorin calcium for inj 200 mg	Tier 1	B/D
leucovorin calcium for inj 350 mg	Tier 1	B/D
leucovorin calcium for inj 500 mg	Tier 1	B/D
leucovorin calcium inj 500 mg/50ml (10 mg/ml)	Tier 1	B/D
leucovorin calcium tab 5 mg	Tier 1	
leucovorin calcium tab 10 mg	Tier 1	
leucovorin calcium tab 15 mg	Tier 1	
leucovorin calcium tab 25 mg	Tier 1	
MESNEX TAB 400MG	Tier 2	
TOPOISOMERASE INHIBITORS		
etoposide inj 100 mg/5ml (20 mg/ml)	Tier 1	B/D
etoposide inj 500 mg/25ml (20 mg/ml)	Tier 1	B/D
irinotecan hcl inj 40 mg/2ml (20 mg/ml)	Tier 1	B/D
irinotecan hcl inj 100 mg/5ml (20 mg/ml)	Tier 1	B/D
irinotecan hcl inj 500 mg/25ml (20 mg/ml)	Tier 1	B/D
toposar inj 1gm/50ml	Tier 1	B/D
toposar inj 100/5ml	Tier 1	B/D
topotecan hcl for inj 4 mg (base equiv)	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)	Tier 2	B/D
TOPOTECAN INJ 4MG/4ML	Tier 2	B/D

CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS

ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE

amlodipine besylate-benazepril hcl cap 2.5-10 mg	Tier 1	
amlodipine besylate-benazepril hcl cap 5-10 mg	Tier 1	
amlodipine besylate-benazepril hcl cap 5-20 mg	Tier 1	
amlodipine besylate-benazepril hcl cap 5-40 mg	Tier 1	
amlodipine besylate-benazepril hcl cap 10-20 mg	Tier 1	
amlodipine besylate-benazepril hcl cap 10-40 mg	Tier 1	
benazepril & hydrochlorothiazide tab 5-6.25 mg	Tier 1	
benazepril & hydrochlorothiazide tab 10-12.5 mg	Tier 1	
benazepril & hydrochlorothiazide tab 20-12.5 mg	Tier 1	
benazepril & hydrochlorothiazide tab 20-25 mg	Tier 1	
captopril & hydrochlorothiazide tab 25-15 mg	Tier 1	
captopril & hydrochlorothiazide tab 25-25 mg	Tier 1	
captopril & hydrochlorothiazide tab 50-15 mg	Tier 1	
captopril & hydrochlorothiazide tab 50-25 mg	Tier 1	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	Tier 1	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	Tier 1	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	Tier 1	
lisinopril & hydrochlorothiazide tab 10-12.5 mg	Tier 1	
lisinopril & hydrochlorothiazide tab 20-12.5 mg	Tier 1	
lisinopril & hydrochlorothiazide tab 20-25 mg	Tier 1	
quinapril-hydrochlorothiazide tab 10-12.5 mg	Tier 1	
quinapril-hydrochlorothiazide tab 20-12.5 mg	Tier 1	
quinapril-hydrochlorothiazide tab 20-25 mg	Tier 1	
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
benazepril hcl tab 5 mg	Tier 1	
benazepril hcl tab 10 mg	Tier 1	
benazepril hcl tab 20 mg	Tier 1	
benazepril hcl tab 40 mg	Tier 1	
captopril tab 12.5 mg	Tier 1	
captopril tab 25 mg	Tier 1	
captopril tab 50 mg	Tier 1	
captopril tab 100 mg	Tier 1	
enalapril maleate tab 2.5 mg	Tier 1	
enalapril maleate tab 5 mg	Tier 1	
enalapril maleate tab 10 mg	Tier 1	
enalapril maleate tab 20 mg	Tier 1	
fosinopril sodium tab 10 mg	Tier 1	
fosinopril sodium tab 20 mg	Tier 1	
fosinopril sodium tab 40 mg	Tier 1	
lisinopril tab 2.5 mg	Tier 1	
lisinopril tab 5 mg	Tier 1	
lisinopril tab 10 mg	Tier 1	
lisinopril tab 20 mg	Tier 1	
lisinopril tab 30 mg	Tier 1	
lisinopril tab 40 mg	Tier 1	
moexipril hcl tab 7.5 mg	Tier 1	
moexipril hcl tab 15 mg	Tier 1	
perindopril erbumine tab 2 mg	Tier 1	
perindopril erbumine tab 4 mg	Tier 1	
perindopril erbumine tab 8 mg	Tier 1	
quinapril hcl tab 5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
quinapril hcl tab 10 mg	Tier 1	
quinapril hcl tab 20 mg	Tier 1	
quinapril hcl tab 40 mg	Tier 1	
ramipril cap 1.25 mg	Tier 1	
ramipril cap 2.5 mg	Tier 1	
ramipril cap 5 mg	Tier 1	
ramipril cap 10 mg	Tier 1	
trandolapril tab 1 mg	Tier 1	
trandolapril tab 2 mg	Tier 1	
trandolapril tab 4 mg	Tier 1	
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
eplerenone tab 25 mg	Tier 1	
eplerenone tab 50 mg	Tier 1	
spironolactone tab 25 mg	Tier 1	
spironolactone tab 50 mg	Tier 1	
spironolactone tab 100 mg	Tier 1	
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
doxazosin mesylate tab 1 mg	Tier 1	
doxazosin mesylate tab 2 mg	Tier 1	
doxazosin mesylate tab 4 mg	Tier 1	
doxazosin mesylate tab 8 mg	Tier 1	
prazosin hcl cap 1 mg	Tier 1	
prazosin hcl cap 2 mg	Tier 1	
prazosin hcl cap 5 mg	Tier 1	
terazosin hcl cap 1 mg (base equivalent)	Tier 1	
terazosin hcl cap 2 mg (base equivalent)	Tier 1	
terazosin hcl cap 5 mg (base equivalent)	Tier 1	
terazosin hcl cap 10 mg (base equivalent)	Tier 1	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	Tier 1	
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	Tier 1	
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	Tier 1	
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
amlodipine besylate-valsartan tab 5-160 mg	Tier 1	
amlodipine besylate-valsartan tab 5-320 mg	Tier 1	
amlodipine besylate-valsartan tab 10-160 mg	Tier 1	
amlodipine besylate-valsartan tab 10-320 mg	Tier 1	
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	Tier 1	
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	Tier 1	
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	Tier 1	
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	Tier 1	
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	Tier 1	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	Tier 1	
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	Tier 1	
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	Tier 1	
ENTRESTO TAB 24-26MG	Tier 2	
ENTRESTO TAB 49-51MG	Tier 2	
ENTRESTO TAB 97-103MG	Tier 2	
irbesartan-hydrochlorothiazide tab 150-12.5 mg	Tier 1	
irbesartan-hydrochlorothiazide tab 300-12.5 mg	Tier 1	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	Tier 1	
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	Tier 1	
losartan potassium & hydrochlorothiazide tab 100-25 mg	Tier 1	
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	Tier 1	
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	Tier 1	
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	Tier 1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	Tier 1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	Tier 1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	Tier 1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	Tier 1	
telmisartan-amlodipine tab 40-5 mg	Tier 1	
telmisartan-amlodipine tab 40-10 mg	Tier 1	
telmisartan-amlodipine tab 80-5 mg	Tier 1	
telmisartan-amlodipine tab 80-10 mg	Tier 1	
telmisartan-hydrochlorothiazide tab 40-12.5 mg	Tier 1	
telmisartan-hydrochlorothiazide tab 80-12.5 mg	Tier 1	
telmisartan-hydrochlorothiazide tab 80-25 mg	Tier 1	
valsartan-hydrochlorothiazide tab 80-12.5 mg	Tier 1	
valsartan-hydrochlorothiazide tab 160-12.5 mg	Tier 1	
valsartan-hydrochlorothiazide tab 160-25 mg	Tier 1	
valsartan-hydrochlorothiazide tab 320-12.5 mg	Tier 1	
valsartan-hydrochlorothiazide tab 320-25 mg	Tier 1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
candesartan cilexetil tab 4 mg	Tier 1	
candesartan cilexetil tab 8 mg	Tier 1	
candesartan cilexetil tab 16 mg	Tier 1	
candesartan cilexetil tab 32 mg	Tier 1	
eprosartan mesylate tab 600 mg	Tier 1	
irbesartan tab 75 mg	Tier 1	
irbesartan tab 150 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
irbesartan tab 300 mg	Tier 1	
losartan potassium tab 25 mg	Tier 1	
losartan potassium tab 50 mg	Tier 1	
losartan potassium tab 100 mg	Tier 1	
olmesartan medoxomil tab 5 mg	Tier 1	
olmesartan medoxomil tab 20 mg	Tier 1	
olmesartan medoxomil tab 40 mg	Tier 1	
telmisartan tab 20 mg	Tier 1	
telmisartan tab 40 mg	Tier 1	
telmisartan tab 80 mg	Tier 1	
valsartan tab 40 mg	Tier 1	
valsartan tab 80 mg	Tier 1	
valsartan tab 160 mg	Tier 1	
valsartan tab 320 mg	Tier 1	
ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM		
amiodarone hcl inj 150 mg/3ml (50 mg/ml)	Tier 1	
amiodarone hcl inj 450 mg/9ml (50 mg/ml)	Tier 1	
amiodarone hcl inj 900 mg/18ml (50 mg/ml)	Tier 1	
amiodarone hcl tab 100 mg	Tier 1	
amiodarone hcl tab 200 mg	Tier 1	
amiodarone hcl tab 400 mg	Tier 1	
disopyramide phosphate cap 100 mg	Tier 2	
disopyramide phosphate cap 150 mg	Tier 2	
dofetilide cap 125 mcg (0.125 mg)	Tier 1	
dofetilide cap 250 mcg (0.25 mg)	Tier 1	
dofetilide cap 500 mcg (0.5 mg)	Tier 1	
flecainide acetate tab 50 mg	Tier 1	
flecainide acetate tab 100 mg	Tier 1	
flecainide acetate tab 150 mg	Tier 1	
mexiletine hcl cap 150 mg	Tier 1	
mexiletine hcl cap 200 mg	Tier 1	
mexiletine hcl cap 250 mg	Tier 1	
MULTAQ TAB 400MG	Tier 2	
NORPACE CAP 100MG CR	Tier 2	
NORPACE CAP 150MG CR	Tier 2	
pacerone tab 100mg	Tier 1	
pacerone tab 200mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
pacerone tab 400mg	Tier 1	
propafenone hcl cap er 12hr 225 mg	Tier 1	
propafenone hcl cap er 12hr 325 mg	Tier 1	
propafenone hcl cap er 12hr 425 mg	Tier 1	
propafenone hcl tab 150 mg	Tier 1	
propafenone hcl tab 225 mg	Tier 1	
propafenone hcl tab 300 mg	Tier 1	
quinidine gluconate tab er 324 mg	Tier 1	
quinidine sulfate tab 200 mg	Tier 1	
quinidine sulfate tab 300 mg	Tier 1	
sorine tab 80mg	Tier 1	
sorine tab 120mg	Tier 1	
sorine tab 160mg	Tier 1	
sorine tab 240mg	Tier 1	
sotalol hcl (afib/afl) tab 80 mg	Tier 1	
sotalol hcl (afib/afl) tab 120 mg	Tier 1	
sotalol hcl (afib/afl) tab 160 mg	Tier 1	
sotalol hcl tab 80 mg	Tier 1	
sotalol hcl tab 120 mg	Tier 1	
sotalol hcl tab 160 mg	Tier 1	
sotalol hcl tab 240 mg	Tier 1	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
atorvastatin calcium tab 10 mg (base equivalent)	Tier 1	
atorvastatin calcium tab 20 mg (base equivalent)	Tier 1	
atorvastatin calcium tab 40 mg (base equivalent)	Tier 1	
atorvastatin calcium tab 80 mg (base equivalent)	Tier 1	
lovastatin tab 10 mg	Tier 1	
lovastatin tab 20 mg	Tier 1	
lovastatin tab 40 mg	Tier 1	
pravastatin sodium tab 10 mg	Tier 1	
pravastatin sodium tab 20 mg	Tier 1	
pravastatin sodium tab 40 mg	Tier 1	
pravastatin sodium tab 80 mg	Tier 1	
rosuvastatin calcium tab 5 mg	Tier 1	QL (30 tabs / 30 days)
rosuvastatin calcium tab 10 mg	Tier 1	QL (30 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
rosuvastatin calcium tab 20 mg	Tier 1	QL (30 tabs / 30 days)
rosuvastatin calcium tab 40 mg	Tier 1	QL (30 tabs / 30 days)
simvastatin tab 5 mg	Tier 1	
simvastatin tab 10 mg	Tier 1	
simvastatin tab 20 mg	Tier 1	
simvastatin tab 40 mg	Tier 1	
simvastatin tab 80 mg	Tier 1	QL (30 tabs / 30 days)
ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL		
cholestyramine light powder 4 gm/dose	Tier 1	
cholestyramine light powder packets 4 gm	Tier 1	
cholestyramine powder 4 gm/dose	Tier 1	
cholestyramine powder packets 4 gm	Tier 1	
colesevelam hcl packet for susp 3.75 gm	Tier 1	
colesevelam hcl tab 625 mg	Tier 1	
colestipol hcl granule packets 5 gm	Tier 1	
colestipol hcl granules 5 gm	Tier 1	
colestipol hcl tab 1 gm	Tier 1	
ezetimibe tab 10 mg	Tier 1	
ezetimibe-simvastatin tab 10-10 mg	Tier 1	
ezetimibe-simvastatin tab 10-20 mg	Tier 1	
ezetimibe-simvastatin tab 10-40 mg	Tier 1	
ezetimibe-simvastatin tab 10-80 mg	Tier 1	
fenofibrate micronized cap 67 mg	Tier 1	
fenofibrate micronized cap 134 mg	Tier 1	
fenofibrate micronized cap 200 mg	Tier 1	
fenofibrate tab 48 mg	Tier 1	
fenofibrate tab 54 mg	Tier 1	
fenofibrate tab 145 mg	Tier 1	
fenofibrate tab 160 mg	Tier 1	
gemfibrozil tab 600 mg	Tier 1	
JUXTAPID CAP 5MG	Tier 2	LA, PA
JUXTAPID CAP 10MG	Tier 2	LA, PA
JUXTAPID CAP 20MG	Tier 2	LA, PA
JUXTAPID CAP 30MG	Tier 2	LA, PA
JUXTAPID CAP 40MG	Tier 2	LA, PA
JUXTAPID CAP 60MG	Tier 2	LA, PA
KYNAMRO INJ 200MG/ML	Tier 2	PA
niacin tab er 500 mg (antihyperlipidemic)	Tier 1	QL (90 tabs / 30 days)
niacin tab er 750 mg (antihyperlipidemic)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
niacin tab er 1000 mg (antihyperlipidemic)	Tier 1	
niacor tab 500mg	Tier 1	
PRALUENT INJ 75MG/ML	Tier 2	PA
PRALUENT INJ 150MG/ML	Tier 2	PA
prevalite pow 4gm	Tier 1	
prevalite pow 4gm pk	Tier 1	
VASCEPA CAP 0.5GM	Tier 2	
VASCEPA CAP 1GM	Tier 2	
BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
atenolol & chlorthalidone tab 50-25 mg	Tier 1	
atenolol & chlorthalidone tab 100-25 mg	Tier 1	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	Tier 1	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	Tier 1	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	Tier 1	
metoprolol & hydrochlorothiazide tab 50-25 mg	Tier 1	
metoprolol & hydrochlorothiazide tab 100-25 mg	Tier 1	
metoprolol & hydrochlorothiazide tab 100-50 mg	Tier 1	
propranolol & hydrochlorothiazide tab 40-25 mg	Tier 1	
propranolol & hydrochlorothiazide tab 80-25 mg	Tier 1	
BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
acebutolol hcl cap 200 mg	Tier 1	
acebutolol hcl cap 400 mg	Tier 1	
atenolol tab 25 mg	Tier 1	
atenolol tab 50 mg	Tier 1	
atenolol tab 100 mg	Tier 1	
betaxolol hcl tab 10 mg	Tier 1	
betaxolol hcl tab 20 mg	Tier 1	
bisoprolol fumarate tab 5 mg	Tier 1	
bisoprolol fumarate tab 10 mg	Tier 1	
BYSTOLIC TAB 2.5MG	Tier 2	QL (30 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BYSTOLIC TAB 5MG	Tier 2	QL (30 tabs / 30 days)
BYSTOLIC TAB 10MG	Tier 2	QL (30 tabs / 30 days)
BYSTOLIC TAB 20MG	Tier 2	QL (60 tabs / 30 days)
carvedilol tab 3.125 mg	Tier 1	
carvedilol tab 6.25 mg	Tier 1	
carvedilol tab 12.5 mg	Tier 1	
carvedilol tab 25 mg	Tier 1	
labetalol hcl tab 100 mg	Tier 1	
labetalol hcl tab 200 mg	Tier 1	
labetalol hcl tab 300 mg	Tier 1	
metoprolol succinate tab er 24hr 25 mg (tartrate equiv)	Tier 1	
metoprolol succinate tab er 24hr 50 mg (tartrate equiv)	Tier 1	
metoprolol succinate tab er 24hr 100 mg (tartrate equiv)	Tier 1	
metoprolol succinate tab er 24hr 200 mg (tartrate equiv)	Tier 1	
metoprolol tartrate iv soln 5 mg/5ml	Tier 1	
metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)	Tier 1	
metoprolol tartrate tab 25 mg	Tier 1	
metoprolol tartrate tab 50 mg	Tier 1	
metoprolol tartrate tab 100 mg	Tier 1	
nadolol tab 20 mg	Tier 1	
nadolol tab 40 mg	Tier 1	
nadolol tab 80 mg	Tier 1	
pindolol tab 5 mg	Tier 1	
pindolol tab 10 mg	Tier 1	
propranolol hcl cap er 24hr 60 mg	Tier 1	
propranolol hcl cap er 24hr 80 mg	Tier 1	
propranolol hcl cap er 24hr 120 mg	Tier 1	
propranolol hcl cap er 24hr 160 mg	Tier 1	
propranolol hcl oral soln 20 mg/5ml	Tier 1	
propranolol hcl oral soln 40 mg/5ml	Tier 1	
propranolol hcl tab 10 mg	Tier 1	
propranolol hcl tab 20 mg	Tier 1	
propranolol hcl tab 40 mg	Tier 1	
propranolol hcl tab 60 mg	Tier 1	
propranolol hcl tab 80 mg	Tier 1	
timolol maleate tab 5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
timolol maleate tab 10 mg	Tier 1	
timolol maleate tab 20 mg	Tier 1	
CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
amlodipine besylate tab 2.5 mg (base equivalent)	Tier 1	
amlodipine besylate tab 5 mg (base equivalent)	Tier 1	
amlodipine besylate tab 10 mg (base equivalent)	Tier 1	
diltiazem hcl cap er 12hr 60 mg	Tier 1	
diltiazem hcl cap er 12hr 90 mg	Tier 1	
diltiazem hcl cap er 12hr 120 mg	Tier 1	
diltiazem hcl cap er 24hr 120 mg	Tier 1	
diltiazem hcl cap er 24hr 180 mg	Tier 1	
diltiazem hcl cap er 24hr 240 mg	Tier 1	
diltiazem hcl coated beads cap er 24hr 120 mg	Tier 1	
diltiazem hcl coated beads cap er 24hr 180 mg	Tier 1	
diltiazem hcl coated beads cap er 24hr 240 mg	Tier 1	
diltiazem hcl coated beads cap er 24hr 300 mg	Tier 1	
diltiazem hcl coated beads cap er 24hr 360 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 120 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 180 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 240 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 300 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 360 mg	Tier 1	
diltiazem hcl extended release beads cap er 24hr 420 mg	Tier 1	
diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)	Tier 1	
diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)	Tier 1	
diltiazem hcl tab 30 mg	Tier 1	
diltiazem hcl tab 60 mg	Tier 1	
diltiazem hcl tab 90 mg	Tier 1	
diltiazem hcl tab 120 mg	Tier 1	
felodipine tab er 24hr 2.5 mg	Tier 1	
felodipine tab er 24hr 5 mg	Tier 1	
felodipine tab er 24hr 10 mg	Tier 1	
isradipine cap 2.5 mg	Tier 1	
isradipine cap 5 mg	Tier 1	
nicardipine hcl cap 20 mg	Tier 1	
nicardipine hcl cap 30 mg	Tier 1	
nifedipine tab er 24hr 30 mg	Tier 1	
nifedipine tab er 24hr 60 mg	Tier 1	
nifedipine tab er 24hr 90 mg	Tier 1	
nifedipine tab er 24hr osmotic release 30 mg	Tier 1	
nifedipine tab er 24hr osmotic release 60 mg	Tier 1	
nifedipine tab er 24hr osmotic release 90 mg	Tier 1	
nimodipine cap 30 mg	Tier 2	
NYMALIZE SOL 30/10ML	Tier 2	
taztia xt cap 120mg/24	Tier 1	
taztia xt cap 180mg/24	Tier 1	
taztia xt cap 240mg/24	Tier 1	
taztia xt cap 300mg er	Tier 1	
taztia xt cap 360mg/24	Tier 1	
verapamil hcl cap er 24hr 100 mg	Tier 1	
verapamil hcl cap er 24hr 120 mg	Tier 1	
verapamil hcl cap er 24hr 180 mg	Tier 1	
verapamil hcl cap er 24hr 200 mg	Tier 1	
verapamil hcl cap er 24hr 240 mg	Tier 1	
verapamil hcl cap er 24hr 300 mg	Tier 1	
verapamil hcl cap er 24hr 360 mg	Tier 1	
verapamil hcl iv soln 2.5 mg/ml	Tier 1	
verapamil hcl tab 40 mg	Tier 1	
verapamil hcl tab 80 mg	Tier 1	
verapamil hcl tab 120 mg	Tier 1	
verapamil hcl tab er 120 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
verapamil hcl tab er 180 mg	Tier 1	
verapamil hcl tab er 240 mg	Tier 1	
DIGITALIS GLYCOSIDES - DRUGS TO TREAT HEART CONDITIONS		
digitek tab 0.25mg	Tier 1	PA; PA if 70 years and older
digitek tab 0.125mg	Tier 1	QL (30 tabs / 30 days)
digoxin inj 0.25 mg/ml	Tier 1	
digoxin oral soln 0.05 mg/ml	Tier 1	PA; PA if 70 years and older
digoxin tab 125 mcg (0.125 mg)	Tier 1	QL (30 tabs / 30 days)
digoxin tab 250 mcg (0.25 mg)	Tier 1	PA; PA if 70 years and older
DIRECT RENIN INHIBITORS/COMBINATIONS - DRUGS TO TREAT HEART CONDITIONS		
aliskiren fumarate tab 150 mg (base equivalent)	Tier 1	
aliskiren fumarate tab 300 mg (base equivalent)	Tier 1	
TEKTURNA HCT TAB 150-12.5	Tier 2	
TEKTURNA HCT TAB 150-25MG	Tier 2	
TEKTURNA HCT TAB 300-12.5	Tier 2	
TEKTURNA HCT TAB 300-25MG	Tier 2	
TEKTURNA TAB 150MG	Tier 2	
TEKTURNA TAB 300MG	Tier 2	
DIURETICS - DRUGS TO TREAT HEART CONDITIONS		
acetazolamide cap er 12hr 500 mg	Tier 1	
acetazolamide tab 125 mg	Tier 1	
acetazolamide tab 250 mg	Tier 1	
amiloride & hydrochlorothiazide tab 5-50 mg	Tier 1	
amiloride hcl tab 5 mg	Tier 1	
bumetanide inj 0.25 mg/ml	Tier 1	
bumetanide tab 0.5 mg	Tier 1	
bumetanide tab 1 mg	Tier 1	
bumetanide tab 2 mg	Tier 1	
chlorothiazide tab 250 mg	Tier 1	
chlorothiazide tab 500 mg	Tier 1	
chlorthalidone tab 25 mg	Tier 1	
chlorthalidone tab 50 mg	Tier 1	
furosemide inj 10 mg/ml	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
furosemide oral soln 8 mg/ml	Tier 1	
furosemide oral soln 10 mg/ml	Tier 1	
furosemide tab 20 mg	Tier 1	
furosemide tab 40 mg	Tier 1	
furosemide tab 80 mg	Tier 1	
hydrochlorothiazide cap 12.5 mg	Tier 1	
hydrochlorothiazide tab 12.5 mg	Tier 1	
hydrochlorothiazide tab 25 mg	Tier 1	
hydrochlorothiazide tab 50 mg	Tier 1	
indapamide tab 1.25 mg	Tier 1	
indapamide tab 2.5 mg	Tier 1	
methazolamide tab 25 mg	Tier 1	
methazolamide tab 50 mg	Tier 1	
methyclothiazide tab 5 mg	Tier 1	
metolazone tab 2.5 mg	Tier 1	
metolazone tab 5 mg	Tier 1	
metolazone tab 10 mg	Tier 1	
spironolactone & hydrochlorothiazide tab 25-25 mg	Tier 1	
torsemide tab 5 mg	Tier 1	
torsemide tab 10 mg	Tier 1	
torsemide tab 20 mg	Tier 1	
torsemide tab 100 mg	Tier 1	
triamterene & hydrochlorothiazide cap 37.5-25 mg	Tier 1	
triamterene & hydrochlorothiazide tab 37.5-25 mg	Tier 1	
triamterene & hydrochlorothiazide tab 75-50 mg	Tier 1	
MISCELLANEOUS		
clonidine hcl tab 0.1 mg	Tier 1	
clonidine hcl tab 0.2 mg	Tier 1	
clonidine hcl tab 0.3 mg	Tier 1	
clonidine td patch weekly 0.1 mg/24hr	Tier 1	
clonidine td patch weekly 0.2 mg/24hr	Tier 1	
clonidine td patch weekly 0.3 mg/24hr	Tier 1	
CORLANOR TAB 5MG	Tier 2	
CORLANOR TAB 7.5MG	Tier 2	
DEMSER CAP 250MG	Tier 2	PA
hydralazine hcl inj 20 mg/ml	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
hydralazine hcl tab 10 mg	Tier 1	
hydralazine hcl tab 25 mg	Tier 1	
hydralazine hcl tab 50 mg	Tier 1	
hydralazine hcl tab 100 mg	Tier 1	
midodrine hcl tab 2.5 mg	Tier 1	
midodrine hcl tab 5 mg	Tier 1	
midodrine hcl tab 10 mg	Tier 1	
minoxidil tab 2.5 mg	Tier 1	
minoxidil tab 10 mg	Tier 1	
NORTHERA CAP 100MG	Tier 2	LA, PA
NORTHERA CAP 200MG	Tier 2	LA, PA
NORTHERA CAP 300MG	Tier 2	LA, PA
ranolazine tab er 12hr 500 mg	Tier 1	
ranolazine tab er 12hr 1000 mg	Tier 1	
NITRATES - DRUGS TO TREAT HEART CONDITIONS		
isosorbide dinitrate tab 5 mg	Tier 1	
isosorbide dinitrate tab 10 mg	Tier 1	
isosorbide dinitrate tab 20 mg	Tier 1	
isosorbide dinitrate tab 30 mg	Tier 1	
isosorbide dinitrate tab er 40 mg	Tier 1	
isosorbide mononitrate tab 10 mg	Tier 1	
isosorbide mononitrate tab 20 mg	Tier 1	
isosorbide mononitrate tab er 24hr 30 mg	Tier 1	
isosorbide mononitrate tab er 24hr 60 mg	Tier 1	
isosorbide mononitrate tab er 24hr 120 mg	Tier 1	
minitran dis 0.1mg/hr	Tier 1	
minitran dis 0.2mg/hr	Tier 1	
minitran dis 0.4mg/hr	Tier 1	
minitran dis 0.6mg/hr	Tier 1	
NITRO-BID OIN 2%	Tier 2	
NITRO-DUR DIS 0.3MG/HR	Tier 2	
NITRO-DUR DIS 0.8MG/HR	Tier 2	
nitroglycerin sl tab 0.3 mg	Tier 1	
nitroglycerin sl tab 0.4 mg	Tier 1	
nitroglycerin sl tab 0.6 mg	Tier 1	
nitroglycerin td patch 24hr 0.1 mg/hr	Tier 1	
nitroglycerin td patch 24hr 0.2 mg/hr	Tier 1	
nitroglycerin td patch 24hr 0.4 mg/hr	Tier 1	
nitroglycerin td patch 24hr 0.6 mg/hr	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	Tier 1	
PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION		
ADEMPAS TAB 0.5MG	Tier 2	QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 1.5MG	Tier 2	QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 1MG	Tier 2	QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 2.5MG	Tier 2	QL (90 tabs / 30 days), LA, PA
ADEMPAS TAB 2MG	Tier 2	QL (90 tabs / 30 days), LA, PA
ambrisentan tab 5 mg	Tier 2	QL (30 tabs / 30 days), LA, PA
ambrisentan tab 10 mg	Tier 2	QL (30 tabs / 30 days), LA, PA
bosentan tab 62.5 mg	Tier 2	QL (120 tabs / 30 days), LA, PA
bosentan tab 125 mg	Tier 2	QL (60 tabs / 30 days), LA, PA
OPSUMIT TAB 10MG	Tier 2	QL (30 tabs / 30 days), LA, PA
REMODULIN INJ 1MG/ML	Tier 2	LA, PA
REMODULIN INJ 2.5MG/ML	Tier 2	LA, PA
REMODULIN INJ 5MG/ML	Tier 2	LA, PA
REMODULIN INJ 10MG/ML	Tier 2	LA, PA
sildenafil citrate tab 20 mg	Tier 1	QL (90 tabs / 30 days), PA
TRACLEER TAB 62.5MG	Tier 2	QL (120 tabs / 30 days), LA, PA
TRACLEER TAB 125MG	Tier 2	QL (60 tabs / 30 days), LA, PA
treprostinil inj soln 20 mg/20ml (1 mg/ml)	Tier 2	LA, PA
treprostinil inj soln 50 mg/20ml (2.5 mg/ml)	Tier 2	LA, PA
treprostinil inj soln 100 mg/20ml (5 mg/ml)	Tier 2	LA, PA
treprostinil inj soln 200 mg/20ml (10 mg/ml)	Tier 2	LA, PA
VENTAVIS SOL 10MCG/ML	Tier 2	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
VENTAVIS SOL 20MCG/ML	Tier 2	PA

CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

ANTIANXIETY - DRUGS TO TREAT ANXIETY

alprazolam tab 0.5 mg	Tier 1	QL (150 tabs / 30 days)
alprazolam tab 0.25 mg	Tier 1	QL (150 tabs / 30 days)
alprazolam tab 1 mg	Tier 1	QL (150 tabs / 30 days)
alprazolam tab 2 mg	Tier 1	QL (150 tabs / 30 days)
buspirone hcl tab 5 mg	Tier 1	
buspirone hcl tab 7.5 mg	Tier 1	
buspirone hcl tab 10 mg	Tier 1	
buspirone hcl tab 15 mg	Tier 1	
buspirone hcl tab 30 mg	Tier 1	
fluvoxamine maleate tab 25 mg	Tier 1	
fluvoxamine maleate tab 50 mg	Tier 1	
fluvoxamine maleate tab 100 mg	Tier 1	
lorazepam conc 2 mg/ml	Tier 1	QL (150 mL / 30 days)
lorazepam inj 2 mg/ml	Tier 1	
lorazepam inj 4 mg/ml	Tier 1	
lorazepam tab 0.5 mg	Tier 1	QL (150 tabs / 30 days)
lorazepam tab 1 mg	Tier 1	QL (150 tabs / 30 days)
lorazepam tab 2 mg	Tier 1	QL (150 tabs / 30 days)

ANTICONVULSANTS - DRUGS TO TREAT SEIZURES

APTIOM TAB 200MG	Tier 2	QL (180 tabs / 30 days)
APTIOM TAB 400MG	Tier 2	QL (90 tabs / 30 days)
APTIOM TAB 600MG	Tier 2	QL (60 tabs / 30 days)
APTIOM TAB 800MG	Tier 2	QL (60 tabs / 30 days)
BANZEL SUS 40MG/ML	Tier 2	PA
BANZEL TAB 200MG	Tier 2	PA
BANZEL TAB 400MG	Tier 2	PA
BRIVIACT INJ 50MG/5ML	Tier 2	PA
BRIVIACT SOL 10MG/ML	Tier 2	PA
BRIVIACT TAB 10MG	Tier 2	PA
BRIVIACT TAB 25MG	Tier 2	PA
BRIVIACT TAB 50MG	Tier 2	PA
BRIVIACT TAB 75MG	Tier 2	PA
BRIVIACT TAB 100MG	Tier 2	PA
carbamazepine cap er 12hr 100 mg	Tier 1	
carbamazepine cap er 12hr 200 mg	Tier 1	
carbamazepine cap er 12hr 300 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
carbamazepine chew tab 100 mg	Tier 1	
carbamazepine susp 100 mg/5ml	Tier 1	
carbamazepine tab 200 mg	Tier 1	
carbamazepine tab er 12hr 100 mg	Tier 1	
carbamazepine tab er 12hr 200 mg	Tier 1	
carbamazepine tab er 12hr 400 mg	Tier 1	
CELONTIN CAP 300MG	Tier 2	
clobazam suspension 2.5 mg/ml	Tier 1	PA
clobazam tab 10 mg	Tier 1	PA
clobazam tab 20 mg	Tier 1	PA
clonazepam orally disintegrating tab 0.5 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam orally disintegrating tab 0.25 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam orally disintegrating tab 0.125 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam orally disintegrating tab 1 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam orally disintegrating tab 2 mg	Tier 1	QL (300 tabs / 30 days)
clonazepam tab 0.5 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam tab 1 mg	Tier 1	QL (90 tabs / 30 days)
clonazepam tab 2 mg	Tier 1	QL (300 tabs / 30 days)
clorazepate dipotassium tab 3.75 mg	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
clorazepate dipotassium tab 7.5 mg	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
clorazepate dipotassium tab 15 mg	Tier 1	QL (180 tabs / 30 days), PA; PA if 65 years and older
DIASTAT ACDL GEL 5-10MG	Tier 2	
DIASTAT ACDL GEL 12.5-20	Tier 2	
DIASTAT PED GEL 2.5M GEL	Tier 2	
diazepam con 5mg/ml	Tier 1	QL (240 mL / 30 days), PA; PA if 65 years and older
diazepam inj 5 mg/ml	Tier 1	
diazepam oral soln 1 mg/ml	Tier 1	QL (1200 mL / 30 days), PA; PA if 65 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
diazepam rectal gel delivery system 2.5 mg	Tier 1	
diazepam rectal gel delivery system 10 mg	Tier 1	
diazepam rectal gel delivery system 20 mg	Tier 1	
diazepam tab 2 mg	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
diazepam tab 5 mg	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
diazepam tab 10 mg	Tier 1	QL (120 tabs / 30 days), PA; PA if 65 years and older
DILANTIN CAP 30MG	Tier 2	
DILANTIN CAP 100MG	Tier 2	
DILANTIN CHW 50MG	Tier 2	
DILANTIN-125 SUS 125/5ML	Tier 2	
divalproex sodium cap delayed release sprinkle 125 mg	Tier 1	
divalproex sodium tab delayed release 125 mg	Tier 1	
divalproex sodium tab delayed release 250 mg	Tier 1	
divalproex sodium tab delayed release 500 mg	Tier 1	
divalproex sodium tab er 24 hr 250 mg	Tier 1	
divalproex sodium tab er 24 hr 500 mg	Tier 1	
EPIDIOLEX SOL 100MG/ML	Tier 2	QL (600 mL / 30 days), LA, PA
epitol tab 200mg	Tier 1	
ethosuximide cap 250 mg	Tier 1	
ethosuximide soln 250 mg/5ml	Tier 1	
felbamate susp 600 mg/5ml	Tier 2	
felbamate tab 400 mg	Tier 1	
felbamate tab 600 mg	Tier 1	
FYCOMPA SUS 0.5MG/ML	Tier 2	QL (720 mL / 30 days), PA
FYCOMPA TAB 2MG	Tier 2	QL (60 tabs / 30 days), PA
FYCOMPA TAB 4MG	Tier 2	QL (60 tabs / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FYCOMPA TAB 6MG	Tier 2	QL (60 tabs / 30 days), PA
FYCOMPA TAB 8MG	Tier 2	QL (30 tabs / 30 days), PA
FYCOMPA TAB 10MG	Tier 2	QL (30 tabs / 30 days), PA
FYCOMPA TAB 12MG	Tier 2	QL (30 tabs / 30 days), PA
gabapentin cap 100 mg	Tier 1	QL (1080 caps / 30 days)
gabapentin cap 300 mg	Tier 1	QL (360 caps / 30 days)
gabapentin cap 400 mg	Tier 1	QL (270 caps / 30 days)
gabapentin oral soln 250 mg/5ml	Tier 1	QL (2160 mL / 30 days)
gabapentin tab 600 mg	Tier 1	QL (180 tabs / 30 days)
gabapentin tab 800 mg	Tier 1	QL (120 tabs / 30 days)
lamotrigine tab 25 mg	Tier 1	
lamotrigine tab 100 mg	Tier 1	
lamotrigine tab 150 mg	Tier 1	
lamotrigine tab 200 mg	Tier 1	
lamotrigine tab chewable dispersible 5 mg	Tier 1	
lamotrigine tab chewable dispersible 25 mg	Tier 1	
lamotrigine tab er 24hr 25 mg	Tier 1	
lamotrigine tab er 24hr 50 mg	Tier 1	
lamotrigine tab er 24hr 100 mg	Tier 1	
lamotrigine tab er 24hr 200 mg	Tier 1	
lamotrigine tab er 24hr 250 mg	Tier 1	
lamotrigine tab er 24hr 300 mg	Tier 1	
levetiracetam in sodium chloride iv soln 500 mg/100ml	Tier 1	
levetiracetam in sodium chloride iv soln 1000 mg/100ml	Tier 1	
levetiracetam in sodium chloride iv soln 1500 mg/100ml	Tier 1	
levetiracetam inj 500 mg/5ml (100 mg/ml)	Tier 1	
levetiracetam oral soln 100 mg/ml	Tier 1	
levetiracetam tab 250 mg	Tier 1	
levetiracetam tab 500 mg	Tier 1	
levetiracetam tab 750 mg	Tier 1	
levetiracetam tab 1000 mg	Tier 1	
levetiracetam tab er 24hr 500 mg	Tier 1	
levetiracetam tab er 24hr 750 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LYRICA CAP 25MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 50MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 75MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 100MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 150MG	Tier 2	QL (120 caps / 30 days)
LYRICA CAP 200MG	Tier 2	QL (90 caps / 30 days)
LYRICA CAP 225MG	Tier 2	QL (60 caps / 30 days)
LYRICA CAP 300MG	Tier 2	QL (60 caps / 30 days)
LYRICA SOL 20MG/ML	Tier 2	QL (946 mL / 30 days)
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	Tier 1	
oxcarbazepine tab 150 mg	Tier 1	
oxcarbazepine tab 300 mg	Tier 1	
oxcarbazepine tab 600 mg	Tier 1	
PEGANONE TAB 250MG	Tier 2	
PHENOBARB INJ 65MG/ML	Tier 2	PA; PA if 70 years and older
phenobarbital elixir 20 mg/5ml	Tier 2	PA; PA if 70 years and older
phenobarbital sodium inj 130 mg/ml	Tier 2	PA; PA if 70 years and older
phenobarbital tab 15 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 16.2 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 30 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 32.4 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 60 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 64.8 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 97.2 mg	Tier 2	PA; PA if 70 years and older
phenobarbital tab 100 mg	Tier 2	PA; PA if 70 years and older
PHENYTEK CAP 200MG	Tier 2	
PHENYTEK CAP 300MG	Tier 2	
phenytoin chew tab 50 mg	Tier 1	
phenytoin sodium extended cap 100 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
phenytoin sodium extended cap 200 mg	Tier 1	
phenytoin sodium extended cap 300 mg	Tier 1	
phenytoin sodium inj 50 mg/ml	Tier 1	
phenytoin susp 125 mg/5ml	Tier 1	
pregabalin cap 25 mg	Tier 1	QL (120 caps / 30 days)
pregabalin cap 50 mg	Tier 1	QL (120 caps / 30 days)
pregabalin cap 75 mg	Tier 1	QL (120 caps / 30 days)
pregabalin cap 100 mg	Tier 1	QL (120 caps / 30 days)
pregabalin cap 150 mg	Tier 1	QL (120 caps / 30 days)
pregabalin cap 200 mg	Tier 1	QL (90 caps / 30 days)
pregabalin cap 225 mg	Tier 1	QL (60 caps / 30 days)
pregabalin cap 300 mg	Tier 1	QL (60 caps / 30 days)
pregabalin soln 20 mg/ml	Tier 1	QL (946 mL / 30 days)
primidone tab 50 mg	Tier 1	
primidone tab 250 mg	Tier 1	
roweepra tab 500mg	Tier 1	
roweepra tab 750mg	Tier 1	
roweepra tab 1000mg	Tier 1	
roweepra xr tab 500mg xr	Tier 1	
roweepra xr tab 750mg xr	Tier 1	
SPRITAM TAB 250MG	Tier 2	
SPRITAM TAB 500MG	Tier 2	
SPRITAM TAB 750MG	Tier 2	
SPRITAM TAB 1000MG	Tier 2	
SYMPAZAN MIS 5MG	Tier 2	PA
SYMPAZAN MIS 10MG	Tier 2	PA
SYMPAZAN MIS 20MG	Tier 2	PA
tiagabine hcl tab 2 mg	Tier 1	
tiagabine hcl tab 4 mg	Tier 1	
tiagabine hcl tab 12 mg	Tier 1	
tiagabine hcl tab 16 mg	Tier 1	
topiramate sprinkle cap 15 mg	Tier 1	
topiramate sprinkle cap 25 mg	Tier 1	
topiramate tab 25 mg	Tier 1	
topiramate tab 50 mg	Tier 1	
topiramate tab 100 mg	Tier 1	
topiramate tab 200 mg	Tier 1	
valproate sodium inj 100 mg/ml	Tier 1	
valproate sodium oral soln 250 mg/5ml (base equiv)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
valproic acid cap 250 mg	Tier 1	
vigabatrin powd pack 500 mg	Tier 2	QL (180 packets / 30 days), LA, PA
vigabatrin tab 500 mg	Tier 2	QL (180 tabs / 30 days), LA, PA
vigadrone pow 500mg	Tier 2	QL (180 packets / 30 days), LA, PA
VIMPAT INJ 200MG/20	Tier 2	
VIMPAT SOL 10MG/ML	Tier 2	QL (1200 mL / 30 days)
VIMPAT TAB 50MG	Tier 2	QL (120 tabs / 30 days)
VIMPAT TAB 100MG	Tier 2	QL (60 tabs / 30 days)
VIMPAT TAB 150MG	Tier 2	QL (60 tabs / 30 days)
VIMPAT TAB 200MG	Tier 2	QL (60 tabs / 30 days)
zonisamide cap 25 mg	Tier 1	
zonisamide cap 50 mg	Tier 1	
zonisamide cap 100 mg	Tier 1	
ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS		
donepezil hydrochloride orally disintegrating tab 5 mg	Tier 1	QL (30 tabs / 30 days)
donepezil hydrochloride orally disintegrating tab 10 mg	Tier 1	
donepezil hydrochloride tab 5 mg	Tier 1	QL (30 tabs / 30 days)
donepezil hydrochloride tab 10 mg	Tier 1	
galantamine hydrobromide cap er 24hr 8 mg	Tier 1	QL (30 caps / 30 days)
galantamine hydrobromide cap er 24hr 16 mg	Tier 1	QL (30 caps / 30 days)
galantamine hydrobromide cap er 24hr 24 mg	Tier 1	QL (30 caps / 30 days)
galantamine hydrobromide oral soln 4 mg/ml	Tier 1	
galantamine hydrobromide tab 4 mg	Tier 1	QL (60 tabs / 30 days)
galantamine hydrobromide tab 8 mg	Tier 1	QL (60 tabs / 30 days)
galantamine hydrobromide tab 12 mg	Tier 1	QL (60 tabs / 30 days)
memantine hcl cap er 24hr 7 mg	Tier 1	PA; PA if < 30 yrs
memantine hcl cap er 24hr 14 mg	Tier 1	PA; PA if < 30 yrs
memantine hcl cap er 24hr 21 mg	Tier 1	PA; PA if < 30 yrs
memantine hcl cap er 24hr 28 mg	Tier 1	PA; PA if < 30 yrs
memantine hcl oral solution 2 mg/ml	Tier 1	PA; PA if < 30 yrs
memantine hcl tab 5 mg	Tier 1	PA; PA if < 30 yrs

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
memantine hcl tab 5 mg (28) & 10 mg (21) titration pak	Tier 2	PA; PA if < 30 yrs
memantine hcl tab 10 mg	Tier 1	PA; PA if < 30 yrs
NAMZARIC CAP	Tier 2	
NAMZARIC CAP 7-10MG	Tier 2	
NAMZARIC CAP 14-10MG	Tier 2	
NAMZARIC CAP 21-10MG	Tier 2	
NAMZARIC CAP 28-10MG	Tier 2	
rivastigmine tartrate cap 1.5 mg (base equivalent)	Tier 1	QL (90 caps / 30 days)
rivastigmine tartrate cap 3 mg (base equivalent)	Tier 1	QL (90 caps / 30 days)
rivastigmine tartrate cap 4.5 mg (base equivalent)	Tier 1	QL (60 caps / 30 days)
rivastigmine tartrate cap 6 mg (base equivalent)	Tier 1	QL (60 caps / 30 days)
rivastigmine td patch 24hr 4.6 mg/24hr	Tier 1	QL (30 patches / 30 days)
rivastigmine td patch 24hr 9.5 mg/24hr	Tier 1	QL (30 patches / 30 days)
rivastigmine td patch 24hr 13.3 mg/24hr	Tier 1	QL (30 patches / 30 days)
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION		
amitriptyline hcl tab 10 mg	Tier 2	
amitriptyline hcl tab 25 mg	Tier 2	
amitriptyline hcl tab 50 mg	Tier 2	
amitriptyline hcl tab 75 mg	Tier 2	
amitriptyline hcl tab 100 mg	Tier 2	
amitriptyline hcl tab 150 mg	Tier 2	
amoxapine tab 25 mg	Tier 2	
amoxapine tab 50 mg	Tier 2	
amoxapine tab 100 mg	Tier 2	
amoxapine tab 150 mg	Tier 2	
bupropion hcl tab 75 mg	Tier 1	
bupropion hcl tab 100 mg	Tier 1	
bupropion hcl tab er 12hr 100 mg	Tier 1	
bupropion hcl tab er 12hr 150 mg	Tier 1	
bupropion hcl tab er 12hr 200 mg	Tier 1	
bupropion hcl tab er 24hr 150 mg	Tier 1	
bupropion hcl tab er 24hr 300 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
citalopram hydrobromide oral soln 10 mg/5ml	Tier 1	
citalopram hydrobromide tab 10 mg (base equiv)	Tier 1	
citalopram hydrobromide tab 20 mg (base equiv)	Tier 1	
citalopram hydrobromide tab 40 mg (base equiv)	Tier 1	
clomipramine hcl cap 25 mg	Tier 2	PA
clomipramine hcl cap 50 mg	Tier 2	PA
clomipramine hcl cap 75 mg	Tier 2	PA
desipramine hcl tab 10 mg	Tier 2	
desipramine hcl tab 25 mg	Tier 2	
desipramine hcl tab 50 mg	Tier 2	
desipramine hcl tab 75 mg	Tier 2	
desipramine hcl tab 100 mg	Tier 2	
desipramine hcl tab 150 mg	Tier 2	
desvenlafaxine succinate tab er 24hr 25 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA
desvenlafaxine succinate tab er 24hr 50 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA
doxepin hcl cap 10 mg	Tier 2	
doxepin hcl cap 25 mg	Tier 2	
doxepin hcl cap 50 mg	Tier 2	
doxepin hcl cap 75 mg	Tier 2	
doxepin hcl cap 100 mg	Tier 2	
doxepin hcl cap 150 mg	Tier 2	
doxepin hcl conc 10 mg/ml	Tier 2	
duloxetine hcl enteric coated pellets cap 20 mg (base eq)	Tier 1	QL (180 caps / 30 days)
duloxetine hcl enteric coated pellets cap 30 mg (base eq)	Tier 1	QL (120 caps / 30 days)
duloxetine hcl enteric coated pellets cap 60 mg (base eq)	Tier 1	QL (60 caps / 30 days)
EMSAM DIS 6MG/24HR	Tier 2	QL (30 patches / 30 days), PA
EMSAM DIS 9MG/24HR	Tier 2	QL (30 patches / 30 days), PA
EMSAM DIS 12MG/24H	Tier 2	QL (30 patches / 30 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
escitalopram oxalate soln 5 mg/5ml (base equiv)	Tier 1	
escitalopram oxalate tab 5 mg (base equiv)	Tier 1	
escitalopram oxalate tab 10 mg (base equiv)	Tier 1	
escitalopram oxalate tab 20 mg (base equiv)	Tier 1	
FETZIMA CAP 20MG	Tier 2	QL (180 caps / 30 days), PA
FETZIMA CAP 40MG	Tier 2	QL (90 caps / 30 days), PA
FETZIMA CAP 80MG	Tier 2	QL (30 caps / 30 days), PA
FETZIMA CAP 120MG	Tier 2	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	Tier 2	PA
fluoxetine hcl cap 10 mg	Tier 1	
fluoxetine hcl cap 20 mg	Tier 1	
fluoxetine hcl cap 40 mg	Tier 1	
fluoxetine hcl solution 20 mg/5ml	Tier 1	
imipramine hcl tab 10 mg	Tier 2	
imipramine hcl tab 25 mg	Tier 2	
imipramine hcl tab 50 mg	Tier 2	
maprotiline hcl tab 25 mg	Tier 1	
maprotiline hcl tab 50 mg	Tier 1	
maprotiline hcl tab 75 mg	Tier 1	
MARPLAN TAB 10MG	Tier 2	QL (180 tabs / 30 days)
mirtazapine orally disintegrating tab 15 mg	Tier 1	
mirtazapine orally disintegrating tab 30 mg	Tier 1	
mirtazapine orally disintegrating tab 45 mg	Tier 1	
mirtazapine tab 7.5 mg	Tier 1	
mirtazapine tab 15 mg	Tier 1	
mirtazapine tab 30 mg	Tier 1	
mirtazapine tab 45 mg	Tier 1	
nefazodone hcl tab 50 mg	Tier 1	
nefazodone hcl tab 100 mg	Tier 1	
nefazodone hcl tab 150 mg	Tier 1	
nefazodone hcl tab 200 mg	Tier 1	
nefazodone hcl tab 250 mg	Tier 1	
nortriptyline hcl cap 10 mg	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nortriptyline hcl cap 25 mg	Tier 2	
nortriptyline hcl cap 50 mg	Tier 2	
nortriptyline hcl cap 75 mg	Tier 2	
nortriptyline hcl soln 10 mg/5ml	Tier 2	
paroxetine hcl tab 10 mg	Tier 2	
paroxetine hcl tab 20 mg	Tier 2	
paroxetine hcl tab 30 mg	Tier 2	
paroxetine hcl tab 40 mg	Tier 2	
PAXIL SUS 10MG/5ML	Tier 2	QL (900 mL / 30 days)
phenelzine sulfate tab 15 mg	Tier 1	
protriptyline hcl tab 5 mg	Tier 2	
protriptyline hcl tab 10 mg	Tier 2	
sertraline hcl oral concentrate for solution 20 mg/ml	Tier 1	
sertraline hcl tab 25 mg	Tier 1	
sertraline hcl tab 50 mg	Tier 1	
sertraline hcl tab 100 mg	Tier 1	
tranylcypromine sulfate tab 10 mg	Tier 1	
trazodone hcl tab 50 mg	Tier 1	
trazodone hcl tab 100 mg	Tier 1	
trazodone hcl tab 150 mg	Tier 1	
trimipramine maleate cap 25 mg	Tier 2	QL (240 caps / 30 days)
trimipramine maleate cap 50 mg	Tier 2	QL (120 caps / 30 days)
trimipramine maleate cap 100 mg	Tier 2	QL (60 caps / 30 days)
TRINTELLIX TAB 5MG	Tier 2	QL (120 tabs / 30 days)
TRINTELLIX TAB 10MG	Tier 2	QL (60 tabs / 30 days)
TRINTELLIX TAB 20MG	Tier 2	QL (30 tabs / 30 days)
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	Tier 1	
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	Tier 1	
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	Tier 1	
venlafaxine hcl tab 25 mg (base equivalent)	Tier 1	
venlafaxine hcl tab 37.5 mg (base equivalent)	Tier 1	
venlafaxine hcl tab 50 mg (base equivalent)	Tier 1	
venlafaxine hcl tab 75 mg (base equivalent)	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
venlafaxine hcl tab 100 mg (base equivalent)	Tier 1	
VIIBRYD KIT STARTER	Tier 2	
VIIBRYD TAB 10MG	Tier 2	QL (30 tabs / 30 days)
VIIBRYD TAB 20MG	Tier 2	QL (30 tabs / 30 days)
VIIBRYD TAB 40MG	Tier 2	QL (30 tabs / 30 days)
ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE		
amantadine hcl cap 100 mg	Tier 1	QL (120 caps / 30 days)
amantadine hcl syrup 50 mg/5ml	Tier 1	
amantadine hcl tab 100 mg	Tier 1	
APOKYN INJ 10MG/ML	Tier 2	QL (20 cartridges / 30 days), LA, PA
benztropine mesylate inj 1 mg/ml	Tier 1	
benztropine mesylate tab 0.5 mg	Tier 2	PA; PA if 70 years and older
benztropine mesylate tab 1 mg	Tier 2	PA; PA if 70 years and older
benztropine mesylate tab 2 mg	Tier 2	PA; PA if 70 years and older
bromocriptine mesylate cap 5 mg (base equivalent)	Tier 1	
bromocriptine mesylate tab 2.5 mg (base equivalent)	Tier 1	
carbidopa & levodopa orally disintegrating tab 10-100 mg	Tier 1	
carbidopa & levodopa orally disintegrating tab 25-100 mg	Tier 1	
carbidopa & levodopa orally disintegrating tab 25-250 mg	Tier 1	
carbidopa & levodopa tab 10-100 mg	Tier 1	
carbidopa & levodopa tab 25-100 mg	Tier 1	
carbidopa & levodopa tab 25-250 mg	Tier 1	
carbidopa & levodopa tab er 25-100 mg	Tier 1	
carbidopa & levodopa tab er 50-200 mg	Tier 1	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	Tier 1	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	Tier 1	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	Tier 1	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	Tier 1	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	Tier 1	
entacapone tab 200 mg	Tier 1	
NEUPRO DIS 1MG/24HR	Tier 2	
NEUPRO DIS 2MG/24HR	Tier 2	
NEUPRO DIS 3MG/24HR	Tier 2	
NEUPRO DIS 4MG/24HR	Tier 2	
NEUPRO DIS 6MG/24HR	Tier 2	
NEUPRO DIS 8MG/24HR	Tier 2	
pramipexole dihydrochloride tab 0.5 mg	Tier 1	
pramipexole dihydrochloride tab 0.25 mg	Tier 1	
pramipexole dihydrochloride tab 0.75 mg	Tier 1	
pramipexole dihydrochloride tab 0.125 mg	Tier 1	
pramipexole dihydrochloride tab 1 mg	Tier 1	
pramipexole dihydrochloride tab 1.5 mg	Tier 1	
rasagiline mesylate tab 0.5 mg (base equiv)	Tier 1	
rasagiline mesylate tab 1 mg (base equiv)	Tier 1	
ropinirole hydrochloride tab 0.5 mg	Tier 1	
ropinirole hydrochloride tab 0.25 mg	Tier 1	
ropinirole hydrochloride tab 1 mg	Tier 1	
ropinirole hydrochloride tab 2 mg	Tier 1	
ropinirole hydrochloride tab 3 mg	Tier 1	
ropinirole hydrochloride tab 4 mg	Tier 1	
ropinirole hydrochloride tab 5 mg	Tier 1	
selegiline hcl cap 5 mg	Tier 1	
selegiline hcl tab 5 mg	Tier 1	
trihexyphenidyl hcl elixir 0.4 mg/ml	Tier 2	PA; PA if 70 years and older
trihexyphenidyl hcl tab 2 mg	Tier 2	PA; PA if 70 years and older
trihexyphenidyl hcl tab 5 mg	Tier 2	PA; PA if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY MAIN INJ 300MG	Tier 2	QL (1 injection / 28 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ABILIFY MAIN INJ 400MG	Tier 2	QL (1 injection / 28 days)
aripiprazole oral solution 1 mg/ml	Tier 2	QL (900 mL / 30 days)
aripiprazole orally disintegrating tab 10 mg	Tier 2	QL (60 tabs / 30 days)
aripiprazole orally disintegrating tab 15 mg	Tier 2	QL (60 tabs / 30 days)
aripiprazole tab 2 mg	Tier 1	QL (30 tabs / 30 days)
aripiprazole tab 5 mg	Tier 1	QL (30 tabs / 30 days)
aripiprazole tab 10 mg	Tier 1	QL (30 tabs / 30 days)
aripiprazole tab 15 mg	Tier 1	QL (30 tabs / 30 days)
aripiprazole tab 20 mg	Tier 1	QL (30 tabs / 30 days)
aripiprazole tab 30 mg	Tier 1	QL (30 tabs / 30 days)
ARISTADA INJ 441MG/1.	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 662MG/2	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 882MG/3	Tier 2	QL (1 injection / 28 days)
ARISTADA INJ 1064MG	Tier 2	QL (1 injection / 56 days)
ARISTADA INJ INITIO	Tier 2	
CHLORPROMAZ INJ 25MG/ML	Tier 2	
CHLORPROMAZ INJ 50MG/2ML	Tier 2	
chlorpromazine hcl tab 10 mg	Tier 1	
chlorpromazine hcl tab 25 mg	Tier 1	
chlorpromazine hcl tab 50 mg	Tier 1	
chlorpromazine hcl tab 100 mg	Tier 1	
chlorpromazine hcl tab 200 mg	Tier 1	
clozapine orally disintegrating tab 12.5 mg	Tier 1	PA
clozapine orally disintegrating tab 25 mg	Tier 1	PA
clozapine orally disintegrating tab 100 mg	Tier 1	NDS, QL (270 tabs / 30 days), PA
clozapine orally disintegrating tab 150 mg	Tier 1	QL (180 tabs / 30 days), PA
clozapine orally disintegrating tab 200 mg	Tier 2	QL (135 tabs / 30 days), PA
clozapine tab 25 mg	Tier 1	
clozapine tab 50 mg	Tier 1	
clozapine tab 100 mg	Tier 1	QL (270 tabs / 30 days)
clozapine tab 200 mg	Tier 1	QL (135 tabs / 30 days)
FANAPT PAK	Tier 2	
FANAPT TAB 1MG	Tier 2	QL (60 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FANAPT TAB 2MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 4MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 6MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 8MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 10MG	Tier 2	QL (60 tabs / 30 days)
FANAPT TAB 12MG	Tier 2	QL (60 tabs / 30 days)
fluphenazine decanoate inj 25 mg/ml	Tier 1	
fluphenazine hcl elixir 2.5 mg/5ml	Tier 1	
fluphenazine hcl inj 2.5 mg/ml	Tier 1	
fluphenazine hcl oral conc 5 mg/ml	Tier 1	
fluphenazine hcl tab 1 mg	Tier 1	
fluphenazine hcl tab 2.5 mg	Tier 1	
fluphenazine hcl tab 5 mg	Tier 1	
fluphenazine hcl tab 10 mg	Tier 1	
GEODON INJ 20MG	Tier 2	QL (6 mL / 3 days)
haloperidol decanoate im soln 50 mg/ml	Tier 1	
haloperidol decanoate im soln 100 mg/ml	Tier 1	
haloperidol lactate inj 5 mg/ml	Tier 1	
haloperidol lactate oral conc 2 mg/ml	Tier 1	
haloperidol tab 0.5 mg	Tier 1	
haloperidol tab 1 mg	Tier 1	
haloperidol tab 2 mg	Tier 1	
haloperidol tab 5 mg	Tier 1	
haloperidol tab 10 mg	Tier 1	
haloperidol tab 20 mg	Tier 1	
INVEGA SUST INJ 39/0.25	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 78/0.5ML	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 117/0.75	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 156MG/ML	Tier 2	QL (1 injection / 28 days)
INVEGA SUST INJ 234/1.5	Tier 2	QL (1 injection / 28 days)
INVEGA TRINZ INJ 273MG	Tier 2	QL (1 injection / 90 days)
INVEGA TRINZ INJ 410MG	Tier 2	QL (1 injection / 90 days)
INVEGA TRINZ INJ 546MG	Tier 2	QL (1 injection / 90 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
INVEGA TRINZ INJ 819MG	Tier 2	QL (1 injection / 90 days)
LATUDA TAB 20MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 40MG	Tier 2	QL (30 tabs / 30 days)
LATUDA TAB 60MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 80MG	Tier 2	QL (60 tabs / 30 days)
LATUDA TAB 120MG	Tier 2	QL (30 tabs / 30 days)
loxapine succinate cap 5 mg	Tier 1	
loxapine succinate cap 10 mg	Tier 1	
loxapine succinate cap 25 mg	Tier 1	
loxapine succinate cap 50 mg	Tier 1	
molindone hcl tab 5 mg	Tier 1	
molindone hcl tab 10 mg	Tier 1	
molindone hcl tab 25 mg	Tier 1	
NUPLAZID CAP 34MG	Tier 2	QL (30 caps / 30 days), LA, PA
NUPLAZID TAB 10MG	Tier 2	QL (30 tabs / 30 days), LA, PA
NUPLAZID TAB 17MG	Tier 2	QL (60 tabs / 30 days), LA, PA
olanzapine for im inj 10 mg	Tier 1	QL (3 vials / 1 day)
olanzapine orally disintegrating tab 5 mg	Tier 1	QL (30 tabs / 30 days)
olanzapine orally disintegrating tab 10 mg	Tier 1	QL (60 tabs / 30 days)
olanzapine orally disintegrating tab 15 mg	Tier 1	QL (30 tabs / 30 days)
olanzapine orally disintegrating tab 20 mg	Tier 1	QL (30 tabs / 30 days)
olanzapine tab 2.5 mg	Tier 1	QL (240 tabs / 30 days)
olanzapine tab 5 mg	Tier 1	QL (120 tabs / 30 days)
olanzapine tab 7.5 mg	Tier 1	QL (30 tabs / 30 days)
olanzapine tab 10 mg	Tier 1	QL (60 tabs / 30 days)
olanzapine tab 15 mg	Tier 1	QL (30 tabs / 30 days)
olanzapine tab 20 mg	Tier 1	QL (30 tabs / 30 days)
paliperidone tab er 24hr 1.5 mg	Tier 2	QL (30 tabs / 30 days)
paliperidone tab er 24hr 3 mg	Tier 2	QL (30 tabs / 30 days)
paliperidone tab er 24hr 6 mg	Tier 2	QL (60 tabs / 30 days)
paliperidone tab er 24hr 9 mg	Tier 2	QL (30 tabs / 30 days)
perphenazine tab 2 mg	Tier 1	
perphenazine tab 4 mg	Tier 1	
perphenazine tab 8 mg	Tier 1	
perphenazine tab 16 mg	Tier 1	
PERSERIS INJ 90MG	Tier 2	QL (1 injection / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PERSERIS INJ 120MG	Tier 2	QL (1 injection / 30 days)
pimozide tab 1 mg	Tier 1	
pimozide tab 2 mg	Tier 1	
quetiapine fumarate tab 25 mg	Tier 1	
quetiapine fumarate tab 50 mg	Tier 1	
quetiapine fumarate tab 100 mg	Tier 1	
quetiapine fumarate tab 200 mg	Tier 1	
quetiapine fumarate tab 300 mg	Tier 1	
quetiapine fumarate tab 400 mg	Tier 1	
quetiapine fumarate tab er 24hr 50 mg	Tier 1	QL (60 tabs / 30 days)
quetiapine fumarate tab er 24hr 150 mg	Tier 1	QL (30 tabs / 30 days)
quetiapine fumarate tab er 24hr 200 mg	Tier 1	QL (30 tabs / 30 days)
quetiapine fumarate tab er 24hr 300 mg	Tier 1	QL (60 tabs / 30 days)
quetiapine fumarate tab er 24hr 400 mg	Tier 1	QL (60 tabs / 30 days)
REXULTI TAB 0.5MG	Tier 2	QL (180 tabs / 30 days)
REXULTI TAB 0.25MG	Tier 2	QL (360 tabs / 30 days)
REXULTI TAB 1MG	Tier 2	QL (90 tabs / 30 days)
REXULTI TAB 2MG	Tier 2	QL (60 tabs / 30 days)
REXULTI TAB 3MG	Tier 2	QL (30 tabs / 30 days)
REXULTI TAB 4MG	Tier 2	QL (30 tabs / 30 days)
RISPERDAL INJ 12.5MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 25MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 37.5MG	Tier 2	QL (2 injections / 28 days)
RISPERDAL INJ 50MG	Tier 2	QL (2 injections / 28 days)
risperidone orally disintegrating tab 0.5 mg	Tier 1	QL (90 tabs / 30 days)
risperidone orally disintegrating tab 0.25 mg	Tier 1	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 1 mg	Tier 1	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 2 mg	Tier 1	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 3 mg	Tier 1	QL (60 tabs / 30 days)
risperidone orally disintegrating tab 4 mg	Tier 1	QL (60 tabs / 30 days)
risperidone soln 1 mg/ml	Tier 1	QL (240 mL / 30 days)
risperidone tab 0.5 mg	Tier 1	
risperidone tab 0.25 mg	Tier 1	
risperidone tab 1 mg	Tier 1	
risperidone tab 2 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
risperidone tab 3 mg	Tier 1	
risperidone tab 4 mg	Tier 1	
SAPHRIS SUB 2.5MG	Tier 2	QL (240 tabs / 30 days)
SAPHRIS SUB 5MG	Tier 2	QL (120 tabs / 30 days)
SAPHRIS SUB 10MG	Tier 2	QL (60 tabs / 30 days)
thioridazine hcl tab 10 mg	Tier 1	
thioridazine hcl tab 25 mg	Tier 1	
thioridazine hcl tab 50 mg	Tier 1	
thioridazine hcl tab 100 mg	Tier 1	
thiothixene cap 1 mg	Tier 1	
thiothixene cap 2 mg	Tier 1	
thiothixene cap 5 mg	Tier 1	
thiothixene cap 10 mg	Tier 1	
trifluoperazine hcl tab 1 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 2 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 5 mg (base equivalent)	Tier 1	
trifluoperazine hcl tab 10 mg (base equivalent)	Tier 1	
VERSACLOZ SUS 50MG/ML	Tier 2	QL (600 mL / 30 days), PA
VRAYLAR CAP 1.5-3MG	Tier 2	PA
VRAYLAR CAP 1.5MG	Tier 2	QL (60 caps / 30 days), PA
VRAYLAR CAP 3MG	Tier 2	QL (30 caps / 30 days), PA
VRAYLAR CAP 4.5MG	Tier 2	QL (30 caps / 30 days), PA
VRAYLAR CAP 6MG	Tier 2	QL (30 caps / 30 days), PA
ziprasidone hcl cap 20 mg	Tier 1	QL (60 caps / 30 days)
ziprasidone hcl cap 40 mg	Tier 1	QL (60 caps / 30 days)
ziprasidone hcl cap 60 mg	Tier 1	QL (60 caps / 30 days)
ziprasidone hcl cap 80 mg	Tier 1	QL (60 caps / 30 days)
ZYPREXA RELP INJ 210MG	Tier 2	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 300MG	Tier 2	QL (2 vials / 28 days), PA
ZYPREXA RELP INJ 405MG	Tier 2	QL (1 vial / 28 days), PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD		
amphetamine-dextroamphetamine cap er 24hr 5 mg	Tier 1	QL (90 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 10 mg	Tier 1	QL (90 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 15 mg	Tier 1	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 20 mg	Tier 1	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 25 mg	Tier 1	QL (30 caps / 30 days)
amphetamine-dextroamphetamine cap er 24hr 30 mg	Tier 1	QL (30 caps / 30 days)
amphetamine-dextroamphetamine tab 5 mg	Tier 1	QL (360 tabs / 30 days)
amphetamine-dextroamphetamine tab 7.5 mg	Tier 1	QL (240 tabs / 30 days)
amphetamine-dextroamphetamine tab 10 mg	Tier 1	QL (180 tabs / 30 days)
amphetamine-dextroamphetamine tab 12.5 mg	Tier 1	QL (90 tabs / 30 days)
amphetamine-dextroamphetamine tab 15 mg	Tier 1	QL (120 tabs / 30 days)
amphetamine-dextroamphetamine tab 20 mg	Tier 1	QL (90 tabs / 30 days)
amphetamine-dextroamphetamine tab 30 mg	Tier 1	QL (60 tabs / 30 days)
atomoxetine hcl cap 10 mg (base equiv)	Tier 1	QL (120 caps / 30 days)
atomoxetine hcl cap 18 mg (base equiv)	Tier 1	QL (120 caps / 30 days)
atomoxetine hcl cap 25 mg (base equiv)	Tier 1	QL (120 caps / 30 days)
atomoxetine hcl cap 40 mg (base equiv)	Tier 1	QL (60 caps / 30 days)
atomoxetine hcl cap 60 mg (base equiv)	Tier 1	QL (30 caps / 30 days)
atomoxetine hcl cap 80 mg (base equiv)	Tier 1	QL (30 caps / 30 days)
atomoxetine hcl cap 100 mg (base equiv)	Tier 1	QL (30 caps / 30 days)
dexmethylphenidate hcl tab 2.5 mg	Tier 1	QL (120 tabs / 30 days)
dexmethylphenidate hcl tab 5 mg	Tier 1	QL (120 tabs / 30 days)
dexmethylphenidate hcl tab 10 mg	Tier 1	QL (60 tabs / 30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv)	Tier 2	PA; PA if 70 years and older
guanfacine hcl tab er 24hr 2 mg (base equiv)	Tier 2	PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
guanfacine hcl tab er 24hr 3 mg (base equiv)	Tier 2	PA; PA if 70 years and older
guanfacine hcl tab er 24hr 4 mg (base equiv)	Tier 2	PA; PA if 70 years and older
methylphenidate hcl soln 5 mg/5ml	Tier 1	QL (1800 mL / 30 days)
methylphenidate hcl soln 10 mg/5ml	Tier 1	QL (900 mL / 30 days)
methylphenidate hcl tab 5 mg	Tier 1	QL (180 tabs / 30 days)
methylphenidate hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days)
methylphenidate hcl tab 20 mg	Tier 1	QL (90 tabs / 30 days)
methylphenidate hcl tab er 10 mg	Tier 1	QL (90 tabs / 30 days)
methylphenidate hcl tab er 20 mg	Tier 1	QL (90 tabs / 30 days)
HYPNOTICS - DRUGS TO TREAT INSOMNIA		
eszopiclone tab 1 mg	Tier 2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
eszopiclone tab 2 mg	Tier 2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
eszopiclone tab 3 mg	Tier 2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
HETLIOZ CAP 20MG	Tier 2	LA, PA
SILENOR TAB 3MG	Tier 2	QL (60 tabs / 30 days)
SILENOR TAB 6MG	Tier 2	QL (30 tabs / 30 days)
temazepam cap 7.5 mg	Tier 1	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
temazepam cap 15 mg	Tier 1	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
zaleplon cap 5 mg	Tier 2	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
zaleplon cap 10 mg	Tier 2	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
zolpidem tartrate tab 5 mg	Tier 2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
zolpidem tartrate tab 10 mg	Tier 2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES		
AIMOVIG INJ 70MG/ML	Tier 2	QL (1 pen / 30 days), PA
AIMOVIG INJ 140MG/ML	Tier 2	QL (1 pen / 30 days), PA
dihydroergotamine mesylate inj 1 mg/ml	Tier 2	
dihydroergotamine mesylate nasal spray 4 mg/ml	Tier 2	QL (8 mL / 30 days)
eletriptan hydrobromide tab 20 mg (base equivalent)	Tier 1	QL (12 tabs / 30 days)
eletriptan hydrobromide tab 40 mg (base equivalent)	Tier 1	QL (12 tabs / 30 days)
EMGALITY INJ 120MG/ML	Tier 2	QL (2 pens / 30 days), PA
EMGALITY INJ 120MG/ML	Tier 2	QL (2 syringes / 30 days), PA
ergotamine w/ caffeine tab 1-100 mg	Tier 1	
naratriptan hcl tab 1 mg (base equiv)	Tier 1	QL (12 tabs / 30 days)
naratriptan hcl tab 2.5 mg (base equiv)	Tier 1	QL (12 tabs / 30 days)
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	Tier 1	QL (18 tabs / 30 days)
rizatriptan benzoate oral disintegrating tab 10 mg (base eq)	Tier 1	QL (18 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
rizatriptan benzoate tab 5 mg (base equivalent)	Tier 1	QL (18 tabs / 30 days)
rizatriptan benzoate tab 10 mg (base equivalent)	Tier 1	QL (18 tabs / 30 days)
sumatriptan nasal spray 5 mg/act	Tier 1	QL (24 inhalers / 30 days)
sumatriptan nasal spray 20 mg/act	Tier 1	QL (12 inhalers / 30 days)
sumatriptan succinate inj 6 mg/0.5ml	Tier 1	QL (12 injections / 30 days)
sumatriptan succinate solution auto-injector 4 mg/0.5ml	Tier 1	QL (18 injections / 30 days)
sumatriptan succinate solution auto-injector 6 mg/0.5ml	Tier 1	QL (12 injections / 30 days)
sumatriptan succinate solution cartridge 4 mg/0.5ml	Tier 1	QL (18 injections / 30 days)
sumatriptan succinate solution cartridge 6 mg/0.5ml	Tier 1	QL (12 injections / 30 days)
sumatriptan succinate solution prefilled syringe 6 mg/0.5ml	Tier 1	QL (12 injections / 30 days)
sumatriptan succinate tab 25 mg	Tier 1	QL (12 tabs / 30 days)
sumatriptan succinate tab 50 mg	Tier 1	QL (12 tabs / 30 days)
sumatriptan succinate tab 100 mg	Tier 1	QL (12 tabs / 30 days)
zolmitriptan orally disintegrating tab 2.5 mg	Tier 1	QL (12 tabs / 30 days)
zolmitriptan orally disintegrating tab 5 mg	Tier 1	QL (12 tabs / 30 days)
zolmitriptan tab 2.5 mg	Tier 1	QL (12 tabs / 30 days)
zolmitriptan tab 5 mg	Tier 1	QL (12 tabs / 30 days)
MISCELLANEOUS		
AUSTEDO TAB 6MG	Tier 2	QL (60 tabs / 30 days), LA, PA
AUSTEDO TAB 9MG	Tier 2	QL (120 tabs / 30 days), LA, PA
AUSTEDO TAB 12MG	Tier 2	QL (120 tabs / 30 days), LA, PA
lithium carbonate cap 150 mg	Tier 1	
lithium carbonate cap 300 mg	Tier 1	
lithium carbonate cap 600 mg	Tier 1	
lithium carbonate tab 300 mg	Tier 1	
lithium carbonate tab er 300 mg	Tier 1	
lithium carbonate tab er 450 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LITHIUM SOL 8MEQ/5ML	Tier 2	
LYRICA CR TAB 82.5MG	Tier 2	QL (90 tabs / 30 days), PA
LYRICA CR TAB 165MG	Tier 2	QL (90 tabs / 30 days), PA
LYRICA CR TAB 330MG	Tier 2	QL (60 tabs / 30 days), PA
NUEDEXTA CAP 20-10MG	Tier 2	QL (60 caps / 30 days), PA
pyridostigmine bromide tab 60 mg	Tier 1	
riluzole tab 50 mg	Tier 1	
tetrabenazine tab 12.5 mg	Tier 2	QL (240 tabs / 30 days), PA
tetrabenazine tab 25 mg	Tier 2	QL (120 tabs / 30 days), PA
MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS		
BETASERON INJ 0.3MG	Tier 2	QL (14 syringes / 28 days), PA
dalfampridine tab er 12hr 10 mg	Tier 2	PA
GILENYA CAP 0.5MG	Tier 2	QL (28 caps / 28 days), PA
glatiramer acetate soln prefilled syringe 20 mg/ml	Tier 2	QL (30 syringes / 30 days), PA
glatiramer acetate soln prefilled syringe 40 mg/ml	Tier 2	QL (12 syringes / 28 days), PA
glatopa inj 20mg/ml	Tier 2	QL (30 syringes / 30 days), PA
glatopa inj 40mg/ml	Tier 2	QL (12 syringes / 28 days), PA
MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS		
baclofen tab 10 mg	Tier 1	
baclofen tab 20 mg	Tier 1	
carisoprodol tab 350 mg	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
cyclobenzaprine hcl tab 5 mg	Tier 2	PA; PA if 70 years and older
cyclobenzaprine hcl tab 10 mg	Tier 2	PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
dantrolene sodium cap 25 mg	Tier 1	
dantrolene sodium cap 50 mg	Tier 1	
dantrolene sodium cap 100 mg	Tier 1	
methocarbamol tab 500 mg	Tier 2	PA; PA if 70 years and older
methocarbamol tab 750 mg	Tier 2	PA; PA if 70 years and older
tizanidine hcl tab 2 mg (base equivalent)	Tier 1	
tizanidine hcl tab 4 mg (base equivalent)	Tier 1	
NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS		
armodafinil tab 50 mg	Tier 1	QL (90 tabs / 30 days), PA
armodafinil tab 150 mg	Tier 1	QL (30 tabs / 30 days), PA
armodafinil tab 200 mg	Tier 1	QL (30 tabs / 30 days), PA
armodafinil tab 250 mg	Tier 1	QL (30 tabs / 30 days), PA
XYREM SOL 500MG/ML	Tier 2	QL (540 mL / 30 days), LA, PA
PSYCHOTHERAPEUTIC-MISC		
acamprosate calcium tab delayed release 333 mg	Tier 1	
ADIPEX-P CAP 37.5MG	Tier 3	DP
ADIPEX-P TAB 37.5MG	Tier 3	DP
benzphetamine hcl tab 50 mg	Tier 3	DP
buprenorphine hcl sl tab 2 mg (base equiv)	Tier 1	QL (90 tabs / 30 days), PA
buprenorphine hcl sl tab 8 mg (base equiv)	Tier 1	QL (90 tabs / 30 days), PA
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	Tier 1	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	Tier 1	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	Tier 1	QL (90 films / 30 days)
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	Tier 1	QL (60 films / 30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	Tier 1	QL (90 tabs / 30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	Tier 1	QL (90 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	Tier 1	
CAFFEINE POW ANHYDROU	Tier 3	DP
CHANTIX PAK 0.5& 1MG	Tier 2	PA
CHANTIX PAK 1MG	Tier 2	PA
CHANTIX TAB 0.5MG	Tier 2	PA
CHANTIX TAB 1MG	Tier 2	PA
diethylpropion hcl tab 25 mg	Tier 3	DP
diethylpropion hcl tab er 24hr 75 mg	Tier 3	DP
disulfiram tab 250 mg	Tier 1	
disulfiram tab 500 mg	Tier 1	
gnp nicotine gum 2mg mint	Tier 3	DP
gnp nicotine gum 2mg orig	Tier 3	DP
gnp nicotine gum 4mg mint	Tier 3	DP
gnp nicotine loz 2mg mint	Tier 3	DP
gnp nicotine loz 4mg mint	Tier 3	DP
gnp nicotine loz mini 2mg	Tier 3	DP
hm nicotine dis 14mg/24h	Tier 3	DP
hm nicotine dis 21mg/24h	Tier 3	DP
hm nicotine gum 2mg mint	Tier 3	DP
hm nicotine gum 4mg mint	Tier 3	DP
hm nicotine loz 2mg mint	Tier 3	DP
hm nicotine loz 4mg mint	Tier 3	DP
naloxone hcl inj 0.4 mg/ml	Tier 1	
naloxone hcl inj 4 mg/10ml	Tier 1	
naloxone hcl soln cartridge 0.4 mg/ml	Tier 1	
naloxone hcl soln prefilled syringe 2 mg/2ml	Tier 1	
naltrexone hcl tab 50 mg	Tier 1	
NARCAN SPR	Tier 2	NDS
nicorelief gum 2mg mint	Tier 3	DP
nicorelief gum 2mg orig	Tier 3	DP
nicorelief gum 4mg mint	Tier 3	DP
nicorelief gum 4mg orig	Tier 3	DP
nicotine pol loz 4mg mint	Tier 3	DP
nicotine polacrilex gum 2 mg	Tier 3	DP
nicotine polacrilex gum 4 mg	Tier 3	DP
nicotine polacrilex lozenge 2 mg	Tier 3	DP
nicotine polacrilex lozenge 4 mg	Tier 3	DP
nicotine td dis 7mg/24hr	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nicotine td patch 24hr 7 mg/24hr	Tier 3	DP
nicotine td patch 24hr 14 mg/24hr	Tier 3	DP
nicotine td patch 24hr 21 mg/24hr	Tier 3	DP
NICOTROL INH	Tier 2	
NICOTROL NS SPR 10MG/ML	Tier 2	
phendimetrazine tartrate cap er 24hr 105 mg	Tier 3	DP
phendimetrazine tartrate tab 35 mg	Tier 3	DP
phentermine hcl cap 15 mg	Tier 3	DP
phentermine hcl cap 30 mg	Tier 3	DP
phentermine hcl cap 37.5 mg	Tier 3	DP
phentermine hcl tab 37.5 mg	Tier 3	DP
QSYMIA CAP 3.75-23	Tier 3	DP
QSYMIA CAP 7.5-46MG	Tier 3	DP
QSYMIA CAP 11.25-69	Tier 3	DP
QSYMIA CAP 15-92MG	Tier 3	DP
sm nicotine gum 2mg	Tier 3	DP
sm nicotine gum 2mg mint	Tier 3	DP
sm nicotine gum 4mg	Tier 3	DP
sm nicotine gum 4mg mint	Tier 3	DP
sm nicotine loz 2mg mint	Tier 3	DP
sm nicotine loz 4mg mint	Tier 3	DP
thrive gum 2mg mint	Tier 3	DP
VIVITROL INJ 380MG	Tier 2	

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

ANADROL-50 TAB 50MG	Tier 2	PA
ANDRODERM DIS 2MG/24HR	Tier 2	QL (30 patches / 30 days), PA
ANDRODERM DIS 4MG/24HR	Tier 2	QL (30 patches / 30 days), PA
oxandrolone tab 2.5 mg	Tier 1	PA
oxandrolone tab 10 mg	Tier 1	PA
testosterone cypionate im inj in oil 100 mg/ml	Tier 1	PA
testosterone cypionate im inj in oil 200 mg/ml	Tier 1	PA
testosterone enanthate im inj in oil 200 mg/ml	Tier 1	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
testosterone td gel 12.5 mg/act (1%)	Tier 1	QL (300 grams / 30 days), PA
testosterone td gel 25 mg/2.5gm (1%)	Tier 1	QL (300 grams / 30 days), PA
testosterone td gel 50 mg/5gm (1%)	Tier 1	QL (300 grams / 30 days), PA
ANTIDIABETICS, INJECTABLE - DRUGS TO TREAT DIABETES		
ALCOHOL SWABS	Tier 2	
BASAGLAR INJ 100UNIT	Tier 2	
BD ULTRAFINE INSULIN SYRINGE	Tier 2	
BD ULTRAFINE/NANO PEN NEEDLES	Tier 2	
BYDUREON BC INJ 2/0.85ML	Tier 2	QL (4 pens / 28 days)
BYDUREON INJ 2MG	Tier 2	QL (4 vials / 28 days)
BYDUREON PEN INJ 2MG	Tier 2	QL (4 pens / 28 days)
BYETTA INJ 5MCG	Tier 2	QL (1 pen / 30 days)
BYETTA INJ 10MCG	Tier 2	QL (1 pen / 30 days)
FIASP FLEX INJ TOUCH	Tier 2	
FIASP INJ 100/ML	Tier 2	
GAUZE PADS 2" X 2"	Tier 2	
HUMULIN R INJ U-500	Tier 2	
HUMULIN R INJ U-500	Tier 2	B/D
INSULIN PEN NEEDLE	Tier 2	
INSULIN SAFETY NEEDLES	Tier 2	
INSULIN SYRINGE	Tier 2	
LEVEMIR INJ	Tier 2	
LEVEMIR INJ FLEXTOUC	Tier 2	
NOVOLIN INJ 70/30	Tier 2	(brand RELION not covered)
NOVOLIN INJ FLEXPEN	Tier 2	(brand RELION not covered)
NOVOLIN N INJ U-100	Tier 2	(brand RELION not covered)
NOVOLIN R INJ U-100	Tier 2	(brand RELION not covered)
NOVOLOG INJ 100/ML	Tier 2	
NOVOLOG INJ FLEXPEN	Tier 2	
NOVOLOG INJ PENFILL	Tier 2	
NOVOLOG MIX INJ 70/30	Tier 2	
NOVOLOG MIX INJ FLEXPEN	Tier 2	
OZEMPIC INJ 2/1.5ML	Tier 2	QL (1 pen / 28 days)
OZEMPIC INJ 2/1.5ML	Tier 2	QL (2 pens / 28 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SOLIQUA INJ 100/33	Tier 2	QL (10 pens / 30 days)
TRESIBA FLEX INJ 100UNIT	Tier 2	
TRESIBA FLEX INJ 200UNIT	Tier 2	
TRESIBA INJ 100UNIT	Tier 2	
TRULICITY INJ 0.75/0.5	Tier 2	QL (4 pens / 28 days)
TRULICITY INJ 1.5/0.5	Tier 2	QL (4 pens / 28 days)
VICTOZA INJ 18MG/3ML	Tier 2	QL (3 pens / 30 days)
XULTOPHY INJ 100/3.6	Tier 2	QL (5 pens / 30 days)
ANTIDIABETICS, ORAL - DRUGS TO TREAT DIABETES		
acarbose tab 25 mg	Tier 1	
acarbose tab 50 mg	Tier 1	
acarbose tab 100 mg	Tier 1	
FARXIGA TAB 5MG	Tier 2	QL (60 tabs / 30 days)
FARXIGA TAB 10MG	Tier 2	QL (30 tabs / 30 days)
glimepiride tab 1 mg	Tier 1	QL (240 tabs / 30 days)
glimepiride tab 2 mg	Tier 1	QL (120 tabs / 30 days)
glimepiride tab 4 mg	Tier 1	QL (60 tabs / 30 days)
glipizide tab 5 mg	Tier 1	QL (240 tabs / 30 days)
glipizide tab 10 mg	Tier 1	QL (120 tabs / 30 days)
glipizide tab er 24hr 2.5 mg	Tier 1	QL (240 tabs / 30 days)
glipizide tab er 24hr 5 mg	Tier 1	QL (120 tabs / 30 days)
glipizide tab er 24hr 10 mg	Tier 1	QL (60 tabs / 30 days)
glipizide xl tab 2.5mg	Tier 1	QL (240 tabs / 30 days)
glipizide xl tab 5mg	Tier 1	QL (120 tabs / 30 days)
glipizide xl tab 10mg	Tier 1	QL (60 tabs / 30 days)
glipizide-metformin hcl tab 2.5-250 mg	Tier 1	QL (240 tabs / 30 days)
glipizide-metformin hcl tab 2.5-500 mg	Tier 1	QL (120 tabs / 30 days)
glipizide-metformin hcl tab 5-500 mg	Tier 1	QL (120 tabs / 30 days)
glyburide micronized tab 1.5 mg	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
glyburide micronized tab 3 mg	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
glyburide micronized tab 6 mg	Tier 2	QL (60 tabs / 30 days), PA; PA if 70 years and older
glyburide tab 1.25 mg	Tier 2	QL (480 tabs / 30 days), PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
glyburide tab 2.5 mg	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
glyburide tab 5 mg	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
glyburide-metformin tab 1.25-250 mg	Tier 2	QL (240 tabs / 30 days), PA; PA if 70 years and older
glyburide-metformin tab 2.5-500 mg	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
glyburide-metformin tab 5-500 mg	Tier 2	QL (120 tabs / 30 days), PA; PA if 70 years and older
JANUMET TAB 50-500MG	Tier 2	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	Tier 2	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 25MG	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 50MG	Tier 2	QL (30 tabs / 30 days)
JANUVIA TAB 100MG	Tier 2	QL (30 tabs / 30 days)
JARDIANCE TAB 10MG	Tier 2	QL (60 tabs / 30 days)
JARDIANCE TAB 25MG	Tier 2	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	Tier 2	QL (60 tabs / 30 days)
JENTADUETO TAB XR	Tier 2	QL (30 tabs / 30 days)
JENTADUETO TAB XR	Tier 2	QL (60 tabs / 30 days)
metformin hcl tab 500 mg	Tier 1	QL (150 tabs / 30 days)
metformin hcl tab 850 mg	Tier 1	QL (90 tabs / 30 days)
metformin hcl tab 1000 mg	Tier 1	QL (75 tabs / 30 days)
metformin hcl tab er 24hr 500 mg	Tier 1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
metformin hcl tab er 24hr 750 mg	Tier 1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
nateglinide tab 60 mg	Tier 1	QL (90 tabs / 30 days)
nateglinide tab 120 mg	Tier 1	QL (90 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
pioglitazone hcl tab 15 mg (base equiv)	Tier 1	QL (30 tabs / 30 days)
pioglitazone hcl tab 30 mg (base equiv)	Tier 1	QL (30 tabs / 30 days)
pioglitazone hcl tab 45 mg (base equiv)	Tier 1	QL (30 tabs / 30 days)
repaglinide tab 0.5 mg	Tier 1	QL (120 tabs / 30 days)
repaglinide tab 1 mg	Tier 1	QL (120 tabs / 30 days)
repaglinide tab 2 mg	Tier 1	QL (240 tabs / 30 days)
SYNJARDY TAB	Tier 2	QL (60 tabs / 30 days)
SYNJARDY TAB 5-500MG	Tier 2	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	Tier 2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	Tier 2	QL (30 tabs / 30 days)
TRADJENTA TAB 5MG	Tier 2	QL (30 tabs / 30 days)
XIGDUO XR TAB 2.5-1000	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	Tier 2	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	Tier 2	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	Tier 2	QL (30 tabs / 30 days)
BISPHOSPHONATES - DRUGS TO TREAT	***BONE LOSS***	
alendronate sodium oral soln 70 mg/75ml	Tier 1	
alendronate sodium tab 5 mg	Tier 1	
alendronate sodium tab 10 mg	Tier 1	
alendronate sodium tab 35 mg	Tier 1	
alendronate sodium tab 40 mg	Tier 1	
alendronate sodium tab 70 mg	Tier 1	
ibandronate sodium tab 150 mg (base equivalent)	Tier 1	B/D
pamidronate disodium for inj 30 mg	Tier 1	B/D
pamidronate disodium for inj 90 mg	Tier 1	B/D
pamidronate disodium iv soln 3 mg/ml	Tier 1	B/D
pamidronate disodium iv soln 9 mg/ml	Tier 1	B/D
PAMIDRONATE INJ 6MG/ML	Tier 2	B/D
risedronate sodium tab 5 mg	Tier 1	
risedronate sodium tab 35 mg	Tier 1	
risedronate sodium tab 150 mg	Tier 1	
risedronate sodium tab delayed release 35 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
zoledronic acid inj conc for iv infusion 4 mg/5ml	Tier 1	B/D
zoledronic acid iv soln 5 mg/100ml	Tier 1	B/D
CALCIUM RECEPTOR AGONISTS		
cinacalcet hcl tab 30 mg (base equiv)	Tier 2	B/D, QL (120 tabs / 30 days)
cinacalcet hcl tab 60 mg (base equiv)	Tier 2	B/D, QL (60 tabs / 30 days)
cinacalcet hcl tab 90 mg (base equiv)	Tier 2	B/D, QL (120 tabs / 30 days)
SENSIPAR TAB 30MG	Tier 2	NDS, B/D, QL (120 tabs / 30 days)
SENSIPAR TAB 60MG	Tier 2	NDS, B/D, QL (60 tabs / 30 days)
SENSIPAR TAB 90MG	Tier 2	NDS, B/D, QL (120 tabs / 30 days)
CHELATING AGENTS		
CHEMET CAP 100MG	Tier 2	
DEPEN TITRA TAB 250MG	Tier 2	
JADENU SPRKL GRA 90MG	Tier 2	LA, PA
JADENU SPRKL GRA 180MG	Tier 2	LA, PA
JADENU SPRKL GRA 360MG	Tier 2	LA, PA
JADENU TAB 90MG	Tier 2	LA, PA
JADENU TAB 180MG	Tier 2	LA, PA
JADENU TAB 360MG	Tier 2	LA, PA
LOKELMA PAK 5GM	Tier 2	
LOKELMA PAK 10GM	Tier 2	
sodium polystyrene sulfonate oral susp 15 gm/60ml	Tier 1	
sodium polystyrene sulfonate powder	Tier 1	
trientine hcl cap 250 mg	Tier 2	PA
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL		
AIMSCO MIS LUBRICAT	Tier 3	DP
alyacen tab 1/35	Tier 1	
amethia lo tab	Tier 1	
amethia tab	Tier 1	
apri tab	Tier 1	
aranelle tab	Tier 1	
ashlyna tab	Tier 1	
ATLAS CONDOM MIS COLR/SPM	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ATLAS CONDOM MIS LUB/COLR	Tier 3	DP
ATLAS CONDOM MIS LUB/SPMC	Tier 3	DP
ATLAS CONDOM MIS LUBRICAT	Tier 3	DP
aubra tab 0.1-0.02	Tier 1	
aviane tab	Tier 1	
balziva tab	Tier 1	
bekyree tab	Tier 1	
blisovi 24 tab fe 1/20	Tier 1	
blisovi fe tab 1.5/30	Tier 1	
briellyn tab	Tier 1	
camila tab 0.35mg	Tier 1	
camrese lo tab	Tier 1	
CLASS ACT MIS LUBRICAT	Tier 3	DP
COLOR CONDOM MIS + LUBE	Tier 3	DP
CONDOMS MIS	Tier 3	DP
CONDOMS MIS LUBRICAT	Tier 3	DP
cryselle-28 tab 28 tabs	Tier 1	
cyclafem tab 1/35	Tier 1	
cyclafem tab 7/7/7	Tier 1	
dasetta tab 1/35	Tier 1	
dasetta tab 7/7/7	Tier 1	
deblitane tab 0.35mg	Tier 1	
delyla tab 0.1-0.02	Tier 1	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	Tier 1	
desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	Tier 1	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Tier 1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	Tier 1	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	Tier 1	
drospirenone-ethinyl estradiol tab 3-0.02 mg	Tier 1	
drospirenone-ethinyl estradiol tab 3-0.03 mg	Tier 1	
DUREX EXTRA MIS SENSITIV	Tier 3	DP
DUREX MIS REALFEEL	Tier 3	DP
ELEXA MIS STIMULAT	Tier 3	DP
ELEXA NATURL MIS FEEL	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ELEXA ULTRA MIS SENSITIV	Tier 3	DP
ELLA TAB 30MG	Tier 2	
emoquette tab	Tier 1	
enpresse-28 tab	Tier 1	
enskyce tab	Tier 1	
errin tab 0.35mg	Tier 1	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	Tier 1	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	Tier 1	
EXTRA SENSIT MIS SPERMICI	Tier 3	DP
falmina tab	Tier 1	
FANTASY LUBR MIS	Tier 3	DP
FANTASY LUBR MIS COLORS	Tier 3	DP
FANTASY LUBR MIS SPERMICI	Tier 3	DP
FANTASY MIS LUBRICAT	Tier 3	DP
fayosim tab	Tier 1	
FC2 FEMALE MIS CONDOM	Tier 3	DP
FC FEMALE MIS CONDOM	Tier 3	DP
femynor tab 0.25-35	Tier 1	NDS
hailey 24 tab fe	Tier 1	
heather tab 0.35mg	Tier 1	
HIGH SENSATI MIS SPERMICI	Tier 3	DP
incassia tab 0.35mg	Tier 1	
INTENSE SENS MIS	Tier 3	DP
introvale tab	Tier 1	
isibloom tab	Tier 1	
jasmiel tab 3-0.02mg	Tier 1	
jolivette tab 0.35mg	Tier 1	
juleber tab	Tier 1	
junel 1.5/30 tab	Tier 1	
junel 1/20 tab	Tier 1	
junel fe 24 tab 1/20	Tier 1	
junel fe tab 1.5/30	Tier 1	
junel fe tab 1/20	Tier 1	
kaitlib fe chw	Tier 1	
KAMELEON LUB MIS COLORS	Tier 3	DP
KAMELEON MIS TRI-COLR	Tier 3	DP
kariva tab 28 day	Tier 1	
kelnor 1/50 tab	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
kelnor tab 1/35	Tier 1	
KIMONO COLOR MIS	Tier 3	DP
KIMONO MICRO MIS THIN	Tier 3	DP
KIMONO MICRO MIS THIN +	Tier 3	DP
KIMONO MICRO MIS THIN PLS	Tier 3	DP
KIMONO MIS LUBRICAT	Tier 3	DP
KIMONO MIS SENSATIO	Tier 3	DP
KIMONO PLUS MIS LUBRICAT	Tier 3	DP
KIMONO PLUS MIS SPERMICI	Tier 3	DP
KIMONO PS MIS LUBRICAT	Tier 3	DP
KIMONO PS MIS PLUS	Tier 3	DP
KIMONO SENSA MIS PLUS	Tier 3	DP
KIMONO SPEC MIS	Tier 3	DP
kurvelo tab 0.15/30	Tier 1	
larin fe tab 1.5/30	Tier 1	
larin fe tab 1/20	Tier 1	
larin tab 1.5/30	Tier 1	
larin tab 1/20	Tier 1	
layolis fe chw	Tier 1	
lessina tab	Tier 1	
levonest tab	Tier 1	
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	Tier 1	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	Tier 1	
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	Tier 1	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	Tier 1	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Tier 1	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Tier 1	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	Tier 1	
levora-28 tab 0.15/30	Tier 1	
LIFESTYLES MIS COLORS	Tier 3	DP
LIFESTYLES MIS EXT STR	Tier 3	DP
LIFESTYLES MIS FORM FIT	Tier 3	DP
LIFESTYLES MIS LUBRICAT	Tier 3	DP
LIFESTYLES MIS RIBBED	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LIFESTYLES MIS SKYN	Tier 3	DP
LIFESTYLES MIS SPERM/LU	Tier 3	DP
LIFESTYLES MIS STUDDED	Tier 3	DP
LIFESTYLES MIS ULT/SENS	Tier 3	DP
LIFESTYLES MIS VIBRA-RI	Tier 3	DP
LIFESTYLES MIS XPLEASUR	Tier 3	DP
lomedia 24 tab fe	Tier 1	
loryna tab 3-0.02mg	Tier 1	
lutera tab	Tier 1	
lyza tab 0.35mg	Tier 1	
marlissa tab 0.15/30	Tier 1	
MAXX MIS LUBRICAT	Tier 3	DP
MAXX PLUS MIS SPERMICI	Tier 3	DP
medroxyprogesterone acetate im susp 150 mg/ml	Tier 1	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	Tier 1	
melodetta chw 24 fe	Tier 1	
mibelas 24 chw fe	Tier 1	
mili tab 0.25/35	Tier 1	
myzilra tab	Tier 1	
NATURAL COND MIS + LUBE	Tier 3	DP
necon tab 0.5/35	Tier 1	
necon tab 7/7/7	Tier 1	
nikki tab 3-0.02mg	Tier 1	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	Tier 1	
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	Tier 1	
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	Tier 1	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	Tier 1	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	Tier 1	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	Tier 1	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	Tier 1	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	Tier 1	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	Tier 1	
norethindrone tab 0.35 mg	Tier 1	
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	Tier 1	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Tier 1	NDS
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Tier 1	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	Tier 1	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	Tier 1	
norlyroc tab 0.35mg	Tier 1	
nortrel tab 0.5/35	Tier 1	
nortrel tab 1/35	Tier 1	
nortrel tab 7/7/7	Tier 1	
NUVARING MIS	Tier 2	
orsythia tab	Tier 1	
philith tab 0.4-35	Tier 1	
pimtrea tab	Tier 1	
pirmella tab 1/35	Tier 1	
portia-28 tab	Tier 1	
previfem tab	Tier 1	NDS
quasense tab	Tier 1	
REALITY MIS LUBRICAT	Tier 3	DP
REALITY ULTR MIS TEXTURED	Tier 3	DP
REALITY ULTR MIS THIN	Tier 3	DP
reclipsen tab	Tier 1	
rivelsa tab	Tier 1	
sharobel tab 0.35mg	Tier 1	
sprintec 28 tab 28 day	Tier 1	NDS
tarina 24 fe tab	Tier 1	
tarina fe tab 1/20	Tier 1	
tri-estaryll tab	Tier 1	
tri-legest tab fe	Tier 1	
tri-lo- tab sprintec	Tier 1	
tri-mili tab	Tier 1	
tri-previfem tab	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
tri-sprintec tab	Tier 1	
tri-vylibra tab	Tier 1	
tri-vylibra tab lo	Tier 1	
trinessa lo tab	Tier 1	
trinessa tab	Tier 1	
trivora-28 tab	Tier 1	
TROJAN EXTEN MIS LUBRICAT	Tier 3	DP
TROJAN MAGN MIS	Tier 3	DP
TROJAN MAGN MIS WARM SEN	Tier 3	DP
TROJAN MAGN MIS XL/LUBE	Tier 3	DP
TROJAN MIS	Tier 3	DP
TROJAN MIS ENZ-LUB	Tier 3	DP
TROJAN MIS NAT LAMB	Tier 3	DP
TROJAN MIS NATULAMB	Tier 3	DP
TROJAN MIS REGULAR	Tier 3	DP
TROJAN MIS RIBBED	Tier 3	DP
TROJAN MIS VERY SEN	Tier 3	DP
TROJAN MIS VERY THN	Tier 3	DP
TROJAN PLEAS MIS SPERMICI	Tier 3	DP
TROJAN PLUS MIS	Tier 3	DP
TROJAN RIB MIS	Tier 3	DP
TROJAN SHARE MIS LUBRICAT	Tier 3	DP
TROJAN SUPRA MIS SPERMICI	Tier 3	DP
TROJAN TWIST MIS PLEASURE	Tier 3	DP
TROJAN ULTRA MIS LUBRICAT	Tier 3	DP
TROJAN-ASSRT MIS PACK	Tier 3	DP
TROJAN-ENZ MIS LARGE	Tier 3	DP
TROJAN-ENZ MIS LUBRICAT	Tier 3	DP
TROJAN-ENZ MIS W/SPERMI	Tier 3	DP
TROJAN/SPERM MIS VERY SEN	Tier 3	DP
TROJAN/SPERM MIS VERY THN	Tier 3	DP
TRUSTEX LUBR MIS ASSORTED	Tier 3	DP
TRUSTEX LUBR MIS BANANA	Tier 3	DP
TRUSTEX LUBR MIS CHOC	Tier 3	DP
TRUSTEX LUBR MIS COLA	Tier 3	DP
TRUSTEX LUBR MIS COLORS	Tier 3	DP
TRUSTEX LUBR MIS EX LARGE	Tier 3	DP
TRUSTEX LUBR MIS EX STR	Tier 3	DP
TRUSTEX LUBR MIS GRAPE	Tier 3	DP
TRUSTEX LUBR MIS MINT	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TRUSTEX LUBR MIS RIB/STUD	Tier 3	DP
TRUSTEX LUBR MIS SPERMICI	Tier 3	DP
TRUSTEX LUBR MIS STRWBRY	Tier 3	DP
TRUSTEX LUBR MIS VANILLA	Tier 3	DP
TRUSTEX MIS BANANA	Tier 3	DP
TRUSTEX MIS CHOCOLAT	Tier 3	DP
TRUSTEX MIS FLAVORS	Tier 3	DP
TRUSTEX MIS MINT	Tier 3	DP
TRUSTEX MIS STRWBRY	Tier 3	DP
TRUSTEX MIS VANILLA	Tier 3	DP
TRUSTEX/RIA MIS LUBRICAT	Tier 3	DP
TRUSTEX/RIA MIS NON-LUB	Tier 3	DP
TRUSTEX/RIA MIS SPERMICI	Tier 3	DP
TRUSTX NON-9 MIS RIB/STUD	Tier 3	DP
tulana tab 0.35mg	Tier 1	
tydemy tab	Tier 1	
ULTIMATE FEE MIS	Tier 3	DP
velivet pak	Tier 1	
vienva tab 0.1-20	Tier 1	
viorele tab	Tier 1	
vyfemla tab 0.4-35	Tier 1	
vylibra tab 0.25-35	Tier 1	NDS
wymzya fe chw 0.4mg-35	Tier 1	
zarah tab 3-0.03mg	Tier 1	
zovia 1/35e tab	Tier 1	
ENDOMETRIOSIS		
danazol cap 50 mg	Tier 1	
danazol cap 100 mg	Tier 1	
danazol cap 200 mg	Tier 1	
SYNAREL SOL 2MG/ML	Tier 2	
ENZYME REPLACEMENTS - DRUGS TO TREAT ENZYME DEFICIENCIES		
ALDURAZYME INJ 2.9MG/5M	Tier 2	LA, PA
CARBAGLU TAB 200MG	Tier 2	LA, PA
CERDELGA CAP 84MG	Tier 2	PA
CEREZYME INJ 400UNIT	Tier 2	LA, PA
CYSTADANE POW	Tier 2	LA
CYSTAGON CAP 50MG	Tier 2	LA, PA
CYSTAGON CAP 150MG	Tier 2	LA, PA
FABRAZYME INJ 5MG	Tier 2	LA, PA
FABRAZYME INJ 35MG	Tier 2	LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
KUVAN POW 100MG	Tier 2	LA, PA
KUVAN POW 500MG	Tier 2	LA, PA
KUVAN TAB 100MG	Tier 2	LA, PA
levocarnitine oral soln 1 gm/10ml (10%)	Tier 1	B/D
levocarnitine tab 330 mg	Tier 1	B/D
LUMIZYME INJ 50MG	Tier 2	NDS, LA, PA
miglustat cap 100 mg	Tier 2	PA
NAGLAZYME INJ 1MG/ML	Tier 2	LA, PA
NITYR TAB 2MG	Tier 2	LA, PA
NITYR TAB 5MG	Tier 2	LA, PA
NITYR TAB 10MG	Tier 2	LA, PA
ORFADIN CAP 2MG	Tier 2	LA, PA
ORFADIN CAP 5MG	Tier 2	LA, PA
ORFADIN CAP 10MG	Tier 2	LA, PA
ORFADIN CAP 20MG	Tier 2	LA, PA
ORFADIN SUS 4MG/ML	Tier 2	LA, PA
sodium phenylbutyrate oral powder 3 gm/teaspoonful	Tier 2	PA
sodium phenylbutyrate tab 500 mg	Tier 2	PA
ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES		
DELESTROGEN INJ 10MG/ML	Tier 2	
estradiol tab 0.5 mg	Tier 2	
estradiol tab 1 mg	Tier 2	
estradiol tab 2 mg	Tier 2	
estradiol td patch weekly 0.1 mg/24hr	Tier 2	
estradiol td patch weekly 0.05 mg/24hr	Tier 2	
estradiol td patch weekly 0.06 mg/24hr	Tier 2	
estradiol td patch weekly 0.025 mg/24hr	Tier 2	
estradiol td patch weekly 0.075 mg/24hr	Tier 2	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	Tier 2	
estradiol vaginal cream 0.1 mg/gm	Tier 1	
estradiol vaginal tab 10 mcg	Tier 1	
estradiol valerate im in oil 20 mg/ml	Tier 1	
estradiol valerate im in oil 40 mg/ml	Tier 1	NDS
fyavolv tab 0.5-2.5	Tier 2	
jinteli tab 1mg-5mcg	Tier 2	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	Tier 2	
GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE		
cortisone acetate tab 25 mg	Tier 1	
DEXAMETHASON CON 1MG/ML	Tier 2	
dexamethasone elixir 0.5 mg/5ml	Tier 1	
dexamethasone sod phosphate preservative free inj 10 mg/ml	Tier 1	
dexamethasone sodium phosphate inj 4 mg/ml	Tier 1	
dexamethasone sodium phosphate inj 10 mg/ml	Tier 1	
dexamethasone sodium phosphate inj 20 mg/5ml	Tier 1	
dexamethasone sodium phosphate inj 100 mg/10ml	Tier 1	
dexamethasone sodium phosphate inj 120 mg/30ml	Tier 1	
dexamethasone soln 0.5 mg/5ml	Tier 1	
dexamethasone tab 0.5 mg	Tier 1	
dexamethasone tab 0.75 mg	Tier 1	
dexamethasone tab 1 mg	Tier 1	
dexamethasone tab 1.5 mg	Tier 1	
dexamethasone tab 2 mg	Tier 1	
dexamethasone tab 4 mg	Tier 1	
dexamethasone tab 6 mg	Tier 1	
fludrocortisone acetate tab 0.1 mg	Tier 1	
hydrocortisone tab 5 mg	Tier 1	
hydrocortisone tab 10 mg	Tier 1	
hydrocortisone tab 20 mg	Tier 1	
methylprednisolone acetate inj susp 40 mg/ml	Tier 1	B/D
methylprednisolone acetate inj susp 80 mg/ml	Tier 1	B/D
methylprednisolone sod succ for inj 40 mg (base equiv)	Tier 1	B/D
methylprednisolone sod succ for inj 125 mg (base equiv)	Tier 1	B/D
methylprednisolone sod succ for inj 1000 mg (base equiv)	Tier 1	B/D
methylprednisolone tab 4 mg	Tier 1	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
methylprednisolone tab 8 mg	Tier 1	B/D
methylprednisolone tab 16 mg	Tier 1	B/D
methylprednisolone tab 32 mg	Tier 1	B/D
methylprednisolone tab therapy pack 4 mg (21)	Tier 1	NDS
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	Tier 1	B/D
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	Tier 1	B/D
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	Tier 1	B/D
prednisolone syrup 15 mg/5ml (usp solution equivalent)	Tier 1	B/D
PREDNISONE CON 5MG/ML	Tier 2	B/D
prednisone oral soln 5 mg/5ml	Tier 1	B/D
prednisone tab 1 mg	Tier 1	B/D
prednisone tab 2.5 mg	Tier 1	B/D
prednisone tab 5 mg	Tier 1	B/D
prednisone tab 10 mg	Tier 1	B/D
prednisone tab 20 mg	Tier 1	B/D
prednisone tab 50 mg	Tier 1	B/D
prednisone tab therapy pack 5 mg (21)	Tier 1	
prednisone tab therapy pack 5 mg (48)	Tier 1	
prednisone tab therapy pack 10 mg (21)	Tier 1	
prednisone tab therapy pack 10 mg (48)	Tier 1	
SOLU-CORTEF INJ 100MG	Tier 2	
SOLU-CORTEF INJ 250MG	Tier 2	
SOLU-CORTEF INJ 500MG	Tier 2	
SOLU-CORTEF INJ 1000MG	Tier 2	
GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR		
GLUCAGEN INJ HYPOKIT	Tier 2	
GLUCAGON KIT 1MG	Tier 2	
PROGLYCEM SUS 50MG/ML	Tier 2	
MISCELLANEOUS		
cabergoline tab 0.5 mg	Tier 1	
calcitonin (salmon) nasal soln 200 unit/act	Tier 1	B/D
CHARCOAL POW	Tier 3	DP
CHEMSTRIP TES UGK	Tier 3	DP
D-XYLOSE POW	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
DIASCREEN 3 MIS	Tier 3	DP
DIASCREEN 5 MIS	Tier 3	DP
DIASCREEN 6 MIS	Tier 3	DP
DIASCREEN 7 MIS	Tier 3	DP
DIASCREEN 8 MIS	Tier 3	DP
DIASCREEN 9 MIS	Tier 3	DP
DIASCREEN 10 MIS	Tier 3	DP
DIASCREEN MIS 1G	Tier 3	DP
DIASCREEN MIS 2GK	Tier 3	DP
DIASCREEN MIS 4OBL	Tier 3	DP
DIASTIX TES STRIPS	Tier 3	DP
FORTEO SOL 600/2.4	Tier 2	PA
GENOTROPIN INJ 0.2MG	Tier 2	PA
GENOTROPIN INJ 0.4MG	Tier 2	PA
GENOTROPIN INJ 0.6MG	Tier 2	PA
GENOTROPIN INJ 0.8MG	Tier 2	PA
GENOTROPIN INJ 1.2MG	Tier 2	PA
GENOTROPIN INJ 1.4MG	Tier 2	PA
GENOTROPIN INJ 1.6MG	Tier 2	PA
GENOTROPIN INJ 1.8MG	Tier 2	PA
GENOTROPIN INJ 1MG	Tier 2	PA
GENOTROPIN INJ 2MG	Tier 2	PA
GENOTROPIN INJ 5MG	Tier 2	PA
GENOTROPIN INJ 12MG	Tier 2	PA
INCRELEX INJ 40MG/4ML	Tier 2	LA, PA
KETO-DIASTIX TES	Tier 3	DP
KORLYM TAB 300MG	Tier 2	LA, PA
LUPR DEP-PED INJ 3M 30MG	Tier 2	PA
LUPR DEP-PED INJ 7.5MG	Tier 2	PA
LUPR DEP-PED INJ 11.25MG	Tier 2	PA
LUPR DEP-PED INJ 15MG	Tier 2	PA
NATPARA INJ 25MCG	Tier 2	PA
NATPARA INJ 50MCG	Tier 2	PA
NATPARA INJ 75MCG	Tier 2	PA
NATPARA INJ 100MCG	Tier 2	PA
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	Tier 1	PA
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	Tier 1	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	Tier 1	PA
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	Tier 2	PA
octreotide acetate inj 1000 mcg/ml (1 mg/ml)	Tier 2	PA
PROLIA SOL 60MG/ML	Tier 2	QL (1 injection / 180 days)
raloxifene hcl tab 60 mg	Tier 1	
SIGNIFOR INJ 0.3MG/ML	Tier 2	LA, PA
SIGNIFOR INJ 0.6MG/ML	Tier 2	LA, PA
SIGNIFOR INJ 0.9MG/ML	Tier 2	LA, PA
SOMATULINE INJ 60/0.2ML	Tier 2	PA
SOMATULINE INJ 90/0.3ML	Tier 2	PA
SOMATULINE INJ 120/.5ML	Tier 2	PA
SOMAVERT INJ 10MG	Tier 2	LA, PA
SOMAVERT INJ 15MG	Tier 2	LA, PA
SOMAVERT INJ 20MG	Tier 2	LA, PA
SOMAVERT INJ 25MG	Tier 2	LA, PA
SOMAVERT INJ 30MG	Tier 2	LA, PA
TYMLOS INJ	Tier 2	PA
XENICAL CAP 120MG	Tier 3	DP
XGEVA INJ	Tier 2	PA
PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS		
AURYXIA TAB 210MG	Tier 2	QL (360 tabs / 30 days), PA
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	Tier 1	QL (360 caps / 30 days)
calcium acetate (phosphate binder) tab 667 mg	Tier 1	QL (360 tabs / 30 days)
sevelamer carbonate packet 0.8 gm	Tier 2	QL (540 packets / 30 days)
sevelamer carbonate packet 2.4 gm	Tier 2	QL (180 packets / 30 days)
sevelamer carbonate tab 800 mg	Tier 1	QL (540 tabs / 30 days)
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES		
medroxyprogesterone acetate tab 2.5 mg	Tier 1	
medroxyprogesterone acetate tab 5 mg	Tier 1	
medroxyprogesterone acetate tab 10 mg	Tier 1	
norethindrone acetate tab 5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
levo-t tab 25mcg	Tier 1	
levo-t tab 50mcg	Tier 1	
levo-t tab 75mcg	Tier 1	
levo-t tab 88mcg	Tier 1	
levo-t tab 100mcg	Tier 1	
levo-t tab 112mcg	Tier 1	
levo-t tab 125mcg	Tier 1	
levo-t tab 137mcg	Tier 1	
levo-t tab 150mcg	Tier 1	
levo-t tab 175mcg	Tier 1	
levo-t tab 200 mcg	Tier 1	
levo-t tab 300 mcg	Tier 1	
levothyroxine sodium tab 25 mcg	Tier 1	
levothyroxine sodium tab 50 mcg	Tier 1	
levothyroxine sodium tab 75 mcg	Tier 1	
levothyroxine sodium tab 88 mcg	Tier 1	
levothyroxine sodium tab 100 mcg	Tier 1	
levothyroxine sodium tab 112 mcg	Tier 1	
levothyroxine sodium tab 125 mcg	Tier 1	
levothyroxine sodium tab 137 mcg	Tier 1	
levothyroxine sodium tab 150 mcg	Tier 1	
levothyroxine sodium tab 175 mcg	Tier 1	
levothyroxine sodium tab 200 mcg	Tier 1	
levothyroxine sodium tab 300 mcg	Tier 1	
levoxyl tab 25mcg	Tier 1	
levoxyl tab 50mcg	Tier 1	
levoxyl tab 75mcg	Tier 1	
levoxyl tab 88mcg	Tier 1	
levoxyl tab 100mcg	Tier 1	
levoxyl tab 112mcg	Tier 1	
levoxyl tab 125mcg	Tier 1	
levoxyl tab 137mcg	Tier 1	
levoxyl tab 150mcg	Tier 1	
levoxyl tab 175mcg	Tier 1	
levoxyl tab 200mcg	Tier 1	
liothyronine sodium tab 5 mcg	Tier 1	
liothyronine sodium tab 25 mcg	Tier 1	
liothyronine sodium tab 50 mcg	Tier 1	
methimazole tab 5 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
methimazole tab 10 mg	Tier 1	
propylthiouracil tab 50 mg	Tier 1	
SYNTHROID TAB 25MCG	Tier 2	
SYNTHROID TAB 50MCG	Tier 2	
SYNTHROID TAB 75MCG	Tier 2	
SYNTHROID TAB 88MCG	Tier 2	
SYNTHROID TAB 100MCG	Tier 2	
SYNTHROID TAB 112MCG	Tier 2	
SYNTHROID TAB 125MCG	Tier 2	
SYNTHROID TAB 137MCG	Tier 2	
SYNTHROID TAB 150MCG	Tier 2	
SYNTHROID TAB 175MCG	Tier 2	
SYNTHROID TAB 200MCG	Tier 2	
SYNTHROID TAB 300MCG	Tier 2	
unithroid tab 25mcg	Tier 1	
unithroid tab 50mcg	Tier 1	
unithroid tab 75mcg	Tier 1	
unithroid tab 88mcg	Tier 1	
unithroid tab 100mcg	Tier 1	
unithroid tab 112mcg	Tier 1	
unithroid tab 125mcg	Tier 1	
unithroid tab 137mcg	Tier 1	
unithroid tab 150mcg	Tier 1	
unithroid tab 175mcg	Tier 1	
unithroid tab 200mcg	Tier 1	
unithroid tab 300mcg	Tier 1	
VASOPRESSINS - DRUGS TO REGULATE PITUITARY HORMONES		
desmopressin acetate inj 4 mcg/ml	Tier 1	
desmopressin acetate nasal spray soln 0.01%	Tier 1	
desmopressin acetate nasal spray soln 0.01% (refrigerated)	Tier 1	
desmopressin acetate tab 0.1 mg	Tier 1	
desmopressin acetate tab 0.2 mg	Tier 1	
STIMATE SOL 1.5MG/ML	Tier 2	
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS		
ANTACIDS		
advanced sus antacid	Tier 3	DP
almacone chw	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
almacone dbl sus strength	Tier 3	DP
almacone sus	Tier 3	DP
ALUM HYDROX SUS 320/5ML	Tier 3	DP
antacid fast sus acting	Tier 3	DP
antacid fast sus relief	Tier 3	DP
antacid plus sus anti-gas	Tier 3	DP
antacid plus sus gas rel	Tier 3	DP
antacid sus	Tier 3	DP
antacid sus anti-gas	Tier 3	DP
antacid sus max st	Tier 3	DP
antacid sus mint crm	Tier 3	DP
antacid sus reg st	Tier 3	DP
antacid/sime sus ds	Tier 3	DP
CALCIUM CARB TAB 648MG	Tier 3	DP
GELUSIL CHW	Tier 3	DP
gnp antacid sus anti-gas	Tier 3	DP
gnp antacid sus cherry	Tier 3	DP
gnp masanti sus max st	Tier 3	DP
gnp masanti sus reg st	Tier 3	DP
hm antacid sus anti-gas	Tier 3	DP
mag-al plus liq	Tier 3	DP
mag-al plus liq xs	Tier 3	DP
MAGN OXIDE POW HEAVY	Tier 3	DP
MAGN OXIDE POW LIGHT	Tier 3	DP
magnesium oxide tab 400 mg	Tier 3	DP
magnesium oxide tab 420 mg	Tier 3	DP
mi-acid sus	Tier 3	DP
mi-acid sus max st	Tier 3	DP
milantex sus ex st	Tier 3	DP
milantex sus original	Tier 3	DP
mintox plus chw	Tier 3	DP
mintox sus	Tier 3	DP
mintox sus max st	Tier 3	DP
qc antacid sus	Tier 3	DP
qc antacid sus anti-gas	Tier 3	DP
rulox sus	Tier 3	DP
sb antacid sus anti-gas	Tier 3	DP
sm antacid sus advanced	Tier 3	DP
sm antacid sus anti-gas	Tier 3	DP
sm antacid/ sus antigas	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SODIUM POW BICARBON	Tier 3	DP
URO-MAG CAP 140MG	Tier 3	DP
ANTI-DIARRHEAL		
anti-diarrhe cap 2mg	Tier 3	DP
anti-diarrhe tab 2mg	Tier 3	DP
bismatrol chw 262mg	Tier 3	DP
bismatrol sus 262/15ml	Tier 3	DP
BISMUTH POW SUBGALLA	Tier 3	DP
bismuth subsalicylate chew tab 262 mg	Tier 3	DP
diarrhea rel sus 262/15ml	Tier 3	DP
gnp k-pec sus 262/15ml	Tier 3	DP
kao-tin sus 262/15ml	Tier 3	DP
KAOLIN POW COLLOID	Tier 3	DP
loperamide cap 2mg	Tier 3	DP
loperamide hcl liq 1 mg/5ml (0.2 mg/ml)	Tier 3	DP
medi-bismuth chw 262mg	Tier 3	DP
PECTIN POW	Tier 3	DP
peptic relf chw 262mg	Tier 3	DP
peptic relf sus 262/15ml	Tier 3	DP
pink bismuth chw 262mg	Tier 3	DP
pink bismuth tab 262mg	Tier 3	DP
sm anti-diar tab 2mg	Tier 3	DP
sm stomach sus 262/15ml	Tier 3	DP
stomach relf chw 262mg	Tier 3	DP
stomach relf sus 262/15ml	Tier 3	DP
stomach relf tab 262mg	Tier 3	DP
ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING		
aprepitant capsule 40 mg	Tier 1	B/D
aprepitant capsule 80 mg	Tier 1	B/D
aprepitant capsule 125 mg	Tier 1	B/D
aprepitant capsule therapy pack 80 & 125 mg	Tier 1	B/D
compro sup 25mg	Tier 1	
dronabinol cap 2.5 mg	Tier 1	B/D, QL (60 caps / 30 days)
dronabinol cap 5 mg	Tier 1	B/D, QL (60 caps / 30 days)
dronabinol cap 10 mg	Tier 1	B/D, QL (60 caps / 30 days)
EMEND SUS 125MG	Tier 2	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
granisetron hcl inj 1 mg/ml	Tier 1	
granisetron hcl inj 4 mg/4ml (1 mg/ml)	Tier 1	
granisetron hcl tab 1 mg	Tier 1	B/D
meclizine hcl tab 12.5 mg	Tier 2	
meclizine hcl tab 25 mg	Tier 2	
metoclopramide hcl inj 5 mg/ml (base equivalent)	Tier 1	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	Tier 1	
metoclopramide hcl tab 5 mg (base equivalent)	Tier 1	
metoclopramide hcl tab 10 mg (base equivalent)	Tier 1	
ondansetron hcl inj 4 mg/2ml (2 mg/ml)	Tier 1	
ondansetron hcl inj 40 mg/20ml (2 mg/ml)	Tier 1	
ondansetron hcl oral soln 4 mg/5ml	Tier 1	B/D
ondansetron hcl tab 4 mg	Tier 1	B/D
ondansetron hcl tab 8 mg	Tier 1	B/D
ondansetron hcl tab 24 mg	Tier 1	B/D
ondansetron orally disintegrating tab 4 mg	Tier 1	B/D
ondansetron orally disintegrating tab 8 mg	Tier 1	B/D
prochlorperazine edisylate inj 10 mg/2ml	Tier 1	
prochlorperazine maleate tab 5 mg (base equivalent)	Tier 1	
prochlorperazine maleate tab 10 mg (base equivalent)	Tier 1	
prochlorperazine suppos 25 mg	Tier 1	
promethazine hcl inj 25 mg/ml	Tier 2	PA; PA if 70 years and older
promethazine hcl inj 50 mg/ml	Tier 2	PA; PA if 70 years and older
promethazine hcl syrup 6.25 mg/5ml	Tier 2	PA; PA if 70 years and older
promethazine hcl tab 12.5 mg	Tier 2	PA; PA if 70 years and older
promethazine hcl tab 25 mg	Tier 2	PA; PA if 70 years and older
promethazine hcl tab 50 mg	Tier 2	PA; PA if 70 years and older
scopolamine td patch 72hr 1 mg/3days	Tier 2	QL (10 patches / 30 days), PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TRANSDERM-SC DIS 1.5MG	Tier 2	QL (10 patches / 30 days), PA; PA if 70 years and older
ANTISPASMODICS - DRUGS FOR STOMACH SPASMS		
dicyclomine hcl cap 10 mg	Tier 2	
dicyclomine hcl oral soln 10 mg/5ml	Tier 2	
dicyclomine hcl tab 20 mg	Tier 2	
glycopyrrolate tab 1 mg	Tier 1	
glycopyrrolate tab 2 mg	Tier 1	
H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID		
famotidine for susp 40 mg/5ml	Tier 1	
famotidine in nacl 0.9% iv soln 20 mg/50ml	Tier 1	
famotidine inj 20 mg/2ml	Tier 1	
famotidine inj 40 mg/4ml	Tier 1	
famotidine inj 200 mg/20ml	Tier 1	
famotidine tab 20 mg	Tier 1	
famotidine tab 40 mg	Tier 1	
ranitidine hcl inj 50 mg/2ml (25 mg/ml)	Tier 1	
ranitidine hcl inj 150 mg/6ml (25 mg/ml)	Tier 1	
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)	Tier 1	
ranitidine hcl tab 150 mg	Tier 1	
ranitidine hcl tab 300 mg	Tier 1	
INFLAMMATORY BOWEL DISEASE		
APRISO CAP 0.375GM	Tier 2	QL (120 caps / 30 days)
balsalazide disodium cap 750 mg	Tier 1	
budesonide delayed release particles cap 3 mg	Tier 2	
DELZICOL CAP 400MG	Tier 2	
hydrocortisone enema 100 mg/60ml	Tier 1	
mesalamine cap dr 400 mg	Tier 1	
mesalamine enema 4 gm	Tier 1	
mesalamine rectal enema 4 gm & cleanser wipe kit	Tier 1	
mesalamine suppos 1000 mg	Tier 1	
mesalamine tab delayed release 800 mg	Tier 1	
sulfasalazine tab 500 mg	Tier 1	
sulfasalazine tab delayed release 500 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LAXATIVES		
bisac-evac sup 10mg	Tier 3	DP
bisacodyl suppos 10 mg	Tier 3	DP
bisacodyl tab 5mg ec	Tier 3	DP
biscolax sup 10mg	Tier 3	DP
constulose sol 10gm/15	Tier 1	
docqlace cap 100mg	Tier 3	DP
docu liq 50mg/5ml	Tier 3	DP
docu soft cap 100mg	Tier 3	DP
docusate cal cap 240mg	Tier 3	DP
docusate sod cap 100mg	Tier 3	DP
docusate sod liq 50mg/5ml	Tier 3	DP
docusate sodium cap 100 mg	Tier 3	DP
docusate sodium liquid 150 mg/15ml	Tier 3	DP
docusil cap 100mg	Tier 3	DP
DOCUSOL MINI ENE	Tier 3	DP
dok plus tab 8.6-50mg	Tier 3	DP
ducodyl tab 5mg ec	Tier 3	DP
ENEMEEZ MINI ENE	Tier 3	DP
ENEMEEZ PLUS ENE 20-283	Tier 3	DP
enulose sol 10gm/15	Tier 1	
epsom salt gra	Tier 3	DP
EPSOM SALT POW	Tier 3	DP
gavilyte-c sol	Tier 1	
gavilyte-g sol	Tier 1	
gavilyte-n sol flav pk	Tier 1	
generlac sol 10gm/15	Tier 1	
gentle laxat sup 10mg	Tier 3	DP
gentle laxat tab 5mg ec	Tier 3	DP
glycerin suppos 1 gm	Tier 3	DP
gnp bisa-lax tab 5mg ec	Tier 3	DP
gnp glycerin sup 1.2gm	Tier 3	DP
gnp laxative sup 10mg	Tier 3	DP
gnp laxative tab 5mg ec	Tier 3	DP
gnp laxative tab 25mg	Tier 3	DP
GOLYTELY SOL	Tier 2	
hm epsom gra salt	Tier 3	DP
hm laxative tab 5mg ec	Tier 3	DP
lactulose (encephalopathy) solution 10 gm/15ml	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
lactulose solution 10 gm/15ml	Tier 1	
lax/stl soft tab 8.6-50mg	Tier 3	DP
laxative sup 10mg	Tier 3	DP
laxative tab 25mg	Tier 3	DP
medi-natural tab 8.6-50mg	Tier 3	DP
medi-natural tab 8.6mg	Tier 3	DP
MINERAL OIL	Tier 3	DP
MINERAL OIL HEAVY	Tier 3	DP
MINERAL OIL LIGHT	Tier 3	DP
MOVIPREP SOL	Tier 2	
nat fiber pow therapy	Tier 3	DP
nat veg lax tab 8.6mg	Tier 3	DP
naturl fiber pow 28.3%	Tier 3	DP
NULYTELY SOL FLAV PKS	Tier 2	
PEDIA-LAX LIQ 50MG	Tier 3	DP
PEDIA-LAX SUP 1GM	Tier 3	DP
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	Tier 1	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	Tier 1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	Tier 1	
qc epsom gra salt	Tier 3	DP
qc laxative sup 10mg	Tier 3	DP
qc natural pow vegetabl	Tier 3	DP
qc senna tab 8.6mg	Tier 3	DP
ra epsom gra salt	Tier 3	DP
RA EPSOM GRA SALT/LVN	Tier 3	DP
ra glycerin sup 80.7%	Tier 3	DP
reguloid pow 28.3%	Tier 3	DP
reguloid pow 48.57%	Tier 3	DP
reguloid pow 58.6%	Tier 3	DP
sani-supp sup pediatri	Tier 3	DP
sb docusate tab 8.6-50mg	Tier 3	DP
sb fib lax pow 33%	Tier 3	DP
sb laxative sup 10mg	Tier 3	DP
sb senna-lax tab 8.6mg	Tier 3	DP
senexon tab 8.6mg	Tier 3	DP
senexon-s tab 8.6-50mg	Tier 3	DP
senna plus tab 8.6-50mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
senna-lax tab 8.6mg	Tier 3	DP
senna-s tab 8.6-50mg	Tier 3	DP
senna-tabs tab 8.6mg	Tier 3	DP
senna-time s tab 8.6-50mg	Tier 3	DP
senna-time tab 8.6mg	Tier 3	DP
senno tab 8.6mg	Tier 3	DP
sennosides syrup 8.8 mg/5ml	Tier 3	DP
sennosides-docusate sodium tab 8.6-50 mg	Tier 3	DP
silace liq 10mg/ml	Tier 3	DP
silace syp 60/15ml	Tier 3	DP
sm fiber pow 28.3%	Tier 3	DP
sm fiber pow 48.57%	Tier 3	DP
sm fiber pow 58.6%	Tier 3	DP
sm laxative sup 10mg	Tier 3	DP
sm laxative tab 5mg ec	Tier 3	DP
sm senna lax tab 8.6mg	Tier 3	DP
sm senna lax tab max str	Tier 3	DP
stim laxat tab 5mg ec	Tier 3	DP
stool softnr cap 100mg	Tier 3	DP
stool softnr cap 250mg	Tier 3	DP
stool softnr syp 60/15ml	Tier 3	DP
stool softnr tab 8.6-50mg	Tier 3	DP
SUPREP BOWEL SOL PREP KIT	Tier 2	
trilyte sol	Tier 1	
womans laxat tab 5mg ec	Tier 3	DP
MISCELLANEOUS		
alosetron hcl tab 0.5 mg (base equiv)	Tier 2	PA
alosetron hcl tab 1 mg (base equiv)	Tier 2	PA
AMITIZA CAP 8MCG	Tier 2	QL (180 caps / 30 days)
AMITIZA CAP 24MCG	Tier 2	QL (60 caps / 30 days)
cromolyn sodium oral conc 100 mg/5ml	Tier 2	
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	Tier 2	
diphenoxylate w/ atropine tab 2.5-0.025 mg	Tier 2	
GATTEX KIT 5MG	Tier 2	LA, PA
LINZESS CAP 72MCG	Tier 2	QL (30 caps / 30 days)
LINZESS CAP 145MCG	Tier 2	QL (30 caps / 30 days)
LINZESS CAP 290MCG	Tier 2	QL (30 caps / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
loperamide hcl cap 2 mg	Tier 1	
misoprostol tab 100 mcg	Tier 1	
misoprostol tab 200 mcg	Tier 1	
MOVANTIK TAB 12.5MG	Tier 2	QL (60 tabs / 30 days)
MOVANTIK TAB 25MG	Tier 2	QL (30 tabs / 30 days)
RELISTOR INJ 8/0.4ML	Tier 2	PA
RELISTOR INJ 12/0.6ML	Tier 2	PA
SIMETHICONE LIQ	Tier 3	DP
sucralfate tab 1 gm	Tier 1	
SYMPROIC TAB 0.2MG	Tier 2	
ursodiol cap 300 mg	Tier 1	
ursodiol tab 250 mg	Tier 1	
ursodiol tab 500 mg	Tier 1	
XIFAXAN TAB 550MG	Tier 2	PA
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	Tier 2	
CREON CAP 6000UNIT	Tier 2	
CREON CAP 12000UNT	Tier 2	
CREON CAP 24000UNT	Tier 2	
CREON CAP 36000UNT	Tier 2	
ZENPEP CAP 3000UNIT	Tier 2	
ZENPEP CAP 5000UNIT	Tier 2	
ZENPEP CAP 10000UNT	Tier 2	
ZENPEP CAP 15000UNT	Tier 2	
ZENPEP CAP 20000UNT	Tier 2	
ZENPEP CAP 25000	Tier 2	
ZENPEP CAP 40000	Tier 2	
PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID		
DEXILANT CAP 30MG DR	Tier 2	QL (30 caps / 30 days)
DEXILANT CAP 60MG DR	Tier 2	QL (30 caps / 30 days)
esomeprazole magnesium cap delayed release 20 mg (base eq)	Tier 1	QL (30 caps / 30 days)
esomeprazole magnesium cap delayed release 40 mg (base eq)	Tier 1	QL (30 caps / 30 days)
esomeprazole sodium for intravenous soln 20 mg (base equiv)	Tier 1	
esomeprazole sodium for intravenous soln 40 mg (base equiv)	Tier 1	
lansoprazole cap delayed release 15 mg	Tier 1	QL (30 caps / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
lansoprazole cap delayed release 30 mg	Tier 1	QL (30 caps / 30 days)
omeprazole cap delayed release 10 mg	Tier 1	
omeprazole cap delayed release 20 mg	Tier 1	
omeprazole cap delayed release 40 mg	Tier 1	
pantoprazole sodium ec tab 20 mg (base equiv)	Tier 1	
pantoprazole sodium ec tab 40 mg (base equiv)	Tier 1	
pantoprazole sodium for iv soln 40 mg (base equiv)	Tier 1	
rabeprazole sodium ec tab 20 mg	Tier 1	QL (30 tabs / 30 days)

GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS

BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE

alfuzosin hcl tab er 24hr 10 mg	Tier 1	QL (30 tabs / 30 days)
dutasteride cap 0.5 mg	Tier 1	QL (30 caps / 30 days)
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	Tier 1	QL (30 caps / 30 days)
finasteride tab 5 mg	Tier 1	
tamsulosin hcl cap 0.4 mg	Tier 1	

MISCELLANEOUS

bethanechol chloride tab 5 mg	Tier 1	
bethanechol chloride tab 10 mg	Tier 1	
bethanechol chloride tab 25 mg	Tier 1	
bethanechol chloride tab 50 mg	Tier 1	
GLYCINE POW	Tier 3	DP
POT CITRATE GRA	Tier 3	DP
potassium citrate tab er 5 meq (540 mg)	Tier 1	
potassium citrate tab er 10 meq (1080 mg)	Tier 1	
potassium citrate tab er 15 meq (1620 mg)	Tier 1	

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

MYRBETRIQ TAB 25MG	Tier 2	QL (60 tabs / 30 days)
MYRBETRIQ TAB 50MG	Tier 2	QL (30 tabs / 30 days)
oxybutynin chloride syrup 5 mg/5ml	Tier 1	
oxybutynin chloride tab 5 mg	Tier 1	
oxybutynin chloride tab er 24hr 5 mg	Tier 1	QL (30 tabs / 30 days)
oxybutynin chloride tab er 24hr 10 mg	Tier 1	QL (60 tabs / 30 days)
oxybutynin chloride tab er 24hr 15 mg	Tier 1	QL (60 tabs / 30 days)
solifenacin succinate tab 5 mg	Tier 1	QL (30 tabs / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
solifenacin succinate tab 10 mg	Tier 1	QL (30 tabs / 30 days)
tolterodine tartrate cap er 24hr 2 mg	Tier 1	QL (30 caps / 30 days), ST
tolterodine tartrate cap er 24hr 4 mg	Tier 1	QL (30 caps / 30 days), ST
tolterodine tartrate tab 1 mg	Tier 1	ST
tolterodine tartrate tab 2 mg	Tier 1	ST
TOVIAZ TAB 4MG	Tier 2	QL (30 tabs / 30 days)
TOVIAZ TAB 8MG	Tier 2	QL (30 tabs / 30 days)
trospium chloride tab 20 mg	Tier 1	QL (60 tabs / 30 days)
VAGINAL ANTI-INFECTIVES		
clindamycin phosphate vaginal cream 2%	Tier 1	
clotrimazole cre 1% vag	Tier 3	DP
clotrimazole cre 3 day	Tier 3	DP
clotrimazole vaginal cream 1%	Tier 3	DP
3 day vaginl cre 2%	Tier 3	DP
metronidazole vaginal gel 0.75%	Tier 1	
miconazole 3 kit combinat	Tier 3	DP
miconazole 3 kit combo pk	Tier 3	DP
miconazole 7 cre 2%	Tier 3	DP
miconazole 7 cre tube/kit	Tier 3	DP
miconazole 7 sup 100mg	Tier 3	DP
miconazole nitrate vaginal cream 2%	Tier 3	DP
miconazole nitrate vaginal suppos 100 mg	Tier 3	DP
sm micon 7 sup 100mg	Tier 3	DP
terconazole vaginal cream 0.4%	Tier 1	
terconazole vaginal cream 0.8%	Tier 1	
terconazole vaginal suppos 80 mg	Tier 1	
vandazole gel 0.75%	Tier 1	
HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS		
ANTICOAGULANTS - BLOOD THINNERS		
COUMADIN TAB 1MG	Tier 2	
COUMADIN TAB 2.5MG	Tier 2	
COUMADIN TAB 2MG	Tier 2	
COUMADIN TAB 3MG	Tier 2	
COUMADIN TAB 4MG	Tier 2	
COUMADIN TAB 5MG	Tier 2	
COUMADIN TAB 6MG	Tier 2	
COUMADIN TAB 7.5MG	Tier 2	
COUMADIN TAB 10MG	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ELIQUIS ST P TAB 5MG	Tier 2	
ELIQUIS TAB 2.5MG	Tier 2	
ELIQUIS TAB 5MG	Tier 2	
enoxaparin sodium inj 30 mg/0.3ml	Tier 1	
enoxaparin sodium inj 40 mg/0.4ml	Tier 1	
enoxaparin sodium inj 60 mg/0.6ml	Tier 1	
enoxaparin sodium inj 80 mg/0.8ml	Tier 1	
enoxaparin sodium inj 100 mg/ml	Tier 1	
enoxaparin sodium inj 120 mg/0.8ml	Tier 1	
enoxaparin sodium inj 150 mg/ml	Tier 1	
enoxaparin sodium inj 300 mg/3ml	Tier 1	
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml	Tier 1	
fondaparinux sodium subcutaneous inj 5 mg/0.4ml	Tier 2	
fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml	Tier 2	
fondaparinux sodium subcutaneous inj 10 mg/0.8ml	Tier 2	
HEP SOD/NACL INJ 25000UNT	Tier 2	
heparin sodium (porcine) 100 unit/ml in d5w	Tier 2	
heparin sodium (porcine) inj 1000 unit/ml	Tier 1	B/D
heparin sodium (porcine) inj 5000 unit/ml	Tier 1	B/D
heparin sodium (porcine) inj 10000 unit/ml	Tier 1	B/D
heparin sodium (porcine) inj 20000 unit/ml	Tier 1	B/D
heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%	Tier 2	
heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%	Tier 2	
HEPARIN/NACL INJ 25000UNT	Tier 2	
jantoven tab 1mg	Tier 1	
jantoven tab 2.5mg	Tier 1	
jantoven tab 2mg	Tier 1	
jantoven tab 3mg	Tier 1	
jantoven tab 4mg	Tier 1	
jantoven tab 5mg	Tier 1	
jantoven tab 6mg	Tier 1	
jantoven tab 7.5mg	Tier 1	
jantoven tab 10mg	Tier 1	
PRADAXA CAP 75MG	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PRADAXA CAP 110MG	Tier 2	
PRADAXA CAP 150MG	Tier 2	
warfarin sodium tab 1 mg	Tier 1	
warfarin sodium tab 2 mg	Tier 1	
warfarin sodium tab 2.5 mg	Tier 1	
warfarin sodium tab 3 mg	Tier 1	
warfarin sodium tab 4 mg	Tier 1	
warfarin sodium tab 5 mg	Tier 1	
warfarin sodium tab 6 mg	Tier 1	
warfarin sodium tab 7.5 mg	Tier 1	
warfarin sodium tab 10 mg	Tier 1	
XARELTO STAR TAB 15/20MG	Tier 2	
XARELTO TAB 2.5MG	Tier 2	
XARELTO TAB 10MG	Tier 2	
XARELTO TAB 15MG	Tier 2	
XARELTO TAB 20MG	Tier 2	
HEMATOPOIETIC GROWTH FACTORS		
GRANIX INJ 300/0.5	Tier 2	PA
GRANIX INJ 300/1ML	Tier 2	PA
GRANIX INJ 480/0.8	Tier 2	PA
GRANIX INJ 480/1.6	Tier 2	PA
NEUPOGEN INJ 300/0.5	Tier 2	PA
NEUPOGEN INJ 300MCG	Tier 2	PA
NEUPOGEN INJ 480/0.8	Tier 2	PA
NEUPOGEN INJ 480MCG	Tier 2	PA
PROCRIT INJ 2000/ML	Tier 2	PA
PROCRIT INJ 3000/ML	Tier 2	PA
PROCRIT INJ 4000/ML	Tier 2	PA
PROCRIT INJ 10000/ML	Tier 2	PA
PROCRIT INJ 20000/ML	Tier 2	PA
PROCRIT INJ 40000/ML	Tier 2	PA
IRON		
DUOFER TAB 28MG	Tier 3	DP
EZFE 200 CAP 200MG	Tier 3	DP
FE SULFATE POW	Tier 3	DP
FERAHEME INJ 510/17ML	Tier 3	DP
ferate tab 27mg	Tier 3	DP
FERGON TAB 27MG	Tier 3	DP
ferosul elx 220/5ml	Tier 3	DP
ferosul tab 325mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FERRETTS IPS SOL	Tier 3	DP
FERRETTS TAB 325MG	Tier 3	DP
ferrex 150 cap 150mg	Tier 3	DP
FERRIMIN 150 TAB	Tier 3	DP
FERRLECIT INJ 12.5MG/M	Tier 3	DP
ferrous fumarate tab 324 mg (106 mg elemental fe)	Tier 3	DP
FERROUS GLUC TAB 324MG	Tier 3	DP
ferrous gluconate tab 240 mg (27 mg elemental fe)	Tier 3	DP
ferrous gluconate tab 324 mg (37.5 mg elemental iron)	Tier 3	DP
FERROUS SUL LIQ 220/5ML	Tier 3	DP
FERROUS SULF SYP 300/5ML	Tier 3	DP
FERROUS SULF TAB 140MG	Tier 3	DP
FERROUS SULF TAB 324MG EC	Tier 3	DP
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)	Tier 3	DP
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	Tier 3	DP
ferrous sulfate tab 325 mg (65 mg elemental fe)	Tier 3	DP
ferrous sulfate tab ec 325 mg (65 mg fe equivalent)	Tier 3	DP
ferrousul tab 325mg	Tier 3	DP
FOLITAB 500 TAB	Tier 3	DP
FUSION CAP	Tier 3	DP
gnp iron tab 45mg	Tier 3	DP
gnp iron tab 65mg	Tier 3	DP
HEMOCYTE TAB 324MG	Tier 3	DP
hm iron tab 65mg	Tier 3	DP
ICAR PEDS SUS GRAPE	Tier 3	DP
ICAR-C TAB	Tier 3	DP
iferex 150 cap	Tier 3	DP
INFED INJ 50MG/ML	Tier 3	DP
INTEGRA CAP	Tier 3	DP
iron 100 tab plus	Tier 3	DP
iron 100/c tab 100-250	Tier 3	DP
NOVAFERRUM CAP 50MG	Tier 3	DP
NOVAFERRUM DRO 15MG/ML	Tier 3	DP
NOVAFERRUM LIQ 125	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nu-iron 150 cap 150mg	Tier 3	DP
poly-iron cap 150mg	Tier 3	DP
PROFE CAP 180MG	Tier 3	DP
SLOW REL FE TAB 143MG CR	Tier 3	DP
slow release tab 47.5mg	Tier 3	DP
sm iron slow tab 160mg cr	Tier 3	DP
sm iron tab 325mg	Tier 3	DP
TANDEM CAP	Tier 3	DP
VENOFER INJ 20MG/ML	Tier 3	DP
wee care sus 15/1.25	Tier 3	DP
MISCELLANEOUS		
anagrelide hcl cap 0.5 mg	Tier 1	
anagrelide hcl cap 1 mg	Tier 1	
BERINERT INJ 500UNIT	Tier 2	QL (24 boxes / 30 days), LA, PA
cilostazol tab 50 mg	Tier 1	
cilostazol tab 100 mg	Tier 1	
DROXIA CAP 200MG	Tier 2	
DROXIA CAP 300MG	Tier 2	
DROXIA CAP 400MG	Tier 2	
ENDARI POW 5GM	Tier 2	LA, PA
FIRAZYR INJ 30MG/3ML	Tier 2	QL (9 syringes / 30 days), PA
HAEGARDA INJ 2000UNIT	Tier 2	QL (30 vials / 30 days), LA, PA
HAEGARDA INJ 3000UNIT	Tier 2	QL (20 vials / 30 days), LA, PA
icatibant acetate inj 30 mg/3ml (base equivalent)	Tier 2	QL (9 syringes / 30 days), PA
pentoxifylline tab er 400 mg	Tier 1	
PROMACTA POW 12.5MG	Tier 2	QL (360 packets / 30 days), LA, PA
PROMACTA TAB 12.5MG	Tier 2	QL (360 tabs / 30 days), LA, PA
PROMACTA TAB 25MG	Tier 2	QL (180 tabs / 30 days), LA, PA
PROMACTA TAB 50MG	Tier 2	QL (90 tabs / 30 days), LA, PA
PROMACTA TAB 75MG	Tier 2	QL (60 tabs / 30 days), LA, PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)	Tier 1	
tranexamic acid tab 650 mg	Tier 1	
PLATELET AGGREGATION INHIBITORS		
aspirin-dipyridamole cap er 12hr 25-200 mg	Tier 1	
BRILINTA TAB 60MG	Tier 2	
BRILINTA TAB 90MG	Tier 2	
clopidogrel bisulfate tab 75 mg (base equiv)	Tier 1	
prasugrel hcl tab 5 mg (base equiv)	Tier 1	
prasugrel hcl tab 10 mg (base equiv)	Tier 1	
ZONTIVITY TAB 2.08MG	Tier 2	
IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM		
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS) - DRUGS TO TREAT RHEUMATOID ARTHRITIS		
HUMIRA INJ 10/0.1ML	Tier 2	QL (2 injections / 28 days), PA
HUMIRA INJ 10MG/0.2	Tier 2	QL (2 syringes / 28 days), PA
HUMIRA INJ 20/0.2ML	Tier 2	QL (2 injections / 28 days), PA
HUMIRA INJ 40/0.4ML	Tier 2	QL (6 injections / 28 days), PA
HUMIRA KIT 20MG/0.4	Tier 2	QL (2 syringes / 28 days), PA
HUMIRA KIT 40MG/0.8	Tier 2	QL (6 syringes / 28 days), PA
HUMIRA PEDIA INJ CROHNS	Tier 2	PA
HUMIRA PEN INJ 40/0.4ML	Tier 2	QL (6 pens / 28 days), PA
HUMIRA PEN INJ 40MG/0.8	Tier 2	QL (6 pens / 28 days), PA
HUMIRA PEN INJ CD/UC/HS	Tier 2	PA
HUMIRA PEN INJ PS/UV	Tier 2	PA
HUMIRA PEN KIT CD/UC/HS	Tier 2	PA
HUMIRA PEN KIT PS/UV	Tier 2	PA
hydroxychloroquine sulfate tab 200 mg	Tier 1	
leflunomide tab 10 mg	Tier 1	
leflunomide tab 20 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
methotrexate sodium tab 2.5 mg (base equiv)	Tier 1	
REMICADE INJ 100MG	Tier 2	PA
XATMEP SOL 2.5MG/ML	Tier 2	B/D
XELJANZ TAB 5MG	Tier 2	QL (60 tabs / 30 days), PA
XELJANZ TAB 10MG	Tier 2	QL (60 tabs / 30 days), PA
XELJANZ XR TAB 11MG	Tier 2	QL (30 tabs / 30 days), PA
IMMUNOGLOBULINS		
BIVIGAM INJ 10%	Tier 2	PA
CARIMUNE NF INJ 12GM	Tier 2	PA
FLEBOGAMMA INJ 5GM/50ML	Tier 2	PA
FLEBOGAMMA INJ 10/100ML	Tier 2	PA
FLEBOGAMMA INJ 10/200ML	Tier 2	PA
FLEBOGAMMA INJ 20/200ML	Tier 2	PA
FLEBOGAMMA INJ 20/400ML	Tier 2	PA
FLEBOGAMMA INJ DIF 5%	Tier 2	PA
GAMASTAN S/D INJ	Tier 2	B/D
GAMMAGARD INJ 1GM/10ML	Tier 2	PA
GAMMAGARD INJ 2.5GM/25	Tier 2	PA
GAMMAGARD INJ 5GM/50ML	Tier 2	PA
GAMMAGARD INJ 10GM/100	Tier 2	PA
GAMMAGARD INJ 20GM/200	Tier 2	PA
GAMMAGARD INJ 30GM/300	Tier 2	PA
GAMMAGARD SD INJ 5GM HU	Tier 2	PA
GAMMAGARD SD INJ 10GM HU	Tier 2	PA
GAMMAKED INJ 1GM/10ML	Tier 2	PA
GAMMAKED INJ 2.5GM/25	Tier 2	PA
GAMMAKED INJ 5GM/50ML	Tier 2	PA
GAMMAKED INJ 10GM/100	Tier 2	PA
GAMMAKED INJ 20GM/200	Tier 2	PA
GAMMAPLEX INJ 5%	Tier 2	PA
GAMMAPLEX INJ 10%	Tier 2	PA
GAMUNEX-C INJ 1GM/10ML	Tier 2	PA
GAMUNEX-C INJ 2.5GM/25	Tier 2	PA
GAMUNEX-C INJ 5GM/50ML	Tier 2	PA
GAMUNEX-C INJ 10GM/100	Tier 2	PA
GAMUNEX-C INJ 20GM/200	Tier 2	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
GAMUNEX-C INJ 40/400ML	Tier 2	PA
OCTAGAM INJ 1GM	Tier 2	PA
OCTAGAM INJ 2.5GM	Tier 2	PA
OCTAGAM INJ 2GM/20ML	Tier 2	PA
OCTAGAM INJ 5GM	Tier 2	PA
OCTAGAM INJ 5GM/50ML	Tier 2	PA
OCTAGAM INJ 10/100ML	Tier 2	PA
OCTAGAM INJ 10GM	Tier 2	PA
OCTAGAM INJ 20/200ML	Tier 2	PA
OCTAGAM INJ 25GM	Tier 2	PA
OCTAGAM INJ 30/300ML	Tier 2	PA
PANZYGA SOL 1GM/10ML	Tier 2	PA
PANZYGA SOL 2.5/25ML	Tier 2	PA
PANZYGA SOL 5GM/50ML	Tier 2	PA
PANZYGA SOL 10/100ML	Tier 2	PA
PANZYGA SOL 20/200ML	Tier 2	PA
PANZYGA SOL 30/300ML	Tier 2	PA
PRIVIGEN INJ 5 GRAMS	Tier 2	PA
PRIVIGEN INJ 10GRAMS	Tier 2	PA
PRIVIGEN INJ 20GRAMS	Tier 2	PA
PRIVIGEN INJ 40GRAMS	Tier 2	PA
IMMUNOMODULATORS		
ACTIMMUNE INJ 2MU/0.5	Tier 2	LA, PA
ARCALYST INJ 220MG	Tier 2	PA
INTRON A INJ 10MU	Tier 2	B/D
INTRON A INJ 18MU	Tier 2	B/D
INTRON A INJ 25MU	Tier 2	B/D
INTRON A INJ 50MU	Tier 2	B/D
IMMUNOSUPPRESSANTS		
azathioprine tab 50 mg	Tier 1	B/D
BENLYSTA INJ 120MG	Tier 2	PA
BENLYSTA INJ 200MG/ML	Tier 2	PA
BENLYSTA INJ 400MG	Tier 2	PA
cyclosporine cap 25 mg	Tier 1	B/D
cyclosporine cap 100 mg	Tier 1	B/D
cyclosporine iv soln 50 mg/ml	Tier 1	B/D
cyclosporine modified cap 25 mg	Tier 1	B/D
cyclosporine modified cap 50 mg	Tier 1	B/D
cyclosporine modified cap 100 mg	Tier 1	B/D
cyclosporine modified oral soln 100 mg/ml	Tier 1	B/D

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
gengraf cap 25mg	Tier 1	B/D
gengraf cap 100mg	Tier 1	B/D
gengraf sol 100mg/ml	Tier 1	B/D
mycophenolate mofetil cap 250 mg	Tier 1	B/D
mycophenolate mofetil for oral susp 200 mg/ml	Tier 2	B/D
mycophenolate mofetil tab 500 mg	Tier 1	B/D
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)	Tier 1	B/D
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)	Tier 1	B/D
NULOJIX INJ 250MG	Tier 2	B/D
PROGRAF GRA 0.2MG	Tier 2	B/D
PROGRAF GRA 1MG	Tier 2	B/D
RAPAMUNE SOL 1MG/ML	Tier 2	B/D
SANDIMMUNE SOL 100MG/ML	Tier 2	B/D
sirolimus oral soln 1 mg/ml	Tier 2	B/D
sirolimus tab 0.5 mg	Tier 1	B/D
sirolimus tab 1 mg	Tier 1	B/D
sirolimus tab 2 mg	Tier 2	B/D
tacrolimus cap 0.5 mg	Tier 1	B/D
tacrolimus cap 1 mg	Tier 1	B/D
tacrolimus cap 5 mg	Tier 1	B/D
ZORTRESS TAB 0.5MG	Tier 2	B/D
ZORTRESS TAB 0.25MG	Tier 2	B/D
ZORTRESS TAB 0.75MG	Tier 2	B/D
ZORTRESS TAB 1MG	Tier 2	B/D
VACCINES		
ACTHIB INJ	Tier 2	
ADACEL INJ	Tier 2	
BCG VACCINE INJ	Tier 2	
BEXSERO INJ	Tier 2	
BOOSTRIX INJ	Tier 2	
DAPTACEL INJ	Tier 2	
DIP/TET PED INJ 25-5LFU	Tier 2	B/D
ENGERIX-B INJ 10/0.5ML	Tier 2	B/D
ENGERIX-B INJ 20MCG/ML	Tier 2	B/D
GARDASIL 9 INJ	Tier 2	
HAVRIX INJ 720UNIT	Tier 2	
HAVRIX INJ 1440UNIT	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
HIBERIX SOL 10MCG	Tier 2	
IMOVAX RABIE INJ 2.5/ML	Tier 2	B/D
INFANRIX INJ	Tier 2	
IPOL INJ INACTIVE	Tier 2	
IXIARO INJ	Tier 2	
KINRIX INJ	Tier 2	
M-M-R II INJ	Tier 2	
MENACTRA INJ	Tier 2	
MENVEO INJ	Tier 2	
PEDIARIX INJ 0.5ML	Tier 2	
PEDVAX HIB INJ	Tier 2	
PENTACEL INJ	Tier 2	
PROQUAD INJ	Tier 2	
QUADRACEL INJ	Tier 2	
RABAVERT INJ	Tier 2	B/D
RECOMBIVA HB INJ 5MCG/0.5	Tier 2	B/D
RECOMBIVA HB INJ 10MCG/ML	Tier 2	B/D
RECOMBIVA-HB INJ 40MCG/ML	Tier 2	B/D
ROTARIX SUS	Tier 2	
ROTATEQ SOL	Tier 2	
SHINGRIX INJ 50MCG	Tier 2	QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	Tier 2	B/D
TENIVAC INJ 5-2LF	Tier 2	B/D
TRUMENBA INJ	Tier 2	
TWINRIX INJ	Tier 2	
TYPHIM VI INJ	Tier 2	
VAQTA INJ 25/0.5ML	Tier 2	
VAQTA INJ 50UNT/ML	Tier 2	
VARIVAX INJ	Tier 2	
YF-VAX INJ	Tier 2	
ZOSTAVAX INJ	Tier 2	QL (1 vial per lifetime)
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS		
ELECTROLYTES		
gnp pediatri sol electrol	Tier 3	DP
klor-con 8 tab 8meq er	Tier 1	
klor-con 10 tab 10meq er	Tier 1	
MAGNESIUM SU INJ 2GM/50ML	Tier 2	
MAGNESIUM SU INJ 4G/100ML	Tier 2	
MAGNESIUM SU INJ 20/500ML	Tier 2	
MAGNESIUM SU INJ 40G/1000	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
MAGNESIUM SU INJ 80MG/ML	Tier 2	
magnesium sulfate in dextrose 5% iv soln 1 gm/100ml	Tier 2	
magnesium sulfate inj 50%	Tier 2	
magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)	Tier 2	
magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)	Tier 2	
magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)	Tier 2	
magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)	Tier 2	
magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)	Tier 2	
MG SO4/D5W INJ 10MG/ML	Tier 2	
oral electrolyte solution	Tier 3	DP
oralyte sol	Tier 3	DP
oralyte sol freeze	Tier 3	DP
ped elctrlyt sol freezer	Tier 3	DP
ped elctrlyt sol fruit	Tier 3	DP
ped elctrlyt sol grape	Tier 3	DP
ped elctrlyt sol unflavrd	Tier 3	DP
potassium chloride cap er 8 meq	Tier 1	
potassium chloride cap er 10 meq	Tier 1	
potassium chloride microencapsulated crys er tab 10 meq	Tier 1	
potassium chloride microencapsulated crys er tab 15 meq	Tier 2	
potassium chloride microencapsulated crys er tab 20 meq	Tier 1	
potassium chloride oral soln 10% (20 meq/15ml)	Tier 1	
potassium chloride oral soln 20% (40 meq/15ml)	Tier 1	
potassium chloride powder packet 20 meq	Tier 1	
potassium chloride tab er 8 meq (600 mg)	Tier 1	
potassium chloride tab er 10 meq	Tier 1	
potassium chloride tab er 20 meq (1500 mg)	Tier 1	
sodium chloride inj 2.5 meq/ml (14.6%)	Tier 1	
sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
tpn electrol inj	Tier 2	B/D
IV NUTRITION		
amino acid infusion 6%	Tier 1	B/D
AMINOSYN II INJ 10%	Tier 2	B/D
AMINOSYN-PF INJ 7%	Tier 2	B/D
AMINOSYN-PF INJ 10%	Tier 2	B/D
chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)	Tier 3	DP
CLINIMIX INJ 4.25/D5W	Tier 2	B/D
CLINIMIX INJ 4.25/D10	Tier 2	B/D
CLINIMIX INJ 4.25/D25	Tier 2	B/D
CLINIMIX INJ 5%/D15W	Tier 2	B/D
CLINIMIX INJ 5%/D20W	Tier 2	B/D
CLINIMIX INJ 5%/D25W	Tier 2	B/D
CLINOLIPID EMU 20%	Tier 2	B/D
COPPER SULF CRY	Tier 3	DP
cupric chloride inj 0.4 mg/ml	Tier 3	DP
FREAMINE HBC INJ 6.9%	Tier 2	B/D
FREAMINE III INJ 10%	Tier 2	B/D
hepatamine sol 8%	Tier 2	B/D
INTRALIPID INJ 20%	Tier 2	B/D
INTRALIPID INJ 30%	Tier 2	B/D
NEPHRAMINE INJ 5.4%	Tier 2	B/D
NUTRILIPID EMU 20%	Tier 2	B/D
PREMASOL SOL 10%	Tier 2	B/D
PROCALAMINE INJ 3%	Tier 2	B/D
PROSOL INJ 20%	Tier 2	B/D
TRAVASOL INJ 10%	Tier 2	B/D
TROPHAMINE INJ 10%	Tier 2	B/D
zinc chloride inj 1 mg/ml	Tier 3	DP
IV REPLACEMENT SOLUTIONS		
D5W/LYTES INJ #48	Tier 2	
D5W/NACL INJ 0.3%	Tier 2	
D10W/NACL INJ 0.2%	Tier 2	
dextrose 2.5% w/ sodium chloride 0.45%	Tier 1	
dextrose 5% in lactated ringers	Tier 1	
dextrose 5% w/ sodium chloride 0.2%	Tier 1	
dextrose 5% w/ sodium chloride 0.9%	Tier 1	
dextrose 5% w/ sodium chloride 0.33%	Tier 1	
dextrose 5% w/ sodium chloride 0.45%	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
dextrose 5% w/ sodium chloride 0.225%	Tier 1	
dextrose 10% w/ sodium chloride 0.45%	Tier 1	
dextrose inj 5%	Tier 1	
dextrose inj 10%	Tier 1	
dextrose inj 50%	Tier 1	
dextrose inj 70%	Tier 1	
IONOSOL-MB INJ D5W	Tier 2	
ISOLYTE-P INJ /D5W	Tier 2	
ISOLYTE-S INJ	Tier 2	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	Tier 1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	Tier 1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	Tier 1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj	Tier 1	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	Tier 1	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	Tier 1	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	Tier 1	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	Tier 1	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	Tier 1	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	Tier 1	
KCL/D5W/NACL INJ 0.3/0.9%	Tier 2	
KCL/D5W/NACL INJ 0.15/0.2	Tier 2	
lactated ringer's solution	Tier 1	
NORMOSOL -M INJ /D5W	Tier 2	
NORMOSOL -R INJ /D5W	Tier 2	
NORMOSOL-R INJ PH 7.4	Tier 2	
PLASMA-LYTE INJ -148	Tier 2	
PLASMA-LYTE INJ -A	Tier 2	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	Tier 1	
potassium chloride 40 meq/l (0.3%) in dextrose 5% inj	Tier 1	
potassium chloride inj 2 meq/ml	Tier 1	
potassium chloride inj 10 meq/50ml	Tier 1	
potassium chloride inj 10 meq/100ml	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
potassium chloride inj 20 meq/50ml	Tier 1	
potassium chloride inj 20 meq/100ml	Tier 1	
potassium chloride inj 40 meq/100ml	Tier 1	
sodium chloride iv soln 0.9%	Tier 1	
sodium chloride iv soln 0.45%	Tier 1	
sodium chloride iv soln 3%	Tier 1	
sodium chloride iv soln 5%	Tier 1	
MINERALS		
BEELITH TAB	Tier 3	DP
CA PHOS DIHY POW DIBASIC	Tier 3	DP
CALCET CHW BITES	Tier 3	DP
CALCET PETIT TAB 200-250	Tier 3	DP
CALCI-CHEW CHW 1250MG	Tier 3	DP
CALCI-MIX CAP 1250MG	Tier 3	DP
calcitrate tab	Tier 3	DP
calcitrate tab 950mg	Tier 3	DP
calcium 600 chw +d/miner	Tier 3	DP
calcium 600 tab	Tier 3	DP
calcium 600 tab + d	Tier 3	DP
calcium 600 tab +d/mnrls	Tier 3	DP
calcium 600 tab -d	Tier 3	DP
calcium +d tab maximum	Tier 3	DP
CALCIUM CARB POW	Tier 3	DP
CALCIUM CARB POW EX-LIGHT	Tier 3	DP
CALCIUM CARB POW HEAVY	Tier 3	DP
calcium carb-vit d w/ minerals chew tab 600 mg-400 unit	Tier 3	DP
calcium carbonate (antacid) susp 1250 mg/5ml	Tier 3	DP
calcium carbonate tab 1250 mg (500 mg elemental ca)	Tier 3	DP
calcium carbonate tab 1500 mg (600 mg elemental ca)	Tier 3	DP
calcium carbonate-cholecalciferol chew tab 500 mg-100 unit	Tier 3	DP
calcium carbonate-cholecalciferol tab 250 mg-125 unit	Tier 3	DP
calcium carbonate-cholecalciferol tab 500 mg-200 unit	Tier 3	DP
calcium carbonate-cholecalciferol tab 500 mg-400 unit	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
calcium carbonate-cholecalciferol tab 600 mg-200 unit	Tier 3	DP
calcium carbonate-cholecalciferol tab 600 mg-400 unit	Tier 3	DP
calcium carbonate-vitamin d tab 500 mg-200 unit	Tier 3	DP
calcium carbonate-vitamin d tab 500 mg-400 unit	Tier 3	DP
calcium carbonate-vitamin d tab 600 mg-125 unit	Tier 3	DP
calcium chloride inj 10%	Tier 3	DP
calcium citr tab w/vit d3	Tier 3	DP
calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)	Tier 3	DP
CALCIUM GLUC POW	Tier 3	DP
CALCIUM GLUC TAB 500MG	Tier 3	DP
CALCIUM LACT POW PENTAHYD	Tier 3	DP
CALCIUM LACT TAB 648MG	Tier 3	DP
CALCIUM PHOS POW TRIBASIC	Tier 3	DP
calcium plus tab 600 +d	Tier 3	DP
calcium soft chw mlk choc	Tier 3	DP
calcium tab 500/d	Tier 3	DP
calcium tab 600mg	Tier 3	DP
calcium tab vit d	Tier 3	DP
calcium-magnesium-zinc tab 333-133-5 mg	Tier 3	DP
calcium-magnesium-zinc tab 334-134-5 mg	Tier 3	DP
calcium/d3 tab	Tier 3	DP
calcium/d chw 500-400	Tier 3	DP
cit calc/d tab 315-250	Tier 3	DP
gnp ca/mg/zn tab	Tier 3	DP
gnp ca/vit d chw minerals	Tier 3	DP
gnp calcium tab 500/d	Tier 3	DP
gnp calcium tab 600/d	Tier 3	DP
gnp calcium tab cit +d3	Tier 3	DP
gnp magnesiu tab 250mg	Tier 3	DP
gnp zinc tab 50mg	Tier 3	DP
MAG CARBONAT POW HEAVY	Tier 3	DP
mag-g tab 500mg	Tier 3	DP
MAG-TAB SR TAB 84MG	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
MAGDELAY TAB 70MG	Tier 3	DP
MAGN CHLORID POW	Tier 3	DP
MAGNEBIND TAB 200	Tier 3	DP
MAGNEBIND TAB 300	Tier 3	DP
magnesium gluconate tab 500 mg (27 mg elemental mg)	Tier 3	DP
magnesium lactate tab er 84 mg (elemental mg) (7 meq)	Tier 3	DP
magnesium oxide tab 400 mg (240 mg elemental mg)	Tier 3	DP
magnesium oxide tab 400 mg (241.3 mg elemental mg)	Tier 3	DP
magnesium oxide tab 500 mg (mg supplement)	Tier 3	DP
magnesium tab 250 mg	Tier 3	DP
magnesium tab 250mg	Tier 3	DP
MAGONATE LIQ 1000/5ML	Tier 3	DP
magonate tab 500mg	Tier 3	DP
manganese chloride inj 0.1 mg/ml	Tier 3	DP
oysco 500 tab 500mg	Tier 3	DP
oysco 500+d chw	Tier 3	DP
oysco 500+d tab	Tier 3	DP
oyst cal/d tab 500mg	Tier 3	DP
oyst shell/d tab 500mg	Tier 3	DP
oyst-cal d tab 250mg	Tier 3	DP
oyster shell calcium tab 500 mg	Tier 3	DP
oyster shell tab 500mg	Tier 3	DP
PHOS-NAK POW CONCENTR	Tier 3	DP
RISACAL-D TAB	Tier 3	DP
sm ca/mg/zn tab	Tier 3	DP
sm calcium chw	Tier 3	DP
sm calcium/d tab 600-400	Tier 3	DP
SM CORAL CAL TAB 1000MG	Tier 3	DP
sm zinc tab 50mg	Tier 3	DP
SOD ACETATE POW ANHYDR	Tier 3	DP
SOD CHLORIDE GRA	Tier 3	DP
sodium chloride tab 1 gm	Tier 3	DP
VITAMIN D TAB 400UNIT	Tier 3	DP
zinc gluconate tab 50 mg (elemental zn)	Tier 3	DP
zinc sulfate cap 50mg	Tier 3	DP
ZINC SULFATE POW GRANULAR	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ZINC SULFATE POW MONOHYD	Tier 3	DP
zinc sulfate tab 220 mg (50 mg zinc equivalent)	Tier 3	DP
zinc tab 50 mg	Tier 3	DP
MISCELLANEOUS		
ACACIA POW	Tier 3	DP
APPLE FLAVOR LIQ	Tier 3	DP
ASPARTAME POW	Tier 3	DP
AZ CREAM CRE	Tier 3	DP
BANANA LIQ FLAVOR	Tier 3	DP
BENZYL ALC LIQ	Tier 3	DP
BITTERNESS POW NATURAL	Tier 3	DP
BUFFER CREAM POW	Tier 3	DP
BUTTER RUM LIQ FLAVOR	Tier 3	DP
BUTYLPARABEN POW	Tier 3	DP
CARBOGEL GEL 940	Tier 3	DP
CARBOHOL GEL 940	Tier 3	DP
CETYL ALCOHO GRA	Tier 3	DP
CHERRY CON	Tier 3	DP
CHERRY SYP	Tier 3	DP
CHERRY SYP CONCENTR	Tier 3	DP
CHOCOLATE CON FLAVOR	Tier 3	DP
CINNAMON OIL FLAVOR	Tier 3	DP
CLOVE FLAVOR OIL	Tier 3	DP
CO-ENZYME WAF Q10/E	Tier 3	DP
COCOA BUTTER MIS	Tier 3	DP
coenzyme q10 cap 10 mg	Tier 3	DP
coenzyme q10 cap 30 mg	Tier 3	DP
coenzyme q10 cap 30mg	Tier 3	DP
coenzyme q10 cap 50 mg	Tier 3	DP
coenzyme q10 cap 50mg	Tier 3	DP
coenzyme q10 cap 60 mg	Tier 3	DP
coenzyme q10 cap 75 mg	Tier 3	DP
coenzyme q10 cap 100 mg	Tier 3	DP
coenzyme q10 cap 100mg	Tier 3	DP
coenzyme q10 cap 150 mg	Tier 3	DP
COENZYME Q10 CHW 60MG	Tier 3	DP
COENZYME Q10 LIQ 30MG/5ML	Tier 3	DP
COENZYME Q10 TAB 25MG	Tier 3	DP
coenzyme q10 tab 60 mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
COENZYME Q10 TAB 200MG	Tier 3	DP
COLLODION LIQ	Tier 3	DP
COLLODION LIQ FLEXIBLE	Tier 3	DP
COQ-10 CAP 100MG TR	Tier 3	DP
DEXTROSE GRA ANHYDROU	Tier 3	DP
DIABETISWEET POW	Tier 3	DP
DISTILLED LIQ WATER	Tier 3	DP
eql coq10 cap 100mg	Tier 3	DP
ETHYL ALCOHO SOL 100%	Tier 3	DP
FATTYBLEND MIS	Tier 3	DP
FDC BLUE 1 POW	Tier 3	DP
FDC BLUE 1 POW AL LAKE	Tier 3	DP
FDC BLUE 2 POW	Tier 3	DP
FDC GREEN #3 POW	Tier 3	DP
FDC RED 40 POW	Tier 3	DP
FDC RED #3 POW	Tier 3	DP
FDC RED #40 POW AL LAKE	Tier 3	DP
FDC YELLOW 5 POW	Tier 3	DP
FDC YELLOW 5 POW AL LAKE	Tier 3	DP
FDC YELLOW 6 POW	Tier 3	DP
FLAVORX LIQ	Tier 3	DP
FRUCTOSE GRA	Tier 3	DP
gnp co q10 cap 60mg	Tier 3	DP
gnp co q10 cap 100mg	Tier 3	DP
GOWEY TIN TINCTURE	Tier 3	DP
GRAPE LIQ FLAVOR	Tier 3	DP
GRAPE SYP	Tier 3	DP
h2q cap 100mg	Tier 3	DP
hm coq10 cap 50mg	Tier 3	DP
hm coq10 cap 100mg	Tier 3	DP
HRT BASE CRE	Tier 3	DP
HYDROPHILIC OIN	Tier 3	DP
HYDROUS CRE EMULSIFI	Tier 3	DP
JELENE OIN	Tier 3	DP
KARAYA GUM	Tier 3	DP
L-ARGININE POW	Tier 3	DP
L-CYSTINE POW	Tier 3	DP
L-GLUTAMINE POW	Tier 3	DP
L-GLUTATHION CRY	Tier 3	DP
L-ISOLEUCINE POW	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
L-METHIONINE POW	Tier 3	DP
L-TYROSINE POW	Tier 3	DP
L-VALINE POW	Tier 3	DP
LACTOSE POW	Tier 3	DP
LACTOSE POW ANHYDROU	Tier 3	DP
LACTOSE POW HYDROUS	Tier 3	DP
LACTOSE POW MONOHYDR	Tier 3	DP
LECITHIN GRA	Tier 3	DP
LEMON FLAVOR OIL	Tier 3	DP
LIP BALM OIN BASE	Tier 3	DP
LIP BALM OIN NATURAL	Tier 3	DP
LIPOBASE CRE	Tier 3	DP
LIPOIL OIL	Tier 3	DP
LIPOVAN BASE CRE	Tier 3	DP
LOLLIBASE POW	Tier 3	DP
LOZIBASE MIS	Tier 3	DP
METHYLCELLUL GEL 1%	Tier 3	DP
METHYLCELLUL GEL 2%	Tier 3	DP
METHYLCELLUL GEL 3%	Tier 3	DP
METHYLCELLUL POW 1500CPS	Tier 3	DP
METHYLCELLUL POW 4000CPS	Tier 3	DP
METHYLPARABE POW	Tier 3	DP
MICRODERM CRE BASE	Tier 3	DP
MICROSOME CRE BASE	Tier 3	DP
NICE DISTILL LIQ WATER	Tier 3	DP
ORA-BLEND SF SUS	Tier 3	DP
ORA-BLEND SUS	Tier 3	DP
ORA-HESIVE PST BASE	Tier 3	DP
ORA-PLUS LIQ	Tier 3	DP
ORA-SWEET SF SYP	Tier 3	DP
ORA-SWEET SYP	Tier 3	DP
ORANGE CONC LIQ	Tier 3	DP
PCCA BASE CRE 7542	Tier 3	DP
PCCA MBK MIS FAT ACID	Tier 3	DP
PEG 300 LIQ	Tier 3	DP
PEG 1000 LIQ	Tier 3	DP
PEG 3350 POW	Tier 3	DP
PEG BLEND OIN	Tier 3	DP
PEPPERMINT OIL FLAVOR	Tier 3	DP
PFCB CRE	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PHARMABASE CRE ANTIOXID	Tier 3	DP
PHARMABASE CRE COSMETIC	Tier 3	DP
PHARMABASE CRE LIGHT	Tier 3	DP
PHARMABASE CRE VAGINAL	Tier 3	DP
PHYTOBASE CRE	Tier 3	DP
PLO20 GEL FLOWABLE	Tier 3	DP
PLO LECITHIN GEL BASE	Tier 3	DP
PLO ULTRAMAX GEL	Tier 3	DP
PNA-HRT BASE CRE	Tier 3	DP
POLOX GEL 20%	Tier 3	DP
POLOX GEL 30%	Tier 3	DP
POLOXAMER POW 407	Tier 3	DP
POLY GLYCOL LIQ 1450	Tier 3	DP
POLY GLYCOL POW 8000	Tier 3	DP
POLYETHYLENE LIQ GLY 400	Tier 3	DP
POLYOXYL 40 POW STEARATE	Tier 3	DP
POT SORBATE CRY	Tier 3	DP
prasterone (dhea) cap 25 mg	Tier 3	DP
PROPYLENE GL LIQ	Tier 3	DP
PROPYLENE LIQ GLYCOL	Tier 3	DP
PROPYPARABEN POW	Tier 3	DP
Q-DERM CRE	Tier 3	DP
q-sorb cap 30mg	Tier 3	DP
q-sorb cap 75mg	Tier 3	DP
q-sorb cap 150mg	Tier 3	DP
q-sorb co-q cap 100mg	Tier 3	DP
RASPBERRY LIQ FLAVOR	Tier 3	DP
RDT BASE POW	Tier 3	DP
SACCHARIN POW	Tier 3	DP
SACCHARIN POW SODIUM	Tier 3	DP
SALTSTABLE CRE	Tier 3	DP
SHEA BUTTER MIS	Tier 3	DP
SIMPLE SYP	Tier 3	DP
sm coq-10 cap 50mg	Tier 3	DP
SOD BENZOATE POW	Tier 3	DP
SOD LAURYL POW SULFATE	Tier 3	DP
SOD SACCHARI GRA	Tier 3	DP
SORBIC ACID POW	Tier 3	DP
SORBITOL SOL 70%	Tier 3	DP
STRAWBERRY LIQ FLAVOR	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SUPPOSIBLEND MIS	Tier 3	DP
SUSPENDIT GEL	Tier 3	DP
SYRSPEND SF SUS ALKA	Tier 3	DP
TANGERINE POW FLAVOR	Tier 3	DP
THREONINE POW	Tier 3	DP
TROCHIBASE MIS	Tier 3	DP
TROCHIBASE MIS CLASSIC	Tier 3	DP
TROCHIBASE S MIS	Tier 3	DP
TROLAMINE LIQ	Tier 3	DP
TUTTI FRUTTI CON	Tier 3	DP
U-BASE CRE	Tier 3	DP
UNIBASE CRE	Tier 3	DP
V-MAX CRE	Tier 3	DP
V-R FATIGUE TAB COMPLEX	Tier 3	DP
VANIBASE CRE	Tier 3	DP
VERSATILE CRE BASE	Tier 3	DP
VERSIGEL CRE	Tier 3	DP
WATERMELON LIQ FLAVOR	Tier 3	DP
white petrolatum gel	Tier 3	DP
WITEPSOL H15 MIS	Tier 3	DP
XANTHAN GUM POW	Tier 3	DP
VITAMINS		
ADULT 50+ CAP OCUVITE	Tier 3	DP
animal shape chw	Tier 3	DP
animal shape chw complete	Tier 3	DP
ANIMAL SHAPE CHW IRON	Tier 3	DP
ANTIOXIDANT CAP	Tier 3	DP
antioxidant tab	Tier 3	DP
antioxidant tab vitamins	Tier 3	DP
APATATE FORT LIQ	Tier 3	DP
APATATE LIQ	Tier 3	DP
AQUADEKS CHW	Tier 3	DP
aquadeks dro	Tier 3	DP
AQUASOL A INJ 50000/ML	Tier 3	DP
AQUASOL E DRO 15/0.3ML	Tier 3	DP
aqueous e dro 15/0.3ml	Tier 3	DP
ascorbic acid cap er 500 mg	Tier 3	DP
ascorbic acid chew tab 250 mg	Tier 3	DP
ascorbic acid chew tab 500 mg	Tier 3	DP
ascorbic acid tab 250 mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ascorbic acid tab 500 mg	Tier 3	DP
ascorbic acid tab 1000 mg	Tier 3	DP
B-12 DOTS TAB 500MCG	Tier 3	DP
b-complex vitamin cap	Tier 3	DP
b-complex vitamin tab	Tier 3	DP
b-complex w/ c & calcium tab	Tier 3	DP
b-complex w/ c tab	Tier 3	DP
balanc b-50 tab	Tier 3	DP
balanc b-100 tab 100mg	Tier 3	DP
bee zee tab	Tier 3	DP
biotin cap 5 mg	Tier 3	DP
biotin tab 5 mg	Tier 3	DP
biotin tab 300 mcg	Tier 3	DP
brewers yeast tab	Tier 3	DP
c 250 tab	Tier 3	DP
c-500 chw 500mg	Tier 3	DP
c-1000/rh tab 1000mg	Tier 3	DP
c/rosehip tr tab 1000mg	Tier 3	DP
ca citrate + tab	Tier 3	DP
cal-mag-zinc tab +d3	Tier 3	DP
calciferol dro 8000/ml	Tier 3	DP
calcitriol cap 0.5 mcg	Tier 1	B/D
calcitriol cap 0.25 mcg	Tier 1	B/D
calcitriol inj 1 mcg/ml	Tier 1	B/D
calcitriol oral soln 1 mcg/ml	Tier 1	B/D
centamin liq	Tier 3	DP
centavite liq	Tier 3	DP
century tab	Tier 3	DP
century tab mature	Tier 3	DP
cerovite jr chw	Tier 3	DP
cerovite tab advanced	Tier 3	DP
cerovite tab senior	Tier 3	DP
CERTAVITE TAB SENIOR	Tier 3	DP
certavite/ tab antioxid	Tier 3	DP
chewabl vite chw childrns	Tier 3	DP
chewable c chw 500mg	Tier 3	DP
child chew chw iron	Tier 3	DP
child chew chw vitamins	Tier 3	DP
child chew/ chw extra c	Tier 3	DP
childrens chw /iron	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CHILDRENS CHW COMPLETE	Tier 3	DP
cholecalciferol cap 1.25 mg (50000 unit)	Tier 3	DP
cholecalciferol cap 10 mcg (400 unit)	Tier 3	DP
cholecalciferol cap 25 mcg (1000 unit)	Tier 3	DP
cholecalciferol cap 50 mcg (2000 unit)	Tier 3	DP
cholecalciferol cap 125 mcg (5000 unit)	Tier 3	DP
cholecalciferol cap 250 mcg (10000 unit)	Tier 3	DP
cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)	Tier 3	DP
cholecalciferol tab 10 mcg (400 unit)	Tier 3	DP
cholecalciferol tab 25 mcg (1000 unit)	Tier 3	DP
cholecalciferol tab 50 mcg (2000 unit)	Tier 3	DP
CL PRENATAL TAB 28-0.8MG	Tier 3	DP
cod liver cap	Tier 3	DP
cod liver oil cap	Tier 3	DP
COD LIVER OIL OIL	Tier 3	DP
compete tab	Tier 3	DP
complete tab	Tier 3	DP
complete tab senior	Tier 3	DP
cyanocobalamin inj 1000 mcg/ml	Tier 3	DP
cyanocobalamin tab 100 mcg	Tier 3	DP
cyanocobalamin tab 250 mcg	Tier 3	DP
cyanocobalamin tab 500 mcg	Tier 3	DP
cyanocobalamin tab 1000 mcg	Tier 3	DP
cyanocobalamin tab er 1000 mcg	Tier 3	DP
cyanocobalamin tab er 2000 mcg	Tier 3	DP
d3 cap 1000unit	Tier 3	DP
d3 super str cap 2000unit	Tier 3	DP
d 400 tab 400unit	Tier 3	DP
daily multi tab	Tier 3	DP
daily vit tab	Tier 3	DP
daily-vite tab	Tier 3	DP
daily-vite/ tab iron	Tier 3	DP
DIALYVIT 800 TAB ZINC 15	Tier 3	DP
dialyvite d cap 5000unit	Tier 3	DP
dialyvite tab 800	Tier 3	DP
dialyvite tab 800/d	Tier 3	DP
DIALYVITE TAB 800/ZINC	Tier 3	DP
e-400 cap 400unit	Tier 3	DP
ecee plus tab	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ELDERTONIC LIQ	Tier 3	DP
ergocalciferol cap 1.25 mg (50000 unit)	Tier 3	DP
ergocalciferol soln 200 mcg/ml (8000 unit/ml)	Tier 3	DP
essentl one tab daily	Tier 3	DP
ester-c tab 500mg	Tier 3	DP
EZFE FORTE CAP	Tier 3	DP
FOLGARD TAB	Tier 3	DP
folic acid inj 5 mg/ml	Tier 3	DP
folic acid tab 1 mg	Tier 3	DP
folic acid tab 400 mcg	Tier 3	DP
folic acid tab 400mcg	Tier 3	DP
folic acid tab 800 mcg	Tier 3	DP
FOSFREE TAB	Tier 3	DP
geriaton liq	Tier 3	DP
GERIATRIC LIQ VITAMIN	Tier 3	DP
gnp b-50 tab balanced	Tier 3	DP
gnp b-100 tab	Tier 3	DP
gnp century tab	Tier 3	DP
gnp century tab cardio	Tier 3	DP
GNP CENTURY TAB ENERGY	Tier 3	DP
gnp century tab mature	Tier 3	DP
gnp century tab senior	Tier 3	DP
gnp century tab ultimate	Tier 3	DP
gnp healthy tab eyes	Tier 3	DP
gnp little chw ones	Tier 3	DP
gnp niacin tab 250mg tr	Tier 3	DP
gnp one dail tab maximum	Tier 3	DP
gnp opti-vit tab	Tier 3	DP
GNP PRENATAL TAB 28-0.8MG	Tier 3	DP
gnp vit b1 tab 100mg	Tier 3	DP
gnp vit b-6 tab 100mg	Tier 3	DP
gnp vit b-12 tab 500mcg	Tier 3	DP
gnp vit b-12 tab 1000 cr	Tier 3	DP
gnp vit c chw 500mg	Tier 3	DP
gnp vit c loz 60mg	Tier 3	DP
gnp vit c tab 250mg	Tier 3	DP
gnp vit c tab 1000mg	Tier 3	DP
gnp vit d tab 1000unit	Tier 3	DP
gnp vit e cap 200unit	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
gnp vit e cap 400unit	Tier 3	DP
gnp vit e cap 1000unit	Tier 3	DP
gnp zoochews chw gummies	Tier 3	DP
healthy eyes cap supervis	Tier 3	DP
healthy eyes tab	Tier 3	DP
hm niacin tab 250mg	Tier 3	DP
hm vit b1 tab 100mg	Tier 3	DP
hm vitamin e cap 200unit	Tier 3	DP
hm vitamin e cap 1000unit	Tier 3	DP
hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	Tier 3	DP
i-vite prote tab	Tier 3	DP
i-vite tab	Tier 3	DP
ICAPS AREDS TAB FORMULA	Tier 3	DP
icaps cap	Tier 3	DP
icaps lutein cap /omega-3	Tier 3	DP
ICAPS LUTEIN TAB ZEAXANTH	Tier 3	DP
icaps mv tab	Tier 3	DP
ICAPS PLUS TAB	Tier 3	DP
INFUVITE INJ	Tier 3	DP
INFUVITE INJ ADULT	Tier 3	DP
INFUVITE INJ PEDIATRI	Tier 3	DP
M-NATAL PLUS TAB	Tier 2	
M.V.I PEDIAT INJ	Tier 3	DP
M.V.I. ADULT INJ	Tier 3	DP
maximum d3 cap 325mcg	Tier 3	DP
mega multi tab men	Tier 3	DP
mega multi tab women	Tier 3	DP
MEGA MULTIVI TAB MEN	Tier 3	DP
MEGA MULTIVI TAB WOMEN	Tier 3	DP
MEPHYTON TAB 5MG	Tier 3	DP
mult vitamin tab essent	Tier 3	DP
mult vitamin tab mens	Tier 3	DP
mult vitamin tab womens	Tier 3	DP
multi-delyn liq	Tier 3	DP
MULTI-DELYN LIQ /IRON	Tier 3	DP
multi-vitamn tab	Tier 3	DP
multilex tab	Tier 3	DP
multilex-t&m tab	Tier 3	DP
multiple vitamins w/ minerals tab	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nail-ex tab 2.5mg	Tier 3	DP
NASCOBAL SPR 500MCG	Tier 3	DP
NEPHRO-VITE TAB	Tier 3	DP
NEPHRONEX LIQ 0.9/5ML	Tier 3	DP
niacin cap 500mg	Tier 3	DP
niacin cap er 250 mg	Tier 3	DP
niacin cap er 500 mg	Tier 3	DP
NIACIN POW	Tier 3	DP
niacin tab 100 mg	Tier 3	DP
niacin tab 500 mg	Tier 3	DP
niacin tab er 500 mg	Tier 3	DP
niacin tab er 750 mg	Tier 3	DP
NIACIN TR TAB 1000MG	Tier 3	DP
NIACINAMIDE POW	Tier 3	DP
niacinamide tab 500 mg	Tier 3	DP
nutr-e-sol liq 400/15ml	Tier 3	DP
OCUVITE CAP ADULT	Tier 3	DP
ocuvite tab lutein	Tier 3	DP
ocuvite xtra tab	Tier 3	DP
once daily tab	Tier 3	DP
once daily tab iron	Tier 3	DP
ONCOVITE TAB	Tier 3	DP
one daily tab	Tier 3	DP
one daily tab maximum	Tier 3	DP
one daily tab men 50+	Tier 3	DP
one daily tab mens	Tier 3	DP
one daily tab mens 50+	Tier 3	DP
one daily tab pls iron	Tier 3	DP
one daily tab wom 50+	Tier 3	DP
one daily tab womens	Tier 3	DP
paricalcitol cap 1 mcg	Tier 1	B/D
paricalcitol cap 2 mcg	Tier 1	B/D
paricalcitol cap 4 mcg	Tier 1	B/D
phytonadione inj 1 mg/0.5ml (2 mg/ml)	Tier 3	DP
phytonadione inj 10 mg/ml	Tier 3	DP
PNV FOLIC AC TAB + IRON	Tier 2	
poly vitamin chw	Tier 3	DP
POLY-VI-SOL DRO /IRON	Tier 3	DP
polyvitamin chw /iron	Tier 3	DP
PRENATAL PLUS	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PRENATAL TAB	Tier 3	DP
PRENATAL TAB 27-0.8MG	Tier 3	DP
PRENATAL TAB 27-1MG	Tier 2	
PRENATAL TAB 28-0.8MG	Tier 3	DP
PRENATAL TAB LOW IRON	Tier 3	DP
PRENATAL TAB PLUS	Tier 2	
PRENATAL VIT TAB LOW IRON	Tier 2	
PRESERVISION CAP AREDS	Tier 3	DP
PRESERVISION CAP AREDS 2	Tier 3	DP
PRESERVISION CAP LUTEIN	Tier 3	DP
PRESERVISION TAB AREDS	Tier 3	DP
PROFE FORTE CAP 155-1MG	Tier 3	DP
prosight tab	Tier 3	DP
pyridoxine hcl inj 100 mg/ml	Tier 3	DP
pyridoxine hcl tab 25 mg	Tier 3	DP
pyridoxine hcl tab 50 mg	Tier 3	DP
pyridoxine hcl tab 100 mg	Tier 3	DP
qc therin-m tab	Tier 3	DP
RAYALDEE CAP 30MCG	Tier 2	
rena-vite tab	Tier 3	DP
sentry tab	Tier 3	DP
sentry tab senior	Tier 3	DP
slo-niacin tab 250mg cr	Tier 3	DP
SLO-NIACIN TAB 500MG CR	Tier 3	DP
SLO-NIACIN TAB 750MG CR	Tier 3	DP
sm animal chw shapes	Tier 3	DP
sm balanced tab b-50	Tier 3	DP
sm balanced tab b-100	Tier 3	DP
sm complete tab	Tier 3	DP
sm complete tab adv form	Tier 3	DP
sm complete tab senior	Tier 3	DP
sm folic acd tab 400mcg	Tier 3	DP
sm multiple tab vit/iron	Tier 3	DP
sm multiple tab vitamins	Tier 3	DP
sm opti-vita tab	Tier 3	DP
SM PRENATAL TAB VITAMINS	Tier 3	DP
sm vit b-6 tab 100mg	Tier 3	DP
sm vit b-12 tab 100mcg	Tier 3	DP
sm vit b-12 tab 500mcg	Tier 3	DP
sm vit b-12 tab 1000 tr	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
sm vit c/rh tab 1000mg	Tier 3	DP
sm vitamin c chw 500mg	Tier 3	DP
sm vitamin c tab 250mg	Tier 3	DP
sm vitamin c tab 1000mg	Tier 3	DP
sm vitamin e cap 200unit	Tier 3	DP
sm vitamin e cap 400unit	Tier 3	DP
sm vitamin e cap 1000unit	Tier 3	DP
stress form/ tab zinc	Tier 3	DP
stress formu tab	Tier 3	DP
stress formu tab w/iron	Tier 3	DP
STUART ONE CAP	Tier 3	DP
super b comp tab vit c	Tier 3	DP
super liq nu-thera	Tier 3	DP
SUPER POW NU-THERA	Tier 3	DP
super tab nu-thera	Tier 3	DP
super vikaps tab	Tier 3	DP
superplex-t tab	Tier 3	DP
tab-a-vite tab	Tier 3	DP
tab-a-vite tab /iron	Tier 3	DP
tab-a-vite tab beta car	Tier 3	DP
tab-a-vite tab maximum	Tier 3	DP
THERA M PLUS TAB	Tier 3	DP
thera tab	Tier 3	DP
THERA TAB	Tier 3	DP
thera-m tab	Tier 3	DP
THERA-M TAB	Tier 3	DP
THERAPEUTIC SOL	Tier 3	DP
therapeutic- tab m	Tier 3	DP
therems tab	Tier 3	DP
THEREMS-H TAB	Tier 3	DP
THEREMS-M TAB	Tier 3	DP
thiamine hcl inj 100 mg/ml	Tier 3	DP
THIAMINE HCL POW	Tier 3	DP
thiamine hcl tab 50 mg	Tier 3	DP
thiamine hcl tab 100 mg	Tier 3	DP
total b/c tab	Tier 3	DP
TRICARE TAB PRENATAL	Tier 2	
UNICOMPLEX-M TAB	Tier 3	DP
vit c & e cap combo	Tier 3	DP
vita-bee/c tab	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
vitamin a cap 8000unit	Tier 3	DP
vitamin a cap 10000 unit	Tier 3	DP
vitamin b12 tab 1000mcg	Tier 3	DP
vitamin c tab 500mg	Tier 3	DP
vitamin c tab 500mg tr	Tier 3	DP
vitamin d3 dro 400unit	Tier 3	DP
vitamin d3 tab 1000unit	Tier 3	DP
vitamin d3 tab 50000unt	Tier 3	DP
vitamin d tab 1000unit	Tier 3	DP
vitamin d-3 tab 5000unit	Tier 3	DP
vitamin e cap 100 unit	Tier 3	DP
vitamin e cap 200 unit	Tier 3	DP
vitamin e cap 400 unit	Tier 3	DP
vitamin e cap 1000 unit	Tier 3	DP
vite/iron chw children	Tier 3	DP
womens one tab daily	Tier 3	DP
zoo friends chw	Tier 3	DP
ZOO FRIENDS CHW COMPLETE	Tier 3	DP
zoo friends chw extra c	Tier 3	DP
zoo friends chw gummies	Tier 3	DP
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS		
ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION		
bacitracin-polymyxin-neomycin-hc ophth oint 1%	Tier 1	
BLEPHAMIDE OIN S.O.P.	Tier 2	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	Tier 1	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	Tier 1	
neomycin-polymyxin-hc ophth susp	Tier 1	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	Tier 1	
TOBRADEX OIN 0.3-0.1%	Tier 2	
TOBRADEX ST SUS 0.3-0.05	Tier 2	
tobramycin-dexamethasone ophth susp 0.3-0.1%	Tier 1	
ZYLET SUS 0.5-0.3%	Tier 2	
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
AZASITE SOL 1%	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
bacitracin ophth oint 500 unit/gm	Tier 1	
bacitracin-polymyxin b ophth oint	Tier 1	
BESIVANCE SUS 0.6%	Tier 2	
CILOXAN OIN 0.3% OP	Tier 2	
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	Tier 1	
erythromycin ophth oint 5 mg/gm	Tier 1	
gatifloxacin ophth soln 0.5%	Tier 1	
gentak oin 0.3% op	Tier 1	
gentamicin sulfate ophth soln 0.3%	Tier 1	
MOXEZA SOL 0.5%	Tier 2	
moxifloxacin hcl ophth soln 0.5% (base equiv)	Tier 1	
NATACYN SUS 5% OP	Tier 2	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	Tier 1	
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	Tier 1	
ofloxacin ophth soln 0.3%	Tier 1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	Tier 1	
sulfacetamide sodium ophth oint 10%	Tier 1	
sulfacetamide sodium ophth soln 10%	Tier 1	
tobramycin ophth soln 0.3%	Tier 1	
trifluridine ophth soln 1%	Tier 1	
ZIRGAN GEL 0.15%	Tier 2	
ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION		
ALREX SUS 0.2%	Tier 2	
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	Tier 1	
BROMSITE DRO 0.075%	Tier 2	
dexamethasone sodium phosphate ophth soln 0.1%	Tier 1	
diclofenac sodium ophth soln 0.1%	Tier 1	
DUREZOL EMU 0.05%	Tier 2	
fluorometholone ophth susp 0.1%	Tier 1	
flurbiprofen sodium ophth soln 0.03%	Tier 1	
ILEVRO DRO 0.3% OP	Tier 2	
ketorolac tromethamine ophth soln 0.4%	Tier 1	
ketorolac tromethamine ophth soln 0.5%	Tier 1	
LOTEMAX GEL 0.5%	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LOTEMAX OIN 0.5%	Tier 2	
LOTEMAX SUS 0.5%	Tier 2	
loteprednol etabonate ophth susp 0.5%	Tier 1	
PRED SOD PHO SOL 1% OP	Tier 2	
prednisolone acetate ophth susp 1%	Tier 1	
PROLENSA SOL 0.07%	Tier 2	
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES		
allergy eye dro	Tier 3	DP
allergy eye dro op	Tier 3	DP
azelastine hcl ophth soln 0.05%	Tier 1	
BEPREVE DRO 1.5%	Tier 2	
cromolyn sodium ophth soln 4%	Tier 1	
eye allergy sol relief	Tier 3	DP
LASTACAFT SOL 0.25%	Tier 2	
NAPHCON-A SOL OP	Tier 3	DP
olopatadine hcl ophth soln 0.2% (base equivalent)	Tier 1	
OPCON-A SOL OP	Tier 3	DP
PAZEO DRO 0.7%	Tier 2	
visine-a sol op	Tier 3	DP
ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA		
ALPHAGAN P SOL 0.1%	Tier 2	
AZOPT SUS 1% OP	Tier 2	
betaxolol hcl ophth soln 0.5%	Tier 1	
BETOPTIC-S SUS 0.25% OP	Tier 2	
brimonidine tartrate ophth soln 0.2%	Tier 1	
brimonidine tartrate ophth soln 0.15%	Tier 1	
carteolol hcl ophth soln 1%	Tier 1	
COMBIGAN SOL 0.2/0.5%	Tier 2	
dorzolamide hcl ophth soln 2%	Tier 1	
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml	Tier 1	
latanoprost ophth soln 0.005%	Tier 1	
levobunolol hcl ophth soln 0.5%	Tier 1	
LUMIGAN SOL 0.01%	Tier 2	
PHOSPHOLINE SOL 0.125%OP	Tier 2	
pilocarpine hcl ophth soln 1%	Tier 1	
pilocarpine hcl ophth soln 2%	Tier 1	
pilocarpine hcl ophth soln 4%	Tier 1	
RHOPRESSA SOL 0.02%	Tier 2	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SIMBRINZA SUS 1-0.2%	Tier 2	
timolol maleate ophth gel forming soln 0.5%	Tier 1	
timolol maleate ophth gel forming soln 0.25%	Tier 1	
timolol maleate ophth soln 0.5%	Tier 1	
timolol maleate ophth soln 0.5% (once-daily)	Tier 1	
timolol maleate ophth soln 0.25%	Tier 1	
TRAVATAN Z DRO 0.004%	Tier 2	
MISCELLANEOUS		
ATROPINE SUL SOL 1% OP	Tier 2	
CYSTARAN SOL 0.44%	Tier 2	LA, PA
proparacaine hcl ophth soln 0.5%	Tier 1	
RESTASIS EMU 0.05%	Tier 2	QL (60 single use vials / 30 days)
RESTASIS MUL EMU 0.05%	Tier 2	QL (1 bottle / 30 days)
RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD		
ANORO ELLIPT AER 62.5-25	Tier 2	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	Tier 2	QL (1 inhaler / 30 days)
COMBIVENT AER 20-100	Tier 2	QL (2 inhalers / 30 days)
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	Tier 1	B/D
TRELEGY AER ELLIPTA	Tier 2	QL (60 blisters / 30 days)
ANTICHOLINERGICS - DRUGS TO TREAT COPD		
ATROVENT HFA AER 17MCG	Tier 2	QL (2 inhalers / 30 days)
INCRUSE ELPT INH 62.5MCG	Tier 2	QL (30 blisters / 30 days)
ipratropium bromide inhal soln 0.02%	Tier 1	B/D
ipratropium bromide nasal soln 0.03% (21 mcg/spray)	Tier 1	
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	Tier 1	
ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES		
all day allg chw 10mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
all day allg sol 1mg/ml	Tier 3	DP
all day allg sol 5mg/5ml	Tier 3	DP
all day allg tab 10mg	Tier 3	DP
aller-chlor tab 4mg	Tier 3	DP
aller-ease tab 60mg	Tier 3	DP
aller-ease tab 180mg	Tier 3	DP
aller-tec tab 10mg	Tier 3	DP
allerclear tab 10mg	Tier 3	DP
allergy cap 25mg	Tier 3	DP
allergy chld liq 12.5/5ml	Tier 3	DP
allergy comp sol 1mg/ml	Tier 3	DP
allergy liq 12.5/5ml	Tier 3	DP
allergy med tab 25mg	Tier 3	DP
allergy relf cap 25mg	Tier 3	DP
allergy relf liq 12.5/5ml	Tier 3	DP
allergy relf tab 1.34mg	Tier 3	DP
allergy relf tab 10mg	Tier 3	DP
allergy relf tab 25mg	Tier 3	DP
allergy tab 4mg	Tier 3	DP
allergy tab 10mg	Tier 3	DP
allergy tab 25mg	Tier 3	DP
allergy-time tab 4mg	Tier 3	DP
azelastine hcl nasal spray 0.1% (137 mcg/spray)	Tier 1	
azelastine hcl nasal spray 0.15% (205.5 mcg/spray)	Tier 1	
banophen cap 25mg	Tier 3	DP
banophen cap 50mg	Tier 3	DP
banophen liq 12.5/5ml	Tier 3	DP
banophen tab 25mg	Tier 3	DP
cetirizine hcl chew tab 5 mg	Tier 3	DP
cetirizine hcl chew tab 10 mg	Tier 3	DP
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	Tier 1	
cetirizine hcl tab 5 mg	Tier 3	DP
cetirizine hcl tab 10 mg	Tier 3	DP
cetirizine sol 1mg/ml	Tier 3	DP
cetirizine sol 5mg/5ml	Tier 3	DP
chld allergy liq 12.5/5ml	Tier 3	DP
chlor-phenir tab 4mg	Tier 3	DP
comp allergy cap 25mg	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
cyproheptadine hcl syrup 2 mg/5ml	Tier 2	PA; PA if 70 years and older
cyproheptadine hcl tab 4 mg	Tier 2	PA; PA if 70 years and older
dayhist alrg tab 12 hour	Tier 3	DP
diphenhist cap 25mg	Tier 3	DP
diphenhist liq 12.5/5ml	Tier 3	DP
diphenhist tab 25mg	Tier 3	DP
diphenhydramine hcl cap 25 mg	Tier 3	DP
diphenhydramine hcl cap 50 mg	Tier 3	DP
diphenhydramine hcl inj 50 mg/ml	Tier 1	
diphenhydramine hcl tab 25 mg	Tier 3	DP
ed chlorped syp jr	Tier 3	DP
fexofenadine hcl tab 60 mg	Tier 3	DP
fexofenadine hcl tab 180 mg	Tier 3	DP
fexofenadine tab 60mg	Tier 3	DP
fexofenadine tab 180mg	Tier 3	DP
gnp all day tab allergy	Tier 3	DP
gnp allergy cap 25mg	Tier 3	DP
gnp allergy tab 4mg	Tier 3	DP
gnp allergy tab 25mg	Tier 3	DP
gnp allergy tab 180mg	Tier 3	DP
gnp dayhist tab 1.34mg	Tier 3	DP
hm allergy tab 4mg	Tier 3	DP
hm allergy tab 25mg	Tier 3	DP
hydroxyzine hcl im soln 25 mg/ml	Tier 2	PA; PA if 70 years and older
hydroxyzine hcl im soln 50 mg/ml	Tier 2	PA; PA if 70 years and older
hydroxyzine hcl syrup 10 mg/5ml	Tier 2	PA; PA if 70 years and older
hydroxyzine hcl tab 10 mg	Tier 2	PA; PA if 70 years and older
hydroxyzine hcl tab 25 mg	Tier 2	PA; PA if 70 years and older
hydroxyzine hcl tab 50 mg	Tier 2	PA; PA if 70 years and older
hydroxyzine pamoate cap 25 mg	Tier 2	PA; PA if 70 years and older
hydroxyzine pamoate cap 50 mg	Tier 2	PA; PA if 70 years and older

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	Tier 1	
levocetirizine dihydrochloride tab 5 mg	Tier 1	
loratadine sol 5mg/5ml	Tier 3	DP
loratadine syp 5mg/5ml	Tier 3	DP
loratadine tab 10 mg	Tier 3	DP
loratadine tab 10mg	Tier 3	DP
medi-phedryl cap 25mg	Tier 3	DP
mucinex allr tab 180mg	Tier 3	DP
pharbechlor tab 4mg	Tier 3	DP
pharbedryl cap 25mg	Tier 3	DP
pharbedryl cap 50mg	Tier 3	DP
qc allergy tab 10mg	Tier 3	DP
sb allergy tab 10mg	Tier 3	DP
sb allergy tab 25mg med	Tier 3	DP
siladryl alr liq 12.5/5ml	Tier 3	DP
sm all day tab allergy	Tier 3	DP
sm allergy tab 4mg	Tier 3	DP
sm allergy tab 25mg rlf	Tier 3	DP
sm loratadin tab 10mg	Tier 3	DP
BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD		
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	Tier 1	QL (2 inhalers / 30 days); (generic of Proair HFA)
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	Tier 1	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
albuterol sulfate soln nebu 0.5% (5 mg/ml)	Tier 1	B/D
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	Tier 1	B/D
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	Tier 1	B/D
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	Tier 1	B/D
albuterol sulfate syrup 2 mg/5ml	Tier 1	
albuterol sulfate tab 2 mg	Tier 1	
albuterol sulfate tab 4 mg	Tier 1	
albuterol sulfate tab er 12hr 4 mg	Tier 1	
albuterol sulfate tab er 12hr 8 mg	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)	Tier 1	B/D
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)	Tier 1	B/D
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)	Tier 1	B/D
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	Tier 1	B/D
levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	Tier 1	QL (2 inhalers / 30 days)
SEREVENT DIS AER 50MCG	Tier 2	QL (60 inhalations / 30 days)
terbutaline sulfate tab 2.5 mg	Tier 1	
terbutaline sulfate tab 5 mg	Tier 1	
VENTOLIN HFA AER	Tier 2	QL (2 inhalers / 30 days)
COUGH AND COLD		
AERCHMBR PLS MIS FLOW-VU	Tier 3	DP
AERCHMBR PLS MIS LRG MASK	Tier 3	DP
AERCHMBR PLS MIS MED MASK	Tier 3	DP
AERCHMBR PLS MIS SM MASK	Tier 3	DP
AERCHMBR Z- MIS STAT PLS	Tier 3	DP
AEROCHAMBER MIS CHAMBER	Tier 3	DP
AEROCHAMBER MIS FLOSIGNA	Tier 3	DP
AEROCHAMBER MIS MV	Tier 3	DP
AEROCHAMBER MIS PLUS	Tier 3	DP
AEROVENT MIS PLUS	Tier 3	DP
aller/conges tab 10-240mg	Tier 3	DP
allergy d tab 5-120mg	Tier 3	DP
allergy rel/ tab deconges	Tier 3	DP
allergy relf tab /nsl dec	Tier 3	DP
allergy relf tab d-24	Tier 3	DP
allergy-d tab 5-120mg	Tier 3	DP
allergy/cong tab 5-120mg	Tier 3	DP
allgy comp-d tab 5-120mg	Tier 3	DP
ambi 10peh/ tab 400gfn	Tier 3	DP
ambi 40pse/ tab 400gfn	Tier 3	DP
ARIAL MIS CHAMBER	Tier 3	DP
benzonatate cap 100 mg	Tier 3	DP
benzonatate cap 200 mg	Tier 3	DP
BREATHERITE MIS	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BREATHERITE MIS LG MASK	Tier 3	DP
BREATHERITE MIS MED MASK	Tier 3	DP
BREATHERITE MIS SM MASK	Tier 3	DP
BREATHERITE MIS SPACER	Tier 3	DP
BREATHERITE MIS W/MASK	Tier 3	DP
bromfed dm syp	Tier 3	DP
CAPCOF SYP 5-2-10MG	Tier 3	DP
cetirizine-pseudoephedrine tab er 12hr 5-120 mg	Tier 3	DP
cheratussin syp ac	Tier 3	DP
child silfed liq 15mg/5ml	Tier 3	DP
CODAR AR LIQ 2-8/5ML	Tier 3	DP
cold/allergy elx children	Tier 3	DP
COMPACT SPAC MIS CHAMBER	Tier 3	DP
COMPACT SPAC MIS LG MASK	Tier 3	DP
COMPACT SPAC MIS MD MASK	Tier 3	DP
COMPACT SPAC MIS SM MASK	Tier 3	DP
cough cont liq dm max	Tier 3	DP
cough dm sus 30mg/5ml	Tier 3	DP
cough syp 100/5ml	Tier 3	DP
cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)	Tier 3	DP
cvs cough dm sus 30mg/5ml	Tier 3	DP
decongestant tab 120mg er	Tier 3	DP
DELSYM SUS 30MG/5ML	Tier 3	DP
dextromethorphan polistirex extended release susp 30 mg/5ml	Tier 3	DP
dextromethorphan-guaifenesin syrup 10-100 mg/5ml	Tier 3	DP
diabetic tus liq 100/5ml	Tier 3	DP
diabetic tus liq dm	Tier 3	DP
diabetic tus liq max st	Tier 3	DP
E-Z SPACER MIS	Tier 3	DP
E-Z SPACER MIS BODY GRD	Tier 3	DP
EASIVENT MIS	Tier 3	DP
EASIVENT MIS MASK LG	Tier 3	DP
EASIVENT MIS MASK MED	Tier 3	DP
EASIVENT MIS MASK SM	Tier 3	DP
eq cough dm sus 30mg/5ml	Tier 3	DP
extra action syp 100-10/5	Tier 3	DP
FLEXICHAMBER MIS	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
genaphed tab 30mg	Tier 3	DP
gnp cough dm sus 30mg/5ml	Tier 3	DP
gnp suphedrn liq 15mg/5ml	Tier 3	DP
gnp tussin liq dm	Tier 3	DP
gnp tussin liq dm cough	Tier 3	DP
gnp tussin liq dm max	Tier 3	DP
gnp tussin syp cf	Tier 3	DP
guaiatuss ac syp 100-10/5	Tier 3	DP
guaifenesin liquid 100 mg/5ml	Tier 3	DP
guaifenesin syp 100-10/5	Tier 3	DP
guaifenesin-codeine soln 100-10 mg/5ml	Tier 3	DP
hm cough dm sus 30mg/5ml	Tier 3	DP
hm tussin liq adlt dm	Tier 3	DP
HOLD CHAMBER MIS ADLT LG	Tier 3	DP
HOLD CHAMBER MIS MEDIUM	Tier 3	DP
HOLD CHAMBER MIS SMALL	Tier 3	DP
hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	Tier 3	DP
hydrocodone w/ homatropine syrup 5-1.5 mg/5ml	Tier 3	DP
hydrocodone w/ homatropine tab 5-1.5 mg	Tier 3	DP
hydromet syp 5-1.5/5	Tier 3	DP
INSPIRACHAMB MIS LARGE	Tier 3	DP
INSPIRACHAMB MIS MEDIUM	Tier 3	DP
INSPIRACHAMB MIS MOUTHPCE	Tier 3	DP
INSPIRACHAMB MIS SMALL	Tier 3	DP
INSPIREASE MIS DD SYST	Tier 3	DP
LITEAIRE MIS	Tier 3	DP
LOHIST-DM SYP 5-2-10MG	Tier 3	DP
lorata-dine tab d 24hr	Tier 3	DP
loratadine d tab 5-120mg	Tier 3	DP
loratadine-d tab 5-120mg	Tier 3	DP
loratadine-d tab 10-240mg	Tier 3	DP
LORTUSS EX LIQ	Tier 3	DP
m-clear wc liq 100-6.3	Tier 3	DP
MAR-COF CG LIQ 225-7.5	Tier 3	DP
medi-tussin syp dm	Tier 3	DP
MICROCHAMBER MIS	Tier 3	DP
MICROSPACER MIS	Tier 3	DP
mucinex chld liq 100/5ml	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
mucus relief liq 100/5ml	Tier 3	DP
mucus relief liq 400/20ml	Tier 3	DP
nasal decong tab 10mg	Tier 3	DP
nasal decong tab 30mg	Tier 3	DP
nasal decong tab 120mg er	Tier 3	DP
NASALCROM SPR 5.2/ACT	Tier 3	DP
NINJACOF-XG LIQ 200-8/5	Tier 3	DP
OPTICHAMBER MIS ADV LRG	Tier 3	DP
OPTICHAMBER MIS ADV MED	Tier 3	DP
OPTICHAMBER MIS ADV SM	Tier 3	DP
OPTICHAMBER MIS DIA LG	Tier 3	DP
OPTICHAMBER MIS DIA MD	Tier 3	DP
OPTICHAMBER MIS DIA SM	Tier 3	DP
OPTICHAMBER MIS DIAMOND	Tier 3	DP
OPTICHAMBER MIS FACE MAS	Tier 3	DP
OPTIHALER MIS	Tier 3	DP
10peh/400gfn tab /20dm	Tier 3	DP
POCKET CHAMB MIS	Tier 3	DP
POCKET SPACE MIS	Tier 3	DP
POLY-TUSSIN LIQ 10-4-10	Tier 3	DP
PRO-RED AC SYP 5-1-9/5	Tier 3	DP
prometh vc/ syp codeine	Tier 3	DP
promethazine w/ codeine syrup 6.25-10 mg/5ml	Tier 3	DP
promethazine-dm syrup 6.25-15 mg/5ml	Tier 3	DP
pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml	Tier 3	DP
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	Tier 3	DP
pseudoephedr tab 120mg er	Tier 3	DP
pseudoephedrine hcl tab 30 mg	Tier 3	DP
pseudoephedrine hcl tab 60 mg	Tier 3	DP
pseudoephedrine hcl tab er 12hr 120 mg	Tier 3	DP
qc suphedrin tab 120mg sr	Tier 3	DP
ra cough dm sus 30mg/5ml	Tier 3	DP
REFENESEN TAB CHST CNG	Tier 3	DP
RITEFLO MIS	Tier 3	DP
robafen dm syp 100-10/5	Tier 3	DP
robafen syp 100/5ml	Tier 3	DP
RYDEX LIQ	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
rynex pse liq	Tier 3	DP
sb cgh contr liq dm	Tier 3	DP
siltuss das liq 100/5ml	Tier 3	DP
siltussin dm liq das	Tier 3	DP
siltussin sa syp 100/5ml	Tier 3	DP
siltussin-dm liq diabetic	Tier 3	DP
siltussin-dm liq max st	Tier 3	DP
siltussin-dm syp alc free	Tier 3	DP
sm nasal dec tab 30mg	Tier 3	DP
sm tussin cf liq	Tier 3	DP
sm tussin dm syp 100-10/5	Tier 3	DP
sm tussin syp dm	Tier 3	DP
sudogest pe tab 10mg	Tier 3	DP
sudogest tab 30mg	Tier 3	DP
sudogest tab 60mg	Tier 3	DP
sudogest tab 120mg er	Tier 3	DP
TESSALON PER CAP 100MG	Tier 3	DP
trymine cg liq 225-7.5	Tier 3	DP
TUSNEL C SYP	Tier 3	DP
tusnel diabt liq 10-100/5	Tier 3	DP
TUSSICAPS CAP 5-4MG	Tier 3	DP
TUSSICAPS CAP 10-8MG	Tier 3	DP
tussigon tab 5-1.5mg	Tier 3	DP
tussin adult liq 100/5ml	Tier 3	DP
tussin adult liq cgh/cong	Tier 3	DP
tussin adult liq cold	Tier 3	DP
tussin cf liq	Tier 3	DP
tussin cf liq cgh/cold	Tier 3	DP
tussin chest syp 100/5ml	Tier 3	DP
tussin dm liq	Tier 3	DP
tussin dm liq 10-200/5	Tier 3	DP
tussin dm liq 100-10/5	Tier 3	DP
tussin dm liq max	Tier 3	DP
tussin dm syp 100-10/5	Tier 3	DP
VALVD HOLDNG MIS CHAMBER	Tier 3	DP
VORTEX VALVE MIS CHAMBER	Tier 3	DP
WATCHHALER MIS	Tier 3	DP
ZUTRIPRO LIQ 60-4-5MG	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LEUKOTRIENE MODULATORS		
montelukast sodium chew tab 4 mg (base equiv)	Tier 1	
montelukast sodium chew tab 5 mg (base equiv)	Tier 1	
montelukast sodium oral granules packet 4 mg (base equiv)	Tier 1	
montelukast sodium tab 10 mg (base equiv)	Tier 1	
zafirlukast tab 10 mg	Tier 1	
zafirlukast tab 20 mg	Tier 1	
MAST CELL STABILIZERS - DRUGS TO TREAT ALLERGIES		
cromolyn sodium soln nebu 20 mg/2ml	Tier 1	B/D
MISCELLANEOUS		
acetylcysteine inhal soln 10%	Tier 1	NDS, B/D
acetylcysteine inhal soln 20%	Tier 1	NDS, B/D
ARALAST NP INJ 500MG	Tier 2	LA, PA
ARALAST NP INJ 1000MG	Tier 2	NDS, LA, PA
AYR SALINE KIT NETI RNS	Tier 3	DP
AYR SALINE KIT RINSE	Tier 3	DP
DALIRESP TAB 250MCG	Tier 2	
DALIRESP TAB 500MCG	Tier 2	
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	Tier 1	(generic of Adrenaclick)
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	Tier 1	(generic of EpiPen)
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	Tier 1	(generic of EpiPen)
epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)	Tier 1	(generic of Adrenaclick)
ESBRIET CAP 267MG	Tier 2	PA
ESBRIET TAB 267MG	Tier 2	PA
ESBRIET TAB 801MG	Tier 2	PA
KALYDECO PAK 25MG	Tier 2	PA
KALYDECO PAK 50MG	Tier 2	PA
KALYDECO PAK 75MG	Tier 2	PA
KALYDECO TAB 150MG	Tier 2	PA
OFEV CAP 100MG	Tier 2	PA
OFEV CAP 150MG	Tier 2	PA
ORKAMBI GRA 100-125	Tier 2	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ORKAMBI GRA 150-188	Tier 2	PA
ORKAMBI TAB 100-125	Tier 2	PA
ORKAMBI TAB 200-125	Tier 2	PA
PROLASTIN-C INJ 1000MG	Tier 2	LA, PA
PROLASTIN-C INJ 1000MG	Tier 2	NDS, LA, PA
PULMOZYME SOL 1MG/ML	Tier 2	PA
SYMDEKO TAB 50-75MG	Tier 2	LA, PA
SYMDEKO TAB 100-150	Tier 2	LA, PA
SYMJEPI INJ 0.3MG	Tier 2	
SYMJEPI INJ 0.15MG	Tier 2	
THEO-24 CAP 100MG CR	Tier 2	
THEO-24 CAP 200MG CR	Tier 2	
THEO-24 CAP 300MG CR	Tier 2	
THEO-24 CAP 400MG ER	Tier 2	
theophylline soln 80 mg/15ml	Tier 1	
theophylline tab er 12hr 300 mg	Tier 1	
theophylline tab er 12hr 450 mg	Tier 1	
theophylline tab er 24hr 400 mg	Tier 1	
theophylline tab er 24hr 600 mg	Tier 1	
XOLAIR INJ 75/0.5	Tier 2	LA, PA
XOLAIR INJ 150MG/ML	Tier 2	LA, PA
XOLAIR SOL 150MG	Tier 2	LA, PA
ZEMAIRA INJ 1000MG	Tier 2	NDS, LA, PA
NASAL STEROIDS - DRUGS TO TREAT ALLERGIES		
flunisolide nasal soln 25 mcg/act (0.025%)	Tier 1	QL (3 bottles / 30 days)
fluticasone propionate nasal susp 50 mcg/act	Tier 1	QL (1 bottle / 30 days)
STEROID INHALANTS - DRUGS TO TREAT ASTHMA		
ARNUITY ELPT INH 50MCG	Tier 2	QL (30 inhalations / 30 days)
ARNUITY ELPT INH 100MCG	Tier 2	QL (30 inhalations / 30 days)
ARNUITY ELPT INH 200MCG	Tier 2	QL (30 inhalations / 30 days)
budesonide inhalation susp 0.5 mg/2ml	Tier 1	B/D
budesonide inhalation susp 0.25 mg/2ml	Tier 1	B/D
FLOVENT DISK AER 50MCG	Tier 2	QL (120 inhalations / 30 days)
FLOVENT DISK AER 100MCG	Tier 2	QL (120 inhalations / 30 days)

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FLOVENT DISK AER 250MCG	Tier 2	QL (240 inhalations / 30 days)
FLOVENT HFA AER 44MCG	Tier 2	QL (2 inhalers / 30 days)
FLOVENT HFA AER 110MCG	Tier 2	QL (2 inhalers / 30 days)
FLOVENT HFA AER 220MCG	Tier 2	QL (2 inhalers / 30 days)
PULMICORT INH 90MCG	Tier 2	QL (2 inhalers / 30 days)
PULMICORT INH 180MCG	Tier 2	QL (2 inhalers / 30 days)
STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT ASTHMA AND COPD		
ADVAIR DISKU AER 100/50	Tier 2	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 250/50	Tier 2	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 500/50	Tier 2	QL (60 inhalations / 30 days)
ADVAIR HFA AER 45/21	Tier 2	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	Tier 2	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	Tier 2	QL (1 inhaler / 30 days)
BREO ELLIPTA INH 100-25	Tier 2	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	Tier 2	QL (60 blisters / 30 days)
SYMBICORT AER 80-4.5	Tier 2	QL (1 inhaler / 30 days)
SYMBICORT AER 160-4.5	Tier 2	QL (1 inhaler / 30 days)
TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS		
DERMATOLOGY, ACNE		
amnesteem cap 10mg	Tier 1	PA
amnesteem cap 20mg	Tier 1	PA
amnesteem cap 40mg	Tier 1	PA
avita cre 0.025%	Tier 1	PA
avita gel 0.025%	Tier 1	PA
benzoyl peroxide-erythromycin gel 5-3%	Tier 1	
claravis cap 10mg	Tier 1	PA
claravis cap 20mg	Tier 1	PA
claravis cap 30mg	Tier 1	PA
claravis cap 40mg	Tier 1	PA

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
clindacin-p pad 1%	Tier 1	
clindamycin phosphate gel 1%	Tier 1	
clindamycin phosphate lotion 1%	Tier 1	
clindamycin phosphate soln 1%	Tier 1	
clindamycin phosphate swab 1%	Tier 1	
erythromycin gel 2%	Tier 1	
erythromycin pads 2%	Tier 1	
erythromycin soln 2%	Tier 1	
isotretinoin cap 10 mg	Tier 1	PA
isotretinoin cap 20 mg	Tier 1	PA
isotretinoin cap 30 mg	Tier 1	PA
isotretinoin cap 40 mg	Tier 1	PA
myorisan cap 10mg	Tier 1	PA
myorisan cap 20mg	Tier 1	PA
myorisan cap 30mg	Tier 1	PA
myorisan cap 40mg	Tier 1	PA
sulfacetamide sodium lotion 10% (acne)	Tier 1	
tretinoin cream 0.1%	Tier 1	PA
tretinoin cream 0.05%	Tier 1	PA
tretinoin cream 0.025%	Tier 1	PA
tretinoin gel 0.01%	Tier 1	PA
tretinoin gel 0.025%	Tier 1	PA
zenatane cap 10mg	Tier 1	PA
zenatane cap 20mg	Tier 1	PA
zenatane cap 30mg	Tier 1	PA
zenatane cap 40mg	Tier 1	PA
DERMATOLOGY, ANTIBIOTICS		
bacitr zinc oin 500/gm	Tier 3	DP
bacitracin oin 500/gm	Tier 3	DP
bacitracin oint 500 unit/gm	Tier 3	DP
bacitracin zinc oint 500 unit/gm	Tier 3	DP
double antib oin	Tier 3	DP
gentamicin sulfate cream 0.1%	Tier 1	
gentamicin sulfate oint 0.1%	Tier 1	
hm triple oin antibiot	Tier 3	DP
mupirocin oint 2%	Tier 1	
neomycin-bacitracin-polymyxin oint	Tier 3	DP
sb triple oin antibiot	Tier 3	DP
silver sulfadiazine cream 1%	Tier 1	
sm antibioti oin 500/gm	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
sm triple oin antibiot	Tier 3	DP
ssd cre 1%	Tier 1	
SULFAMYLON CRE 85MG/GM	Tier 2	
tri-biozene oin	Tier 3	DP
triple antib oin	Tier 3	DP
triple antib oin max st	Tier 3	DP
triple antib oin plus	Tier 3	DP
DERMATOLOGY, ANTIFUNGALS		
anti-fungal cre 1%	Tier 3	DP
anti-fungal pow 1%	Tier 3	DP
antifungal aer 1%	Tier 3	DP
antifungal cre 1%	Tier 3	DP
antifungal cre 2%	Tier 3	DP
athlete foot cre 1%	Tier 3	DP
athlete foot cre af	Tier 3	DP
baza antifun cre 2%	Tier 3	DP
BENZOIN TIN	Tier 3	DP
BENZOIN TIN PLAIN	Tier 3	DP
castellani paint	Tier 3	DP
ciclopirox gel 0.77%	Tier 1	
ciclopirox olamine cream 0.77% (base equiv)	Tier 1	
ciclopirox olamine susp 0.77% (base equiv)	Tier 1	
ciclopirox shampoo 1%	Tier 1	
clotrimazole cre 1%	Tier 3	DP
clotrimazole cream 1%	Tier 1	
clotrimazole cream 1%	Tier 3	DP
clotrimazole soln 1%	Tier 1	
clotrimazole soln 1%	Tier 3	DP
clotrimazole w/ betamethasone cream 1-0.05%	Tier 1	
fungoid-d cre 1%	Tier 3	DP
jock itch aer 1%	Tier 3	DP
ketoconazole cream 2%	Tier 1	
miconazole nitrate cream 2%	Tier 3	DP
nyamyc pow 100000	Tier 1	
nystatin cream 100000 unit/gm	Tier 1	
nystatin oint 100000 unit/gm	Tier 1	
nystatin topical powder 100000 unit/gm	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
nystop pow 100000	Tier 1	
podactin pow 1%	Tier 3	DP
sm antifungl cre 1%	Tier 3	DP
sm antifungl cre 2%	Tier 3	DP
soothe&cool cre inzo 2%	Tier 3	DP
terbinafine cre 1%	Tier 3	DP
terbinafine hcl cream 1%	Tier 3	DP
tolnaftate cre 1%	Tier 3	DP
tolnaftate cream 1%	Tier 3	DP
tolnaftate powder 1%	Tier 3	DP
DERMATOLOGY, ANTIPSORIATICS		
acitretin cap 10 mg	Tier 2	PA
acitretin cap 17.5 mg	Tier 2	PA
acitretin cap 25 mg	Tier 2	PA
calcipotriene cream 0.005%	Tier 1	QL (120 gm / 30 days), PA
calcipotriene oint 0.005%	Tier 1	QL (120 gm / 30 days), PA
calcipotriene soln 0.005% (50 mcg/ml)	Tier 1	QL (120 mL / 30 days), PA
tazarotene cream 0.1%	Tier 1	PA
TAZORAC CRE 0.05%	Tier 2	PA
DERMATOLOGY, ANTISEBORRHEICS		
ketoconazole shampoo 2%	Tier 1	
selenium sulfide lotion 2.5%	Tier 1	
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort cre 1%	Tier 1	
ala-cort cre 2.5%	Tier 1	
alclometasone dipropionate cream 0.05%	Tier 1	
alclometasone dipropionate oint 0.05%	Tier 1	
betamethasone dipropionate augmented cream 0.05%	Tier 1	
betamethasone dipropionate augmented gel 0.05%	Tier 1	
betamethasone dipropionate augmented lotion 0.05%	Tier 1	
betamethasone dipropionate augmented oint 0.05%	Tier 1	
betamethasone dipropionate cream 0.05%	Tier 1	
betamethasone dipropionate lotion 0.05%	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
betamethasone dipropionate oint 0.05%	Tier 1	
betamethasone valerate cream 0.1% (base equivalent)	Tier 1	
betamethasone valerate lotion 0.1% (base equivalent)	Tier 1	
betamethasone valerate oint 0.1% (base equivalent)	Tier 1	
ENSTILAR AER	Tier 2	PA
fluocinolone acetonide cream 0.01%	Tier 1	
fluocinolone acetonide cream 0.025%	Tier 1	
fluocinolone acetonide oil 0.01% (body oil)	Tier 1	
fluocinolone acetonide oil 0.01% (scalp oil)	Tier 1	
fluocinolone acetonide oint 0.025%	Tier 1	
fluocinolone acetonide soln 0.01%	Tier 1	
fluocinonide cream 0.05%	Tier 1	
fluocinonide emulsified base cream 0.05%	Tier 1	
fluocinonide gel 0.05%	Tier 1	
fluocinonide soln 0.05%	Tier 1	
fluticasone propionate cream 0.05%	Tier 1	
fluticasone propionate oint 0.005%	Tier 1	
halobetasol propionate cream 0.05%	Tier 1	
halobetasol propionate oint 0.05%	Tier 1	
hydrocortisone butyrate cream 0.1%	Tier 1	
hydrocortisone butyrate oint 0.1%	Tier 1	
hydrocortisone cream 1%	Tier 1	
hydrocortisone cream 2.5%	Tier 1	
hydrocortisone lotion 2.5%	Tier 1	
hydrocortisone oint 2.5%	Tier 1	
hydrocortisone valerate cream 0.2%	Tier 1	
hydrocortisone valerate oint 0.2%	Tier 1	
mometasone furoate cream 0.1%	Tier 1	
mometasone furoate oint 0.1%	Tier 1	
mometasone furoate solution 0.1% (lotion)	Tier 1	
TEXACORT SOL 2.5%	Tier 2	
triamcinolone acetonide cream 0.1%	Tier 1	
triamcinolone acetonide cream 0.5%	Tier 1	
triamcinolone acetonide cream 0.025%	Tier 1	
triamcinolone acetonide lotion 0.1%	Tier 1	
triamcinolone acetonide lotion 0.025%	Tier 1	
triamcinolone acetonide oint 0.1%	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
triamcinolone acetonide oint 0.5%	Tier 1	
triamcinolone acetonide oint 0.025%	Tier 1	
DERMATOLOGY, LOCAL ANESTHETICS		
glydo gel 2%	Tier 1	QL (30 mL / 30 days), PA
lidocaine hcl soln 4%	Tier 1	QL (50 mL / 30 days), PA
lidocaine hcl urethral/mucosal gel 2%	Tier 1	QL (30 mL / 30 days), PA
lidocaine oint 5%	Tier 1	QL (50 grams / 30 days), PA
lidocaine patch 5%	Tier 1	QL (3 patches / 1 day), PA
lidocaine-prilocaine cream 2.5-2.5%	Tier 1	QL (30 grams / 30 days), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
ACESULFAME POW POTASSIU	Tier 3	DP
ACETAMIN POW	Tier 3	DP
ACETIC ACID SOL 3%	Tier 3	DP
ACETIC ACID SOL GLACIAL	Tier 3	DP
ACETYL-L-CAR POW HCL	Tier 3	DP
ALLANTOIN POW	Tier 3	DP
ALMOND OIL SWEET	Tier 3	DP
ALOE VERA POW	Tier 3	DP
ALUM AMMONIU POW	Tier 3	DP
ALUMINUM CL CRY	Tier 3	DP
ALUMINUM POW HYDROXID	Tier 3	DP
amlactin lot 12%	Tier 3	DP
AMMONIUM GRA CHLORIDE	Tier 3	DP
AMMONIUM POW ALUMINUM	Tier 3	DP
ARGININE HCL POW	Tier 3	DP
ASCORBIC ACD GRA	Tier 3	DP
ASCORBIC ACD POW	Tier 3	DP
ASCORBYL POW PALMITAT	Tier 3	DP
BETAINE POW ANHYDROU	Tier 3	DP
BIOFLAVINOID POW LEMON	Tier 3	DP
BIOFLAVONOID POW CITRUS	Tier 3	DP
BISMUTH POW SUBNITRA	Tier 3	DP
BISMUTH SUBC POW	Tier 3	DP
BORIC ACID GRA	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BORIC ACID POW	Tier 3	DP
CALAMINE LOT	Tier 3	DP
CALAMINE LOT 8-8%	Tier 3	DP
CALAMINE LOT PHENOLAT	Tier 3	DP
CALAMINE POW	Tier 3	DP
CALCIUM POW CITRATE	Tier 3	DP
CALCIUM POW HYDROXID	Tier 3	DP
CALCIUM POW SACCHARA	Tier 3	DP
CAMPHOR CRY	Tier 3	DP
capsaicin cre 0.1%	Tier 3	DP
capsaicin cream 0.025%	Tier 3	DP
CAPSAICIN LIQ 0.15%	Tier 3	DP
CAPSAICIN POW	Tier 3	DP
CARBOMER POW HOMOPOLY	Tier 3	DP
CARBOXYMETHY POW SODIUM	Tier 3	DP
CHLOROFORM SOL	Tier 3	DP
CHOLESTEROL POW ACETATE	Tier 3	DP
CHRYSIN POW	Tier 3	DP
CITRIC ACID GRA ANHYDROU	Tier 3	DP
CITRIC ACID GRA MONOHYDR	Tier 3	DP
CITRIC ACID POW ANHYDROU	Tier 3	DP
CLORPACTIN POW WCS-90	Tier 3	DP
CLOVE OIL	Tier 3	DP
COAL TAR SOL 20%	Tier 3	DP
COCONUT OIL	Tier 3	DP
COENZYME Q10 POW	Tier 3	DP
CORN STARCH POW	Tier 3	DP
COTTONSEED OIL	Tier 3	DP
CREATINE POW MONOHYDR	Tier 3	DP
CROTON OIL	Tier 3	DP
D-VITAMIN E POW SUCCINAT	Tier 3	DP
diclofenac sodium gel 1%	Tier 1	PA
ETHOXY ETHNL LIQ REAGENT	Tier 3	DP
ETHYL ALCOHO SOL 95%	Tier 3	DP
ETHYL ALCOHO SOL 95% USP	Tier 3	DP
ETHYL ALCOHO SOL SDA 95%	Tier 3	DP
ETHYL OLEATE LIQ	Tier 3	DP
EUGENOL SOL	Tier 3	DP
FERRIC POW SUBSULFA	Tier 3	DP
FERRIC SUBSU SOL	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
fluorouracil cream 5%	Tier 1	
fluorouracil soln 2%	Tier 1	
fluorouracil soln 5%	Tier 1	
FORMALDEHYDE SOL 37%	Tier 3	DP
FREE & CLEAR SHA	Tier 3	DP
FULLERS POW EARTH	Tier 3	DP
GLUCOSAMINE POW HCL	Tier 3	DP
GLUCOSAMINE POW SULFATE	Tier 3	DP
GLYCERIN LIQ	Tier 3	DP
GLYCOLIC ACD CRY	Tier 3	DP
GLYCOLIC ACD SOL 70%	Tier 3	DP
GRAPE SEED OIL	Tier 3	DP
GREEN TEA EX LIQ 90%	Tier 3	DP
HYDROCHL ACD LIQ 37%	Tier 3	DP
hydrocortisone rectal cream 2.5%	Tier 1	
ICHTHAMMOL POW	Tier 3	DP
imiquimod cream 5%	Tier 1	
INDOLE-3- POW CARBINOL	Tier 3	DP
INOSITOL POW HEXANICO	Tier 3	DP
IODINE CRY RESUBLIM	Tier 3	DP
IODOFORM POW	Tier 3	DP
ISOPROPYL LIQ PALMITAT	Tier 3	DP
JESSNERS SOL	Tier 3	DP
KOJIC ACID POW	Tier 3	DP
L-CITRULLINE POW	Tier 3	DP
LAC-HYDRIN LOT 12%	Tier 3	DP
lactic acid (ammonium lactate) cream 12%	Tier 1	
lactic acid (ammonium lactate) cream 12%	Tier 3	DP
lactic acid (ammonium lactate) lotion 12%	Tier 1	
lactic acid (ammonium lactate) lotion 12%	Tier 3	DP
LACTIC ACID SOL	Tier 3	DP
LIPOIC ACID POW	Tier 3	DP
MAG CITRATE POW TRIBASIC	Tier 3	DP
MAGNESIUM POW HYDROXID	Tier 3	DP
MALIC ACID POW	Tier 3	DP
MANNITOL POW	Tier 3	DP
MENTHOL CRY	Tier 3	DP
MENTHOL-L CRY	Tier 3	DP
METHYL SULF CRY	Tier 3	DP
metronidazole cream 0.75%	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
metronidazole gel 0.75%	Tier 1	
metronidazole lotion 0.75%	Tier 1	
NA PHOS MONO POW ANHYDROU	Tier 3	DP
NEW SKIN AER	Tier 3	DP
OIL-ALMOND OIL SWEET	Tier 3	DP
OIL-COCONUT OIL	Tier 3	DP
ORNITHINE POW HCL	Tier 3	DP
OXALIC ACID CRY	Tier 3	DP
PANRETIN GEL 0.1%	Tier 2	
PENTRAVAN CRE	Tier 3	DP
PENTRAVAN CRE PLUS	Tier 3	DP
PERUVIAN LIQ BALSAM	Tier 3	DP
PHENOL LIQ	Tier 3	DP
PHOSPHATIDYL POW 20%	Tier 3	DP
PICATO GEL 0.05%	Tier 2	QL (2 tubes / 30 days)
PICATO GEL 0.015%	Tier 2	QL (3 tubes / 30 days)
podofilox soln 0.5%	Tier 1	
POLYSORBATE SOL 20	Tier 3	DP
POT GLUCONAT POW ANHYDROU	Tier 3	DP
POT HYDROXID SOL 10%	Tier 3	DP
POT HYDROXID SOL 20%	Tier 3	DP
POT NITRATE GRA	Tier 3	DP
POT NITRATE GRA PURIFIED	Tier 3	DP
POTASSIUM CRY BROMIDE	Tier 3	DP
POTASSIUM CRY IODIDE	Tier 3	DP
POTASSIUM MIS HYDROXID	Tier 3	DP
procto-med cre hc 2.5%	Tier 1	
procto-pak cre 1%	Tier 1	
proctozone cre -hc 2.5%	Tier 1	
PSYLLIUM POW HUSK 95%	Tier 3	DP
PX CALAMINE LOT	Tier 3	DP
PYRUVIC ACID LIQ	Tier 3	DP
RA CALAMINE LOT	Tier 3	DP
RED YEAST POW RICE	Tier 3	DP
RESORCINOL POW	Tier 3	DP
rosadan cre 0.75%	Tier 1	
SAFFLOWER OIL	Tier 3	DP
SALICYLIC POW ACID	Tier 3	DP
SM CALAMINE LOT	Tier 3	DP
SM CALAMINE LOT PHENOLAT	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SOD BROMIDE GRA	Tier 3	DP
SOD FLUORIDE POW	Tier 3	DP
SOD METABISU GRA ANHYDR	Tier 3	DP
SOD PERBORAT CRY	Tier 3	DP
SOD PHOSPHAT GRA DIBASIC	Tier 3	DP
SOD PROPION POW	Tier 3	DP
SOD SULFITE POW ANHYDROU	Tier 3	DP
SODIUM BORAT POW	Tier 3	DP
SODIUM CITRA GRA DIHYDRAT	Tier 3	DP
SODIUM MIS HYDROXID	Tier 3	DP
SODIUM POW BICARBON	Tier 3	DP
SOYBEAN OIL	Tier 3	DP
SPERMACETI MIS	Tier 3	DP
SQUARIC ACID LIQ BUTANOL	Tier 3	DP
SQUARIC ACID POW DI-N-BUT	Tier 3	DP
STEVIA POW EXTRACT	Tier 3	DP
SULFUR POW	Tier 3	DP
SULFUR POW PRECIPIT	Tier 3	DP
tacrolimus oint 0.1%	Tier 1	
tacrolimus oint 0.03%	Tier 1	
TALC POW	Tier 3	DP
TANNIC ACID POW	Tier 3	DP
TARGRETIN GEL 1%	Tier 2	PA
TARTARIC ACD GRA	Tier 3	DP
THYMOL CRY	Tier 3	DP
TURPENTINE LIQ SPIRITS	Tier 3	DP
UNDECYLENIC LIQ ACID	Tier 3	DP
UREA BEA	Tier 3	DP
UREA POW PEROXIDE	Tier 3	DP
VALCHLOR GEL 0.016%	Tier 2	LA, PA
VEEGUM MIS LUMP	Tier 3	DP
VITAMIN K-1 POW	Tier 3	DP
XYLITOL POW	Tier 3	DP
ZINC CHLORID GRA	Tier 3	DP
ZINC OXIDE POW	Tier 3	DP
zostrix hp cre 0.1%	Tier 3	DP
ZOSTRIX NAT CRE 0.033%	Tier 3	DP
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
complete kit lice	Tier 3	DP
gnp lice kit	Tier 3	DP

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
lice killing sha	Tier 3	DP
lice killing sha 0.33-4%	Tier 3	DP
lice treatmt lot 1%	Tier 3	DP
lice treatmt sha 0.33-4%	Tier 3	DP
lice trtmnt liq	Tier 3	DP
lice trtmnt liq 1%	Tier 3	DP
licide sha 0.33-4%	Tier 3	DP
malathion lotion 0.5%	Tier 1	
permethrin cream 5%	Tier 1	
ra lice liq max st	Tier 3	DP
RID COMPLETE KIT LICE	Tier 3	DP
RID ESS LICE KIT 0.33-4%	Tier 3	DP
rid lice kil sha 0.33-4%	Tier 3	DP
rid licekill sha 0.33-4%	Tier 3	DP
sm lice soln kit	Tier 3	DP
tgt lice kit complete	Tier 3	DP
DERMATOLOGY, WOUND CARE AGENTS		
acetic acid irrigation soln 0.25%	Tier 1	
REGRANEX GEL 0.01%	Tier 2	PA
SANTYL OIN 250/GM	Tier 2	
sodium chloride irrigation soln 0.9%	Tier 1	
water for irrigation, sterile irrigation soln	Tier 1	
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl cap 30 mg	Tier 1	
chlorhexidine gluconate soln 0.12%	Tier 1	
clotrimazole troche 10 mg	Tier 1	
lidocaine hcl viscous soln 2%	Tier 1	
little teeth gel 7.5%	Tier 3	DP
nystatin susp 100000 unit/ml	Tier 1	
ORASEP SPR	Tier 3	DP
periogard sol 0.12%	Tier 1	
periomed con 0.63%	Tier 3	DP
pilocarpine hcl tab 5 mg	Tier 1	
pilocarpine hcl tab 7.5 mg	Tier 1	
triamcinolone acetonide dental paste 0.1%	Tier 1	
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR		
acetic acid otic soln 2%	Tier 1	
CIPRODEX SUS 0.3-0.1%	Tier 2	
flac oil 0.01%	Tier 1	
fluocinolone acetonide (otic) oil 0.01%	Tier 1	

Drug Name	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
neomycin-polymyxin-hc otic soln 1%	Tier 1	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	Tier 1	
ofloxacin otic soln 0.3%	Tier 1	

D. Index of Covered Drugs