



## Neighborhood **INTEGRITY** (Medicare-Medicaid Plan) **2024 Formulary: List of covered drugs**

**Important Message About What You Pay for Vaccines** – Some vaccines are considered medical benefits. Other vaccines are considered Part D drugs. Our plan covers most Part D vaccines at no cost to you.

For more recent information or other questions, contact us at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays or visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY). No changes made since 06/20/2024.

# Neighborhood INTEGRITY| 2024 *List of Covered Drugs* (Formulary)

## Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs and items are covered by Neighborhood INTEGRITY. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Neighborhood INTEGRITY. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



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## A. Disclaimers

This is a list of drugs that Members can get in Neighborhood INTEGRITY.

- ❖ Neighborhood INTEGRITY is a health plan that contracts with both Medicare and Rhode Island Medicaid to provide benefits of both programs to enrollees.
- ❖ You can always check Neighborhood INTEGRITY's up-to-date *List of Covered Drugs* online at [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Please call Member Services at 1-844-812-6896, 8 am to 8 pm, Monday - Friday; 8 am to 12 pm on Saturday. On Saturday afternoons, Sundays and holidays, you may be asked to leave a message. TTY users should call 711. The call is free.
- ❖ You can ask to get this document and future materials in your preferred language and/or alternate format by calling Member Services. This is called a "standing request". Member Services will document your standing request in your member record so that you can receive materials now and in the future in your preferred language and/or format. You can change or delete your standing request at any time by calling Member Services.

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## B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQ to learn more, or look for a question and answer.

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### B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the "Drug List" for short.)

The drugs on the *List of Covered Drugs* that starts on page 13 are the drugs covered by Neighborhood INTEGRITY. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

- Neighborhood INTEGRITY will cover all medically necessary drugs on the Drug List if:
  - your doctor or other prescriber says you need them to get better or stay healthy, **and**
  - you fill the prescription at a Neighborhood INTEGRITY network pharmacy.
- Neighborhood INTEGRITY may have additional steps to access certain drugs (refer to question B4 below).

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



You can also refer to an up-to-date list of drugs that we cover on our website at [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY) or call Member Services at 1-844-812-6896 (TTY 711).

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## **B2. Does the Drug List ever change?**

Yes, and Neighborhood INTEGRITY must follow Medicare and Rhode Island Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization (PA) or approval for a drug. (PA is permission from Neighborhood INTEGRITY before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check Neighborhood INTEGRITY's up to date Drug List online at [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).
- You can also call Member Services to check the current Drug List at 1-844-812-6896 (TTY 711).

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## **B3. What happens when there is a change to the Drug List?**

Some changes to the Drug List will happen **immediately**. For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same. When we add the

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new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.

- We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
- You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know. We will send you a letter with advice on how to follow up with your provider and pharmacist.

**We may make other changes that affect the drugs you take.** We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is not new to the market **and**
  - Replace a brand name drug currently on the Drug List **or**
  - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to question B10.

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#### **B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?**

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases, you or your doctor or other prescriber must do something before you can get the drug. For example:

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- **Prior authorization (PA) or approval:** For some drugs, you or your doctor or other prescriber must get PA from Neighborhood INTEGRITY before you fill your prescription. Neighborhood INTEGRITY may not cover the drug if you do not get approval.
- **Quantity limits:** Sometimes Neighborhood INTEGRITY limits the amount of a drug you can get.
- **Step therapy:** Sometimes Neighborhood INTEGRITY requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages **13-151**. You can also get more information by visiting our website at [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY). We have posted online documents that explain our PA and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please refer to questions B10-B12 for more information about exceptions.

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### **B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?**

The table of drugs on page **13** has a column labeled "Necessary actions, restrictions, or limits on use."

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### **B6. What happens if Neighborhood INTEGRITY changes their rules about some drugs (for example, PA (approval), quantity limits, and/or step therapy restrictions)?**

In some cases, we will tell you in advance if we add or change PA, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

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### **B7. How can I find a drug on the Drug List?**

There are two ways to find a drug:

- You can search alphabetically by the drug's name, **or**
- You can search by medical condition.

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



To search **alphabetically**, refer to the Index of Covered Drugs section. You can find it on page **152**.

To search **by medical condition**, find the section labeled “Drugs Grouped by Medical Condition” on page **13**. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, **Cardiovascular**. That is where you will find drugs that treat heart conditions.

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### **B8. What if the drug I want to take is not on the Drug List?**

If you don't find your drug on the Drug List, call Member Services at 1-844-812-6896 (TTY 711) and ask about it. If you learn that Neighborhood INTEGRITY will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please refer to questions B10-B12 for more information about exceptions.

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### **B9. What if I am a new Neighborhood INTEGRITY Member and can't find my drug on the Drug List or have a problem getting my drug?**

We can help. We may cover a temporary 30-day supply of your Part D drug or 90-day supply of your Rhode Island Medicaid-covered drug during the first 90 days you are a member of Neighborhood INTEGRITY. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

We will cover a 30-day supply of your Part D drug or 90-day supply of your Rhode Island Medicaid-covered drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires PA by Neighborhood INTEGRITY, **or**
- you are taking a drug that is part of a step therapy restriction.

If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Neighborhood INTEGRITY Member.
- This is in addition to the temporary supply during the first 90 days you are a Member of Neighborhood INTEGRITY.

Level of Care transitions are allowed for members released from a long-term care facility within the past 30 days. We will cover a cumulative 30-day supply of the drug you need whether or not you are a new Neighborhood INTEGRITY member.

Level of Care transitions are also allowed for members admitted to a long-term care facility within the past 30 days. We will cover a cumulative 31-day supply of the drug you need (fill limits are applicable for certain brand name drugs), whether or not you are a new Neighborhood INTEGRITY member.

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### **B10. Can I ask for an exception to cover my drug?**

Yes. You can ask Neighborhood INTEGRITY to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, Neighborhood INTEGRITY may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or PA requirements.

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### **B11. How can I ask for an exception?**

To ask for an exception, call Member Services. Member Services will work with you and your provider to help you ask for an exception. You can also read Chapter 9 of the *Member Handbook* to learn more about exceptions.

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### **B12. How long does it take to get an exception?**

After we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. Your prescriber should fax the statement to 1-855-829-2875.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



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### **B13. What are generic drugs?**

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

Neighborhood INTEGRITY covers both brand name drugs and generic drugs.

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### **B14. What are OTC drugs?**

OTC stands for "over-the-counter." Neighborhood INTEGRITY covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Neighborhood INTEGRITY Drug List to find out what OTC drugs are covered.

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### **B15. Does Neighborhood INTEGRITY cover non-drug OTC products?**

Neighborhood INTEGRITY covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include certain urine or blood testing supplies, certain flavoring agents or dyes that can be added to liquid medications, and certain cream bases used for compounding.

You can read the Neighborhood INTEGRITY Drug List to find out what non-drug OTC products are covered.

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### **B16. What is my copay?**

As a Neighborhood INTEGRITY Member, you have no copays for prescription and OTC drugs as long as you follow Neighborhood INTEGRITY's rules.

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### **B17. What are drug tiers?**

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs.
- Tier 2 drugs are brand name drugs.
- Tier 3 drugs are non-Medicare drugs and non-Medicare covered OTC drugs and items.

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**If you have questions**, please call Neighborhood INTEGRITY at 1-844-812-6896 and TTY 711, 8 am to 8 pm, Monday through Friday and 8 am to 12 pm on Saturdays. The call is free. **For more information**, visit [www.nhpri.org/INTEGRITY](http://www.nhpri.org/INTEGRITY).



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## C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by Neighborhood INTEGRITY. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page **152**. The index alphabetically lists all drugs covered by Neighborhood INTEGRITY.

**Note:** The **DP** symbol next to a drug means the drug is not a “Part D drug.” The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage).

- In addition, if you are getting Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for these drugs. For more information on Extra Help, please refer to the call-out box below.

**Extra Help** is a Medicare program that helps people with limited incomes and resources reduce Medicare Part D prescription drug costs, such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.”

- These drugs also have different rules for appeals. An appeal is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Rhode Island Medicaid.
- If you or your doctor disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Member Services at 1-844-812-6896 (TTY 711). You can also read Chapter 9 of the *Member Handbook* to learn how to appeal a decision.



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## C1. Drugs Grouped by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, **Cardiovascular**. That is where you will find drugs that treat heart conditions.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

PA = Prior authorization (approval): you must have approval from the plan before you can get this drug.

ST = Step therapy: you must try another drug before you can get this one.

QL = Quantity limit: Neighborhood INTEGRITY limits the amount of this drug you can get.

B/D = This drug may be covered either by Medicare Part B or D. Depending upon the circumstances, a prior authorization (approval) may be required. Information may need to be submitted describing why and where (in what setting) you are using this drug.

DP = This drug is not a Part D drug.

NDS= Non-Extended Day Supply. This drug is not available for more than a 30-day supply.

LA = Limited Access. This drug is only available through certain specialty pharmacies.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., SYNTHROID), and generic drugs are listed in lower-case italics (e.g., *levothyroxine*). The information in the “Necessary actions, restrictions, or limits on use” column tells you if Neighborhood INTEGRITY has any rules for covering your drug.

# LIST OF COVERED DRUGS BY MEDICAL CONDITION

EFFECTIVE DATE: 7/1/2024

| NAME OF DRUG                                                          | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>ANALGESICS</b>                                                     |                                          |                                                  |
| <b>Gout</b>                                                           |                                          |                                                  |
| <i>allopurinol oral tablet 100 mg, 300 mg</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>colchicine oral tablet 0.6 mg</i>                                  | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>colchicine-probenecid oral tablet 0.5-500 mg</i>                   | \$0 (Tier 1)                             |                                                  |
| MITIGARE ORAL CAPSULE 0.6 MG                                          | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <i>probenecid oral tablet 500 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| <b>Miscellaneous</b>                                                  |                                          |                                                  |
| <i>8 hr arthritis pain relief tablet extended release 650 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen childrens solution 160 mg/5ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen childrens suspension 160 mg/5ml oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen childrens tablet chewable 160 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen er tablet extended release 650 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen extra strength tablet 500 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen infants suspension 160 mg/5ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen suppository 120 mg rectal</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen suppository 650 mg rectal</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen tablet 325 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen tablet 500 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>acetaminophen tablet chewable 160 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>adult aspirin regimen tablet delayed release 81 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>arthritis pain relief tablet extended release 650 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>arthritis pain reliever tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin 81 tablet delayed release 81 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin adult low dose tablet delayed release 81 mg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin adult low strength tablet delayed release 81 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin ec low strength tablet delayed release 81 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin low dose tablet delayed release 81 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin regimen tablet delayed release 81 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin suppository 300 mg rectal</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin tablet 325 mg oral</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin tablet delayed release 325 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>aspirin tablet delayed release 81 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |

**PA** - Prior Authorization   **QL** - Quantity Limits   **ST** - Step Therapy   **B/D** - Covered under Medicare B or D   **LA** - Limited Access   **NDS** - Non-Extended Days Supply   **DP** - The drug is not a Part D drug

| NAME OF DRUG                                                           | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>childrens silapap liquid 160 mg/5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| ECOTRIN LOW STRENGTH TABLET DELAYED RELEASE 81 MG ORAL                 | \$0 (Tier 3)                             | DP                                               |
| <i>ed-apap liquid 160 mg/5ml oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| FEVERALL ADULTS SUPPOSITORY 650 MG RECTAL                              | \$0 (Tier 3)                             | DP                                               |
| FEVERALL CHILDRENS SUPPOSITORY 120 MG RECTAL                           | \$0 (Tier 3)                             | DP                                               |
| FEVERALL INFANTS SUPPOSITORY 80 MG RECTAL                              | \$0 (Tier 3)                             | DP                                               |
| FEVERALL JUNIOR STRENGTH SUPPOSITORY 325 MG RECTAL                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp 8 hour arthritis relief tablet extended release 650 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>gnp 8 hour pain relief tablet extended release 650 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp 8 hour pain reliever tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>gnp acetaminophen tablet 325 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp acetaminophen tablet chewable 160 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp aspirin low dose tablet delayed release 81 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp aspirin tablet delayed release 325 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp aspirin tablet delayed release 81 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp infants pain/fever suspension 160 mg/5ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pain &amp; fever childrens suspension 160 mg/5ml oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pain &amp; fever infants suspension 160 mg/5ml oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pain relief extra strength tablet 500 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pain relief tablet 325 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense arthritis pain tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense aspirin low dose tablet delayed release 81 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense aspirin tablet 325 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense pain &amp; fever child suspension 160 mg/5ml oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense pain &amp; fever infants suspension 160 mg/5ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense pain relief extra st tablet 500 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense pain relief tablet 325 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>hm acetaminophen childrens tablet chewable 160 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>hm adult aspirin tablet 325 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                           | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>hm arthritis pain relief tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>hm aspirin ec low dose tablet delayed release 81 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>hm aspirin tablet delayed release 325 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>hm pain reliever tablet 325 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>liquid acetaminophen liquid 160 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>mapap arthritis pain tablet extended release 650 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>mapap capsule 500 mg oral</i>                                       | \$0 (Tier 3)                             | DP                                               |
| MAPAP CHILDRENS TABLET CHEWABLE 160 MG ORAL                            | \$0 (Tier 3)                             | DP                                               |
| MAPAP CHILDRENS TABLET CHEWABLE 80 MG ORAL                             | \$0 (Tier 3)                             | DP                                               |
| <i>m-pap liquid 160 mg/5ml oral</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>pain &amp; fever childrens suspension 160 mg/5ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>pain &amp; fever infants suspension 160 mg/5ml oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>pain relief extra strength tablet 500 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>pain relief liquid 500 mg/15ml oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>pain relief regular strength tablet 325 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| PHARBETOL EXTRA STRENGTH TABLET 500 MG ORAL                            | \$0 (Tier 3)                             | DP                                               |
| PHARBETOL TABLET 325 MG ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| <i>qc arthritis pain relief tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>qc aspirin low dose tablet delayed release 81 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>qc aspirin tablet 325 mg oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| <i>qc enteric aspirin tablet delayed release 325 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>qc non-aspirin childrens suspension 160 mg/5ml oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>qc non-aspirin extra strength tablet 500 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>qc pain relief childrens suspension 160 mg/5ml oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>qc pain relief extra strength tablet 500 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>qc pain relief tablet 325 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>sm 8 hour pain relief tablet extended release 650 mg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>sm arthritis pain relief tablet extended release 650 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>sm aspirin adult low strength tablet delayed release 81 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>sm aspirin ec tablet delayed release 325 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>sm aspirin low dose tablet delayed release 81 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>sm aspirin tablet 325 mg oral</i>                                   | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                   | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm pain &amp; fever childrens suspension 160 mg/5ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>sm pain &amp; fever infants suspension 160 mg/5ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm pain relief tablet 500 mg oral</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm pain reliever childrens suspension 160 mg/5ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm pain reliever ex st tablet 500 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>sm pain reliever tablet 325 mg oral</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>tri-buffered aspirin tablet 325 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <b>Nsaids</b>                                                                  |                                          |                                                  |
| <i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>                            | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>celecoxib oral capsule 400 mg</i>                                           | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>childrens ibuprofen suspension 100 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>childrens ibuprofen suspension 200 mg/10ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>diclofenac potassium oral tablet 50 mg</i>                                  | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>diclofenac sodium er oral tablet extended release 24 hour 100 mg</i>        | \$0 (Tier 1)                             |                                                  |
| <i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg</i>       | \$0 (Tier 1)                             |                                                  |
| <i>diflunisal oral tablet 500 mg</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>ec-naproxen oral tablet delayed release 375 mg</i>                          | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>ec-naproxen oral tablet delayed release 500 mg</i>                          | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>etodolac oral capsule 200 mg, 300 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>etodolac oral tablet 400 mg, 500 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| <i>flurbiprofen oral tablet 100 mg</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>gnp childrens ibuprofen suspension 100 mg/5ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp ibuprofen childrens tablet chewable 100 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp ibuprofen infants suspension 50 mg/1.25ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp ibuprofen tablet 200 mg oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense ibuprofen childrens suspension 100 mg/5ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense ibuprofen infants suspension 50 mg/1.25ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense ibuprofen tablet 200 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>hm ibuprofen childrens suspension 100 mg/5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>hm ibuprofen tablet 200 mg oral</i>                                         | \$0 (Tier 3)                             | DP                                               |
| <b>IBU ORAL TABLET 400 MG, 600 MG, 800 MG</b>                                  | \$0 (Tier 1)                             |                                                  |
| <i>ibuprofen childrens suspension 100 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>ibuprofen junior strength tablet chewable 100 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>ibuprofen oral suspension 100 mg/5ml</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>                            | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                                                                            | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>ibuprofen tablet 200 mg oral</i>                                                                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>infants ibuprofen suspension 50 mg/1.25ml oral</i>                                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>meijer ibuprofen tablet 200 mg oral</i>                                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>meloxicam oral tablet 15 mg, 7.5 mg</i>                                                                                              | \$0 (Tier 1)                             |                                                  |
| <i>nabumetone oral tablet 500 mg, 750 mg</i>                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>                                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>naproxen oral tablet delayed release 375 mg</i>                                                                                      | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>naproxen oral tablet delayed release 500 mg</i>                                                                                      | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>naproxen sodium oral tablet 275 mg, 550 mg</i>                                                                                       | \$0 (Tier 1)                             |                                                  |
| <i>piroxicam oral capsule 10 mg, 20 mg</i>                                                                                              | \$0 (Tier 1)                             |                                                  |
| <i>px ibuprofen tablet 200 mg oral</i>                                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>qc childrens ibuprofen suspension 100 mg/5ml oral</i>                                                                                | \$0 (Tier 3)                             | DP                                               |
| <i>qc ibuprofen tablet 200 mg oral</i>                                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm ibuprofen ib childrens tablet chewable 100 mg oral</i>                                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm ibuprofen ib tablet 200 mg oral</i>                                                                                               | \$0 (Tier 3)                             | DP                                               |
| <i>sm ibuprofen tablet 200 mg oral</i>                                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm infants ibuprofen suspension 50 mg/1.25ml oral</i>                                                                                | \$0 (Tier 3)                             | DP                                               |
| <i>sulindac oral tablet 150 mg, 200 mg</i>                                                                                              | \$0 (Tier 1)                             |                                                  |
| <b>Opioid Analgesics, Long-Acting</b>                                                                                                   |                                          |                                                  |
| <i>buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr</i>                                     | \$0 (Tier 1)                             | PA; QL (4 per 28 days)                           |
| <i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr</i> | \$0 (Tier 1)                             | PA; QL (10 per 30 days)                          |
| <i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 120 mg, 80 mg</i>                                           | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 20 mg, 30 mg, 40 mg, 60 mg</i>                                      | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <b>HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG</b>                             | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <b>METHADONE HCL INTENSOL ORAL CONCENTRATE 10 MG/ML</b>                                                                                 | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>methadone hcl oral solution 10 mg/5ml, 5 mg/5ml</i>                                                                                  | \$0 (Tier 1)                             | PA; QL (450 per 30 days)                         |
| <i>methadone hcl oral tablet 10 mg, 5 mg</i>                                                                                            | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>                                             | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <b>OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG</b>                                 | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <b>Opioid Analgesics, Short-Acting</b>                                                                                                  |                                          |                                                  |
| <i>acetaminophen-codeine oral solution 120-12 mg/5ml</i>                                                                                | \$0 (Tier 1)                             | QL (2700 per 30 days)                            |

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|--------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>acetaminophen-codeine oral tablet 300-15 mg</i>                                               | \$0 (Tier 1)                             | QL (400 per 30 days)                             |
| <i>acetaminophen-codeine oral tablet 300-30 mg</i>                                               | \$0 (Tier 1)                             | QL (360 per 30 days)                             |
| <i>acetaminophen-codeine oral tablet 300-60 mg</i>                                               | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml</i>                                  | \$0 (Tier 2)                             |                                                  |
| ENDOCET ORAL TABLET 10-325 MG                                                                    | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| ENDOCET ORAL TABLET 2.5-325 MG, 5-325 MG                                                         | \$0 (Tier 1)                             | QL (360 per 30 days)                             |
| ENDOCET ORAL TABLET 7.5-325 MG                                                                   | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg</i> | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| <i>fentanyl citrate buccal lozenge on a handle 200 mcg</i>                                       | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>                                   | \$0 (Tier 1)                             | QL (2700 per 30 days)                            |
| <i>hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg</i>                               | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>hydrocodone-acetaminophen oral tablet 5-325 mg</i>                                            | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>                                              | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| <i>hydromorphone hcl oral liquid 1 mg/ml</i>                                                     | \$0 (Tier 1)                             | QL (600 per 30 days)                             |
| <i>hydromorphone hcl oral tablet 2 mg, 4 mg, 8 mg</i>                                            | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>                                   | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>morphine sulfate (pf) injection solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 5 mg/ml, 8 mg/ml</i>     | \$0 (Tier 2)                             | B/D                                              |
| <i>morphine sulfate (pf) intravenous solution 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml</i>   | \$0 (Tier 2)                             | B/D                                              |
| <i>morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 50 mg/ml, 8 mg/ml</i>                | \$0 (Tier 2)                             | B/D                                              |
| <i>morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml</i>                                       | \$0 (Tier 1)                             | QL (900 per 30 days)                             |
| <i>morphine sulfate oral tablet 15 mg, 30 mg</i>                                                 | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>nalbuphine hcl injection solution 10 mg/ml, 20 mg/ml</i>                                      | \$0 (Tier 2)                             |                                                  |
| <i>oxycodone hcl oral capsule 5 mg</i>                                                           | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>oxycodone hcl oral concentrate 100 mg/5ml</i>                                                 | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>oxycodone hcl oral solution 5 mg/5ml</i>                                                      | \$0 (Tier 1)                             | QL (900 per 30 days)                             |
| <i>oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>                                | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>oxycodone-acetaminophen oral tablet 10-325 mg</i>                                             | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg</i>                                  | \$0 (Tier 1)                             | QL (360 per 30 days)                             |
| <i>oxycodone-acetaminophen oral tablet 7.5-325 mg</i>                                            | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>tramadol hcl oral tablet 50 mg</i>                                                            | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>                                            | \$0 (Tier 1)                             | QL (240 per 30 days)                             |

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|---------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>ANESTHETICS</b>                                                                                |                                          |                                                  |
| <b>Local Anesthetics</b>                                                                          |                                          |                                                  |
| <i>lidocaine hcl (pf) injection solution 0.5 %, 1 %, 1.5 %</i>                                    | \$0 (Tier 1)                             | B/D                                              |
| <i>lidocaine hcl injection solution 0.5 %, 1 %, 2 %</i>                                           | \$0 (Tier 1)                             | B/D                                              |
| <b>ANTI-INFECTIVES</b>                                                                            |                                          |                                                  |
| <b>Antifungals</b>                                                                                |                                          |                                                  |
| ABELCET INTRAVENOUS SUSPENSION 5 MG/ML                                                            | \$0 (Tier 2)                             | B/D                                              |
| <i>amphotericin b intravenous solution reconstituted 50 mg</i>                                    | \$0 (Tier 1)                             | B/D                                              |
| <i>amphotericin b liposome intravenous suspension reconstituted 50 mg</i>                         | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg</i>                        | \$0 (Tier 1)                             |                                                  |
| <i>fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%</i> | \$0 (Tier 1)                             |                                                  |
| <i>fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>flucytosine oral capsule 250 mg, 500 mg</i>                                                    | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>griseofulvin microsize oral suspension 125 mg/5ml</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>griseofulvin microsize oral tablet 500 mg</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| <i>itraconazole oral capsule 100 mg</i>                                                           | \$0 (Tier 1)                             | PA                                               |
| <i>ketoconazole oral tablet 200 mg</i>                                                            | \$0 (Tier 1)                             | PA                                               |
| <i>miconazole sodium intravenous solution reconstituted 100 mg, 50 mg</i>                         | \$0 (Tier 2)                             | NDS                                              |
| <i>nystatin oral tablet 500000 unit</i>                                                           | \$0 (Tier 1)                             |                                                  |
| <i>posaconazole oral suspension 40 mg/ml</i>                                                      | \$0 (Tier 2)                             | PA; QL (630 per 30 days); NDS                    |
| <i>posaconazole oral tablet delayed release 100 mg</i>                                            | \$0 (Tier 2)                             | PA; QL (93 per 30 days); NDS                     |
| <i>terbinafine hcl oral tablet 250 mg</i>                                                         | \$0 (Tier 1)                             | QL (90 per 365 days)                             |
| <i>voriconazole intravenous solution reconstituted 200 mg</i>                                     | \$0 (Tier 1)                             | PA                                               |
| <i>voriconazole oral suspension reconstituted 40 mg/ml</i>                                        | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>voriconazole oral tablet 200 mg</i>                                                            | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>voriconazole oral tablet 50 mg</i>                                                             | \$0 (Tier 1)                             | PA; QL (480 per 30 days)                         |
| <b>Anti-Infectives - Miscellaneous</b>                                                            |                                          |                                                  |
| <i>albendazole oral tablet 200 mg</i>                                                             | \$0 (Tier 2)                             | PA; QL (672 per 365 days); NDS                   |
| <i>amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>atovaquone oral suspension 750 mg/5ml</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>aztreonam injection solution reconstituted 1 gm, 2 gm</i>                                      | \$0 (Tier 1)                             |                                                  |

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|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| BINAXNOW COVID-19 AG HOME TEST KIT IN VITRO                                                                                      | \$0 (Tier 3)                             | DP                                               |
| CARESTART COVID-19 HOME TEST KIT IN VITRO                                                                                        | \$0 (Tier 3)                             | DP                                               |
| CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG                                                                                  | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml</i>                                                           | \$0 (Tier 1)                             |                                                  |
| <i>clindamycin phosphate in d5w intravenous solution 300 mg/50ml, 600 mg/50ml, 900 mg/50ml</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>clindamycin phosphate in nacl intravenous solution 300-0.9 mg/50ml-%, 600-0.9 mg/50ml-%, 900-0.9 mg/50ml-%</i>                | \$0 (Tier 2)                             |                                                  |
| <i>clindamycin phosphate injection solution 600 mg/4ml, 900 mg/6ml, 9000 mg/60ml</i>                                             | \$0 (Tier 1)                             |                                                  |
| CLINITEST RAPID COVID-19 TEST KIT IN VITRO                                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>colistimethate sodium (cba) injection solution reconstituted 150 mg</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>covid-19 at-home test kit in vitro</i>                                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>cvs covid-19 at home test kit kit in vitro</i>                                                                                | \$0 (Tier 3)                             | DP                                               |
| <i>dapsone oral tablet 100 mg, 25 mg</i>                                                                                         | \$0 (Tier 1)                             |                                                  |
| <i>daptomycin intravenous solution reconstituted 350 mg, 500 mg</i>                                                              | \$0 (Tier 2)                             | NDS                                              |
| DIATRUST COVID-19 HOME TEST KIT IN VITRO                                                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>ellume covid-19 home test kit in vitro</i>                                                                                    | \$0 (Tier 3)                             | DP                                               |
| EMVERM ORAL TABLET CHEWABLE 100 MG                                                                                               | \$0 (Tier 2)                             | QL (12 per 365 days); NDS                        |
| <i>ertapenem sodium injection solution reconstituted 1 gm</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| FLOWFLEX COVID-19 AG HOME TEST KIT IN VITRO                                                                                      | \$0 (Tier 3)                             | DP                                               |
| GENABIO COVID-19 RAPID TEST KIT IN VITRO                                                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-%</i> | \$0 (Tier 1)                             |                                                  |
| <i>gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml</i>                                                                  | \$0 (Tier 1)                             |                                                  |
| <i>gnp antibacterial urinary pain tablet 162-162.5 mg oral</i>                                                                   | \$0 (Tier 3)                             | DP                                               |
| IHEALTH COVID-19 RAPID TEST KIT IN VITRO                                                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg</i>                                                     | \$0 (Tier 1)                             |                                                  |
| INDICAID COVID-19 RAPID TEST KIT IN VITRO                                                                                        | \$0 (Tier 3)                             | DP                                               |
| INTELISWAB COVID-19 RAPID TEST KIT IN VITRO                                                                                      | \$0 (Tier 3)                             | DP                                               |
| <i>ivermectin oral tablet 3 mg</i>                                                                                               | \$0 (Tier 1)                             | PA; QL (12 per 90 days)                          |

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| NAME OF DRUG                                                                | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>linezolid in sodium chloride intravenous solution 600-0.9 mg/300ml-%</i> | \$0 (Tier 1)                             |                                                  |
| <i>linezolid intravenous solution 600 mg/300ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>linezolid oral suspension reconstituted 100 mg/5ml</i>                   | \$0 (Tier 2)                             | QL (1800 per 30 days); NDS                       |
| <i>linezolid oral tablet 600 mg</i>                                         | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| LUCIRA CHECK IT COVID-19 TEST KIT IN VITRO                                  | \$0 (Tier 3)                             | DP                                               |
| <i>meropenem intravenous solution reconstituted 1 gm, 500 mg</i>            | \$0 (Tier 1)                             |                                                  |
| <i>methenamine hippurate oral tablet 1 gm</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>metronidazole intravenous solution 500 mg/100ml</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>metronidazole oral tablet 250 mg, 500 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>neomycin sulfate oral tablet 500 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>nitazoxanide oral tablet 500 mg</i>                                      | \$0 (Tier 2)                             | QL (6 per 30 days); NDS                          |
| <i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>               | \$0 (Tier 2)                             |                                                  |
| <i>nitrofurantoin monohyd macro oral capsule 100 mg</i>                     | \$0 (Tier 2)                             |                                                  |
| ON/GO COVID-19 ANTIGEN TEST KIT IN VITRO                                    | \$0 (Tier 3)                             | DP                                               |
| ON/GO ONE COVID-19 HOME TEST KIT IN VITRO                                   | \$0 (Tier 3)                             | DP                                               |
| <i>pentamidine isethionate inhalation solution reconstituted 300 mg</i>     | \$0 (Tier 1)                             | B/D                                              |
| <i>pentamidine isethionate injection solution reconstituted 300 mg</i>      | \$0 (Tier 1)                             |                                                  |
| PILOT COVID-19 AT-HOME TEST KIT IN VITRO                                    | \$0 (Tier 3)                             | DP                                               |
| <i>praziquantel oral tablet 600 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| QUICKVUE AT-HOME COVID-19 TEST KIT IN VITRO                                 | \$0 (Tier 3)                             | DP                                               |
| <i>reeses pinworm medicine suspension 144 (50 base) mg/ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED 200 MG                          | \$0 (Tier 2)                             | NDS                                              |
| SIVEXTRO ORAL TABLET 200 MG                                                 | \$0 (Tier 2)                             | NDS                                              |
| SPEEDY SWAB COVID-19 ANTIGEN KIT IN VITRO                                   | \$0 (Tier 3)                             | DP                                               |
| <i>streptomycin sulfate intramuscular solution reconstituted 1 gm</i>       | \$0 (Tier 2)                             | NDS                                              |
| <i>sulfadiazine oral tablet 500 mg</i>                                      | \$0 (Tier 2)                             | NDS                                              |
| <i>sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml</i>     | \$0 (Tier 1)                             |                                                  |
| <i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>          | \$0 (Tier 1)                             |                                                  |
| <i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>      | \$0 (Tier 1)                             |                                                  |
| <i>tinidazole oral tablet 250 mg, 500 mg</i>                                | \$0 (Tier 1)                             |                                                  |

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|-------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>tobramycin inhalation nebulization solution 300 mg/5ml</i>                                               | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>tobramycin sulfate injection solution 1.2 gm/30ml, 10 mg/ml, 2 gm/50ml, 80 mg/2ml</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>trimethoprim oral tablet 100 mg</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-%, 750-0.9 mg/150ml-%</i> | \$0 (Tier 2)                             |                                                  |
| <i>vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 5 gm, 500 mg, 750 mg</i>                  | \$0 (Tier 1)                             |                                                  |
| <i>vancomycin hcl oral capsule 125 mg</i>                                                                   | \$0 (Tier 1)                             | QL (80 per 180 days)                             |
| <i>vancomycin hcl oral capsule 250 mg</i>                                                                   | \$0 (Tier 1)                             | QL (160 per 180 days)                            |
| <b>Antimalarials</b>                                                                                        |                                          |                                                  |
| <i>atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>                                                     | \$0 (Tier 1)                             |                                                  |
| COARTEM ORAL TABLET 20-120 MG                                                                               | \$0 (Tier 2)                             |                                                  |
| <i>mefloquine hcl oral tablet 250 mg</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>primaquine phosphate tablet 26.3 (15 base) mg oral</i>                                                   | \$0 (Tier 1)                             |                                                  |
| <i>primaquine phosphate tablet 26.3 (15 base) mg oral</i>                                                   | \$0 (Tier 2)                             |                                                  |
| <i>quinine sulfate oral capsule 324 mg</i>                                                                  | \$0 (Tier 1)                             | PA                                               |
| <b>Antiretroviral Agents</b>                                                                                |                                          |                                                  |
| <i>abacavir sulfate oral solution 20 mg/ml</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <i>abacavir sulfate oral tablet 300 mg</i>                                                                  | \$0 (Tier 1)                             |                                                  |
| APTIVUS ORAL CAPSULE 250 MG                                                                                 | \$0 (Tier 2)                             | NDS                                              |
| <i>atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg</i>                                               | \$0 (Tier 1)                             |                                                  |
| <i>darunavir oral tablet 600 mg</i>                                                                         | \$0 (Tier 2)                             | QL (60 per 30 days); NDS                         |
| <i>darunavir oral tablet 800 mg</i>                                                                         | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| EDURANT ORAL TABLET 25 MG                                                                                   | \$0 (Tier 2)                             | NDS                                              |
| <i>efavirenz oral capsule 200 mg, 50 mg</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>efavirenz oral tablet 600 mg</i>                                                                         | \$0 (Tier 1)                             |                                                  |
| <i>emtricitabine oral capsule 200 mg</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| EMTRIVA ORAL SOLUTION 10 MG/ML                                                                              | \$0 (Tier 2)                             |                                                  |
| <i>etravirine oral tablet 100 mg, 200 mg</i>                                                                | \$0 (Tier 2)                             | NDS                                              |
| <i>fosamprenavir calcium oral tablet 700 mg</i>                                                             | \$0 (Tier 2)                             | NDS                                              |
| FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG                                                            | \$0 (Tier 2)                             | LA; NDS                                          |
| INTELENCE ORAL TABLET 25 MG                                                                                 | \$0 (Tier 2)                             |                                                  |
| ISENTRESS HD ORAL TABLET 600 MG                                                                             | \$0 (Tier 2)                             | NDS                                              |
| ISENTRESS ORAL PACKET 100 MG                                                                                | \$0 (Tier 2)                             | NDS                                              |
| ISENTRESS ORAL TABLET 400 MG                                                                                | \$0 (Tier 2)                             | NDS                                              |

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|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ISENTRESS ORAL TABLET CHEWABLE 100 MG                            | \$0 (Tier 2)                             | NDS                                              |
| ISENTRESS ORAL TABLET CHEWABLE 25 MG                             | \$0 (Tier 2)                             |                                                  |
| <i>lamivudine oral solution 10 mg/ml</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>lamivudine oral tablet 150 mg, 300 mg</i>                     | \$0 (Tier 1)                             |                                                  |
| LEXIVA ORAL SUSPENSION 50 MG/ML                                  | \$0 (Tier 2)                             |                                                  |
| <i>maraviroc oral tablet 150 mg, 300 mg</i>                      | \$0 (Tier 2)                             | NDS                                              |
| <i>nevirapine er oral tablet extended release 24 hour 400 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>nevirapine oral suspension 50 mg/5ml</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>nevirapine oral tablet 200 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| NORVIR ORAL PACKET 100 MG                                        | \$0 (Tier 2)                             |                                                  |
| PIFELTRO ORAL TABLET 100 MG                                      | \$0 (Tier 2)                             | NDS                                              |
| PREZISTA ORAL SUSPENSION 100 MG/ML                               | \$0 (Tier 2)                             | QL (400 per 30 days); NDS                        |
| PREZISTA ORAL TABLET 150 MG                                      | \$0 (Tier 2)                             | QL (240 per 30 days); NDS                        |
| PREZISTA ORAL TABLET 75 MG                                       | \$0 (Tier 2)                             | QL (480 per 30 days)                             |
| REYATAZ ORAL PACKET 50 MG                                        | \$0 (Tier 2)                             | NDS                                              |
| <i>ritonavir oral tablet 100 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG              | \$0 (Tier 2)                             | NDS                                              |
| SELZENTRY ORAL SOLUTION 20 MG/ML                                 | \$0 (Tier 2)                             | NDS                                              |
| SELZENTRY ORAL TABLET 25 MG                                      | \$0 (Tier 2)                             |                                                  |
| SELZENTRY ORAL TABLET 75 MG                                      | \$0 (Tier 2)                             | NDS                                              |
| SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG         | \$0 (Tier 2)                             | LA; NDS                                          |
| <i>tenofovir disoproxil fumarate oral tablet 300 mg</i>          | \$0 (Tier 1)                             |                                                  |
| TIVICAY ORAL TABLET 10 MG                                        | \$0 (Tier 2)                             |                                                  |
| TIVICAY ORAL TABLET 25 MG, 50 MG                                 | \$0 (Tier 2)                             | NDS                                              |
| TIVICAY PD ORAL TABLET SOLUBLE 5 MG                              | \$0 (Tier 2)                             | NDS                                              |
| TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33ML                      | \$0 (Tier 2)                             | LA; NDS                                          |
| TYBOST ORAL TABLET 150 MG                                        | \$0 (Tier 2)                             |                                                  |
| VIRACEPT ORAL TABLET 250 MG, 625 MG                              | \$0 (Tier 2)                             | NDS                                              |
| VIREAD ORAL POWDER 40 MG/GM                                      | \$0 (Tier 2)                             | NDS                                              |
| VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG                        | \$0 (Tier 2)                             | NDS                                              |
| <i>zidovudine oral capsule 100 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>zidovudine oral syrup 50 mg/5ml</i>                           | \$0 (Tier 1)                             |                                                  |
| <i>zidovudine oral tablet 300 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <b>Antiretroviral Combination Agents</b>                         |                                          |                                                  |
| <i>abacavir sulfate-lamivudine oral tablet 600-300 mg</i>        | \$0 (Tier 1)                             |                                                  |
| BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG                  | \$0 (Tier 2)                             | NDS                                              |

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|----------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| CIMDUO ORAL TABLET 300-300 MG                                                    | \$0 (Tier 2)                             | NDS                                              |
| COMPLERA ORAL TABLET 200-25-300 MG                                               | \$0 (Tier 2)                             | NDS                                              |
| DELSTRIGO ORAL TABLET 100-300-300 MG                                             | \$0 (Tier 2)                             | NDS                                              |
| DESCOVY ORAL TABLET 120-15 MG, 200-25 MG                                         | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| DOVATO ORAL TABLET 50-300 MG                                                     | \$0 (Tier 2)                             | NDS                                              |
| <i>efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg</i>                 | \$0 (Tier 2)                             | NDS                                              |
| <i>efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg</i> | \$0 (Tier 2)                             | NDS                                              |
| <i>emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i> | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| <i>emtricitabine-tenofovir df oral tablet 200-300 mg</i>                         | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| EVOTAZ ORAL TABLET 300-150 MG                                                    | \$0 (Tier 2)                             | NDS                                              |
| GENVOYA ORAL TABLET 150-150-200-10 MG                                            | \$0 (Tier 2)                             | NDS                                              |
| JULUCA ORAL TABLET 50-25 MG                                                      | \$0 (Tier 2)                             | NDS                                              |
| <i>lamivudine-zidovudine oral tablet 150-300 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>lopinavir-ritonavir oral solution 400-100 mg/5ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| ODEFSEY ORAL TABLET 200-25-25 MG                                                 | \$0 (Tier 2)                             | NDS                                              |
| PREZCOBIX ORAL TABLET 800-150 MG                                                 | \$0 (Tier 2)                             | NDS                                              |
| STRIBILD ORAL TABLET 150-150-200-300 MG                                          | \$0 (Tier 2)                             | NDS                                              |
| SYMTUZA ORAL TABLET 800-150-200-10 MG                                            | \$0 (Tier 2)                             | NDS                                              |
| TRIUMEQ ORAL TABLET 600-50-300 MG                                                | \$0 (Tier 2)                             | NDS                                              |
| TRIUMEQ PD ORAL TABLET SOLUBLE 60-5-30 MG                                        | \$0 (Tier 2)                             | NDS                                              |
| TRIZIVIR ORAL TABLET 300-150-300 MG                                              | \$0 (Tier 2)                             | NDS                                              |
| <b>Antitubercular Agents</b>                                                     |                                          |                                                  |
| <i>cycloserine oral capsule 250 mg</i>                                           | \$0 (Tier 2)                             | NDS                                              |
| <i>ethambutol hcl oral tablet 100 mg, 400 mg</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>isoniazid oral syrup 50 mg/5ml</i>                                            | \$0 (Tier 1)                             |                                                  |
| <i>isoniazid oral tablet 100 mg, 300 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| PRIFTIN ORAL TABLET 150 MG                                                       | \$0 (Tier 2)                             |                                                  |
| <i>pyrazinamide oral tablet 500 mg</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>rifabutin oral capsule 150 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| <i>rifampin intravenous solution reconstituted 600 mg</i>                        | \$0 (Tier 1)                             |                                                  |
| <i>rifampin oral capsule 150 mg, 300 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| SIRTURO ORAL TABLET 100 MG, 20 MG                                                | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| TRECTOR ORAL TABLET 250 MG                                                       | \$0 (Tier 2)                             |                                                  |
| <b>Antivirals</b>                                                                |                                          |                                                  |
| <i>acyclovir oral capsule 200 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| <i>acyclovir oral suspension 200 mg/5ml</i>                                      | \$0 (Tier 1)                             |                                                  |

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|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>acyclovir oral tablet 400 mg, 800 mg</i>                           | \$0 (Tier 1)                             |                                                  |
| <i>acyclovir sodium intravenous solution 50 mg/ml</i>                 | \$0 (Tier 1)                             | B/D                                              |
| <i>adefovir dipivoxil oral tablet 10 mg</i>                           | \$0 (Tier 1)                             |                                                  |
| BARACLUDE ORAL SOLUTION 0.05 MG/ML                                    | \$0 (Tier 2)                             | NDS                                              |
| <i>entecavir oral tablet 0.5 mg, 1 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG                            | \$0 (Tier 2)                             | PA; NDS                                          |
| EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG                             | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>ganciclovir sodium intravenous solution reconstituted 500 mg</i>   | \$0 (Tier 1)                             | B/D                                              |
| HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG                           | \$0 (Tier 2)                             | PA; NDS                                          |
| HARVONI ORAL TABLET 45-200 MG, 90-400 MG                              | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>lamivudine oral tablet 100 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| MAVYRET ORAL PACKET 50-20 MG                                          | \$0 (Tier 2)                             | PA; NDS                                          |
| MAVYRET ORAL TABLET 100-40 MG                                         | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>oseltamivir phosphate oral capsule 30 mg</i>                       | \$0 (Tier 1)                             | QL (168 per 365 days)                            |
| <i>oseltamivir phosphate oral capsule 45 mg, 75 mg</i>                | \$0 (Tier 1)                             | QL (84 per 365 days)                             |
| <i>oseltamivir phosphate oral suspension reconstituted 6 mg/ml</i>    | \$0 (Tier 1)                             | QL (1080 per 365 days)                           |
| PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG & 10 X 100MG  | \$0 (Tier 2)                             | QL (40 per 30 days)                              |
| PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG & 10 X 100MG  | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML                              | \$0 (Tier 2)                             | PA; NDS                                          |
| PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML         | \$0 (Tier 2)                             | PA; NDS                                          |
| PREVYMIS ORAL TABLET 240 MG, 480 MG                                   | \$0 (Tier 2)                             | PA; QL (28 per 28 days); NDS                     |
| RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT | \$0 (Tier 2)                             | QL (120 per 365 days)                            |
| <i>ribavirin oral capsule 200 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>ribavirin oral tablet 200 mg</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>rimantadine hcl oral tablet 100 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>valacyclovir hcl oral tablet 1 gm, 500 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>valganciclovir hcl oral solution reconstituted 50 mg/ml</i>        | \$0 (Tier 2)                             | NDS                                              |
| <i>valganciclovir hcl oral tablet 450 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| VEMLIDY ORAL TABLET 25 MG                                             | \$0 (Tier 2)                             | NDS                                              |
| VOSEVI ORAL TABLET 400-100-100 MG                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG               | \$0 (Tier 2)                             | QL (1 per 180 days)                              |
| XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG               | \$0 (Tier 2)                             | QL (1 per 180 days)                              |

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| NAME OF DRUG                                                                             | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Cephalosporins</b>                                                                    |                                          |                                                  |
| <i>cefaclor er oral tablet extended release 12 hour 500 mg</i>                           | \$0 (Tier 2)                             |                                                  |
| <i>cefaclor oral capsule 250 mg, 500 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>cefaclor oral suspension reconstituted 250 mg/5ml</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>cefadroxil oral capsule 500 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml</i>                   | \$0 (Tier 1)                             |                                                  |
| <i>cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 2 gm, 3 gm, 500 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>cefazolin sodium intravenous solution reconstituted 1 gm</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>cefazolin sodium intravenous solution reconstituted 2 gm, 3 gm</i>                    | \$0 (Tier 2)                             |                                                  |
| <i>cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%</i>      | \$0 (Tier 2)                             |                                                  |
| <i>cefdinir oral capsule 300 mg</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>cefepime hcl injection solution reconstituted 1 gm</i>                                | \$0 (Tier 1)                             |                                                  |
| <i>cefepime hcl intravenous solution reconstituted 2 gm</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>cefixime oral capsule 400 mg</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>cefoxitin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm</i>             | \$0 (Tier 1)                             |                                                  |
| <i>cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml</i>          | \$0 (Tier 1)                             |                                                  |
| <i>cefpodoxime proxetil oral tablet 100 mg, 200 mg</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>cefprozil oral tablet 250 mg, 500 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>ceftazidime injection solution reconstituted 1 gm, 6 gm</i>                           | \$0 (Tier 1)                             |                                                  |
| <i>ceftazidime intravenous solution reconstituted 2 gm</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i>    | \$0 (Tier 1)                             |                                                  |
| <i>ceftriaxone sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm</i>           | \$0 (Tier 1)                             |                                                  |
| <i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>cefuroxime sodium injection solution reconstituted 750 mg</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>cefuroxime sodium intravenous solution reconstituted 1.5 gm</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>cephalexin oral capsule 250 mg, 500 mg</i>                                            | \$0 (Tier 1)                             |                                                  |

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|------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>                   | \$0 (Tier 1)                             |                                                  |
| TAZICEF INJECTION SOLUTION RECONSTITUTED 1 GM                                            | \$0 (Tier 1)                             |                                                  |
| TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED 1 GM, 2 GM, 6 GM                              | \$0 (Tier 1)                             |                                                  |
| TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 400 MG, 600 MG                                | \$0 (Tier 2)                             | NDS                                              |
| <b>Erythromycins/Macrolides</b>                                                          |                                          |                                                  |
| <i>azithromycin intravenous solution reconstituted 500 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>azithromycin oral packet 1 gm</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>clarithromycin er oral tablet extended release 24 hour 500 mg</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>               | \$0 (Tier 1)                             |                                                  |
| <i>clarithromycin oral tablet 250 mg, 500 mg</i>                                         | \$0 (Tier 1)                             |                                                  |
| DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML                                           | \$0 (Tier 2)                             | NDS                                              |
| DIFICID ORAL TABLET 200 MG                                                               | \$0 (Tier 2)                             | NDS                                              |
| E.E.S. 400 ORAL TABLET 400 MG                                                            | \$0 (Tier 1)                             |                                                  |
| ERY-TAB ORAL TABLET DELAYED RELEASE 250 MG, 333 MG, 500 MG                               | \$0 (Tier 1)                             |                                                  |
| ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG                        | \$0 (Tier 2)                             |                                                  |
| ERYTHROCIN STEARATE ORAL TABLET 250 MG                                                   | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin base oral capsule delayed release particles 250 mg</i>                   | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin base oral tablet 250 mg, 500 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin ethylsuccinate oral tablet 400 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin lactobionate intravenous solution reconstituted 500 mg</i>               | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg</i>                   | \$0 (Tier 1)                             |                                                  |
| <b>Fluoroquinolones</b>                                                                  |                                          |                                                  |
| CIPRO ORAL SUSPENSION RECONSTITUTED 500 MG/5ML (10%)                                     | \$0 (Tier 2)                             |                                                  |
| <i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>ciprofloxacin in d5w intravenous solution 200 mg/100ml, 400 mg/200ml</i>              | \$0 (Tier 1)                             |                                                  |

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|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>levofloxacin in d5w intravenous solution 250 mg/50ml, 500 mg/100ml, 750 mg/150ml</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>levofloxacin intravenous solution 25 mg/ml</i>                                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>levofloxacin oral solution 25 mg/ml</i>                                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>moxifloxacin hcl in nacl intravenous solution 400 mg/250ml</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>moxifloxacin hcl oral tablet 400 mg</i>                                                                                        | \$0 (Tier 1)                             |                                                  |
| <b>Penicillins</b>                                                                                                                |                                          |                                                  |
| <i>amoxicillin oral capsule 250 mg, 500 mg</i>                                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin oral tablet 500 mg, 875 mg</i>                                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml</i> | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>ampicillin oral capsule 500 mg</i>                                                                                             | \$0 (Tier 1)                             |                                                  |
| <i>ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 2 gm, 250 mg, 500 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>ampicillin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>ampicillin-sulbactam sodium intravenous solution reconstituted 1.5 (1-0.5) gm, 15 (10-5) gm, 3 (2-1) gm</i>                    | \$0 (Tier 1)                             |                                                  |
| BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1200000 UNIT/2ML, 2400000 UNIT/4ML, 600000 UNIT/ML                        | \$0 (Tier 2)                             |                                                  |
| <i>dicloxacillin sodium oral capsule 250 mg, 500 mg</i>                                                                           | \$0 (Tier 1)                             |                                                  |
| <i>nafcillin sodium injection solution reconstituted 1 gm, 2 gm</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>nafcillin sodium intravenous solution reconstituted 10 gm</i>                                                                  | \$0 (Tier 2)                             | NDS                                              |
| <i>oxacillin sodium injection solution reconstituted 1 gm, 2 gm</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>oxacillin sodium intravenous solution reconstituted 10 gm</i>                                                                  | \$0 (Tier 1)                             |                                                  |

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>penicillin g pot in dextrose intravenous solution 40000 unit/ml, 60000 unit/ml</i>                                                                             | \$0 (Tier 2)                             |                                                  |
| <i>penicillin g potassium injection solution reconstituted 20000000 unit, 5000000 unit</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>penicillin g sodium injection solution reconstituted 5000000 unit</i>                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml</i>                                                                                  | \$0 (Tier 1)                             |                                                  |
| <i>penicillin v potassium oral tablet 250 mg, 500 mg</i>                                                                                                          | \$0 (Tier 1)                             |                                                  |
| PFIZERPEN INJECTION SOLUTION RECONSTITUTED 20000000 UNIT, 5000000 UNIT                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm</i> | \$0 (Tier 1)                             |                                                  |
| <b>Tetracyclines</b>                                                                                                                                              |                                          |                                                  |
| DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                                                                                                                | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline hyclate intravenous solution reconstituted 100 mg</i>                                                                                              | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>                                                                                                             | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>                                                                                                              | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>                                                                                                         | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline monohydrate oral suspension reconstituted 25 mg/5ml</i>                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg</i>                                                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>minocycline hcl oral capsule 100 mg, 50 mg, 75 mg</i>                                                                                                          | \$0 (Tier 1)                             |                                                  |
| NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                                                                                                                  | \$0 (Tier 2)                             | LA; NDS                                          |
| NUZYRA ORAL TABLET 150 MG                                                                                                                                         | \$0 (Tier 2)                             | LA; NDS                                          |
| <i>tetracycline hcl oral capsule 250 mg, 500 mg</i>                                                                                                               | \$0 (Tier 1)                             | PA                                               |
| <i>tigecycline intravenous solution reconstituted 50 mg</i>                                                                                                       | \$0 (Tier 2)                             | NDS                                              |
| <b>ANTINEOPLASTIC AGENTS</b>                                                                                                                                      |                                          |                                                  |
| <b>Alkylating Agents</b>                                                                                                                                          |                                          |                                                  |
| BENDEKA INTRAVENOUS SOLUTION 100 MG/4ML                                                                                                                           | \$0 (Tier 2)                             | B/D; LA; NDS                                     |
| <i>carboplatin intravenous solution 150 mg/15ml, 450 mg/45ml, 50 mg/5ml, 600 mg/60ml</i>                                                                          | \$0 (Tier 1)                             | B/D                                              |
| <i>cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml</i>                                                                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclophosphamide injection solution reconstituted 1 gm, 500 mg</i>                                                                                             | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclophosphamide injection solution reconstituted 2 gm</i>                                                                                                     | \$0 (Tier 2)                             | B/D; NDS                                         |

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|-----------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>cyclophosphamide intravenous solution 1 gm/5ml, 2 gm/10ml, 500 mg/2.5ml, 500 mg/ml</i>     | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>cyclophosphamide oral capsule 25 mg, 50 mg</i>                                             | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclophosphamide oral tablet 25 mg, 50 mg</i>                                              | \$0 (Tier 2)                             | B/D                                              |
| GLEOSTINE ORAL CAPSULE 10 MG, 40 MG                                                           | \$0 (Tier 2)                             |                                                  |
| GLEOSTINE ORAL CAPSULE 100 MG                                                                 | \$0 (Tier 2)                             | NDS                                              |
| LEUKERAN ORAL TABLET 2 MG                                                                     | \$0 (Tier 2)                             | NDS                                              |
| <i>oxaliplatin intravenous solution 100 mg/20ml, 200 mg/40ml, 50 mg/10ml</i>                  | \$0 (Tier 1)                             | B/D                                              |
| <i>oxaliplatin intravenous solution reconstituted 100 mg</i>                                  | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>oxaliplatin intravenous solution reconstituted 50 mg</i>                                   | \$0 (Tier 1)                             | B/D                                              |
| PARAPLATIN INTRAVENOUS SOLUTION 1000 MG/100ML                                                 | \$0 (Tier 1)                             | B/D                                              |
| <b>Antibiotics</b>                                                                            |                                          |                                                  |
| <i>doxorubicin hcl intravenous solution 2 mg/ml</i>                                           | \$0 (Tier 1)                             | B/D                                              |
| <i>doxorubicin hcl liposomal intravenous injectable 2 mg/ml</i>                               | \$0 (Tier 2)                             | B/D; NDS                                         |
| ELLENCE INTRAVENOUS SOLUTION 200 MG/100ML, 50 MG/25ML                                         | \$0 (Tier 2)                             | B/D                                              |
| <b>Antimetabolites</b>                                                                        |                                          |                                                  |
| <i>azacitidine injection suspension reconstituted 100 mg</i>                                  | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>cytarabine injection solution 20 mg/ml</i>                                                 | \$0 (Tier 1)                             | B/D                                              |
| <i>fluorouracil intravenous solution 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml</i>      | \$0 (Tier 1)                             | B/D                                              |
| <i>gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml</i>           | \$0 (Tier 1)                             | B/D                                              |
| <i>gemcitabine hcl intravenous solution reconstituted 1 gm, 2 gm, 200 mg</i>                  | \$0 (Tier 1)                             | B/D                                              |
| INQOVI ORAL TABLET 35-100 MG                                                                  | \$0 (Tier 2)                             | PA; LA; QL (5 per 28 days); NDS                  |
| LONSURF ORAL TABLET 15-6.14 MG                                                                | \$0 (Tier 2)                             | PA; LA; QL (100 per 28 days); NDS                |
| LONSURF ORAL TABLET 20-8.19 MG                                                                | \$0 (Tier 2)                             | PA; LA; QL (80 per 28 days); NDS                 |
| <i>mercaptopurine oral tablet 50 mg</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i>          | \$0 (Tier 1)                             | B/D                                              |
| <i>methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml</i>                          | \$0 (Tier 1)                             | B/D                                              |
| <i>methotrexate sodium injection solution reconstituted 1 gm</i>                              | \$0 (Tier 1)                             | B/D                                              |
| ONUREG ORAL TABLET 200 MG, 300 MG                                                             | \$0 (Tier 2)                             | PA; LA; QL (14 per 28 days); NDS                 |
| <i>pemetrexed disodium intravenous solution reconstituted 100 mg, 1000 mg, 500 mg, 750 mg</i> | \$0 (Tier 2)                             | B/D; NDS                                         |
| PURIXAN ORAL SUSPENSION 2000 MG/100ML                                                         | \$0 (Tier 2)                             | LA; NDS                                          |
| TABLOID ORAL TABLET 40 MG                                                                     | \$0 (Tier 2)                             |                                                  |

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|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Hormonal Antineoplastic Agents</b>                                  |                                          |                                                  |
| <i>abiraterone acetate oral tablet 250 mg</i>                          | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| <i>abiraterone acetate oral tablet 500 mg</i>                          | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| AKEEGA ORAL TABLET 100-500 MG, 50-500 MG                               | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| <i>anastrozole oral tablet 1 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>bicalutamide oral tablet 50 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG                 | \$0 (Tier 2)                             | PA                                               |
| ERLEADA ORAL TABLET 240 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| ERLEADA ORAL TABLET 60 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| EULEXIN ORAL CAPSULE 125 MG                                            | \$0 (Tier 2)                             | NDS                                              |
| <i>exemestane oral tablet 25 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL | \$0 (Tier 2)                             | PA; NDS                                          |
| FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG                     | \$0 (Tier 2)                             | PA                                               |
| <i>fulvestrant intramuscular solution prefilled syringe 250 mg/5ml</i> | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>letrozole oral tablet 2.5 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>leuprolide acetate injection kit 1 mg/0.2ml</i>                     | \$0 (Tier 1)                             | PA                                               |
| LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG                       | \$0 (Tier 2)                             | PA; NDS                                          |
| LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG                      | \$0 (Tier 2)                             | PA; NDS                                          |
| LYSODREN ORAL TABLET 500 MG                                            | \$0 (Tier 2)                             | LA; NDS                                          |
| <i>megestrol acetate oral tablet 20 mg, 40 mg</i>                      | \$0 (Tier 2)                             |                                                  |
| <i>nilutamide oral tablet 150 mg</i>                                   | \$0 (Tier 2)                             | NDS                                              |
| NUBEQA ORAL TABLET 300 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| ORGOVYX ORAL TABLET 120 MG                                             | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| ORSERDU ORAL TABLET 345 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| ORSERDU ORAL TABLET 86 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| SOLTAMOX ORAL SOLUTION 10 MG/5ML                                       | \$0 (Tier 2)                             | NDS                                              |
| <i>tamoxifen citrate oral tablet 10 mg, 20 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>toremifene citrate oral tablet 60 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| XTANDI ORAL CAPSULE 40 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| XTANDI ORAL TABLET 40 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| XTANDI ORAL TABLET 80 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| <b>Immunomodulators</b>                                                |                                          |                                                  |
| <i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 5 mg</i>            | \$0 (Tier 2)                             | PA; LA; QL (28 per 28 days); NDS                 |
| <i>lenalidomide oral capsule 20 mg, 25 mg</i>                          | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |

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| NAME OF DRUG                                                                                 | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG                                                 | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (28 per 28 days); NDS                 |
| REVLIMID ORAL CAPSULE 20 MG, 25 MG                                                           | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| THALOMID ORAL CAPSULE 100 MG                                                                 | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days); NDS                |
| THALOMID ORAL CAPSULE 150 MG, 200 MG                                                         | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| THALOMID ORAL CAPSULE 50 MG                                                                  | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| <b>Miscellaneous</b>                                                                         |                                          |                                                  |
| BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML                                   | \$0 (Tier 2)                             | PA; LA; QL (2 per 28 days); NDS                  |
| <i>bexarotene oral capsule 75 mg</i>                                                         | \$0 (Tier 2)                             | PA; QL (300 per 30 days); NDS                    |
| <i>hydroxyurea oral capsule 500 mg</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>irinotecan hcl intravenous solution 100 mg/5ml, 300 mg/15ml, 40 mg/2ml, 500 mg/25ml</i>   | \$0 (Tier 1)                             | B/D                                              |
| IWILFIN ORAL TABLET 192 MG                                                                   | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| KISQALI FEMARA (200 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG                           | \$0 (Tier 2)                             | PA; QL (49 per 28 days); NDS                     |
| KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG                           | \$0 (Tier 2)                             | PA; QL (70 per 28 days); NDS                     |
| KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG                           | \$0 (Tier 2)                             | PA; QL (91 per 28 days); NDS                     |
| MATULANE ORAL CAPSULE 50 MG                                                                  | \$0 (Tier 2)                             | LA; NDS                                          |
| <i>tretinoin oral capsule 10 mg</i>                                                          | \$0 (Tier 2)                             | NDS                                              |
| WELIREG ORAL TABLET 40 MG                                                                    | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| <b>Mitotic Inhibitors</b>                                                                    |                                          |                                                  |
| <i>docetaxel intravenous concentrate 160 mg/8ml, 80 mg/4ml</i>                               | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>docetaxel intravenous concentrate 20 mg/ml</i>                                            | \$0 (Tier 1)                             | B/D                                              |
| <i>docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml</i>                      | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml</i>                     | \$0 (Tier 1)                             | B/D                                              |
| <i>paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml</i> | \$0 (Tier 1)                             | B/D                                              |
| <i>paclitaxel protein-bound part intravenous suspension reconstituted 100 mg</i>             | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>vincristine sulfate intravenous solution 1 mg/ml</i>                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>vinorelbine tartrate intravenous solution 10 mg/ml, 50 mg/5ml</i>                         | \$0 (Tier 1)                             | B/D                                              |
| <b>Molecular Target Agents</b>                                                               |                                          |                                                  |
| ALECENSA ORAL CAPSULE 150 MG                                                                 | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| ALUNBRIG ORAL TABLET 180 MG, 90 MG                                                           | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |

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|-------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ALUNBRIG ORAL TABLET 30 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG                           | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| AUGTYRO ORAL CAPSULE 40 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG                | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| BALVERSA ORAL TABLET 3 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| BALVERSA ORAL TABLET 4 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| BALVERSA ORAL TABLET 5 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (28 per 28 days); NDS                 |
| <i>bortezomib injection solution reconstituted 1 mg, 2.5 mg, 3.5 mg</i> | \$0 (Tier 2)                             | PA; NDS                                          |
| BOSULIF ORAL CAPSULE 100 MG                                             | \$0 (Tier 2)                             | PA; QL (150 per 25 days); NDS                    |
| BOSULIF ORAL CAPSULE 50 MG                                              | \$0 (Tier 2)                             | PA; QL (360 per 30 days); NDS                    |
| BOSULIF ORAL TABLET 100 MG                                              | \$0 (Tier 2)                             | PA; QL (180 per 30 days); NDS                    |
| BOSULIF ORAL TABLET 400 MG, 500 MG                                      | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| BRAFTOVI ORAL CAPSULE 75 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| BRUKINSA ORAL CAPSULE 80 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG                               | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| CALQUENCE ORAL CAPSULE 100 MG                                           | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| CALQUENCE ORAL TABLET 100 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| CAPRELSA ORAL TABLET 100 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| CAPRELSA ORAL TABLET 300 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG                        | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG                 | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days); NDS                |
| COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG                              | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| COPIKTRA ORAL CAPSULE 15 MG, 25 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| COTELLIC ORAL TABLET 20 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (63 per 28 days); NDS                 |
| DAURISMO ORAL TABLET 100 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| DAURISMO ORAL TABLET 25 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| ERIVEDGE ORAL CAPSULE 150 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| <i>erlotinib hcl oral tablet 100 mg, 150 mg</i>                         | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>erlotinib hcl oral tablet 25 mg</i>                                  | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>               | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>everolimus oral tablet soluble 2 mg</i>                              | \$0 (Tier 2)                             | PA; QL (150 per 30 days); NDS                    |
| <i>everolimus oral tablet soluble 3 mg</i>                              | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <i>everolimus oral tablet soluble 5 mg</i>                              | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| EXKIVITY ORAL CAPSULE 40 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG                                   | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| FRUZAQLA ORAL CAPSULE 1 MG                                              | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |

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|--------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| FRUZAQLA ORAL CAPSULE 5 MG                                   | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| GAVRETO ORAL CAPSULE 100 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| <i>gefitinib oral tablet 250 mg</i>                          | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG                     | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600-10000 MG-UNT/5ML | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG          | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG    | \$0 (Tier 2)                             | PA; NDS                                          |
| IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG                   | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG                    | \$0 (Tier 2)                             | PA; LA; QL (21 per 28 days); NDS                 |
| ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG               | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| IDHIFA ORAL TABLET 100 MG, 50 MG                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| <i>imatinib mesylate oral tablet 100 mg</i>                  | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <i>imatinib mesylate oral tablet 400 mg</i>                  | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| IMBRUVICA ORAL CAPSULE 140 MG                                | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| IMBRUVICA ORAL CAPSULE 70 MG                                 | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| IMBRUVICA ORAL SUSPENSION 70 MG/ML                           | \$0 (Tier 2)                             | PA; LA; QL (216 per 27 days); NDS                |
| IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG                 | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| INLYTA ORAL TABLET 1 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| INLYTA ORAL TABLET 5 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| INREBIC ORAL CAPSULE 100 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG          | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| JAYPIRCA ORAL TABLET 100 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| JAYPIRCA ORAL TABLET 50 MG                                   | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 160 MG    | \$0 (Tier 2)                             | B/D; LA; NDS                                     |
| KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG   | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4ML                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG        | \$0 (Tier 2)                             | PA; QL (21 per 28 days); NDS                     |
| KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG        | \$0 (Tier 2)                             | PA; QL (42 per 28 days); NDS                     |
| KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG        | \$0 (Tier 2)                             | PA; QL (63 per 28 days); NDS                     |
| KOSELUGO ORAL CAPSULE 10 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| KOSELUGO ORAL CAPSULE 25 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |

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|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| KRAZATI ORAL TABLET 200 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| <i>lapatinib ditosylate oral tablet 250 mg</i>                        | \$0 (Tier 2)                             | PA; QL (180 per 30 days); NDS                    |
| LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG            | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG         | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG        | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG        | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG              | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG          | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| LORBRENA ORAL TABLET 100 MG                                           | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| LORBRENA ORAL TABLET 25 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| LUMAKRAS ORAL TABLET 120 MG                                           | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| LUMAKRAS ORAL TABLET 320 MG                                           | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| LYNPARZA ORAL TABLET 100 MG, 150 MG                                   | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG              | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG              | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days); NDS                |
| LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG              | \$0 (Tier 2)                             | PA; LA; QL (140 per 28 days); NDS                |
| MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML                       | \$0 (Tier 2)                             | PA; LA; QL (1260 per 30 days); NDS               |
| MEKINIST ORAL TABLET 0.5 MG                                           | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| MEKINIST ORAL TABLET 2 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| MEKTOVI ORAL TABLET 15 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED 200 MG                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| NERLYNX ORAL TABLET 40 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| NEXAVAR ORAL TABLET 200 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG                               | \$0 (Tier 2)                             | PA; QL (3 per 28 days); NDS                      |
| ODOMZO ORAL CAPSULE 200 MG                                            | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG              | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| OGSIVEO ORAL TABLET 50 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |

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|---------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG                                | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG               | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>pazopanib hcl oral tablet 200 mg</i>                                   | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG                                | \$0 (Tier 2)                             | PA; LA; QL (28 per 28 days); NDS                 |
| PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 MG                | \$0 (Tier 2)                             | PA; QL (28 per 28 days); NDS                     |
| PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 & 50 MG           | \$0 (Tier 2)                             | PA; QL (56 per 28 days); NDS                     |
| PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK 2 X 150 MG            | \$0 (Tier 2)                             | PA; QL (56 per 28 days); NDS                     |
| QINLOCK ORAL TABLET 50 MG                                                 | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| RETEVMO ORAL CAPSULE 40 MG                                                | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| RETEVMO ORAL CAPSULE 80 MG                                                | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| REZLIDHIA ORAL CAPSULE 150 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| ROZLYTREK ORAL CAPSULE 100 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (150 per 30 days); NDS                |
| ROZLYTREK ORAL CAPSULE 200 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| ROZLYTREK ORAL PACKET 50 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (336 per 28 days); NDS                |
| RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG                                | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| RYDAPT ORAL CAPSULE 25 MG                                                 | \$0 (Tier 2)                             | PA; QL (224 per 28 days); NDS                    |
| SCSEMBLIX ORAL TABLET 20 MG                                               | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| SCSEMBLIX ORAL TABLET 40 MG                                               | \$0 (Tier 2)                             | PA; QL (300 per 30 days); NDS                    |
| <i>sorafenib tosylate oral tablet 200 mg</i>                              | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 70 MG, 80 MG                   | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| SPRYCEL ORAL TABLET 20 MG                                                 | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| STIVARGA ORAL TABLET 40 MG                                                | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| <i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>       | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| TABRECTA ORAL TABLET 150 MG, 200 MG                                       | \$0 (Tier 2)                             | PA; QL (112 per 28 days); NDS                    |
| TAFINLAR ORAL CAPSULE 50 MG, 75 MG                                        | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| TAFINLAR ORAL TABLET SOLUBLE 10 MG                                        | \$0 (Tier 2)                             | PA; LA; QL (900 per 30 days); NDS                |
| TAGRISSE ORAL TABLET 40 MG, 80 MG                                         | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG              | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| TALZENNA ORAL CAPSULE 0.25 MG                                             | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| TASIGNA ORAL CAPSULE 150 MG, 200 MG                                       | \$0 (Tier 2)                             | PA; QL (112 per 28 days); NDS                    |
| TASIGNA ORAL CAPSULE 50 MG                                                | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| TAZVERIK ORAL TABLET 200 MG                                               | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |

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| NAME OF DRUG                                                      | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| TECENTRIQ INTRAVENOUS SOLUTION 1200 MG/20ML, 840 MG/14ML          | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| TEPMETKO ORAL TABLET 225 MG                                       | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| TIBSOVO ORAL TABLET 250 MG                                        | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG       | \$0 (Tier 2)                             | PA; NDS                                          |
| TRUQAP ORAL TABLET 160 MG, 200 MG                                 | \$0 (Tier 2)                             | PA; LA; QL (64 per 28 days); NDS                 |
| TRUXIMA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML             | \$0 (Tier 2)                             | PA; NDS                                          |
| TUKYSA ORAL TABLET 150 MG, 50 MG                                  | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| TURALIO ORAL CAPSULE 125 MG                                       | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG                             | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| VENCLEXTA ORAL TABLET 10 MG                                       | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days)                     |
| VENCLEXTA ORAL TABLET 100 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| VENCLEXTA ORAL TABLET 50 MG                                       | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days); NDS                |
| VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG | \$0 (Tier 2)                             | PA; LA; QL (42 per 28 days); NDS                 |
| VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG                | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| VITRAKVI ORAL CAPSULE 100 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| VITRAKVI ORAL CAPSULE 25 MG                                       | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| VITRAKVI ORAL SOLUTION 20 MG/ML                                   | \$0 (Tier 2)                             | PA; LA; QL (300 per 30 days); NDS                |
| VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG                          | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| VONJO ORAL CAPSULE 100 MG                                         | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| XALKORI ORAL CAPSULE 200 MG, 250 MG                               | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| XALKORI ORAL CAPSULE SPRINKLE 150 MG                              | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| XALKORI ORAL CAPSULE SPRINKLE 20 MG                               | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| XALKORI ORAL CAPSULE SPRINKLE 50 MG                               | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| XOSPATA ORAL TABLET 40 MG                                         | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG        | \$0 (Tier 2)                             | PA; LA; QL (8 per 28 days); NDS                  |
| XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG         | \$0 (Tier 2)                             | PA; LA; QL (4 per 28 days); NDS                  |
| XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG        | \$0 (Tier 2)                             | PA; LA; QL (8 per 28 days); NDS                  |
| XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG         | \$0 (Tier 2)                             | PA; LA; QL (4 per 28 days); NDS                  |
| XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG        | \$0 (Tier 2)                             | PA; LA; QL (24 per 28 days); NDS                 |
| XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG         | \$0 (Tier 2)                             | PA; LA; QL (8 per 28 days); NDS                  |
| XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG        | \$0 (Tier 2)                             | PA; LA; QL (32 per 28 days); NDS                 |

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| NAME OF DRUG                                                                                                | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ZEJULA ORAL CAPSULE 100 MG                                                                                  | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG                                                                   | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| ZELBORAF ORAL TABLET 240 MG                                                                                 | \$0 (Tier 2)                             | PA; LA; QL (240 per 30 days); NDS                |
| ZIRABEV INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML                                                        | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| ZOLINZA ORAL CAPSULE 100 MG                                                                                 | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| ZYDELIG ORAL TABLET 100 MG, 150 MG                                                                          | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| ZYKADIA ORAL TABLET 150 MG                                                                                  | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| <b>Protective Agents</b>                                                                                    |                                          |                                                  |
| <i>leucovorin calcium injection solution 500 mg/50ml</i>                                                    | \$0 (Tier 1)                             | B/D                                              |
| <i>leucovorin calcium injection solution reconstituted 100 mg, 200 mg, 350 mg, 50 mg, 500 mg</i>            | \$0 (Tier 1)                             | B/D                                              |
| <i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| MESNEX ORAL TABLET 400 MG                                                                                   | \$0 (Tier 2)                             | NDS                                              |
| <b>CARDIOVASCULAR</b>                                                                                       |                                          |                                                  |
| <b>Ace Inhibitor Combinations</b>                                                                           |                                          |                                                  |
| <i>amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i> | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>               | \$0 (Tier 1)                             |                                                  |
| <i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>                                        | \$0 (Tier 1)                             |                                                  |
| <i>fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg</i>                                            | \$0 (Tier 1)                             |                                                  |
| <i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <b>Ace Inhibitors</b>                                                                                       |                                          |                                                  |
| <i>benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| <i>fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>moexipril hcl oral tablet 15 mg, 7.5 mg</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>                                                   | \$0 (Tier 1)                             |                                                  |
| <i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>                                                            | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                                                     | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Aldosterone Receptor Antagonists</b>                                                                          |                                          |                                                  |
| <i>eplerenone oral tablet 25 mg, 50 mg</i>                                                                       | \$0 (Tier 1)                             |                                                  |
| KERENDIA ORAL TABLET 10 MG, 20 MG                                                                                | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>                                                           | \$0 (Tier 1)                             |                                                  |
| <b>Alpha Blockers</b>                                                                                            |                                          |                                                  |
| <i>doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>                                                                | \$0 (Tier 1)                             |                                                  |
| <i>terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <b>Angiotensin II Receptor Antagonist Combinations</b>                                                           |                                          |                                                  |
| <i>amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>                        | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>                                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>candesartan cilexetil-hctz oral tablet 16-12.5 mg</i>                                                         | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>candesartan cilexetil-hctz oral tablet 32-12.5 mg, 32-25 mg</i>                                               | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG                                                               | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg</i>                                                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg</i>                                                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| <i>olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>                                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i> | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>                                   | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>telmisartan-hctz oral tablet 40-12.5 mg, 80-25 mg</i>                                                         | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>telmisartan-hctz oral tablet 80-12.5 mg</i>                                                                   | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>      | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <b>Angiotensin II Receptor Antagonists</b>                                                                       |                                          |                                                  |
| <i>candesartan cilexetil oral tablet 16 mg, 4 mg, 8 mg</i>                                                       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>candesartan cilexetil oral tablet 32 mg</i>                                                                   | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>                                                              | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>losartan potassium oral tablet 100 mg, 25 mg, 50 mg</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>olmesartan medoxomil oral tablet 20 mg, 40 mg</i>                                                             | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>olmesartan medoxomil oral tablet 5 mg</i>                                                                     | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>                                                               | \$0 (Tier 1)                             | QL (30 per 30 days)                              |

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|----------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>valsartan oral tablet 160 mg, 40 mg, 80 mg</i>                                      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>valsartan oral tablet 320 mg</i>                                                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <b>Antiarrhythmics</b>                                                                 |                                          |                                                  |
| <i>amiodarone hcl intravenous solution 150 mg/3ml, 450 mg/9ml, 900 mg/18ml</i>         | \$0 (Tier 1)                             |                                                  |
| <i>amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>                              | \$0 (Tier 2)                             |                                                  |
| <i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>flecainide acetate oral tablet 100 mg, 150 mg, 50 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| MULTAQ ORAL TABLET 400 MG                                                              | \$0 (Tier 2)                             |                                                  |
| NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG                        | \$0 (Tier 2)                             |                                                  |
| PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG                                            | \$0 (Tier 1)                             |                                                  |
| <i>propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>propafenone hcl oral tablet 150 mg, 225 mg, 300 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>quinidine sulfate oral tablet 200 mg, 300 mg</i>                                    | \$0 (Tier 1)                             |                                                  |
| SORINE ORAL TABLET 120 MG, 160 MG, 240 MG, 80 MG                                       | \$0 (Tier 1)                             |                                                  |
| <i>sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>                           | \$0 (Tier 1)                             |                                                  |
| <b>Antilipemics, Fibrates</b>                                                          |                                          |                                                  |
| <i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>gemfibrozil oral tablet 600 mg</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <b>Antilipemics, Hmg-CoA Reductase Inhibitors</b>                                      |                                          |                                                  |
| <i>atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>                     | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>                                      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>                       | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>                      | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>                        | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <b>Antilipemics, Miscellaneous</b>                                                     |                                          |                                                  |
| <i>cholestyramine light oral packet 4 gm</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>cholestyramine light oral powder 4 gm/dose</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>cholestyramine oral packet 4 gm</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>cholestyramine oral powder 4 gm/dose</i>                                            | \$0 (Tier 1)                             |                                                  |

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|--------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>colesevelam hcl oral packet 3.75 gm</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>colesevelam hcl oral tablet 625 mg</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <i>colestipol hcl oral granules 5 gm</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>colestipol hcl oral packet 5 gm</i>                                                           | \$0 (Tier 1)                             |                                                  |
| <i>colestipol hcl oral tablet 1 gm</i>                                                           | \$0 (Tier 1)                             |                                                  |
| <i>ezetimibe oral tablet 10 mg</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>                  | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| NEXLETOL ORAL TABLET 180 MG                                                                      | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| NEXLIZET ORAL TABLET 180-10 MG                                                                   | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg</i>       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>omega-3-acid ethyl esters oral capsule 1 gm</i>                                               | \$0 (Tier 1)                             | PA                                               |
| PREVALITE ORAL PACKET 4 GM                                                                       | \$0 (Tier 1)                             |                                                  |
| PREVALITE ORAL POWDER 4 GM/DOSE                                                                  | \$0 (Tier 1)                             |                                                  |
| REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML                           | \$0 (Tier 2)                             | PA                                               |
| REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML                                        | \$0 (Tier 2)                             | PA                                               |
| REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML                                  | \$0 (Tier 2)                             | PA                                               |
| VASCEPA ORAL CAPSULE 0.5 GM, 1 GM                                                                | \$0 (Tier 2)                             |                                                  |
| <b>Beta-Blocker/Diuretic Combinations</b>                                                        |                                          |                                                  |
| <i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>             | \$0 (Tier 1)                             |                                                  |
| <i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>                 | \$0 (Tier 1)                             |                                                  |
| <b>Beta-Blockers</b>                                                                             |                                          |                                                  |
| <i>acebutolol hcl oral capsule 200 mg, 400 mg</i>                                                | \$0 (Tier 1)                             |                                                  |
| <i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>betaxolol hcl oral tablet 10 mg, 20 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>                                               | \$0 (Tier 1)                             |                                                  |
| <i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>labetalol hcl oral tablet 100 mg, 200 mg, 300 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>metoprolol tartrate intravenous solution 5 mg/5ml</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>                                      | \$0 (Tier 1)                             |                                                  |

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|--------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>nebivolol hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>                                                               | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>nebivolol hcl oral tablet 20 mg</i>                                                                             | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>pindolol oral tablet 10 mg, 5 mg</i>                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml</i>                                                          | \$0 (Tier 1)                             |                                                  |
| <i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>                                               | \$0 (Tier 1)                             |                                                  |
| <i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <b>Calcium Channel Blockers</b>                                                                                    |                                          |                                                  |
| <i>amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg</i>                                                         | \$0 (Tier 1)                             |                                                  |
| CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG                                     | \$0 (Tier 1)                             |                                                  |
| <i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>  | \$0 (Tier 1)                             |                                                  |
| <i>diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>                                        | \$0 (Tier 1)                             |                                                  |
| <i>felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>isradipine oral capsule 2.5 mg, 5 mg</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>nicardipine hcl oral capsule 20 mg, 30 mg</i>                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>nimodipine oral capsule 30 mg</i>                                                                               | \$0 (Tier 1)                             |                                                  |
| NYMALIZE ORAL SOLUTION 6 MG/ML                                                                                     | \$0 (Tier 2)                             | NDS                                              |
| TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG                             | \$0 (Tier 1)                             |                                                  |
| TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG                    | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                                                         | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>verapamil hcl intravenous solution 2.5 mg/ml</i>                                                                  | \$0 (Tier 1)                             |                                                  |
| <i>verapamil hcl oral tablet 120 mg, 40 mg, 80 mg</i>                                                                | \$0 (Tier 1)                             |                                                  |
| <b>Diuretics</b>                                                                                                     |                                          |                                                  |
| <i>acetazolamide er oral capsule extended release 12 hour 500 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>acetazolamide oral tablet 125 mg, 250 mg</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>amiloride hcl oral tablet 5 mg</i>                                                                                | \$0 (Tier 1)                             |                                                  |
| <i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>                                                             | \$0 (Tier 1)                             |                                                  |
| <i>bumetanide injection solution 0.25 mg/ml</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>chlorthalidone oral tablet 25 mg, 50 mg</i>                                                                       | \$0 (Tier 1)                             |                                                  |
| <i>furosemide injection solution 10 mg/ml</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>hydrochlorothiazide oral capsule 12.5 mg</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>indapamide oral tablet 1.25 mg, 2.5 mg</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>methazolamide oral tablet 25 mg, 50 mg</i>                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>spironolactone-hctz oral tablet 25-25 mg</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <i>triamterene-hctz oral capsule 37.5-25 mg</i>                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg</i>                                                             | \$0 (Tier 1)                             |                                                  |
| <b>Miscellaneous</b>                                                                                                 |                                          |                                                  |
| <i>aliskiren fumarate oral tablet 150 mg, 300 mg</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <i>clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr</i>                                      | \$0 (Tier 1)                             |                                                  |
| CORLANOR ORAL SOLUTION 5 MG/5ML                                                                                      | \$0 (Tier 2)                             | QL (450 per 30 days)                             |
| CORLANOR ORAL TABLET 5 MG, 7.5 MG                                                                                    | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <i>digoxin injection solution 0.25 mg/ml</i>                                                                         | \$0 (Tier 1)                             |                                                  |
| <i>digoxin oral solution 0.05 mg/ml</i>                                                                              | \$0 (Tier 1)                             |                                                  |
| <i>digoxin oral tablet 125 mcg, 250 mcg</i>                                                                          | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>droxidopa oral capsule 100 mg</i>                                                                                 | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <i>droxidopa oral capsule 200 mg, 300 mg</i>                                                                         | \$0 (Tier 2)                             | PA; QL (180 per 30 days); NDS                    |
| <i>epinephrine (anaphylaxis) injection solution 1 mg/ml</i>                                                          | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                               | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>guanfacine hcl oral tablet 1 mg, 2 mg</i>                                               | \$0 (Tier 2)                             | PA                                               |
| <i>hydralazine hcl injection solution 20 mg/ml</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>metirosine oral capsule 250 mg</i>                                                      | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>minoxidil oral tablet 10 mg, 2.5 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg</i>                  | \$0 (Tier 1)                             |                                                  |
| VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG                                                    | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <b>Nitrates</b>                                                                            |                                          |                                                  |
| <i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| NITRO-BID TRANSDERMAL OINTMENT 2 %                                                         | \$0 (Tier 2)                             |                                                  |
| <i>nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg</i>                   | \$0 (Tier 1)                             |                                                  |
| <i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>  | \$0 (Tier 1)                             |                                                  |
| <i>nitroglycerin translingual solution 0.4 mg/spray</i>                                    | \$0 (Tier 1)                             |                                                  |
| <b>Pulmonary Arterial Hypertension</b>                                                     |                                          |                                                  |
| ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG                                     | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| <i>ambrisentan oral tablet 10 mg, 5 mg</i>                                                 | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| <i>bosentan oral tablet 125 mg, 62.5 mg</i>                                                | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| OPSUMIT ORAL TABLET 10 MG                                                                  | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| <i>sildenafil citrate oral tablet 20 mg</i>                                                | \$0 (Tier 1)                             | PA; QL (360 per 30 days)                         |
| <i>treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml</i>    | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| VENTAVIS INHALATION SOLUTION 10 MCG/ML, 20 MCG/ML                                          | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <b>CENTRAL NERVOUS SYSTEM</b>                                                              |                                          |                                                  |
| <b>Antianxiety</b>                                                                         |                                          |                                                  |
| <i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>                                  | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| <i>buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i>                                | \$0 (Tier 1)                             |                                                  |
| <i>lorazepam injection solution 2 mg/ml, 4 mg/ml</i>                                       | \$0 (Tier 1)                             |                                                  |
| LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML                                                | \$0 (Tier 1)                             | QL (150 per 30 days)                             |

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|---------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>lorazepam oral concentrate 2 mg/ml</i>                                                   | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| <i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>                                             | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| <b>Antidementia</b>                                                                         |                                          |                                                  |
| <i>donepezil hcl oral tablet 10 mg</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>donepezil hcl oral tablet 5 mg</i>                                                       | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>donepezil hcl oral tablet dispersible 10 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>donepezil hcl oral tablet dispersible 5 mg</i>                                           | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg</i> | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>galantamine hydrobromide oral solution 4 mg/ml</i>                                       | \$0 (Tier 1)                             | QL (200 per 30 days)                             |
| <i>galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg</i>                               | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg</i>     | \$0 (Tier 1)                             | PA                                               |
| <i>memantine hcl oral solution 2 mg/ml</i>                                                  | \$0 (Tier 1)                             | PA                                               |
| <i>memantine hcl oral tablet 10 mg, 5 mg</i>                                                | \$0 (Tier 1)                             | PA                                               |
| <i>memantine hcl oral tablet 28 x 5 mg &amp; 21 x 10 mg</i>                                 | \$0 (Tier 2)                             | PA                                               |
| NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK 7 & 14 & 21 & 28 -10 MG                       | \$0 (Tier 2)                             |                                                  |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG        | \$0 (Tier 2)                             |                                                  |
| <i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr</i>        | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <b>Antidepressants</b>                                                                      |                                          |                                                  |
| <i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>             | \$0 (Tier 2)                             |                                                  |
| <i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>                                   | \$0 (Tier 2)                             |                                                  |
| AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG                                             | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg</i>    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg</i>                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg</i>                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>bupropion hcl oral tablet 100 mg, 75 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>citalopram hydrobromide oral solution 10 mg/5ml</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg</i>                                    | \$0 (Tier 2)                             | PA                                               |

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|----------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>                | \$0 (Tier 2)                             |                                                  |
| <i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg</i> | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>                   | \$0 (Tier 2)                             |                                                  |
| <i>doxepin hcl oral concentrate 10 mg/ml</i>                                                 | \$0 (Tier 2)                             |                                                  |
| <i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>             | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR                             | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>escitalopram oxalate oral solution 5 mg/5ml</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>                                   | \$0 (Tier 1)                             |                                                  |
| FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG                                  | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 40 MG                                   | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG                            | \$0 (Tier 2)                             | PA; QL (56 per 365 days)                         |
| <i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>fluoxetine hcl oral solution 20 mg/5ml</i>                                                | \$0 (Tier 1)                             |                                                  |
| <i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>                                        | \$0 (Tier 2)                             |                                                  |
| MARPLAN ORAL TABLET 10 MG                                                                    | \$0 (Tier 2)                             | QL (180 per 30 days)                             |
| <i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>                                   | \$0 (Tier 1)                             |                                                  |
| <i>mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>                             | \$0 (Tier 2)                             |                                                  |
| <i>nortriptyline hcl oral solution 10 mg/5ml</i>                                             | \$0 (Tier 2)                             |                                                  |
| <i>paroxetine hcl oral suspension 10 mg/5ml</i>                                              | \$0 (Tier 2)                             | PA; QL (900 per 30 days)                         |
| <i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>                                 | \$0 (Tier 2)                             |                                                  |
| <i>phenelzine sulfate oral tablet 15 mg</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <i>protriptyline hcl oral tablet 10 mg, 5 mg</i>                                             | \$0 (Tier 2)                             |                                                  |
| <i>sertraline hcl oral concentrate 20 mg/ml</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>sertraline hcl oral tablet 100 mg, 25 mg, 50 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>tranylcypromine sulfate oral tablet 10 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| <i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>trimipramine maleate oral capsule 100 mg</i>                                              | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <i>trimipramine maleate oral capsule 25 mg, 50 mg</i>                                        | \$0 (Tier 2)                             | QL (120 per 30 days)                             |
| TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG                                                    | \$0 (Tier 2)                             | QL (30 per 30 days)                              |

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| NAME OF DRUG                                                                                                                                      | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>                                                            | \$0 (Tier 1)                             |                                                  |
| <i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>                                                                           | \$0 (Tier 1)                             |                                                  |
| <i>vilazodone hcl oral tablet 10 mg, 20 mg, 40 mg</i>                                                                                             | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| ZURZUVAE ORAL CAPSULE 20 MG, 25 MG                                                                                                                | \$0 (Tier 2)                             | PA; LA; QL (28 per 14 days); NDS                 |
| ZURZUVAE ORAL CAPSULE 30 MG                                                                                                                       | \$0 (Tier 2)                             | PA; LA; QL (14 per 14 days); NDS                 |
| <b>Antiparkinsonian Agents</b>                                                                                                                    |                                          |                                                  |
| <i>amantadine hcl oral capsule 100 mg</i>                                                                                                         | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>amantadine hcl oral solution 50 mg/5ml</i>                                                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>amantadine hcl oral tablet 100 mg</i>                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>benztropine mesylate injection solution 1 mg/ml</i>                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg</i>                                                                                        | \$0 (Tier 2)                             | PA                                               |
| <i>bromocriptine mesylate oral capsule 5 mg</i>                                                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>bromocriptine mesylate oral tablet 2.5 mg</i>                                                                                                  | \$0 (Tier 1)                             |                                                  |
| <i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>                                                                             | \$0 (Tier 1)                             |                                                  |
| <i>carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>entacapone oral tablet 200 mg</i>                                                                                                              | \$0 (Tier 1)                             |                                                  |
| INBRIJA INHALATION CAPSULE 42 MG                                                                                                                  | \$0 (Tier 2)                             | PA; LA; QL (300 per 30 days); NDS                |
| NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR                                                 | \$0 (Tier 2)                             |                                                  |
| <i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>                                                   | \$0 (Tier 1)                             |                                                  |
| <i>rasagiline mesylate oral tablet 0.5 mg, 1 mg</i>                                                                                               | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>selegiline hcl oral capsule 5 mg</i>                                                                                                           | \$0 (Tier 1)                             |                                                  |
| <i>selegiline hcl oral tablet 5 mg</i>                                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>trihexyphenidyl hcl oral solution 0.4 mg/ml</i>                                                                                                | \$0 (Tier 2)                             | PA                                               |
| <i>trihexyphenidyl hcl oral tablet 2 mg, 5 mg</i>                                                                                                 | \$0 (Tier 2)                             | PA                                               |
| <b>Antipsychotics</b>                                                                                                                             |                                          |                                                  |
| ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG                                                                                   | \$0 (Tier 2)                             | QL (1 per 28 days); NDS                          |

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| NAME OF DRUG                                                                                           | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG                              | \$0 (Tier 2)                             | QL (1 per 28 days); NDS                          |
| <i>aripiprazole oral solution 1 mg/ml</i>                                                              | \$0 (Tier 1)                             | QL (900 per 30 days)                             |
| <i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>                                 | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>aripiprazole oral tablet dispersible 10 mg, 15 mg</i>                                               | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML                                           | \$0 (Tier 2)                             | NDS                                              |
| ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML                                                 | \$0 (Tier 2)                             | QL (3.9 per 56 days); NDS                        |
| ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 441 MG/1.6ML                                                  | \$0 (Tier 2)                             | QL (1.6 per 28 days); NDS                        |
| ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 662 MG/2.4ML                                                  | \$0 (Tier 2)                             | QL (2.4 per 28 days); NDS                        |
| ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 882 MG/3.2ML                                                  | \$0 (Tier 2)                             | QL (3.2 per 28 days); NDS                        |
| <i>asenapine maleate sublingual tablet sublingual 10 mg, 2.5 mg, 5 mg</i>                              | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG                                                             | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| <i>chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>chlorpromazine hcl oral concentrate 100 mg/ml, 30 mg/ml</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>clozapine oral tablet 100 mg</i>                                                                    | \$0 (Tier 1)                             | QL (270 per 30 days)                             |
| <i>clozapine oral tablet 200 mg</i>                                                                    | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>clozapine oral tablet 25 mg, 50 mg</i>                                                              | \$0 (Tier 1)                             |                                                  |
| <i>clozapine oral tablet dispersible 100 mg</i>                                                        | \$0 (Tier 1)                             | PA; QL (270 per 30 days)                         |
| <i>clozapine oral tablet dispersible 12.5 mg, 25 mg</i>                                                | \$0 (Tier 1)                             | PA                                               |
| <i>clozapine oral tablet dispersible 150 mg</i>                                                        | \$0 (Tier 1)                             | PA; QL (180 per 30 days)                         |
| <i>clozapine oral tablet dispersible 200 mg</i>                                                        | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG                                          | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| FANAPT TITRATION PACK ORAL TABLET 1 & 2 & 4 & 6 MG                                                     | \$0 (Tier 2)                             | PA; QL (16 per 365 days)                         |
| <i>fluphenazine decanoate injection solution 25 mg/ml</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>fluphenazine hcl injection solution 2.5 mg/ml</i>                                                   | \$0 (Tier 1)                             |                                                  |
| <i>fluphenazine hcl oral concentrate 5 mg/ml</i>                                                       | \$0 (Tier 1)                             |                                                  |
| <i>fluphenazine hcl oral elixir 2.5 mg/5ml</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml 1 ml, 50 mg/ml, 50 mg/ml(1ml)</i> | \$0 (Tier 1)                             |                                                  |

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|--------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>haloperidol lactate injection solution 5 mg/ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>haloperidol lactate oral concentrate 2 mg/ml</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>          | \$0 (Tier 1)                             |                                                  |
| INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML        | \$0 (Tier 2)                             | QL (3.5 per 180 days); NDS                       |
| INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1560 MG/5ML          | \$0 (Tier 2)                             | QL (5 per 180 days); NDS                         |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML       | \$0 (Tier 2)                             | QL (0.75 per 28 days); NDS                       |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 156 MG/ML           | \$0 (Tier 2)                             | QL (1 per 28 days); NDS                          |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 234 MG/1.5ML        | \$0 (Tier 2)                             | QL (1.5 per 28 days); NDS                        |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML        | \$0 (Tier 2)                             | QL (0.25 per 28 days)                            |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 78 MG/0.5ML         | \$0 (Tier 2)                             | QL (0.5 per 28 days); NDS                        |
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML         | \$0 (Tier 2)                             | QL (0.88 per 90 days); NDS                       |
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 410 MG/1.32ML         | \$0 (Tier 2)                             | QL (1.32 per 90 days); NDS                       |
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 546 MG/1.75ML         | \$0 (Tier 2)                             | QL (1.75 per 90 days); NDS                       |
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 819 MG/2.63ML         | \$0 (Tier 2)                             | QL (2.63 per 90 days); NDS                       |
| <i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>               | \$0 (Tier 1)                             |                                                  |
| <i>lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg</i>                  | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>lurasidone hcl oral tablet 80 mg</i>                                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>molindone hcl oral tablet 10 mg, 25 mg, 5 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| NUPLAZID ORAL CAPSULE 34 MG                                                    | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| NUPLAZID ORAL TABLET 10 MG                                                     | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| <i>olanzapine intramuscular solution reconstituted 10 mg</i>                   | \$0 (Tier 1)                             | QL (3 per 1 day)                                 |
| <i>olanzapine oral tablet 10 mg, 2.5 mg, 5 mg</i>                              | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>olanzapine oral tablet 15 mg, 20 mg, 7.5 mg</i>                             | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>olanzapine oral tablet dispersible 10 mg</i>                                | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>olanzapine oral tablet dispersible 15 mg, 20 mg, 5 mg</i>                   | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg</i> | \$0 (Tier 1)                             | QL (30 per 30 days)                              |

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|---------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>paliperidone er oral tablet extended release 24 hour 6 mg</i>                            | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG                                       | \$0 (Tier 2)                             | QL (1 per 30 days); NDS                          |
| <i>pimozide oral tablet 1 mg, 2 mg</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg</i>           | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg</i>    | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>                        | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>quetiapine fumarate oral tablet 25 mg</i>                                                | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>quetiapine fumarate oral tablet 300 mg, 400 mg</i>                                       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG                                             | \$0 (Tier 2)                             | QL (60 per 30 days); NDS                         |
| REXULTI ORAL TABLET 3 MG, 4 MG                                                              | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| <i>risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg</i> | \$0 (Tier 1)                             | QL (2 per 28 days)                               |
| <i>risperidone microspheres er intramuscular suspension reconstituted er 37.5 mg, 50 mg</i> | \$0 (Tier 2)                             | QL (2 per 28 days); NDS                          |
| <i>risperidone oral solution 1 mg/ml</i>                                                    | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg</i>                                  | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>risperidone oral tablet dispersible 1 mg, 2 mg, 3 mg</i>                                 | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>risperidone oral tablet dispersible 4 mg</i>                                             | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR                     | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| <i>thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| <i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| VERSACLOZ ORAL SUSPENSION 50 MG/ML                                                          | \$0 (Tier 2)                             | PA; QL (600 per 30 days); NDS                    |
| VRAYLAR ORAL CAPSULE 1.5 MG                                                                 | \$0 (Tier 2)                             | QL (60 per 30 days); NDS                         |
| VRAYLAR ORAL CAPSULE 3 MG, 4.5 MG, 6 MG                                                     | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| <i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>                              | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>ziprasidone mesylate intramuscular solution reconstituted 20 mg</i>                      | \$0 (Tier 1)                             | QL (6 per 3 days)                                |
| ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG, 300 MG                      | \$0 (Tier 2)                             | PA; QL (2 per 28 days); NDS                      |
| ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 405 MG                              | \$0 (Tier 2)                             | PA; QL (1 per 28 days); NDS                      |

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|--------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Antiseizure Agents</b>                                                            |                                          |                                                  |
| APTOM ORAL TABLET 200 MG, 400 MG                                                     | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| APTOM ORAL TABLET 600 MG, 800 MG                                                     | \$0 (Tier 2)                             | QL (60 per 30 days); NDS                         |
| BRIVIACT INTRAVENOUS SOLUTION 50 MG/5ML                                              | \$0 (Tier 2)                             | PA                                               |
| BRIVIACT ORAL SOLUTION 10 MG/ML                                                      | \$0 (Tier 2)                             | PA; QL (600 per 30 days); NDS                    |
| BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG                              | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| <i>carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg</i>  | \$0 (Tier 1)                             |                                                  |
| <i>carbamazepine oral suspension 100 mg/5ml</i>                                      | \$0 (Tier 1)                             |                                                  |
| <i>carbamazepine oral tablet 200 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>carbamazepine oral tablet chewable 100 mg</i>                                     | \$0 (Tier 1)                             |                                                  |
| <i>clobazam oral suspension 2.5 mg/ml</i>                                            | \$0 (Tier 1)                             | PA; QL (480 per 30 days)                         |
| <i>clobazam oral tablet 10 mg, 20 mg</i>                                             | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>clonazepam oral tablet 0.5 mg, 1 mg</i>                                           | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>clonazepam oral tablet 2 mg</i>                                                   | \$0 (Tier 1)                             | QL (300 per 30 days)                             |
| <i>clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg</i>            | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>clonazepam oral tablet dispersible 2 mg</i>                                       | \$0 (Tier 1)                             | QL (300 per 30 days)                             |
| <i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>                    | \$0 (Tier 1)                             | PA; QL (180 per 30 days)                         |
| DIACOMIT ORAL CAPSULE 250 MG                                                         | \$0 (Tier 2)                             | PA; LA; QL (360 per 30 days); NDS                |
| DIACOMIT ORAL CAPSULE 500 MG                                                         | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| DIACOMIT ORAL PACKET 250 MG                                                          | \$0 (Tier 2)                             | PA; LA; QL (360 per 30 days); NDS                |
| DIACOMIT ORAL PACKET 500 MG                                                          | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| <i>diazepam injection solution 5 mg/ml</i>                                           | \$0 (Tier 1)                             |                                                  |
| DIAZEPAM INTENSOL ORAL CONCENTRATE 5 MG/ML                                           | \$0 (Tier 1)                             | PA; QL (240 per 30 days)                         |
| <i>diazepam oral solution 5 mg/5ml</i>                                               | \$0 (Tier 1)                             | PA; QL (1200 per 30 days)                        |
| <i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>                                        | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>diazepam rectal gel 10 mg, 2.5 mg, 20 mg</i>                                      | \$0 (Tier 1)                             |                                                  |
| DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG                                         | \$0 (Tier 2)                             |                                                  |
| DILANTIN ORAL CAPSULE 100 MG, 30 MG                                                  | \$0 (Tier 2)                             |                                                  |
| DILANTIN ORAL SUSPENSION 125 MG/5ML                                                  | \$0 (Tier 2)                             |                                                  |
| <i>divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg</i>      | \$0 (Tier 1)                             |                                                  |
| <i>divalproex sodium oral capsule delayed release sprinkle 125 mg</i>                | \$0 (Tier 1)                             |                                                  |

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|---------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| EPIDIOLEX ORAL SOLUTION 100 MG/ML                                                                       | \$0 (Tier 2)                             | PA; LA; QL (600 per 30 days); NDS                |
| EPITOL ORAL TABLET 200 MG                                                                               | \$0 (Tier 1)                             |                                                  |
| EPRONTIA ORAL SOLUTION 25 MG/ML                                                                         | \$0 (Tier 2)                             | PA; QL (480 per 30 days)                         |
| <i>ethosuximide oral capsule 250 mg</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>ethosuximide oral solution 250 mg/5ml</i>                                                            | \$0 (Tier 1)                             |                                                  |
| <i>felbamate oral suspension 600 mg/5ml</i>                                                             | \$0 (Tier 2)                             | NDS                                              |
| <i>felbamate oral tablet 400 mg, 600 mg</i>                                                             | \$0 (Tier 1)                             |                                                  |
| FINTEPLA ORAL SOLUTION 2.2 MG/ML                                                                        | \$0 (Tier 2)                             | PA; LA; QL (360 per 30 days); NDS                |
| FYCOMPA ORAL SUSPENSION 0.5 MG/ML                                                                       | \$0 (Tier 2)                             | PA; QL (720 per 30 days); NDS                    |
| FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG                                                      | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| FYCOMPA ORAL TABLET 2 MG                                                                                | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>                                                   | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>gabapentin oral solution 250 mg/5ml, 300 mg/6ml</i>                                                  | \$0 (Tier 1)                             | QL (2160 per 30 days)                            |
| <i>gabapentin oral tablet 600 mg</i>                                                                    | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>gabapentin oral tablet 800 mg</i>                                                                    | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>lacosamide intravenous solution 200 mg/20ml</i>                                                      | \$0 (Tier 1)                             |                                                  |
| <i>lacosamide oral solution 10 mg/ml</i>                                                                | \$0 (Tier 1)                             | QL (1200 per 30 days)                            |
| <i>lacosamide oral tablet 100 mg, 150 mg, 200 mg</i>                                                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>lacosamide oral tablet 50 mg</i>                                                                     | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>                                            | \$0 (Tier 1)                             |                                                  |
| <i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>levetiracetam in nacl intravenous solution 1000 mg/100ml, 1500 mg/100ml, 500 mg/100ml</i>            | \$0 (Tier 1)                             |                                                  |
| <i>levetiracetam intravenous solution 500 mg/5ml</i>                                                    | \$0 (Tier 1)                             |                                                  |
| <i>levetiracetam oral solution 100 mg/ml</i>                                                            | \$0 (Tier 1)                             |                                                  |
| <i>levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg</i>                                        | \$0 (Tier 1)                             |                                                  |
| <i>methsuximide oral capsule 300 mg</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| NAYZILAM NASAL SOLUTION 5 MG/0.1ML                                                                      | \$0 (Tier 2)                             |                                                  |
| <i>oxcarbazepine oral suspension 300 mg/5ml</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <i>phenobarbital oral elixir 20 mg/5ml</i>                                                              | \$0 (Tier 2)                             | PA; QL (1500 per 30 days)                        |
| <i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>        | \$0 (Tier 2)                             | PA; QL (120 per 30 days)                         |

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|----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml</i>   | \$0 (Tier 2)                             | PA                                               |
| PHENYTEK ORAL CAPSULE 200 MG, 300 MG                                 | \$0 (Tier 1)                             |                                                  |
| <i>phenytoin oral suspension 125 mg/5ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>phenytoin oral tablet chewable 50 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>phenytoin sodium injection solution 50 mg/ml</i>                  | \$0 (Tier 1)                             |                                                  |
| <i>pregabalin oral capsule 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>   | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>pregabalin oral capsule 200 mg</i>                                | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>pregabalin oral capsule 225 mg, 300 mg</i>                        | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>pregabalin oral solution 20 mg/ml</i>                             | \$0 (Tier 1)                             | PA; QL (900 per 30 days)                         |
| <i>primidone oral tablet 125 mg, 250 mg, 50 mg</i>                   | \$0 (Tier 1)                             |                                                  |
| ROWEEPRA ORAL TABLET 500 MG                                          | \$0 (Tier 1)                             |                                                  |
| <i>rufinamide oral suspension 40 mg/ml</i>                           | \$0 (Tier 2)                             | PA; QL (2400 per 30 days); NDS                   |
| <i>rufinamide oral tablet 200 mg</i>                                 | \$0 (Tier 1)                             | PA; QL (480 per 30 days)                         |
| <i>rufinamide oral tablet 400 mg</i>                                 | \$0 (Tier 2)                             | PA; QL (240 per 30 days); NDS                    |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG                   | \$0 (Tier 2)                             | QL (90 per 30 days)                              |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG                    | \$0 (Tier 2)                             | QL (360 per 30 days)                             |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 500 MG                    | \$0 (Tier 2)                             | QL (180 per 30 days)                             |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 750 MG                    | \$0 (Tier 2)                             | QL (120 per 30 days)                             |
| SUBVENITE ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG                  | \$0 (Tier 1)                             |                                                  |
| SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG                                | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| <i>tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>            | \$0 (Tier 1)                             |                                                  |
| <i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>           | \$0 (Tier 1)                             |                                                  |
| <i>valproate sodium intravenous solution 100 mg/ml</i>               | \$0 (Tier 1)                             |                                                  |
| <i>valproic acid oral capsule 250 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>valproic acid oral solution 250 mg/5ml</i>                        | \$0 (Tier 1)                             |                                                  |
| VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML                          | \$0 (Tier 2)                             |                                                  |
| VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 7.5 MG/0.1ML            | \$0 (Tier 2)                             |                                                  |
| VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 10 MG/0.1ML             | \$0 (Tier 2)                             |                                                  |
| VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML                            | \$0 (Tier 2)                             |                                                  |

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|--------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>vigabatrin oral packet 500 mg</i>                                                                               | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| <i>vigabatrin oral tablet 500 mg</i>                                                                               | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| VIGADRONE ORAL PACKET 500 MG                                                                                       | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| VIGADRONE ORAL TABLET 500 MG                                                                                       | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| VIGPODER ORAL PACKET 500 MG                                                                                        | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG                                                   | \$0 (Tier 2)                             | QL (56 per 28 days); NDS                         |
| XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK 150 & 200 MG                                                   | \$0 (Tier 2)                             | QL (56 per 28 days); NDS                         |
| XCOPRI ORAL TABLET 100 MG, 50 MG                                                                                   | \$0 (Tier 2)                             | QL (30 per 30 days); NDS                         |
| XCOPRI ORAL TABLET 150 MG, 200 MG                                                                                  | \$0 (Tier 2)                             | QL (60 per 30 days); NDS                         |
| XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG                                                          | \$0 (Tier 2)                             | QL (28 per 28 days)                              |
| XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG                                  | \$0 (Tier 2)                             | QL (28 per 28 days); NDS                         |
| ZONISADE ORAL SUSPENSION 100 MG/5ML                                                                                | \$0 (Tier 2)                             | PA; QL (900 per 30 days); NDS                    |
| <i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>                                                                | \$0 (Tier 1)                             |                                                  |
| ZTALMY ORAL SUSPENSION 50 MG/ML                                                                                    | \$0 (Tier 2)                             | PA; LA; QL (1100 per 30 days); NDS               |
| <b>Attention Deficit Hyperactivity Disorder</b>                                                                    |                                          |                                                  |
| <i>amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i> | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>                        | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>amphetamine-dextroamphetamine oral tablet 20 mg</i>                                                             | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg</i>                                                            | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg</i>                                                           | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>atomoxetine hcl oral capsule 40 mg</i>                                                                          | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>dexmethylphenidate hcl oral tablet 10 mg</i>                                                                    | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>dexmethylphenidate hcl oral tablet 2.5 mg, 5 mg</i>                                                             | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 4 mg</i>                                     | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <i>guanfacine hcl er oral tablet extended release 24 hour 3 mg</i>                                                 | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <i>methylphenidate hcl er oral tablet extended release 10 mg, 20 mg</i>                                            | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>methylphenidate hcl oral solution 10 mg/5ml</i>                                                                 | \$0 (Tier 1)                             | PA; QL (900 per 30 days)                         |
| <i>methylphenidate hcl oral solution 5 mg/5ml</i>                                                                  | \$0 (Tier 1)                             | PA; QL (1800 per 30 days)                        |
| <i>methylphenidate hcl oral tablet 10 mg, 5 mg</i>                                                                 | \$0 (Tier 1)                             | PA; QL (180 per 30 days)                         |
| <i>methylphenidate hcl oral tablet 20 mg</i>                                                                       | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <b>Hypnotics</b>                                                                                                   |                                          |                                                  |
| DAYVIGO ORAL TABLET 10 MG, 5 MG                                                                                    | \$0 (Tier 2)                             | QL (30 per 30 days)                              |

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|--------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>doxepin hcl oral tablet 3 mg, 6 mg</i>                                      | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>                                | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <i>tasimelteon oral capsule 20 mg</i>                                          | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>temazepam oral capsule 15 mg</i>                                            | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>temazepam oral capsule 30 mg, 7.5 mg</i>                                    | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>zaleplon oral capsule 10 mg</i>                                             | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <i>zaleplon oral capsule 5 mg</i>                                              | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <i>zolpidem tartrate oral tablet 10 mg, 5 mg</i>                               | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <b>Migraine</b>                                                                |                                          |                                                  |
| AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML                | \$0 (Tier 2)                             | PA; QL (1 per 30 days)                           |
| <i>dihydroergotamine mesylate injection solution 1 mg/ml</i>                   | \$0 (Tier 2)                             | NDS                                              |
| <i>dihydroergotamine mesylate nasal solution 4 mg/ml</i>                       | \$0 (Tier 2)                             | PA; QL (8 per 30 days); NDS                      |
| <i>ergotamine-caffeine oral tablet 1-100 mg</i>                                | \$0 (Tier 1)                             | PA; QL (40 per 28 days)                          |
| <i>naratriptan hcl oral tablet 1 mg, 2.5 mg</i>                                | \$0 (Tier 1)                             | QL (12 per 30 days)                              |
| NURTEC ORAL TABLET DISPERSIBLE 75 MG                                           | \$0 (Tier 2)                             | PA; QL (16 per 30 days)                          |
| QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG                                        | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| <i>rizatriptan benzoate oral tablet 10 mg, 5 mg</i>                            | \$0 (Tier 1)                             | QL (18 per 30 days)                              |
| <i>rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg</i>                | \$0 (Tier 1)                             | QL (18 per 30 days)                              |
| <i>sumatriptan nasal solution 20 mg/act</i>                                    | \$0 (Tier 1)                             | QL (12 per 30 days)                              |
| <i>sumatriptan nasal solution 5 mg/act</i>                                     | \$0 (Tier 1)                             | QL (24 per 30 days)                              |
| <i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>                  | \$0 (Tier 1)                             | QL (12 per 30 days)                              |
| <i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml</i> | \$0 (Tier 1)                             | QL (9 per 30 days)                               |
| <i>sumatriptan succinate refill subcutaneous solution cartridge 6 mg/0.5ml</i> | \$0 (Tier 1)                             | QL (6 per 30 days)                               |
| <i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>                  | \$0 (Tier 1)                             | QL (6 per 30 days)                               |
| <i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml</i>    | \$0 (Tier 1)                             | QL (9 per 30 days)                               |
| <i>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</i>    | \$0 (Tier 1)                             | QL (6 per 30 days)                               |
| UBRELVY ORAL TABLET 100 MG, 50 MG                                              | \$0 (Tier 2)                             | PA; QL (16 per 30 days)                          |
| <b>Miscellaneous</b>                                                           |                                          |                                                  |
| AUSTEDO ORAL TABLET 12 MG, 9 MG                                                | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| AUSTEDO ORAL TABLET 6 MG                                                       | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG                          | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 24 MG                          | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |

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|---------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG                                  | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG | \$0 (Tier 2)                             | PA; QL (84 per 365 days); NDS                    |
| <i>lithium carbonate er oral tablet extended release 300 mg, 450 mg</i>               | \$0 (Tier 1)                             |                                                  |
| <i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>lithium carbonate oral tablet 300 mg</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>lithium oral solution 8 meq/5ml</i>                                                | \$0 (Tier 1)                             |                                                  |
| NUDEXTA ORAL CAPSULE 20-10 MG                                                         | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <i>pyridostigmine bromide oral tablet 60 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>riluzole oral tablet 50 mg</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>tetrabenazine oral tablet 12.5 mg</i>                                              | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <i>tetrabenazine oral tablet 25 mg</i>                                                | \$0 (Tier 2)                             | PA; QL (120 per 30 days); NDS                    |
| <b>Multiple Sclerosis Agents</b>                                                      |                                          |                                                  |
| BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG                                          | \$0 (Tier 2)                             | PA; LA; QL (120 per 30 days); NDS                |
| BETASERON SUBCUTANEOUS KIT 0.3 MG                                                     | \$0 (Tier 2)                             | PA; QL (14 per 28 days); NDS                     |
| <i>dalfampridine er oral tablet extended release 12 hour 10 mg</i>                    | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>fingolimod hcl oral capsule 0.5 mg</i>                                             | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml</i>            | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml</i>            | \$0 (Tier 2)                             | PA; QL (12 per 28 days); NDS                     |
| GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML                              | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML                              | \$0 (Tier 2)                             | PA; QL (12 per 28 days); NDS                     |
| KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML                              | \$0 (Tier 2)                             | PA; LA; QL (6.4 per 365 days); NDS               |
| <b>Musculoskeletal Therapy Agents</b>                                                 |                                          |                                                  |
| <i>baclofen oral tablet 10 mg, 20 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>baclofen oral tablet 5 mg</i>                                                      | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>carisoprodol oral tablet 350 mg</i>                                                | \$0 (Tier 2)                             | PA; QL (120 per 30 days)                         |
| <i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>                                    | \$0 (Tier 2)                             | PA; QL (90 per 30 days)                          |
| <i>dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>methocarbamol oral tablet 500 mg</i>                                               | \$0 (Tier 2)                             | PA; QL (360 per 30 days)                         |
| <i>methocarbamol oral tablet 750 mg</i>                                               | \$0 (Tier 2)                             | PA; QL (240 per 30 days)                         |
| <i>tizanidine hcl oral tablet 2 mg, 4 mg</i>                                          | \$0 (Tier 1)                             |                                                  |

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|-------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Narcolepsy/Cataplexy</b>                                                         |                                          |                                                  |
| <i>armodafinil oral tablet 150 mg, 200 mg, 250 mg</i>                               | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>armodafinil oral tablet 50 mg</i>                                                | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>modafinil oral tablet 100 mg</i>                                                 | \$0 (Tier 1)                             | PA; QL (30 per 30 days)                          |
| <i>modafinil oral tablet 200 mg</i>                                                 | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>sodium oxybate oral solution 500 mg/ml</i>                                       | \$0 (Tier 2)                             | PA; LA; QL (540 per 30 days); NDS                |
| <b>Psychotherapeutic-Misc</b>                                                       |                                          |                                                  |
| <i>acamprosate calcium oral tablet delayed release 333 mg</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg</i>                    | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg</i>                       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>      | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg</i> | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg</i>   | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>disulfiram oral tablet 250 mg, 500 mg</i>                                        | \$0 (Tier 1)                             |                                                  |
| <i>gnp nicotine gum 4 mg mouth/throat</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine mini lozenge 2 mg mouth/throat</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine mini lozenge 4 mg mouth/throat</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine patch 24 hour 14 mg/24hr transdermal</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine patch 24 hour 21 mg/24hr transdermal</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine patch 24 hour 7 mg/24hr transdermal</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine polacrilex gum 2 mg mouth/throat</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine polacrilex gum 4 mg mouth/throat</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine polacrilex lozenge 2 mg mouth/throat</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nicotine polacrilex lozenge 4 mg mouth/throat</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pain relief nighttime tablet 250-250-38 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense nicotine gum 2 mg mouth/throat</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense nicotine gum 4 mg mouth/throat</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense nicotine lozenge 2 mg mouth/throat</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense nicotine lozenge 4 mg mouth/throat</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>hm nicotine patch 24 hour 21 mg/24hr transdermal</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>hm nicotine patch 24 hour 7 mg/24hr transdermal</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>hm nicotine polacrilex gum 2 mg mouth/throat</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>hm nicotine polacrilex gum 4 mg mouth/throat</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>hm nicotine polacrilex lozenge 2 mg mouth/throat</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml</i>                         | \$0 (Tier 1)                             |                                                  |

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|--------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>naloxone hcl injection solution cartridge 0.4 mg/ml</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>naloxone hcl nasal liquid 4 mg/0.1ml</i>                                                | \$0 (Tier 1)                             |                                                  |
| <i>naltrexone hcl oral tablet 50 mg</i>                                                    | \$0 (Tier 1)                             |                                                  |
| NICODERM CQ PATCH 24 HOUR 14 MG/24HR TRANSDERMAL                                           | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine kit 21-14-7 mg/24hr transdermal</i>                                            | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine mini lozenge 2 mg mouth/throat</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine mini lozenge 4 mg mouth/throat</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine patch 24 hour 14 mg/24hr transdermal (otc)</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine patch 24 hour 21 mg/24hr transdermal (otc)</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine patch 24 hour 7 mg/24hr transdermal (otc)</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine polacrilex gum 2 mg mouth/throat</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine polacrilex gum 4 mg mouth/throat</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine polacrilex lozenge 2 mg mouth/throat</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine polacrilex lozenge 4 mg mouth/throat</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine polacrilex mini lozenge 2 mg mouth/throat</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine step 1 patch 24 hour 21 mg/24hr transdermal</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine step 2 patch 24 hour 14 mg/24hr transdermal</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>nicotine step 3 patch 24 hour 7 mg/24hr transdermal</i>                                 | \$0 (Tier 3)                             | DP                                               |
| NICOTROL INHALATION INHALER 10 MG                                                          | \$0 (Tier 2)                             |                                                  |
| NICOTROL NS NASAL SOLUTION 10 MG/ML                                                        | \$0 (Tier 2)                             |                                                  |
| <i>qc nicotine transdermal system patch 24 hour 14 mg/24hr transdermal</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>qc nicotine transdermal system patch 24 hour 21 mg/24hr transdermal</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine gum 4 mg mouth/throat</i>                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine lozenge 2 mg mouth/throat</i>                                               | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine polacrilex gum 2 mg mouth/throat</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine polacrilex gum 4 mg mouth/throat</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine polacrilex lozenge 2 mg mouth/throat</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>sm nicotine polacrilex lozenge 4 mg mouth/throat</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 &amp; 1 mg x 42</i> | \$0 (Tier 1)                             | PA; QL (106 per 365 days)                        |
| <i>varenicline tartrate oral tablet 0.5 mg, 1 mg</i>                                       | \$0 (Tier 1)                             | PA; QL (56 per 28 days)                          |
| VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG                                     | \$0 (Tier 2)                             | NDS                                              |

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| NAME OF DRUG                                                                                | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>ENDOCRINE AND METABOLIC</b>                                                              |                                          |                                                  |
| <b>Androgens</b>                                                                            |                                          |                                                  |
| DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML, 200 MG/ML                               | \$0 (Tier 1)                             | PA                                               |
| <i>methyltestosterone oral capsule 10 mg</i>                                                | \$0 (Tier 2)                             | PA; QL (600 per 30 days); NDS                    |
| <i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)</i> | \$0 (Tier 1)                             | PA                                               |
| <i>testosterone enanthate intramuscular solution 200 mg/ml</i>                              | \$0 (Tier 1)                             | PA                                               |
| <i>testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</i>      | \$0 (Tier 1)                             | PA; QL (300 per 30 days)                         |
| <i>testosterone transdermal gel 20.25 mg/act (1.62%)</i>                                    | \$0 (Tier 1)                             | PA; QL (150 per 30 days)                         |
| <b>Antidiabetics, Insulins</b>                                                              |                                          |                                                  |
| ADMELOG INJECTION SOLUTION 100 UNIT/ML                                                      | \$0 (Tier 2)                             |                                                  |
| ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                             | \$0 (Tier 2)                             |                                                  |
| ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML                                                | \$0 (Tier 2)                             |                                                  |
| BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                             | \$0 (Tier 2)                             |                                                  |
| COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML                                              | \$0 (Tier 2)                             |                                                  |
| <i>cvs gauze sterile pad 2"x2"</i>                                                          | \$0 (Tier 2)                             |                                                  |
| EXEL COMFORT POINT PEN NEEDLE 29G X 12MM                                                    | \$0 (Tier 2)                             |                                                  |
| FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                              | \$0 (Tier 2)                             |                                                  |
| FIASP INJECTION SOLUTION 100 UNIT/ML                                                        | \$0 (Tier 2)                             |                                                  |
| FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                   | \$0 (Tier 2)                             |                                                  |
| FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                  | \$0 (Tier 2)                             | B/D                                              |
| <i>global alcohol prep ease pad 70 %</i>                                                    | \$0 (Tier 2)                             |                                                  |
| HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML                            | \$0 (Tier 2)                             | B/D; NDS                                         |
| HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML                      | \$0 (Tier 2)                             | NDS                                              |
| LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                              | \$0 (Tier 2)                             |                                                  |
| LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML                                                    | \$0 (Tier 2)                             |                                                  |
| NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML              | \$0 (Tier 2)                             |                                                  |
| NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                                   | \$0 (Tier 2)                             |                                                  |
| NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML                          | \$0 (Tier 2)                             |                                                  |

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|-----------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML                                                                   | \$0 (Tier 2)                             |                                                  |
| NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML                                                   | \$0 (Tier 2)                             |                                                  |
| NOVOLIN R INJECTION SOLUTION 100 UNIT/ML                                                                        | \$0 (Tier 2)                             |                                                  |
| NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML                              | \$0 (Tier 2)                             |                                                  |
| NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                                                   | \$0 (Tier 2)                             |                                                  |
| OMNIPOD 5 G6 INTRO (GEN 5) KIT                                                                                  | \$0 (Tier 2)                             | PA; QL (1 per 365 days)                          |
| OMNIPOD 5 G6 PODS (GEN 5)                                                                                       | \$0 (Tier 2)                             | PA; QL (15 per 30 days)                          |
| OMNIPOD 5 G7 INTRO (GEN 5) KIT                                                                                  | \$0 (Tier 2)                             | PA; QL (1 per 365 days)                          |
| OMNIPOD 5 G7 PODS (GEN 5)                                                                                       | \$0 (Tier 2)                             | PA; QL (15 per 30 days)                          |
| OMNIPOD CLASSIC PODS (GEN 3)                                                                                    | \$0 (Tier 2)                             | PA; QL (15 per 30 days)                          |
| OMNIPOD DASH INTRO (GEN 4) KIT                                                                                  | \$0 (Tier 2)                             | PA; QL (1 per 365 days)                          |
| OMNIPOD DASH PODS (GEN 4)                                                                                       | \$0 (Tier 2)                             | PA; QL (15 per 30 days)                          |
| OMNIPOD GO KIT 10 UNIT/24HR, 15 UNIT/24HR, 20 UNIT/24HR, 25 UNIT/24HR, 30 UNIT/24HR, 35 UNIT/24HR, 40 UNIT/24HR | \$0 (Tier 2)                             | PA; QL (15 per 30 days)                          |
| <i>preferred plus insulin syringe 28g x 1/2" 0.5 ml</i>                                                         | \$0 (Tier 2)                             |                                                  |
| RELI-ON INSULIN SYRINGE 29G 0.3 ML                                                                              | \$0 (Tier 2)                             |                                                  |
| SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML                                                    | \$0 (Tier 2)                             | QL (15 per 25 days)                              |
| TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML                                              | \$0 (Tier 2)                             |                                                  |
| TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML                                                  | \$0 (Tier 2)                             |                                                  |
| TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML                                   | \$0 (Tier 2)                             |                                                  |
| TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML                                                                       | \$0 (Tier 2)                             |                                                  |
| V-GO 20 KIT 20 UNIT/24HR                                                                                        | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| V-GO 30 KIT 30 UNIT/24HR                                                                                        | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| V-GO 40 KIT 40 UNIT/24HR                                                                                        | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML                                                  | \$0 (Tier 2)                             | QL (15 per 30 days)                              |
| <b>Antidiabetics</b>                                                                                            |                                          |                                                  |
| <i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>                                                                | \$0 (Tier 1)                             |                                                  |
| BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML                                                           | \$0 (Tier 2)                             | PA; QL (3.4 per 28 days)                         |
| BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML                                              | \$0 (Tier 2)                             | PA; QL (2.4 per 30 days)                         |

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| NAME OF DRUG                                                                                                                          | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION<br>PEN-INJECTOR 5 MCG/0.02ML                                                                   | \$0 (Tier 2)                             | PA; QL (1.2 per 30 days)                         |
| FARXIGA ORAL TABLET 10 MG, 5 MG                                                                                                       | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>glimepiride oral tablet 1 mg, 2 mg</i>                                                                                             | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>glimepiride oral tablet 4 mg</i>                                                                                                   | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>glipizide er oral tablet extended release 24 hour 10 mg</i>                                                                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>glipizide er oral tablet extended release 24 hour 2.5 mg, 5 mg</i>                                                                 | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>glipizide oral tablet 10 mg</i>                                                                                                    | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>glipizide oral tablet 5 mg</i>                                                                                                     | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>glipizide xl oral tablet extended release 24 hour 10 mg</i>                                                                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>glipizide xl oral tablet extended release 24 hour 2.5 mg, 5 mg</i>                                                                 | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>glipizide-metformin hcl oral tablet 2.5-250 mg</i>                                                                                 | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| <i>glipizide-metformin hcl oral tablet 2.5-500 mg, 5-500 mg</i>                                                                       | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG                                                                                                 | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| JANUMET ORAL TABLET 50-1000 MG, 50-500 MG                                                                                             | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| JANUMET XR ORAL TABLET EXTENDED RELEASE<br>24 HOUR 100-1000 MG                                                                        | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| JANUMET XR ORAL TABLET EXTENDED RELEASE<br>24 HOUR 50-1000 MG, 50-500 MG                                                              | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG                                                                                              | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| JARDIANCE ORAL TABLET 10 MG, 25 MG                                                                                                    | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500<br>MG, 2.5-850 MG                                                                         | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| JENTADUETO XR ORAL TABLET EXTENDED<br>RELEASE 24 HOUR 2.5-1000 MG                                                                     | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| JENTADUETO XR ORAL TABLET EXTENDED<br>RELEASE 24 HOUR 5-1000 MG                                                                       | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>metformin hcl er oral tablet extended release 24 hour<br/>500 mg</i>                                                               | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>metformin hcl er oral tablet extended release 24 hour<br/>750 mg</i>                                                               | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>metformin hcl oral tablet 1000 mg</i>                                                                                              | \$0 (Tier 1)                             | QL (75 per 30 days)                              |
| <i>metformin hcl oral tablet 500 mg</i>                                                                                               | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| <i>metformin hcl oral tablet 850 mg</i>                                                                                               | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| MOUNJARO SUBCUTANEOUS SOLUTION PEN-<br>INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15<br>MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5<br>MG/0.5ML | \$0 (Tier 2)                             | PA; QL (2 per 28 days)                           |
| <i>nateglinide oral tablet 120 mg, 60 mg</i>                                                                                          | \$0 (Tier 1)                             | QL (90 per 30 days)                              |

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|----------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML                        | \$0 (Tier 2)                             | PA; QL (1.5 per 28 days)                         |
| OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML                          | \$0 (Tier 2)                             | PA; QL (3 per 28 days)                           |
| OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML                                    | \$0 (Tier 2)                             | PA; QL (3 per 28 days)                           |
| OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML                                    | \$0 (Tier 2)                             | PA; QL (3 per 28 days)                           |
| <i>pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg</i>                                            | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg</i>                             | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>repaglinide oral tablet 0.5 mg, 1 mg</i>                                                        | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>repaglinide oral tablet 2 mg</i>                                                                | \$0 (Tier 1)                             | QL (240 per 30 days)                             |
| RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG                                                             | \$0 (Tier 2)                             | PA; QL (30 per 30 days)                          |
| SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG                                          | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| SYNJARDY ORAL TABLET 5-500 MG                                                                      | \$0 (Tier 2)                             | QL (120 per 30 days)                             |
| SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 5-1000 MG               | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25-1000 MG                                        | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| TRADJENTA ORAL TABLET 5 MG                                                                         | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG                        | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG                   | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML | \$0 (Tier 2)                             | PA; QL (2 per 28 days)                           |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG                               | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG                    | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <b>Antiobesity Agents</b>                                                                          |                                          |                                                  |
| ADIPEX-P CAPSULE 37.5 MG ORAL                                                                      | \$0 (Tier 3)                             | DP                                               |
| ADIPEX-P TABLET 37.5 MG ORAL                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>benzphetamine hcl tablet 25 mg oral</i>                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>benzphetamine hcl tablet 50 mg oral</i>                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>diethylpropion hcl er tablet extended release 24 hour 75 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>diethylpropion hcl tablet 25 mg oral</i>                                                        | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| LOMAIRA TABLET 8 MG ORAL                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>phendimetrazine tartrate tablet 35 mg oral</i>                                          | \$0 (Tier 3)                             | DP                                               |
| <i>phentermine hcl capsule 15 mg oral</i>                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>phentermine hcl capsule 30 mg oral</i>                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>phentermine hcl capsule 37.5 mg oral</i>                                                | \$0 (Tier 3)                             | DP                                               |
| <i>phentermine hcl tablet 37.5 mg oral</i>                                                 | \$0 (Tier 3)                             | DP                                               |
| QSYMIA CAPSULE EXTENDED RELEASE 24 HOUR 11.25-69 MG ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| QSYMIA CAPSULE EXTENDED RELEASE 24 HOUR 15-92 MG ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| QSYMIA CAPSULE EXTENDED RELEASE 24 HOUR 3.75-23 MG ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| QSYMIA CAPSULE EXTENDED RELEASE 24 HOUR 7.5-46 MG ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| XENICAL CAPSULE 120 MG ORAL                                                                | \$0 (Tier 3)                             | DP                                               |
| <b>Calcium Regulators</b>                                                                  |                                          |                                                  |
| <i>alendronate sodium oral solution 70 mg/75ml</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>alendronate sodium oral tablet 10 mg, 35 mg, 70 mg</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>calcitonin (salmon) nasal solution 200 unit/act</i>                                     | \$0 (Tier 1)                             | B/D                                              |
| <i>ibandronate sodium oral tablet 150 mg</i>                                               | \$0 (Tier 1)                             | B/D                                              |
| NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG, 25 MCG, 50 MCG, 75 MCG                             | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>pamidronate disodium intravenous solution 30 mg/10ml, 90 mg/10ml</i>                    | \$0 (Tier 1)                             | B/D                                              |
| <i>pamidronate disodium intravenous solution 6 mg/ml</i>                                   | \$0 (Tier 2)                             | B/D                                              |
| PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML                                    | \$0 (Tier 2)                             | QL (1 per 180 days)                              |
| <i>risedronate sodium oral tablet 150 mg, 35 mg, 35 mg (12 pack), 35 mg (4 pack), 5 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>risedronate sodium oral tablet delayed release 35 mg</i>                                | \$0 (Tier 1)                             |                                                  |
| <i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>        | \$0 (Tier 2)                             | PA; NDS                                          |
| XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML                                                   | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>zoledronic acid intravenous concentrate 4 mg/5ml</i>                                    | \$0 (Tier 1)                             | B/D                                              |
| <i>zoledronic acid intravenous solution 4 mg/100ml, 5 mg/100ml</i>                         | \$0 (Tier 1)                             | B/D                                              |
| <b>Chelating Agents</b>                                                                    |                                          |                                                  |
| CHEMET ORAL CAPSULE 100 MG                                                                 | \$0 (Tier 2)                             | NDS                                              |
| <i>deferasirox granules oral packet 180 mg, 360 mg, 90 mg</i>                              | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>deferasirox oral tablet 180 mg, 360 mg</i>                                              | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>deferasirox oral tablet 90 mg</i>                                                       | \$0 (Tier 1)                             | PA                                               |

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|-------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| LOKELMA ORAL PACKET 10 GM, 5 GM                       | \$0 (Tier 2)                             |                                                  |
| <i>penicillamine oral tablet 250 mg</i>               | \$0 (Tier 2)                             | NDS                                              |
| <i>sodium polystyrene sulfonate oral powder</i>       | \$0 (Tier 1)                             |                                                  |
| SPS ORAL SUSPENSION 15 GM/60ML                        | \$0 (Tier 1)                             |                                                  |
| <i>trientine hcl oral capsule 250 mg</i>              | \$0 (Tier 2)                             | PA; NDS                                          |
| VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM         | \$0 (Tier 2)                             |                                                  |
| <b>Contraceptives</b>                                 |                                          |                                                  |
| AFIRMELLE ORAL TABLET 0.1-20 MG-MCG                   | \$0 (Tier 1)                             |                                                  |
| <i>aimSCO lubricated</i>                              | \$0 (Tier 3)                             | DP                                               |
| ALTAVERA ORAL TABLET 0.15-30 MG-MCG                   | \$0 (Tier 1)                             |                                                  |
| <i>alyacen 1/35 oral tablet 1-35 mg-mcg</i>           | \$0 (Tier 1)                             |                                                  |
| <i>alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i> | \$0 (Tier 1)                             |                                                  |
| AMETHIA ORAL TABLET 0.15-0.03 & 0.01 MG               | \$0 (Tier 1)                             |                                                  |
| APRI ORAL TABLET 0.15-30 MG-MCG                       | \$0 (Tier 1)                             |                                                  |
| ARANELLE ORAL TABLET 0.5/1/0.5-35 MG-MCG              | \$0 (Tier 1)                             |                                                  |
| ASHLYNA ORAL TABLET 0.15-0.03 & 0.01 MG               | \$0 (Tier 1)                             |                                                  |
| AUBRA EQ ORAL TABLET 0.1-20 MG-MCG                    | \$0 (Tier 1)                             |                                                  |
| AUROVELA 1/20 ORAL TABLET 1-20 MG-MCG                 | \$0 (Tier 1)                             |                                                  |
| AUROVELA 24 FE ORAL TABLET 1-20 MG-MCG(24)            | \$0 (Tier 1)                             |                                                  |
| AUROVELA FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG          | \$0 (Tier 1)                             |                                                  |
| AUROVELA FE 1/20 ORAL TABLET 1-20 MG-MCG              | \$0 (Tier 1)                             |                                                  |
| AVIANE ORAL TABLET 0.1-20 MG-MCG                      | \$0 (Tier 1)                             |                                                  |
| AYUNA ORAL TABLET 0.15-30 MG-MCG                      | \$0 (Tier 1)                             |                                                  |
| AZURETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)         | \$0 (Tier 1)                             |                                                  |
| BALZIVA ORAL TABLET 0.4-35 MG-MCG                     | \$0 (Tier 1)                             |                                                  |
| BLISOVI 24 FE ORAL TABLET 1-20 MG-MCG(24)             | \$0 (Tier 1)                             |                                                  |
| BLISOVI FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG           | \$0 (Tier 1)                             |                                                  |
| <i>bielllyn oral tablet 0.4-35 mg-mcg</i>             | \$0 (Tier 1)                             |                                                  |
| CAMILA ORAL TABLET 0.35 MG                            | \$0 (Tier 1)                             |                                                  |
| CAMRESE LO ORAL TABLET 0.1-0.02 & 0.01 MG             | \$0 (Tier 1)                             |                                                  |
| CAMRESE ORAL TABLET 0.15-0.03 & 0.01 MG               | \$0 (Tier 1)                             |                                                  |
| CHATEAL EQ ORAL TABLET 0.15-30 MG-MCG                 | \$0 (Tier 1)                             |                                                  |
| CRYSELLE-28 ORAL TABLET 0.3-30 MG-MCG                 | \$0 (Tier 1)                             |                                                  |
| CYRED EQ ORAL TABLET 0.15-30 MG-MCG                   | \$0 (Tier 1)                             |                                                  |
| DASETTA 1/35 ORAL TABLET 1-35 MG-MCG                  | \$0 (Tier 1)                             |                                                  |
| DASETTA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG        | \$0 (Tier 1)                             |                                                  |
| DAYSEE ORAL TABLET 0.15-0.03 & 0.01 MG                | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                              | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| DEBLITANE ORAL TABLET 0.35 MG                                                             | \$0 (Tier 1)                             |                                                  |
| DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML             | \$0 (Tier 2)                             |                                                  |
| <i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5), 0.15-30 mg-mcg</i> | \$0 (Tier 1)                             |                                                  |
| <i>drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>                    | \$0 (Tier 1)                             |                                                  |
| DUREX REALFEEL DEVICE                                                                     | \$0 (Tier 3)                             | DP                                               |
| ELINEST ORAL TABLET 0.3-30 MG-MCG                                                         | \$0 (Tier 1)                             |                                                  |
| ELURYNG VAGINAL RING 0.12-0.015 MG/24HR                                                   | \$0 (Tier 1)                             |                                                  |
| EMZAHH ORAL TABLET 0.35 MG                                                                | \$0 (Tier 1)                             |                                                  |
| ENILLORING VAGINAL RING 0.12-0.015 MG/24HR                                                | \$0 (Tier 1)                             |                                                  |
| ENPRESSE-28 ORAL TABLET 50-30/75-40/ 125-30 MCG                                           | \$0 (Tier 1)                             |                                                  |
| ENSKYCE ORAL TABLET 0.15-30 MG-MCG                                                        | \$0 (Tier 1)                             |                                                  |
| ERRIN ORAL TABLET 0.35 MG                                                                 | \$0 (Tier 1)                             |                                                  |
| ESTARYLLA ORAL TABLET 0.25-35 MG-MCG                                                      | \$0 (Tier 1)                             |                                                  |
| <i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr</i>                     | \$0 (Tier 1)                             |                                                  |
| FALMINA ORAL TABLET 0.1-20 MG-MCG                                                         | \$0 (Tier 1)                             |                                                  |
| FANTASY LUBRICATED                                                                        | \$0 (Tier 3)                             | DP                                               |
| FANTASY LUBRICATED/SPERMICIDE                                                             | \$0 (Tier 3)                             | DP                                               |
| FC2 FEMALE CONDOM                                                                         | \$0 (Tier 3)                             | DP                                               |
| FINZALA ORAL TABLET CHEWABLE 1-20 MG-MCG(24)                                              | \$0 (Tier 1)                             |                                                  |
| HAILEY 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                   | \$0 (Tier 1)                             |                                                  |
| HAILEY 24 FE ORAL TABLET 1-20 MG-MCG(24)                                                  | \$0 (Tier 1)                             |                                                  |
| HALOETTE VAGINAL RING 0.12-0.015 MG/24HR                                                  | \$0 (Tier 1)                             |                                                  |
| HEATHER ORAL TABLET 0.35 MG                                                               | \$0 (Tier 1)                             |                                                  |
| ICLEVIA ORAL TABLET 0.15-0.03 MG                                                          | \$0 (Tier 1)                             |                                                  |
| INCASSIA ORAL TABLET 0.35 MG                                                              | \$0 (Tier 1)                             |                                                  |
| INTROVALE ORAL TABLET 0.15-0.03 MG                                                        | \$0 (Tier 1)                             |                                                  |
| ISIBLOOM ORAL TABLET 0.15-30 MG-MCG                                                       | \$0 (Tier 1)                             |                                                  |
| JASMIEL ORAL TABLET 3-0.02 MG                                                             | \$0 (Tier 1)                             |                                                  |
| JOLESSA ORAL TABLET 0.15-0.03 MG                                                          | \$0 (Tier 1)                             |                                                  |
| JULEBER ORAL TABLET 0.15-30 MG-MCG                                                        | \$0 (Tier 1)                             |                                                  |
| JUNEL 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                    | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                                                   | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| JUNEL 1/20 ORAL TABLET 1-20 MG-MCG                                                                             | \$0 (Tier 1)                             |                                                  |
| JUNEL FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                                      | \$0 (Tier 1)                             |                                                  |
| JUNEL FE 1/20 ORAL TABLET 1-20 MG-MCG                                                                          | \$0 (Tier 1)                             |                                                  |
| JUNEL FE 24 ORAL TABLET 1-20 MG-MCG(24)                                                                        | \$0 (Tier 1)                             |                                                  |
| KAITLIB FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG                                                                  | \$0 (Tier 1)                             |                                                  |
| KARIVA ORAL TABLET 0.15-0.02/0.01 MG (21/5)                                                                    | \$0 (Tier 1)                             |                                                  |
| KELNOR 1/35 ORAL TABLET 1-35 MG-MCG                                                                            | \$0 (Tier 1)                             |                                                  |
| KELNOR 1/50 ORAL TABLET 1-50 MG-MCG                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>kimono</i>                                                                                                  | \$0 (Tier 3)                             | DP                                               |
| KIMONO COLORS DEVICE                                                                                           | \$0 (Tier 3)                             | DP                                               |
| KIMONO MAXX-LARGE FLARE                                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>kimono micro thin</i>                                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>kimono micro thin plus</i>                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>kimono plus</i>                                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>kimono sensation</i>                                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>kimono sensation plus</i>                                                                                   | \$0 (Tier 3)                             | DP                                               |
| KIMONO SPECIAL DEVICE                                                                                          | \$0 (Tier 3)                             | DP                                               |
| KURVELO ORAL TABLET 0.15-30 MG-MCG                                                                             | \$0 (Tier 1)                             |                                                  |
| LARIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                                         | \$0 (Tier 1)                             |                                                  |
| LARIN 1/20 ORAL TABLET 1-20 MG-MCG                                                                             | \$0 (Tier 1)                             |                                                  |
| LARIN 24 FE ORAL TABLET 1-20 MG-MCG(24)                                                                        | \$0 (Tier 1)                             |                                                  |
| LARIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                                      | \$0 (Tier 1)                             |                                                  |
| LARIN FE 1/20 ORAL TABLET 1-20 MG-MCG                                                                          | \$0 (Tier 1)                             |                                                  |
| LAYOLIS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG                                                                  | \$0 (Tier 1)                             |                                                  |
| LEENA ORAL TABLET 0.5/1/0.5-35 MG-MCG                                                                          | \$0 (Tier 1)                             |                                                  |
| LESSINA ORAL TABLET 0.1-20 MG-MCG                                                                              | \$0 (Tier 1)                             |                                                  |
| LEVONEST ORAL TABLET 50-30/75-40/ 125-30 MCG                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>levonorgest-eth est &amp; eth est oral tablet 42-21-21-7 days</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>levonorgest-eth estrad 91-day oral tablet 0.1-0.02 &amp; 0.01 mg, 0.15-0.03 &amp; 0.01 mg, 0.15-0.03 mg</i> | \$0 (Tier 1)                             |                                                  |
| <i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg</i>                                       | \$0 (Tier 1)                             |                                                  |
| LEVORA 0.15/30 (28) ORAL TABLET 0.15-30 MG-MCG                                                                 | \$0 (Tier 1)                             |                                                  |
| LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG                                                                 | \$0 (Tier 1)                             |                                                  |

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|-----------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG                                              | \$0 (Tier 1)                             |                                                  |
| LOESTRIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                            | \$0 (Tier 1)                             |                                                  |
| LOESTRIN FE 1/20 ORAL TABLET 1-20 MG-MCG                                                | \$0 (Tier 1)                             |                                                  |
| LORYNA ORAL TABLET 3-0.02 MG                                                            | \$0 (Tier 1)                             |                                                  |
| LOW-OGESTREL ORAL TABLET 0.3-30 MG-MCG                                                  | \$0 (Tier 1)                             |                                                  |
| LUTERA ORAL TABLET 0.1-20 MG-MCG                                                        | \$0 (Tier 1)                             |                                                  |
| LYLEQ ORAL TABLET 0.35 MG                                                               | \$0 (Tier 1)                             |                                                  |
| LYZA ORAL TABLET 0.35 MG                                                                | \$0 (Tier 1)                             |                                                  |
| <i>marlissa oral tablet 0.15-30 mg-mcg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>maxx</i>                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>maxx plus</i>                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>medroxyprogesterone acetate intramuscular suspension 150 mg/ml</i>                   | \$0 (Tier 1)                             |                                                  |
| <i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i> | \$0 (Tier 1)                             |                                                  |
| MIBELAS 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)                                      | \$0 (Tier 1)                             |                                                  |
| MICROGESTIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                            | \$0 (Tier 1)                             |                                                  |
| MICROGESTIN 1/20 ORAL TABLET 1-20 MG-MCG                                                | \$0 (Tier 1)                             |                                                  |
| MICROGESTIN 24 FE ORAL TABLET 1-20 MG-MCG                                               | \$0 (Tier 1)                             |                                                  |
| MICROGESTIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                         | \$0 (Tier 1)                             |                                                  |
| MICROGESTIN FE 1/20 ORAL TABLET 1-20 MG-MCG                                             | \$0 (Tier 1)                             |                                                  |
| MILI ORAL TABLET 0.25-35 MG-MCG                                                         | \$0 (Tier 1)                             |                                                  |
| MONO-LINYAH ORAL TABLET 0.25-35 MG-MCG                                                  | \$0 (Tier 1)                             |                                                  |
| NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG                                             | \$0 (Tier 1)                             |                                                  |
| NIKKI ORAL TABLET 3-0.02 MG                                                             | \$0 (Tier 1)                             |                                                  |
| NORA-BE ORAL TABLET 0.35 MG                                                             | \$0 (Tier 1)                             |                                                  |
| <i>norelgestromin-eth estradiol transdermal patch weekly 150-35 mcg/24hr</i>            | \$0 (Tier 1)                             |                                                  |
| <i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>                               | \$0 (Tier 1)                             |                                                  |
| <i>norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24)</i>                  | \$0 (Tier 1)                             |                                                  |
| <i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>            | \$0 (Tier 1)                             |                                                  |
| <i>norethindrone oral tablet 0.35 mg</i>                                                | \$0 (Tier 1)                             |                                                  |
| <i>norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg, 0.8-25 mg-mcg</i>      | \$0 (Tier 1)                             |                                                  |

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|--------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>                                           | \$0 (Tier 1)                             |                                                  |
| <i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg</i> | \$0 (Tier 1)                             |                                                  |
| NORLYROC ORAL TABLET 0.35 MG                                                                           | \$0 (Tier 1)                             |                                                  |
| NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG                                                          | \$0 (Tier 1)                             |                                                  |
| NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG                                                              | \$0 (Tier 1)                             |                                                  |
| NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG                                                              | \$0 (Tier 1)                             |                                                  |
| NORTREL 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG                                                         | \$0 (Tier 1)                             |                                                  |
| NYLIA 1/35 ORAL TABLET 1-35 MG-MCG                                                                     | \$0 (Tier 1)                             |                                                  |
| NYLIA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG                                                           | \$0 (Tier 1)                             |                                                  |
| NYMYO ORAL TABLET 0.25-35 MG-MCG                                                                       | \$0 (Tier 1)                             |                                                  |
| OCELLA ORAL TABLET 3-0.03 MG                                                                           | \$0 (Tier 1)                             |                                                  |
| PHILITH ORAL TABLET 0.4-35 MG-MCG                                                                      | \$0 (Tier 1)                             |                                                  |
| PIMTREA ORAL TABLET 0.15-0.02/0.01 MG (21/5)                                                           | \$0 (Tier 1)                             |                                                  |
| PORTIA-28 ORAL TABLET 0.15-30 MG-MCG                                                                   | \$0 (Tier 1)                             |                                                  |
| REALITY LATEX CONDOMS                                                                                  | \$0 (Tier 3)                             | DP                                               |
| RECLIPSEN ORAL TABLET 0.15-30 MG-MCG                                                                   | \$0 (Tier 1)                             |                                                  |
| RIVELSA ORAL TABLET 42-21-21-7 DAYS                                                                    | \$0 (Tier 1)                             |                                                  |
| SETLAKIN ORAL TABLET 0.15-0.03 MG                                                                      | \$0 (Tier 1)                             |                                                  |
| SHAROBEL ORAL TABLET 0.35 MG                                                                           | \$0 (Tier 1)                             |                                                  |
| SIMLIYA ORAL TABLET 0.15-0.02/0.01 MG (21/5)                                                           | \$0 (Tier 1)                             |                                                  |
| SIMPESSE ORAL TABLET 0.15-0.03 & 0.01 MG                                                               | \$0 (Tier 1)                             |                                                  |
| SPRINTEC 28 ORAL TABLET 0.25-35 MG-MCG                                                                 | \$0 (Tier 1)                             |                                                  |
| SRONYX ORAL TABLET 0.1-20 MG-MCG                                                                       | \$0 (Tier 1)                             |                                                  |
| SYEDA ORAL TABLET 3-0.03 MG                                                                            | \$0 (Tier 1)                             |                                                  |
| TARINA 24 FE ORAL TABLET 1-20 MG-MCG(24)                                                               | \$0 (Tier 1)                             |                                                  |
| TARINA FE 1/20 EQ ORAL TABLET 1-20 MG-MCG                                                              | \$0 (Tier 1)                             |                                                  |
| TILIA FE ORAL TABLET 1-20/1-30/1-35 MG-MCG                                                             | \$0 (Tier 1)                             |                                                  |
| TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG                                                    | \$0 (Tier 1)                             |                                                  |
| TRI-LEGEST FE ORAL TABLET 1-20/1-30/1-35 MG-MCG                                                        | \$0 (Tier 1)                             |                                                  |
| TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-35 MCG                                                       | \$0 (Tier 1)                             |                                                  |
| TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG                                                 | \$0 (Tier 1)                             |                                                  |
| TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG                                                    | \$0 (Tier 1)                             |                                                  |

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|-------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-25 MCG     | \$0 (Tier 1)                             |                                                  |
| TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-25 MCG | \$0 (Tier 1)                             |                                                  |
| TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-35 MCG        | \$0 (Tier 1)                             |                                                  |
| TRI-NYMYO ORAL TABLET 0.18/0.215/0.25 MG-35 MCG       | \$0 (Tier 1)                             |                                                  |
| TRI-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-35 MCG    | \$0 (Tier 1)                             |                                                  |
| TRIVORA (28) ORAL TABLET 50-30/75-40/ 125-30 MCG      | \$0 (Tier 1)                             |                                                  |
| TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG  | \$0 (Tier 1)                             |                                                  |
| TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG     | \$0 (Tier 1)                             |                                                  |
| TRUSTEX LUB/RIBBED/STUDD                              | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUB/SPERMICIDE EX ST                          | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUB/SPERMICIDE XL                             | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUBRICATED                                    | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUBRICATED EX LARGE                           | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUBRICATED EXTRA ST                           | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX LUBRICATED/SPERMICIDE                         | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX NON-LUBRICATED                                | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX RIA LUB/SPERMICIDE                            | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX RIA LUBRICATED                                | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX RIA NON-LUBRICATED                            | \$0 (Tier 3)                             | DP                                               |
| TRUSTEX-NONOXYNOL-9/RIB/STUD                          | \$0 (Tier 3)                             | DP                                               |
| TURQOZ ORAL TABLET 0.3-30 MG-MCG                      | \$0 (Tier 1)                             |                                                  |
| TYDEMY ORAL TABLET 3-0.03-0.451 MG                    | \$0 (Tier 1)                             |                                                  |
| VELIVET ORAL TABLET 0.1/0.125/0.15 -0.025 MG          | \$0 (Tier 1)                             |                                                  |
| VESTURA ORAL TABLET 3-0.02 MG                         | \$0 (Tier 1)                             |                                                  |
| VIENVA ORAL TABLET 0.1-20 MG-MCG                      | \$0 (Tier 1)                             |                                                  |
| <i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>   | \$0 (Tier 1)                             |                                                  |
| VYFEMLA ORAL TABLET 0.4-35 MG-MCG                     | \$0 (Tier 1)                             |                                                  |
| VYLIBRA ORAL TABLET 0.25-35 MG-MCG                    | \$0 (Tier 1)                             |                                                  |
| WERA ORAL TABLET 0.5-35 MG-MCG                        | \$0 (Tier 1)                             |                                                  |
| WYMZYA FE ORAL TABLET CHEWABLE 0.4-35 MG-MCG          | \$0 (Tier 1)                             |                                                  |
| XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR       | \$0 (Tier 1)                             |                                                  |
| ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR       | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                                                                                    | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ZOVIA 1/35 (28) ORAL TABLET 1-35 MG-MCG                                                                                         | \$0 (Tier 1)                             |                                                  |
| ZUMANDIMINE ORAL TABLET 3-0.03 MG                                                                                               | \$0 (Tier 1)                             |                                                  |
| <b>Endometriosis</b>                                                                                                            |                                          |                                                  |
| <i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>                                                                               | \$0 (Tier 1)                             |                                                  |
| SYNAREL NASAL SOLUTION 2 MG/ML                                                                                                  | \$0 (Tier 2)                             | PA; NDS                                          |
| <b>Estrogens</b>                                                                                                                |                                          |                                                  |
| DOTTI TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR                    | \$0 (Tier 2)                             |                                                  |
| <i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>                                                                                 | \$0 (Tier 2)                             |                                                  |
| <i>estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>         | \$0 (Tier 2)                             |                                                  |
| <i>estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i> | \$0 (Tier 2)                             |                                                  |
| <i>estradiol vaginal cream 0.1 mg/gm</i>                                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>estradiol vaginal tablet 10 mcg</i>                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>                                                            | \$0 (Tier 2)                             |                                                  |
| FYAVOLV ORAL TABLET 0.5-2.5 MG-MCG, 1-5 MG-MCG                                                                                  | \$0 (Tier 2)                             |                                                  |
| JINTELI ORAL TABLET 1-5 MG-MCG                                                                                                  | \$0 (Tier 2)                             |                                                  |
| LYLLANA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR                  | \$0 (Tier 2)                             |                                                  |
| MIMVEY ORAL TABLET 1-0.5 MG                                                                                                     | \$0 (Tier 2)                             |                                                  |
| <i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>                                                       | \$0 (Tier 2)                             |                                                  |
| YUVAFEM VAGINAL TABLET 10 MCG                                                                                                   | \$0 (Tier 1)                             |                                                  |
| <b>Glucocorticoids</b>                                                                                                          |                                          |                                                  |
| DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML                                                                                 | \$0 (Tier 2)                             | B/D                                              |
| <i>dexamethasone oral elixir 0.5 mg/5ml</i>                                                                                     | \$0 (Tier 1)                             | B/D                                              |
| <i>dexamethasone oral solution 0.5 mg/5ml</i>                                                                                   | \$0 (Tier 1)                             | B/D                                              |
| <i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>                                                | \$0 (Tier 1)                             | B/D                                              |
| <i>dexamethasone sod phosphate pf injection solution 10 mg/ml</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml</i>                 | \$0 (Tier 1)                             |                                                  |

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|-----------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>dexamethasone sodium phosphate injection solution prefilled syringe 4 mg/ml</i>            | \$0 (Tier 1)                             |                                                  |
| <i>fludrocortisone acetate oral tablet 0.1 mg</i>                                             | \$0 (Tier 1)                             |                                                  |
| <i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>                                          | \$0 (Tier 1)                             |                                                  |
| <i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>                     | \$0 (Tier 1)                             | B/D                                              |
| <i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>                                | \$0 (Tier 1)                             | B/D                                              |
| <i>methylprednisolone oral tablet therapy pack 4 mg</i>                                       | \$0 (Tier 1)                             |                                                  |
| <i>methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg</i> | \$0 (Tier 1)                             | B/D                                              |
| <i>prednisolone oral solution 15 mg/5ml</i>                                                   | \$0 (Tier 1)                             | B/D                                              |
| <i>prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>  | \$0 (Tier 1)                             | B/D                                              |
| PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML                                                  | \$0 (Tier 2)                             | B/D                                              |
| <i>prednisone oral solution 5 mg/5ml</i>                                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>                         | \$0 (Tier 1)                             | B/D                                              |
| <i>prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)</i>       | \$0 (Tier 1)                             |                                                  |
| SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG                  | \$0 (Tier 2)                             |                                                  |
| <b>Glucose Elevating Agents</b>                                                               |                                          |                                                  |
| <i>cvs glucose gel 40 % oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>diazoxide oral suspension 50 mg/ml</i>                                                     | \$0 (Tier 2)                             | NDS                                              |
| GLUTOSE 5 GEL 40 % ORAL                                                                       | \$0 (Tier 3)                             | DP                                               |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML             | \$0 (Tier 2)                             |                                                  |
| GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML                                                    | \$0 (Tier 2)                             |                                                  |
| GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML                                  | \$0 (Tier 2)                             |                                                  |
| <i>value plus glucose gel 40 % oral</i>                                                       | \$0 (Tier 3)                             | DP                                               |
| <b>Miscellaneous</b>                                                                          |                                          |                                                  |
| ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML                                                    | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>betaine oral powder</i>                                                                    | \$0 (Tier 2)                             | LA; NDS                                          |
| <i>cabergoline oral tablet 0.5 mg</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>carglumic acid oral tablet soluble 200 mg</i>                                              | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| CERDELGA ORAL CAPSULE 84 MG                                                                   | \$0 (Tier 2)                             | PA; LA; NDS                                      |

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|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT                                                                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>charcoal powder</i>                                                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>cinacalcet hcl oral tablet 30 mg, 60 mg</i>                                                                           | \$0 (Tier 1)                             | B/D; QL (60 per 30 days)                         |
| <i>cinacalcet hcl oral tablet 90 mg</i>                                                                                  | \$0 (Tier 2)                             | B/D; QL (120 per 30 days); NDS                   |
| CVS KETONE CARE STRIP IN VITRO                                                                                           | \$0 (Tier 3)                             | DP                                               |
| CYSTAGON ORAL CAPSULE 150 MG, 50 MG                                                                                      | \$0 (Tier 2)                             | PA; LA                                           |
| <i>desmopressin ace spray refrig nasal solution 0.01 %</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>desmopressin acetate injection solution 4 mcg/ml</i>                                                                  | \$0 (Tier 2)                             | NDS                                              |
| <i>desmopressin acetate oral tablet 0.1 mg, 0.2 mg</i>                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>desmopressin acetate pf injection solution 4 mcg/ml</i>                                                               | \$0 (Tier 2)                             | NDS                                              |
| <i>desmopressin acetate spray nasal solution 0.01 %</i>                                                                  | \$0 (Tier 1)                             |                                                  |
| FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG                                                                 | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| GENOTROPIN MINISUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG | \$0 (Tier 2)                             | PA; NDS                                          |
| GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG                                                                            | \$0 (Tier 2)                             | PA; NDS                                          |
| INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML                                                                                 | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| JAVYGTOR ORAL PACKET 100 MG, 500 MG                                                                                      | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| JAVYGTOR ORAL TABLET 100 MG                                                                                              | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| KETO-DIASTIX STRIP IN VITRO                                                                                              | \$0 (Tier 3)                             | DP                                               |
| KORLYM ORAL TABLET 300 MG                                                                                                | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>levocarnitine oral solution 1 gm/10ml</i>                                                                             | \$0 (Tier 1)                             | B/D                                              |
| <i>levocarnitine oral tablet 330 mg</i>                                                                                  | \$0 (Tier 1)                             | B/D                                              |
| LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG                                                                        | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG                                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 30 MG                                                             | \$0 (Tier 2)                             | PA; NDS                                          |
| LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT 45 MG                                                                       | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>mifepristone oral tablet 300 mg</i>                                                                                   | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>miglustat oral capsule 100 mg</i>                                                                                     | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML                                                                                   | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>nitroisone oral capsule 10 mg, 2 mg, 20 mg, 5 mg</i>                                                                  | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>                                           | \$0 (Tier 1)                             | PA                                               |
| <i>octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml</i>                                                     | \$0 (Tier 2)                             | PA; NDS                                          |

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|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml</i>                                   | \$0 (Tier 1)                             | PA                                               |
| <i>octreotide acetate subcutaneous solution prefilled syringe 500 mcg/ml</i>                                              | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>raloxifene hcl oral tablet 60 mg</i>                                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>sapropterin dihydrochloride oral packet 100 mg, 500 mg</i>                                                             | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>sapropterin dihydrochloride oral tablet 100 mg</i>                                                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML                                                            | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>sodium phenylbutyrate oral powder 3 gm/tsp</i>                                                                         | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>sodium phenylbutyrate oral tablet 500 mg</i>                                                                           | \$0 (Tier 2)                             | PA; NDS                                          |
| SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML                                             | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG                                            | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| YARGESA ORAL CAPSULE 100 MG                                                                                               | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| <b>Phosphate Binder Agents</b>                                                                                            |                                          |                                                  |
| <i>calcium acetate (phos binder) oral capsule 667 mg</i>                                                                  | \$0 (Tier 1)                             | QL (360 per 30 days)                             |
| <i>calcium acetate oral tablet 667 mg</i>                                                                                 | \$0 (Tier 1)                             | QL (360 per 30 days)                             |
| <i>lanthanum carbonate oral tablet chewable 1000 mg, 500 mg</i>                                                           | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>lanthanum carbonate oral tablet chewable 750 mg</i>                                                                    | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>sevelamer carbonate oral packet 0.8 gm</i>                                                                             | \$0 (Tier 1)                             | QL (540 per 30 days)                             |
| <i>sevelamer carbonate oral packet 2.4 gm</i>                                                                             | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>sevelamer carbonate oral tablet 800 mg</i>                                                                             | \$0 (Tier 1)                             | QL (540 per 30 days)                             |
| VELPHORO ORAL TABLET CHEWABLE 500 MG                                                                                      | \$0 (Tier 2)                             | QL (180 per 30 days); NDS                        |
| <b>Progestins</b>                                                                                                         |                                          |                                                  |
| <i>medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <i>megestrol acetate oral suspension 40 mg/ml</i>                                                                         | \$0 (Tier 2)                             |                                                  |
| <i>megestrol acetate oral suspension 625 mg/5ml</i>                                                                       | \$0 (Tier 2)                             | PA                                               |
| <i>norethindrone acetate oral tablet 5 mg</i>                                                                             | \$0 (Tier 1)                             |                                                  |
| <i>progesterone oral capsule 100 mg, 200 mg</i>                                                                           | \$0 (Tier 1)                             |                                                  |
| <b>Thyroid Agents</b>                                                                                                     |                                          |                                                  |
| EUTHYROX ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG        | \$0 (Tier 1)                             |                                                  |
| LEVO-T ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG | \$0 (Tier 1)                             |                                                  |

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|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i> | \$0 (Tier 1)                             |                                                  |
| LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG                              | \$0 (Tier 1)                             |                                                  |
| <i>liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg</i>                                                                                   | \$0 (Tier 1)                             |                                                  |
| <i>methimazole oral tablet 10 mg, 5 mg</i>                                                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>propylthiouracil oral tablet 50 mg</i>                                                                                                      | \$0 (Tier 1)                             |                                                  |
| SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG                   | \$0 (Tier 2)                             |                                                  |
| UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG                   | \$0 (Tier 1)                             |                                                  |
| <b>Vitamin D Analogs</b>                                                                                                                       |                                          |                                                  |
| <i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>                                                                                               | \$0 (Tier 1)                             | B/D                                              |
| <i>calcitriol oral solution 1 mcg/ml</i>                                                                                                       | \$0 (Tier 1)                             | B/D                                              |
| <i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>                                                                                           | \$0 (Tier 1)                             | B/D                                              |
| RAYALDEE ORAL CAPSULE EXTENDED RELEASE 30 MCG                                                                                                  | \$0 (Tier 2)                             | NDS                                              |
| <b>GASTROINTESTINAL</b>                                                                                                                        |                                          |                                                  |
| <b>Antacids</b>                                                                                                                                |                                          |                                                  |
| ALMACONE DOUBLE STRENGTH SUSPENSION 400-400-40 MG/5ML ORAL                                                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>aluminum hydroxide gel suspension 320 mg/5ml oral</i>                                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>antacid calcium tablet chewable 500 mg oral</i>                                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>antacid maximum strength suspension 400-400-40 mg/5ml oral</i>                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>antacid maximum strength suspension 800-800-80 mg/10ml oral</i>                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>antacid regular strength suspension 200-200-20 mg/5ml oral</i>                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>antacid regular strength tablet chewable 500 mg oral</i>                                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>antacid suspension 400-400-40 mg/10ml oral</i>                                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>antacid/antigas suspension 400-400-40 mg/10ml oral</i>                                                                                      | \$0 (Tier 3)                             | DP                                               |
| <i>calcium antacid tablet chewable 500 mg oral</i>                                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate antacid suspension 1250 mg/5ml oral</i>                                                                                   | \$0 (Tier 3)                             | DP                                               |
| CAL-GEST ANTACID TABLET CHEWABLE 500 MG ORAL                                                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp antacid &amp; anti-gas suspension 200-200-20 mg/5ml oral</i>                                                                            | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>gnp antacid &amp; anti-gas suspension 400-400-40 mg/5ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp antacid regular strength suspension 200-200-20 mg/5ml oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>gnp antacid tablet chewable 500 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp magnesium oxide tablet 250 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>hm antacid anti-gas ex st suspension 400-400-40 mg/5ml oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>hm antacid suspension 200-200-20 mg/5ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>mag-al plus liquid 200-200-20 mg/5ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>mag-al plus xs liquid 400-400-40 mg/5ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide -mg supplement tablet 250 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide tablet 250 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide tablet 400 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide tablet 420 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>mintox maximum strength suspension 400-400-40 mg/5ml oral</i>      | \$0 (Tier 3)                             | DP                                               |
| MINTOX PLUS TABLET CHEWABLE 200-200-25 MG ORAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>qc antacid suspension 200-200-20 mg/5ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>qc antacid tablet chewable 500 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>qc antacid/anti-gas suspension 200-200-20 mg/5ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>qc antacid/anti-gas suspension 400-400-40 mg/5ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>sm antacid advanced max st suspension 400-400-40 mg/5ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>sm antacid advanced suspension 200-200-20 mg/5ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>sm antacid maximum strength suspension 400-400-40 mg/5ml oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>sm antacid suspension 400-400-40 mg/10ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm antacid tablet chewable 500 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>sodium bicarbonate powder oral (otc)</i>                           | \$0 (Tier 3)                             | DP                                               |
| <b>Anti-Diarrheal</b>                                                 |                                          |                                                  |
| <i>anti-diarrheal capsule 2 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>anti-diarrheal solution 1 mg/7.5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>anti-diarrheal tablet 2 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>bismatrol tablet chewable 262 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp anti-diarrheal capsule 2 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp anti-diarrheal tablet 2 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp loperamide hcl solution 1 mg/7.5ml oral</i>                    | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                         | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>gnp pink bismuth tablet 262 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense anti-diarrheal solution 1 mg/7.5ml oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>hm stomach relief ultra suspension 525 mg/15ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>loperamide hcl solution 1 mg/7.5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>loperamide hcl tablet 2 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>px stomach relief max st suspension 525 mg/15ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>qc anti-diarrheal capsule 2 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>qc anti-diarrheal tablet 2 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>qc diarrhea relief suspension 262 mg/15ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>qc pink bismuth suspension 525 mg/15ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>qc stomach relief ultra suspension 525 mg/15ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| RESTORA RX CAPSULE 60-1.25 MG ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm anti-diarrheal capsule 2 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>sm anti-diarrheal solution 1 mg/7.5ml oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>sm anti-diarrheal tablet 2 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm stomach relief suspension 525 mg/30ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm stomach relief tablet 262 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>sm stomach relief tablet chewable 262 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>stomach relief extra strength suspension 525 mg/15ml oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>stomach relief suspension 525 mg/30ml oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>stomach relief ultra suspension 525 mg/15ml oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <b>Antiemetics</b>                                                   |                                          |                                                  |
| <i>aprepitant oral capsule 125 mg, 40 mg, 80 &amp; 125 mg, 80 mg</i> | \$0 (Tier 1)                             | B/D                                              |
| COMPRO RECTAL SUPPOSITORY 25 MG                                      | \$0 (Tier 1)                             |                                                  |
| <i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>                   | \$0 (Tier 1)                             | B/D; QL (60 per 30 days)                         |
| <i>granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml</i>        | \$0 (Tier 1)                             |                                                  |
| <i>granisetron hcl oral tablet 1 mg</i>                              | \$0 (Tier 1)                             | B/D                                              |
| <i>meclizine hcl oral tablet 12.5 mg, 25 mg</i>                      | \$0 (Tier 2)                             |                                                  |
| <i>metoclopramide hcl injection solution 5 mg/ml</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>metoclopramide hcl oral solution 5 mg/5ml</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml</i>       | \$0 (Tier 1)                             |                                                  |
| <i>ondansetron hcl injection solution prefilled syringe 4 mg/2ml</i> | \$0 (Tier 1)                             |                                                  |
| <i>ondansetron hcl oral solution 4 mg/5ml</i>                        | \$0 (Tier 1)                             | B/D                                              |
| <i>ondansetron hcl oral tablet 4 mg, 8 mg</i>                        | \$0 (Tier 1)                             | B/D                                              |
| <i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>                | \$0 (Tier 1)                             | B/D                                              |

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| NAME OF DRUG                                                        | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>prochlorperazine edisylate injection solution 10 mg/2ml</i>      | \$0 (Tier 1)                             |                                                  |
| <i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>             | \$0 (Tier 1)                             |                                                  |
| <i>prochlorperazine rectal suppository 25 mg</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>promethazine hcl injection solution 25 mg/ml, 50 mg/ml</i>       | \$0 (Tier 2)                             | PA                                               |
| <i>promethazine hcl oral solution 6.25 mg/5ml</i>                   | \$0 (Tier 2)                             | PA                                               |
| <i>promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg</i>           | \$0 (Tier 2)                             | PA                                               |
| <i>scopolamine transdermal patch 72 hour 1 mg/3days</i>             | \$0 (Tier 2)                             | PA; QL (10 per 30 days)                          |
| <b>Antispasmodics</b>                                               |                                          |                                                  |
| <i>dicyclomine hcl oral capsule 10 mg</i>                           | \$0 (Tier 2)                             |                                                  |
| <i>dicyclomine hcl oral solution 10 mg/5ml</i>                      | \$0 (Tier 2)                             |                                                  |
| <i>dicyclomine hcl oral tablet 20 mg</i>                            | \$0 (Tier 2)                             |                                                  |
| <i>glycopyrrolate oral tablet 1 mg</i>                              | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>glycopyrrolate oral tablet 2 mg</i>                              | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <b>H2-Receptor Antagonists</b>                                      |                                          |                                                  |
| <i>famotidine (pf) intravenous solution 20 mg/2ml</i>               | \$0 (Tier 1)                             |                                                  |
| <i>famotidine intravenous solution 200 mg/20ml, 40 mg/4ml</i>       | \$0 (Tier 1)                             |                                                  |
| <i>famotidine oral suspension reconstituted 40 mg/5ml</i>           | \$0 (Tier 1)                             | QL (300 per 30 days)                             |
| <i>famotidine oral tablet 20 mg</i>                                 | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>famotidine oral tablet 40 mg</i>                                 | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>famotidine premixed intravenous solution 20-0.9 mg/50ml-%</i>    | \$0 (Tier 1)                             |                                                  |
| <i>nizatidine oral capsule 150 mg, 300 mg</i>                       | \$0 (Tier 1)                             |                                                  |
| <b>Inflammatory Bowel Disease</b>                                   |                                          |                                                  |
| <i>balsalazide disodium oral capsule 750 mg</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>budesonide er oral tablet extended release 24 hour 9 mg</i>      | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <i>budesonide oral capsule delayed release particles 3 mg</i>       | \$0 (Tier 1)                             | PA; QL (90 per 30 days)                          |
| <i>hydrocortisone rectal enema 100 mg/60ml</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>mesalamine er oral capsule extended release 24 hour 0.375 gm</i> | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>mesalamine oral capsule delayed release 400 mg</i>               | \$0 (Tier 1)                             | QL (180 per 30 days)                             |
| <i>mesalamine oral tablet delayed release 1.2 gm</i>                | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>mesalamine rectal enema 4 gm</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>mesalamine rectal suppository 1000 mg</i>                        | \$0 (Tier 1)                             |                                                  |
| <i>mesalamine-cleanser rectal kit 4 gm</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>sulfasalazine oral tablet 500 mg</i>                             | \$0 (Tier 1)                             |                                                  |
| <i>sulfasalazine oral tablet delayed release 500 mg</i>             | \$0 (Tier 1)                             |                                                  |

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| NAME OF DRUG                                                     | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Laxatives</b>                                                 |                                          |                                                  |
| <i>bisacodyl ec tablet delayed release 5 mg oral (otc)</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>bisacodyl suppository 10 mg rectal</i>                        | \$0 (Tier 3)                             | DP                                               |
| CLEARLAX POWDER 17 GM/SCOOP ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| COLACE CLEAR CAPSULE 50 MG ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>constulose oral solution 10 gm/15ml</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>docusate calcium capsule 240 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>docusate mini enema 283 mg/5ml rectal</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>docusate sodium capsule 100 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>docusate sodium capsule 250 mg oral (otc)</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>docusate sodium liquid 50 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| DOCUSOL KIDS ENEMA 100 MG/5ML RECTAL                             | \$0 (Tier 3)                             | DP                                               |
| DOCUSOL MINI ENEMA 283 MG/5ML RECTAL                             | \$0 (Tier 3)                             | DP                                               |
| <i>enema enema 7-19 gm/118ml rectal</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>enema ready-to-use enema 7-19 gm/118ml rectal</i>             | \$0 (Tier 3)                             | DP                                               |
| ENEMEEZ MINI ENEMA 283 MG/5ML RECTAL                             | \$0 (Tier 3)                             | DP                                               |
| ENEMEEZ PLUS ENEMA 20-283 MG RECTAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>enulose oral solution 10 gm/15ml</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>epsom salt granules oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>fiber laxative tablet 625 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>fiber powder 28.3 % oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>fiber tablet 625 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>fiber-lax tablet 625 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| FLEET ENEMA ENEMA 7-19 GM/118ML RECTAL                           | \$0 (Tier 3)                             | DP                                               |
| FLEET ENEMA ENEMA RECTAL                                         | \$0 (Tier 3)                             | DP                                               |
| <i>gavilax powder 17 gm/scoop oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| GAVILYTE-C ORAL SOLUTION RECONSTITUTED 240 GM                    | \$0 (Tier 1)                             |                                                  |
| GAVILYTE-G ORAL SOLUTION RECONSTITUTED 236 GM                    | \$0 (Tier 1)                             |                                                  |
| <i>generlac oral solution 10 gm/15ml</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>gentle laxative suppository 10 mg rectal</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gentle laxative tablet delayed release 5 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>gentlelax powder 17 gm/scoop oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>glycerin (adult) suppository 2 gm rectal</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>glycerin (infants &amp; children) suppository 1 gm rectal</i> | \$0 (Tier 3)                             | DP                                               |
| <i>glycerin adult suppository 2 gm rectal</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>glycerin childrens suppository 1 gm rectal</i>                | \$0 (Tier 3)                             | DP                                               |
| GLYCOLAX POWDER 17 GM/SCOOP ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| GNP CLEARLAX PACKET 17 GM ORAL                                   | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                                                    | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| GNP CLEARLAX POWDER 17 GM/SCOOP ORAL                                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp fiber powder 43 % oral</i>                                                                               | \$0 (Tier 3)                             | DP                                               |
| <i>gnp gentle laxative suppository 10 mg rectal</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp gentle laxative tablet delayed release 5 mg oral</i>                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp glycerin (adult) suppository 2.1 gm rectal</i>                                                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp glycerin child suppository 1.2 gm rectal</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp milk of magnesia suspension 1200 mg/15ml oral</i>                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp mineral oil oil oral</i>                                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp natural fiber capsule 0.52 gm oral</i>                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp natural fiber powder 28.3 % oral</i>                                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp senna plus tablet 8.6-50 mg oral</i>                                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp womens gentle laxative tablet delayed release 5 mg oral</i>                                              | \$0 (Tier 3)                             | DP                                               |
| GOODSENSE CLEARLAX POWDER 17 GM/SCOOP ORAL                                                                      | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense epsom salt granules oral</i>                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense mineral oil oil oral</i>                                                                           | \$0 (Tier 3)                             | DP                                               |
| HEALTHYLAX PACKET 17 GM ORAL                                                                                    | \$0 (Tier 3)                             | DP                                               |
| HM CLEARLAX POWDER 17 GM/SCOOP ORAL                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>hm enema enema 7-19 gm/118ml rectal</i>                                                                      | \$0 (Tier 3)                             | DP                                               |
| <i>hm gentle laxative suppository 10 mg rectal</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>hm laxative tablet delayed release 5 mg oral</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>hm milk of magnesia suspension 1200 mg/15ml oral</i>                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>hm senna tablet 8.6 mg oral</i>                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>hm stool softener capsule 100 mg oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>hm stool softener/laxative tablet 8.6-50 mg oral</i>                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>konsyl daily fiber powder 28.3 % oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>konsyl daily fiber powder 60.3 % oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>lactulose encephalopathy oral solution 10 gm/15ml</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <i>lactulose oral solution 10 gm/15ml</i>                                                                       | \$0 (Tier 1)                             |                                                  |
| <i>laxative max str tablet 25 mg oral</i>                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>laxative regular strength tablet 15 mg oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>milk of magnesia suspension 400 mg/5ml oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>milk of magnesia suspension 7.75 % oral</i>                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>mineral oil oil oral</i>                                                                                     | \$0 (Tier 3)                             | DP                                               |
| MIRALAX POWDER 17 GM/SCOOP ORAL (OTC)                                                                           | \$0 (Tier 3)                             | DP                                               |
| <i>na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml, 17.5-3.13-1.6 gm/177ml 2 pack (480ml)</i> | \$0 (Tier 1)                             |                                                  |
| <i>natural psyllium seed powder 100 % oral</i>                                                                  | \$0 (Tier 3)                             | DP                                               |
| PEDIA-LAX LIQUID 50 MG/15ML ORAL                                                                                | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| PEDIA-LAX SUPPOSITORY 2.8 GM RECTAL                                   | \$0 (Tier 3)                             | DP                                               |
| <i>peg 3350 packet 17 gm oral</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>peg 3350 powder 17 gm/scoop oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm</i> | \$0 (Tier 1)                             |                                                  |
| <i>peg-3350/electrolytes oral solution reconstituted 236 gm</i>       | \$0 (Tier 1)                             |                                                  |
| PLENVU ORAL SOLUTION RECONSTITUTED 140 GM                             | \$0 (Tier 2)                             |                                                  |
| <i>polyethylene glycol 3350 packet 17 gm oral (otc)</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>polyethylene glycol 3350 powder 17 gm/scoop oral (otc)</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>qc enema enema 16-6 gm/133ml rectal</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>qc epsom salt granules oral</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>qc fiber laxative capsule 0.52 gm oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>qc fiber therapy powder 25 % oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>qc fiber therapy powder 51.7 % oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>qc gentle laxative suppository 10 mg rectal</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>qc milk of magnesia suspension 400 mg/5ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>qc mineral oil heavy oil oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>qc natural vegetable powder 95 % oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>qc natura-lax powder 17 gm/scoop oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>qc stool softener capsule 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>qc stool softener pls laxative tablet 8.6-50 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| REGULOID POWDER 28.3 % ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| REGULOID POWDER 43 % ORAL                                             | \$0 (Tier 3)                             | DP                                               |
| REGULOID POWDER 51.7 % ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| <i>senexon-s tablet 8.6-50 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>senna capsule 8.6 mg oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>senna laxative tablet 8.6 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>senna liquid 8.8 mg/5ml oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| <i>senna plus tablet 8.6-50 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>senna s tablet 8.6-50 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>senna syrup 8.8 mg/5ml oral (otc)</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>senna tablet 8.6 mg oral</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>senna-lax tablet 8.6 mg oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| <i>senna-tabs tablet 8.6 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>senna-time s tablet 8.6-50 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>senna-time tablet 8.6 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| SEKOKOT EXTRA STRENGTH TABLET 17.2 MG ORAL                            | \$0 (Tier 3)                             | DP                                               |

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|-------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| SM CLEARLAX POWDER 17 GM/SCOOP ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| <i>sm enema enema 7-19 gm/118ml rectal</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>sm fiber powder 28.3 % oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm fiber powder 43 % oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm fiber powder 58.6 % oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm fiber powder powder 25 % oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm fiber tablet 625 mg oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm gentle laxative tablet delayed release 5 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm milk of magnesia suspension 1200 mg/15ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm stool softener capsule 100 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm stool softener/laxative tablet 8.6-50 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>stimulant laxative tablet 8.6-50 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>stool softener capsule 100 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>stool softener plus laxative tablet 8.6-50 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>vegetable lax+stool softener tablet 8.6-50 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <b>Miscellaneous</b>                                                    |                                          |                                                  |
| <i>alosetron hcl oral tablet 0.5 mg, 1 mg</i>                           | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| <i>cromolyn sodium oral concentrate 100 mg/5ml</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml</i>              | \$0 (Tier 2)                             |                                                  |
| <i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>                  | \$0 (Tier 2)                             |                                                  |
| <i>gas relief extra strength tablet chewable 125 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>gas relief ultra strength capsule 180 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| GATTEX SUBCUTANEOUS KIT 5 MG                                            | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <i>gnp anti-gas capsule 180 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp gas relief tablet chewable 80 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>hm gas relief infants drops suspension 20 mg/0.3ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>hm gas relief tablet chewable 80 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG                           | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>loperamide hcl oral capsule 2 mg</i>                                 | \$0 (Tier 1)                             |                                                  |
| <i>misoprostol oral tablet 100 mcg, 200 mcg</i>                         | \$0 (Tier 1)                             |                                                  |
| MOVANTIK ORAL TABLET 12.5 MG, 25 MG                                     | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| PHAZYME MAXIMUM STRENGTH CAPSULE 250 MG ORAL                            | \$0 (Tier 3)                             | DP                                               |
| <i>qc gas relief extra strength capsule 125 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 12 MG/0.6ML (0.6ML SYRINGE) | \$0 (Tier 2)                             | PA; QL (16.8 per 28 days); NDS                   |
| RELISTOR SUBCUTANEOUS SOLUTION 8 MG/0.4ML                               | \$0 (Tier 2)                             | PA; QL (11.2 per 28 days); NDS                   |
| <i>sm gas relief infants suspension 20 mg/0.3ml oral</i>                | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                                                                                                                                 | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm gas relief tablet chewable 125 mg oral</i>                                                                                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>sm gas relief tablet chewable 80 mg oral</i>                                                                                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>sucralfate oral tablet 1 gm</i>                                                                                                                                                           | \$0 (Tier 1)                             |                                                  |
| <i>ursodiol oral capsule 300 mg</i>                                                                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>ursodiol oral tablet 250 mg, 500 mg</i>                                                                                                                                                   | \$0 (Tier 1)                             |                                                  |
| XERMELO ORAL TABLET 250 MG                                                                                                                                                                   | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| XIFAXAN ORAL TABLET 550 MG                                                                                                                                                                   | \$0 (Tier 2)                             | PA; NDS                                          |
| <b>Pancreatic Enzymes</b>                                                                                                                                                                    |                                          |                                                  |
| CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT                                                          | \$0 (Tier 2)                             |                                                  |
| ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT | \$0 (Tier 2)                             |                                                  |
| <b>Proton Pump Inhibitors</b>                                                                                                                                                                |                                          |                                                  |
| <i>esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg</i>                                                                                                                      | \$0 (Tier 1)                             | ST; QL (30 per 30 days)                          |
| <i>lansoprazole oral capsule delayed release 15 mg, 30 mg</i>                                                                                                                                | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg</i>                                                                                                                           | \$0 (Tier 1)                             |                                                  |
| <i>pantoprazole sodium intravenous solution reconstituted 40 mg</i>                                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>pantoprazole sodium oral tablet delayed release 20 mg, 40 mg</i>                                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>rabeprazole sodium oral tablet delayed release 20 mg</i>                                                                                                                                  | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <b>GENITOURINARY</b>                                                                                                                                                                         |                                          |                                                  |
| <b>Benign Prostatic Hyperplasia</b>                                                                                                                                                          |                                          |                                                  |
| <i>alfuzosin hcl er oral tablet extended release 24 hour 10 mg</i>                                                                                                                           | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>dutasteride oral capsule 0.5 mg</i>                                                                                                                                                       | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg</i>                                                                                                                                    | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>finasteride oral tablet 5 mg</i>                                                                                                                                                          | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>tamsulosin hcl oral capsule 0.4 mg</i>                                                                                                                                                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <b>Miscellaneous</b>                                                                                                                                                                         |                                          |                                                  |
| <i>acetic acid irrigation solution 0.25 %</i>                                                                                                                                                | \$0 (Tier 1)                             |                                                  |
| <i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>                                                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)</i>                                                                                  | \$0 (Tier 1)                             |                                                  |

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|---------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Urinary Antispasmodics</b>                                                   |                                          |                                                  |
| GEMTESA ORAL TABLET 75 MG                                                       | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML                              | \$0 (Tier 2)                             | QL (300 per 28 days)                             |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG                     | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg</i> | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>oxybutynin chloride er oral tablet extended release 24 hour 5 mg</i>         | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>oxybutynin chloride oral solution 5 mg/5ml</i>                               | \$0 (Tier 1)                             | QL (600 per 30 days)                             |
| <i>oxybutynin chloride oral tablet 5 mg</i>                                     | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>solifenacin succinate oral tablet 10 mg, 5 mg</i>                            | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg</i> | \$0 (Tier 1)                             | ST; QL (30 per 30 days)                          |
| <i>tolterodine tartrate oral tablet 1 mg, 2 mg</i>                              | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>trospium chloride oral tablet 20 mg</i>                                      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <b>Vaginal Anti-Infectives</b>                                                  |                                          |                                                  |
| <i>3 day vaginal cream 2 % vaginal</i>                                          | \$0 (Tier 3)                             | DP                                               |
| <i>clindamycin phosphate vaginal cream 2 %</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>clotrimazole 3 cream 2 % vaginal</i>                                         | \$0 (Tier 3)                             | DP                                               |
| <i>clotrimazole cream 1 % vaginal</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp clotrimazole 3 cream 2 % vaginal</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp miconazole 1 kit 1200 &amp; 2 mg &amp; % vaginal</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp miconazole 3 kit 200 &amp; 2 mg-% (9gm) vaginal</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp miconazole 7 cream 2 % vaginal</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>metronidazole vaginal gel 0.75 %</i>                                         | \$0 (Tier 1)                             |                                                  |
| <i>miconazole 3 combo-supp kit 200 &amp; 2 mg-% (9gm) vaginal</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>miconazole 7 cream 2 % vaginal</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>miconazole nitrate cream 2 % vaginal</i>                                     | \$0 (Tier 3)                             | DP                                               |
| MONISTAT 7 COMBO PACK APP KIT 100 & 2 MG-% (9GM) VAGINAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>qc 3 day cream 4 % vaginal</i>                                               | \$0 (Tier 3)                             | DP                                               |
| <i>qc clotrimazole cream 1 % vaginal</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>qc miconazole 7 cream 2 % vaginal</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm 3-day vaginal cream 2 % vaginal</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm clotrimazole vaginal cream 1 % vaginal</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>sm miconazole 3 applicator kit 200 &amp; 2 mg-% (9gm) vaginal</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sm miconazole 3 kit 200 &amp; 2 mg-% (9gm) vaginal</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm miconazole 7 cream 2 % vaginal</i>                                        | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm miconazole 7 suppository 100 mg vaginal</i>                                                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>terconazole vaginal cream 0.4 %, 0.8 %</i>                                                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>terconazole vaginal suppository 80 mg</i>                                                                                                         | \$0 (Tier 1)                             |                                                  |
| <b>HEMATOLOGIC</b>                                                                                                                                   |                                          |                                                  |
| <b>Anticoagulants</b>                                                                                                                                |                                          |                                                  |
| ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG                                                                                            | \$0 (Tier 2)                             | QL (74 per 30 days)                              |
| ELIQUIS ORAL TABLET 2.5 MG                                                                                                                           | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| ELIQUIS ORAL TABLET 5 MG                                                                                                                             | \$0 (Tier 2)                             | QL (74 per 30 days)                              |
| <i>enoxaparin sodium injection solution 300 mg/3ml</i>                                                                                               | \$0 (Tier 1)                             |                                                  |
| <i>enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml</i> | \$0 (Tier 1)                             |                                                  |
| <i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>                                                               | \$0 (Tier 2)                             | NDS                                              |
| <i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>                                                                                        | \$0 (Tier 1)                             |                                                  |
| <i>heparin (porcine) in nacl intravenous solution 12500-0.45 ut/250ml-%, 25000-0.45 ut/250ml-%, 25000-0.45 ut/500ml-%</i>                            | \$0 (Tier 2)                             |                                                  |
| <i>heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 25000-5 ut/500ml-%, 40-5 unit/ml-%</i>                                             | \$0 (Tier 2)                             |                                                  |
| <i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>                                          | \$0 (Tier 1)                             | B/D                                              |
| <i>heparin sodium (porcine) pf injection solution 1000 unit/ml</i>                                                                                   | \$0 (Tier 1)                             | B/D                                              |
| JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG                                                                       | \$0 (Tier 1)                             |                                                  |
| <i>warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>                                                         | \$0 (Tier 1)                             |                                                  |
| XARELTO ORAL SUSPENSION RECONSTITUTED 1 MG/ML                                                                                                        | \$0 (Tier 2)                             | QL (620 per 30 days)                             |
| XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG                                                                                                              | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| XARELTO ORAL TABLET 2.5 MG                                                                                                                           | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG                                                                                             | \$0 (Tier 2)                             | QL (51 per 30 days)                              |
| <b>Hematopoietic Growth Factors</b>                                                                                                                  |                                          |                                                  |
| PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML                                                                   | \$0 (Tier 2)                             | PA                                               |
| PROCRIT INJECTION SOLUTION 20000 UNIT/ML, 40000 UNIT/ML                                                                                              | \$0 (Tier 2)                             | PA; NDS                                          |
| ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML                                                                             | \$0 (Tier 2)                             | PA; NDS                                          |

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|-------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML            | \$0 (Tier 2)                             | PA; QL (1.2 per 28 days); NDS                    |
| <b>Iron</b>                                                             |                                          |                                                  |
| <i>active fe tablet 75-1.25 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| CHROMAGEN CAPSULE ORAL                                                  | \$0 (Tier 3)                             | DP                                               |
| CORVITA 150 TABLET 150-1.25 MG ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| CORVITE 150 TABLET ORAL                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>corvite fe tablet oral</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>cvs iron tablet 240 (27 fe) mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs iron tablet 325 (65 fe) mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs slow release dried iron tablet extended release 45 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>cvs slow release iron tablet extended release 45 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>eq slow-release iron tablet extended release 45 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>eq iron supplement therapy tablet 325 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>eq slow release iron tablet extended release 160 (50 fe) mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| FERAHEME SOLUTION 510 MG/17ML INTRAVENOUS                               | \$0 (Tier 3)                             | DP                                               |
| FERATE TABLET 240 (27 FE) MG ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| FERGON TABLET 240 (27 FE) MG ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| FERIVA 21/7 TABLET 75-1 MG ORAL                                         | \$0 (Tier 3)                             | DP                                               |
| FERIVAFA CAPSULE 110-1 MG ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| FEROSUL TABLET 325 (65 FE) MG ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| FERRALET 90 TABLET 90-1 MG ORAL                                         | \$0 (Tier 3)                             | DP                                               |
| <i>ferretts tablet 325 (106 fe) mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| FERREX 150 CAPSULE 150 MG ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| <i>ferric x-150 capsule 150 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| FERRLECIT SOLUTION 12.5 MG/ML INTRAVENOUS                               | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous fumarate tablet 29 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous fumarate tablet 324 (106 fe) mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous gluconate tablet 240 (27 fe) mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous gluconate tablet 324 (37.5 fe) mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous gluconate tablet 324 (38 fe) mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous sulfate solution 220 (44 fe) mg/5ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous sulfate tablet 325 (65 fe) mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>ferrous sulfate tablet delayed release 324 (65 fe) mg oral</i>       | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>ferrous sulfate tablet delayed release 325 (65 fe) mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| FOLITAB 500 TABLET EXTENDED RELEASE 105-500-0.8 MG ORAL               | \$0 (Tier 3)                             | DP                                               |
| FOLIVANE-F CAPSULE 125-1 MG ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| FOLIVANE-PLUS CAPSULE ORAL                                            | \$0 (Tier 3)                             | DP                                               |
| FUSION CAPSULE 65-65-25-30 MG ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| FUSION PLUS CAPSULE ORAL                                              | \$0 (Tier 3)                             | DP                                               |
| <i>gnp iron tablet extended release 45 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| HEMATEX LIQUID 100 MG/5ML ORAL                                        | \$0 (Tier 3)                             | DP                                               |
| <i>hematinic/folic acid tablet 324-1 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| HEMATOGEN FA CAPSULE 200-250-0.01-1 MG ORAL                           | \$0 (Tier 3)                             | DP                                               |
| HEMOCYTE PLUS CAPSULE 106-1 MG ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| INFED SOLUTION 50 MG/ML INJECTION                                     | \$0 (Tier 3)                             | DP                                               |
| INJECTAFER SOLUTION 750 MG/15ML INTRAVENOUS                           | \$0 (Tier 3)                             | DP                                               |
| INTEGRA CAPSULE 62.5-62.5-40-3 MG ORAL                                | \$0 (Tier 3)                             | DP                                               |
| INTEGRA F CAPSULE 125-1 MG ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| INTEGRA PLUS CAPSULE ORAL                                             | \$0 (Tier 3)                             | DP                                               |
| <i>iron 27 tablet 240 (27 fe) mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>iron chews pediatric tablet chewable 15 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>iron high-potency tablet 325 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>iron slow release tablet extended release 45 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>iron supplement solution 220 (44 fe) mg/5ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>iron tablet 240 (27 fe) mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>iron tablet 325 (65 fe) mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>iron tablet 90 (18 fe) mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| IRON UP LIQUID 15 MG/0.5ML ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| <i>kp ferrous gluconate tablet 324 (37.5 fe) mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>kp ferrous sulfate tablet 325 (65 fe) mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| MONOFERRIC SOLUTION 1000 MG/10ML INTRAVENOUS                          | \$0 (Tier 3)                             | DP                                               |
| MULTIGEN PLUS TABLET 50-101-1 MG ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| MULTIGEN TABLET 70 MG ORAL                                            | \$0 (Tier 3)                             | DP                                               |
| <i>na ferric gluc cplx in sucrose solution 12.5 mg/ml intravenous</i> | \$0 (Tier 3)                             | DP                                               |
| NEPHRON FA TABLET ORAL                                                | \$0 (Tier 3)                             | DP                                               |
| NIFEREX TABLET ORAL                                                   | \$0 (Tier 3)                             | DP                                               |
| NOVAFERRUM LIQUID 125 MG/5ML ORAL                                     | \$0 (Tier 3)                             | DP                                               |

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|-------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| NOVAFERRUM PEDIATRIC DROPS LIQUID 15 MG/ML ORAL                         | \$0 (Tier 3)                             | DP                                               |
| NUFERA TABLET ORAL                                                      | \$0 (Tier 3)                             | DP                                               |
| NU-IRON CAPSULE 150 MG ORAL                                             | \$0 (Tier 3)                             | DP                                               |
| POLY-IRON 150 CAPSULE 150 MG ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| <i>polysaccharide iron complex capsule 150 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>polysaccharide-iron complex capsule 150 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>purevit dualfe plus capsule 162-115.2-1 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>px iron tablet 27 mg oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>qc ferrous sulfate tablet 325 (65 fe) mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>ra high potency iron tablet 27 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>ra iron tablet 27 mg oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>ra slow release iron tablet extended release 45 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>se-tan plus capsule 162-115.2-1 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| SLOW FE TABLET EXTENDED RELEASE 45 MG ORAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>slow iron tablet extended release 160 (50 fe) mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>slow release iron tablet extended release 160 (50 fe) mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>slow release iron tablet extended release 45 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>slow release iron tablet extended release 47.5 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>slow release iron tablet extended release 50 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>sm iron slow release tablet extended release 160 (50 fe) mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>sm iron tablet 325 (65 fe) mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>sm slow release dried iron tablet extended release 45 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>sm slow release iron tablet extended release 45 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| TANDEM CAPSULE 53-53 MG ORAL                                            | \$0 (Tier 3)                             | DP                                               |
| TANDEM PLUS CAPSULE 162-115.2-1 MG ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| TRICON CAPSULE ORAL                                                     | \$0 (Tier 3)                             | DP                                               |
| TRIFERIC PACKET 272 MG HEMODIALYSIS                                     | \$0 (Tier 3)                             | DP                                               |
| <i>trigels-f forte capsule 460-60-0.01-1 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| VENOFER SOLUTION 20 MG/ML INTRAVENOUS                                   | \$0 (Tier 3)                             | DP                                               |
| VITRON-C TABLET 65-125 MG ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| <i>wee care suspension 15 mg/1.25ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <b>Miscellaneous</b>                                                    |                                          |                                                  |
| ALVAIZ ORAL TABLET 18 MG, 36 MG                                         | \$0 (Tier 2)                             | PA; LA; QL (90 per 30 days); NDS                 |
| ALVAIZ ORAL TABLET 54 MG, 9 MG                                          | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |

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|-------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>anagrelide hcl oral capsule 0.5 mg, 1 mg</i>                                           | \$0 (Tier 1)                             |                                                  |
| BERINERT INTRAVENOUS KIT 500 UNIT                                                         | \$0 (Tier 2)                             | PA; LA; QL (24 per 30 days); NDS                 |
| <i>cilostazol oral tablet 100 mg, 50 mg</i>                                               | \$0 (Tier 1)                             |                                                  |
| DOPTELET ORAL TABLET 20 MG, 20 MG (10 PACK), 20 MG(15 PACK)                               | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG                                                | \$0 (Tier 2)                             |                                                  |
| ENDARI ORAL PACKET 5 GM                                                                   | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT                                    | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT                                    | \$0 (Tier 2)                             | PA; LA; QL (20 per 30 days); NDS                 |
| <i>icatibant acetate subcutaneous solution prefilled syringe 30 mg/3ml</i>                | \$0 (Tier 2)                             | PA; QL (27 per 30 days); NDS                     |
| <i>pentoxifylline er oral tablet extended release 400 mg</i>                              | \$0 (Tier 1)                             |                                                  |
| PROMACTA ORAL PACKET 12.5 MG                                                              | \$0 (Tier 2)                             | PA; LA; QL (360 per 30 days); NDS                |
| PROMACTA ORAL PACKET 25 MG                                                                | \$0 (Tier 2)                             | PA; LA; QL (180 per 30 days); NDS                |
| PROMACTA ORAL TABLET 12.5 MG, 25 MG                                                       | \$0 (Tier 2)                             | PA; LA; QL (30 per 30 days); NDS                 |
| PROMACTA ORAL TABLET 50 MG, 75 MG                                                         | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML                                 | \$0 (Tier 2)                             | PA; LA; QL (27 per 30 days); NDS                 |
| <i>tranexamic acid intravenous solution 1000 mg/10ml</i>                                  | \$0 (Tier 1)                             |                                                  |
| <i>tranexamic acid oral tablet 650 mg</i>                                                 | \$0 (Tier 1)                             |                                                  |
| <b>Platelet Aggregation Inhibitors</b>                                                    |                                          |                                                  |
| <i>aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg</i>            | \$0 (Tier 1)                             |                                                  |
| BRILINTA ORAL TABLET 60 MG, 90 MG                                                         | \$0 (Tier 2)                             |                                                  |
| <i>clopidogrel bisulfate oral tablet 75 mg</i>                                            | \$0 (Tier 1)                             |                                                  |
| <i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>                                       | \$0 (Tier 2)                             | PA                                               |
| <i>prasugrel hcl oral tablet 10 mg, 5 mg</i>                                              | \$0 (Tier 1)                             |                                                  |
| <b>IMMUNOLOGIC AGENTS</b>                                                                 |                                          |                                                  |
| <b>Autoimmune Agents</b>                                                                  |                                          |                                                  |
| <i>adalimumab-aacf (2 pen) subcutaneous auto-injector kit 40 mg/0.8ml</i>                 | \$0 (Tier 2)                             | PA; QL (28 per 365 days); NDS                    |
| DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML, 300 MG/2ML                     | \$0 (Tier 2)                             | PA; NDS                                          |
| DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML, 200 MG/1.14ML, 300 MG/2ML | \$0 (Tier 2)                             | PA; NDS                                          |
| ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML                                      | \$0 (Tier 2)                             | PA; QL (8 per 28 days); NDS                      |
| ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML                                                  | \$0 (Tier 2)                             | PA; QL (8 per 28 days); NDS                      |

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|--------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML                       | \$0 (Tier 2)                             | PA; QL (8 per 28 days); NDS                      |
| ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML                              | \$0 (Tier 2)                             | PA; QL (8 per 28 days); NDS                      |
| HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML                      | \$0 (Tier 2)                             | PA; QL (6 per 28 days); NDS                      |
| HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML                                   | \$0 (Tier 2)                             | PA; QL (4 per 28 days); NDS                      |
| HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML                          | \$0 (Tier 2)                             | PA; QL (2 per 28 days); NDS                      |
| HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML                          | \$0 (Tier 2)                             | PA; QL (4 per 28 days); NDS                      |
| HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML, 40 MG/0.8ML             | \$0 (Tier 2)                             | PA; QL (6 per 28 days); NDS                      |
| HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML                          | \$0 (Tier 2)                             | PA; QL (3 per 28 days); NDS                      |
| HUMIRA-PED<40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML | \$0 (Tier 2)                             | PA; QL (2 per 28 days); NDS                      |
| HUMIRA-PED>=40KG CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML               | \$0 (Tier 2)                             | PA; QL (3 per 28 days); NDS                      |
| HUMIRA-PED>=40KG UC STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML                      | \$0 (Tier 2)                             | PA; QL (4 per 28 days); NDS                      |
| HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML                     | \$0 (Tier 2)                             | PA; QL (4 per 28 days); NDS                      |
| HUMIRA-PSORIASIS/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML      | \$0 (Tier 2)                             | PA; QL (3 per 28 days); NDS                      |
| IDACIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML                                  | \$0 (Tier 2)                             | PA; QL (28 per 365 days); NDS                    |
| IDACIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML                          | \$0 (Tier 2)                             | PA; QL (28 per 365 days); NDS                    |
| IDACIO-CROHNS/UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML                        | \$0 (Tier 2)                             | PA; QL (6 per 365 days); NDS                     |
| IDACIO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML                        | \$0 (Tier 2)                             | PA; QL (4 per 365 days); NDS                     |
| <i>infliximab intravenous solution reconstituted 100 mg</i>                                | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML                   | \$0 (Tier 2)                             | PA; QL (2.28 per 28 days); NDS                   |
| KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML               | \$0 (Tier 2)                             | PA; QL (2.28 per 28 days); NDS                   |
| OTEZLA ORAL TABLET 30 MG                                                                   | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |

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|--------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG              | \$0 (Tier 2)                             | PA; QL (110 per 365 days); NDS                   |
| REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG           | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG          | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG     | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 45 MG            | \$0 (Tier 2)                             | PA; QL (168 per 365 days); NDS                   |
| SKYRIZI INTRAVENOUS SOLUTION 600 MG/10ML                     | \$0 (Tier 2)                             | PA; QL (60 per 365 days); NDS                    |
| SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML    | \$0 (Tier 2)                             | PA; QL (6 per 365 days); NDS                     |
| SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML         | \$0 (Tier 2)                             | PA; QL (1.2 per 56 days); NDS                    |
| SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML         | \$0 (Tier 2)                             | PA; QL (2.4 per 56 days); NDS                    |
| SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML    | \$0 (Tier 2)                             | PA; QL (6 per 365 days); NDS                     |
| STELARA INTRAVENOUS SOLUTION 130 MG/26ML                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML                    | \$0 (Tier 2)                             | PA; LA; QL (0.5 per 28 days); NDS                |
| STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML  | \$0 (Tier 2)                             | PA; QL (0.5 per 28 days); NDS                    |
| STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML     | \$0 (Tier 2)                             | PA; QL (1 per 28 days); NDS                      |
| TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML           | \$0 (Tier 2)                             | PA; LA; QL (3 per 28 days); NDS                  |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML       | \$0 (Tier 2)                             | PA; LA; QL (3 per 28 days); NDS                  |
| TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML         | \$0 (Tier 2)                             | PA; QL (1 per 28 days); NDS                      |
| TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML    | \$0 (Tier 2)                             | PA; QL (1 per 28 days); NDS                      |
| XELJANZ ORAL SOLUTION 1 MG/ML                                | \$0 (Tier 2)                             | PA; QL (480 per 24 days); NDS                    |
| XELJANZ ORAL TABLET 10 MG, 5 MG                              | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| <b>Disease-Modifying Anti-Rheumatic Drugs (Dmards)</b>       |                                          |                                                  |
| <i>hydroxychloroquine sulfate oral tablet 200 mg</i>         | \$0 (Tier 1)                             |                                                  |
| JYLAMVO ORAL SOLUTION 2 MG/ML                                | \$0 (Tier 2)                             | B/D                                              |
| <i>leflunomide oral tablet 10 mg, 20 mg</i>                  | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>methotrexate sodium oral tablet 2.5 mg</i>                | \$0 (Tier 1)                             |                                                  |

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|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| XATMEP ORAL SOLUTION 2.5 MG/ML                                                                                                            | \$0 (Tier 2)                             | B/D                                              |
| <b>Immunoglobulins</b>                                                                                                                    |                                          |                                                  |
| BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML                                                                                       | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML                                                                  | \$0 (Tier 2)                             | PA; NDS                                          |
| GAMASTAN INTRAMUSCULAR INJECTABLE                                                                                                         | \$0 (Tier 2)                             | B/D; LA                                          |
| GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM                                                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML                                                                | \$0 (Tier 2)                             | PA; NDS                                          |
| GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML                                  | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML | \$0 (Tier 2)                             | PA; NDS                                          |
| PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML                                     | \$0 (Tier 2)                             | PA; NDS                                          |
| PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML                                                            | \$0 (Tier 2)                             | PA; NDS                                          |
| <b>Immunomodulators</b>                                                                                                                   |                                          |                                                  |
| ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML                                                                                             | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG                                                                                       | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <b>Immunosuppressants</b>                                                                                                                 |                                          |                                                  |
| ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG                                                                            | \$0 (Tier 2)                             | B/D                                              |
| ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 5 MG                                                                                    | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>azathioprine oral tablet 50 mg</i>                                                                                                     | \$0 (Tier 1)                             | B/D                                              |
| BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG                                                                                | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML                                                                                    | \$0 (Tier 2)                             | PA; LA; QL (8 per 28 days); NDS                  |

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|--------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| BENLYSTA SUBCUTANEOUS SOLUTION<br>PREFILLED SYRINGE 200 MG/ML                        | \$0 (Tier 2)                             | PA; LA; QL (8 per 28 days); NDS                  |
| <i>cyclosporine intravenous solution 50 mg/ml</i>                                    | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>                       | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclosporine modified oral solution 100 mg/ml</i>                                 | \$0 (Tier 1)                             | B/D                                              |
| <i>cyclosporine oral capsule 100 mg, 25 mg</i>                                       | \$0 (Tier 1)                             | B/D                                              |
| <i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>                         | \$0 (Tier 2)                             | B/D; NDS                                         |
| GENGRAF ORAL CAPSULE 100 MG, 25 MG                                                   | \$0 (Tier 1)                             | B/D                                              |
| GENGRAF ORAL SOLUTION 100 MG/ML                                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>mycophenolate mofetil oral capsule 250 mg</i>                                     | \$0 (Tier 1)                             | B/D                                              |
| <i>mycophenolate mofetil oral suspension reconstituted 200 mg/ml</i>                 | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>mycophenolate mofetil oral tablet 500 mg</i>                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>mycophenolate sodium oral tablet delayed release 180 mg, 360 mg</i>               | \$0 (Tier 1)                             | B/D                                              |
| NULOJIX INTRAVENOUS SOLUTION<br>RECONSTITUTED 250 MG                                 | \$0 (Tier 2)                             | B/D; NDS                                         |
| PROGRAF ORAL PACKET 0.2 MG, 1 MG                                                     | \$0 (Tier 2)                             | B/D                                              |
| REZUROCK ORAL TABLET 200 MG                                                          | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| SANDIMMUNE ORAL SOLUTION 100 MG/ML                                                   | \$0 (Tier 2)                             | B/D                                              |
| <i>sirolimus oral solution 1 mg/ml</i>                                               | \$0 (Tier 2)                             | B/D; NDS                                         |
| <i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>                                      | \$0 (Tier 1)                             | B/D                                              |
| <i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>                                    | \$0 (Tier 1)                             | B/D                                              |
| <b>Vaccines</b>                                                                      |                                          |                                                  |
| ABRYSCO INTRAMUSCULAR SOLUTION<br>RECONSTITUTED 120 MCG/0.5ML                        | \$0 (Tier 1)                             |                                                  |
| ACTHIB INTRAMUSCULAR SOLUTION<br>RECONSTITUTED                                       | \$0 (Tier 1)                             |                                                  |
| ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5<br>(PREFILLED SYRINGE), 5-2-15.5 LF-MCG/0.5 | \$0 (Tier 1)                             |                                                  |
| AREXVY INTRAMUSCULAR SUSPENSION<br>RECONSTITUTED 120 MCG/0.5ML                       | \$0 (Tier 1)                             |                                                  |
| <i>bcg vaccine injection solution reconstituted 50 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| BEXSERO INTRAMUSCULAR SUSPENSION<br>PREFILLED SYRINGE                                | \$0 (Tier 1)                             |                                                  |
| BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-<br>18.5 LF-MCG/0.5                          | \$0 (Tier 1)                             |                                                  |
| BOOSTRIX INTRAMUSCULAR SUSPENSION<br>PREFILLED SYRINGE 5-2.5-18.5 LF-MCG/0.5         | \$0 (Tier 1)                             |                                                  |
| DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-<br>5                                        | \$0 (Tier 1)                             |                                                  |

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|-----------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| DENGVAIXA SUBCUTANEOUS SUSPENSION RECONSTITUTED                             | \$0 (Tier 1)                             |                                                  |
| <i>diphtheria-tetanus toxoids dt intramuscular suspension 25-5 Iu/0.5ml</i> | \$0 (Tier 1)                             | B/D                                              |
| ENGERIX-B INJECTION SUSPENSION 20 MCG/ML                                    | \$0 (Tier 1)                             | B/D                                              |
| ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/0.5ML, 20 MCG/ML    | \$0 (Tier 1)                             | B/D                                              |
| GARDASIL 9 INTRAMUSCULAR SUSPENSION                                         | \$0 (Tier 1)                             |                                                  |
| GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE                       | \$0 (Tier 1)                             |                                                  |
| HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML                | \$0 (Tier 1)                             |                                                  |
| HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 20 MCG/0.5ML            | \$0 (Tier 1)                             | B/D                                              |
| HIBERIX INJECTION SOLUTION RECONSTITUTED 10 MCG                             | \$0 (Tier 1)                             |                                                  |
| IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED 2.5 UNIT/ML            | \$0 (Tier 1)                             | B/D                                              |
| INFANRIX INTRAMUSCULAR SUSPENSION 25-58-10                                  | \$0 (Tier 1)                             |                                                  |
| IPOLE INJECTION INJECTABLE                                                  | \$0 (Tier 1)                             |                                                  |
| IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED                                 | \$0 (Tier 1)                             |                                                  |
| IXIARO INTRAMUSCULAR SUSPENSION                                             | \$0 (Tier 1)                             |                                                  |
| JYNNEOS SUBCUTANEOUS SUSPENSION 0.5 ML                                      | \$0 (Tier 1)                             | B/D                                              |
| KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML                    | \$0 (Tier 1)                             |                                                  |
| MENACTRA INTRAMUSCULAR SOLUTION                                             | \$0 (Tier 1)                             |                                                  |
| MENQUADFI INTRAMUSCULAR SOLUTION                                            | \$0 (Tier 1)                             |                                                  |
| MENVEO INTRAMUSCULAR SOLUTION                                               | \$0 (Tier 1)                             |                                                  |
| MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED                                 | \$0 (Tier 1)                             |                                                  |
| M-M-R II INJECTION SOLUTION RECONSTITUTED                                   | \$0 (Tier 1)                             |                                                  |
| PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE                         | \$0 (Tier 1)                             |                                                  |
| PEDVAX HIB INTRAMUSCULAR SUSPENSION 7.5 MCG/0.5ML                           | \$0 (Tier 1)                             |                                                  |
| PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED                             | \$0 (Tier 1)                             |                                                  |
| PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED                             | \$0 (Tier 1)                             |                                                  |
| PREHEVBRIO INTRAMUSCULAR SUSPENSION 10 MCG/ML                               | \$0 (Tier 1)                             | B/D                                              |

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|-------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED                                                   | \$0 (Tier 1)                             |                                                  |
| PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED                                                   | \$0 (Tier 1)                             |                                                  |
| QUADRACEL INTRAMUSCULAR SUSPENSION , (58 UNT/ML)                                                | \$0 (Tier 1)                             |                                                  |
| QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML                                     | \$0 (Tier 1)                             |                                                  |
| RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED                                                 | \$0 (Tier 1)                             | B/D                                              |
| RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML                            | \$0 (Tier 1)                             | B/D                                              |
| RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/ML, 5 MCG/0.5ML                     | \$0 (Tier 1)                             | B/D                                              |
| ROTARIX ORAL SUSPENSION                                                                         | \$0 (Tier 1)                             |                                                  |
| ROTARIX ORAL SUSPENSION RECONSTITUTED                                                           | \$0 (Tier 1)                             |                                                  |
| ROTATEQ ORAL SOLUTION                                                                           | \$0 (Tier 1)                             |                                                  |
| SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML                                    | \$0 (Tier 1)                             | QL (2 per 999 days)                              |
| TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML                                                     | \$0 (Tier 1)                             | B/D                                              |
| TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU, 5-2 LFU (INJECTION)                                   | \$0 (Tier 1)                             | B/D                                              |
| TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1.2 MCG/0.25ML, 2.4 MCG/0.5ML                | \$0 (Tier 1)                             |                                                  |
| TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE                                             | \$0 (Tier 1)                             |                                                  |
| TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 720-20 ELU-MCG/ML                            | \$0 (Tier 1)                             |                                                  |
| TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML                                                   | \$0 (Tier 1)                             |                                                  |
| TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML                                 | \$0 (Tier 1)                             |                                                  |
| VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 25 UNIT/0.5ML 0.5 ML, 50 UNIT/ML, 50 UNIT/ML 1 ML | \$0 (Tier 1)                             |                                                  |
| VARIVAX SUBCUTANEOUS INJECTABLE 1350 PFU/0.5ML                                                  | \$0 (Tier 1)                             |                                                  |
| YF-VAX SUBCUTANEOUS INJECTABLE , (2.5 ML IN 1 VIAL, MULTI-DOSE)                                 | \$0 (Tier 1)                             |                                                  |
| <b>MISCELLANEOUS</b>                                                                            |                                          |                                                  |
| <b>Miscellaneous</b>                                                                            |                                          |                                                  |
| 1st base cream external (otc)                                                                   | \$0 (Tier 3)                             | DP                                               |
| ARBEM H-COSMETIC CREAM EXTERNAL                                                                 | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ARBEM LIOPEN CREAM EXTERNAL                                | \$0 (Tier 3)                             | DP                                               |
| <i>az cream cream external (otc)</i>                       | \$0 (Tier 3)                             | DP                                               |
| BASE PCCA CLARIFYING CREAM EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>cream base cream external (otc)</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>emollient base cream external (otc)</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>grape flavor liquid (otc)</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>hm petroleum jelly gel external</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>hydrous emulsified base cream external</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin liquid 1 mg/ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>microderm base cream external</i>                       | \$0 (Tier 3)                             | DP                                               |
| MICROSOME BASE CREAM EXTERNAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>oral suspend liquid oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| ORAPENN SD ANHYD SWEETENED LIQUID ORAL (OTC)               | \$0 (Tier 3)                             | DP                                               |
| ORAPENN SD ANHYD UNSWEETEN LIQUID ORAL                     | \$0 (Tier 3)                             | DP                                               |
| ORA-PLUS LIQUID ORAL (OTC)                                 | \$0 (Tier 3)                             | DP                                               |
| PCCA BASE 7542 CREAM EXTERNAL                              | \$0 (Tier 3)                             | DP                                               |
| PCCA EMOLLIENT CREAM BASE CREAM EXTERNAL                   | \$0 (Tier 3)                             | DP                                               |
| <i>petrolatum gel external</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>petroleum jelly gel external</i>                        | \$0 (Tier 3)                             | DP                                               |
| PFCB CREAM EXTERNAL                                        | \$0 (Tier 3)                             | DP                                               |
| PHARMABASE ANTIOXIDANT CREAM EXTERNAL                      | \$0 (Tier 3)                             | DP                                               |
| PHARMABASE COSMETIC CREAM EXTERNAL (OTC)                   | \$0 (Tier 3)                             | DP                                               |
| PHARMABASE COSMETIC NATURAL CREAM EXTERNAL (OTC)           | \$0 (Tier 3)                             | DP                                               |
| PHARMABASE LIGHT CREAM EXTERNAL                            | \$0 (Tier 3)                             | DP                                               |
| PHARMABASE VAGINAL CREAM EXTERNAL                          | \$0 (Tier 3)                             | DP                                               |
| PHYTOBASE CREAM EXTERNAL (OTC)                             | \$0 (Tier 3)                             | DP                                               |
| <i>polyethylene glycol 3350 powder (otc)</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>scar care cream external</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm alcohol solution 70 %</i>                            | \$0 (Tier 3)                             | DP                                               |
| SYRSPEND SF LIQUID ORAL (OTC)                              | \$0 (Tier 3)                             | DP                                               |
| U-BASE CREAM EXTERNAL                                      | \$0 (Tier 3)                             | DP                                               |
| VANIBASE CREAM EXTERNAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>vanishing cream botanical base cream external (otc)</i> | \$0 (Tier 3)                             | DP                                               |
| <i>versatile cream base cream external (otc)</i>           | \$0 (Tier 3)                             | DP                                               |
| VERSIGEL CREAM EXTERNAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>white petroleum jelly gel external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>wound care cream external</i>                           | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| XCEL 100 CREAM EXTERNAL                                                                                                                                               | \$0 (Tier 3)                             | DP                                               |
| <b>NUTRITIONAL/SUPPLEMENTS</b>                                                                                                                                        |                                          |                                                  |
| <b>Electrolytes/Minerals, Injectable</b>                                                                                                                              |                                          |                                                  |
| <i>dextrose 5%/electrolyte #48 intravenous solution</i>                                                                                                               | \$0 (Tier 2)                             |                                                  |
| <i>dextrose in lactated ringers intravenous solution 5 %</i>                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>dextrose-sodium chloride intravenous solution 10-0.2 %</i>                                                                                                         | \$0 (Tier 2)                             |                                                  |
| <i>dextrose-sodium chloride intravenous solution 10-0.45 %, 5-0.2 %, 5-0.225 %, 5-0.3 %, 5-0.45 %, 5-0.9 %</i>                                                        | \$0 (Tier 1)                             |                                                  |
| <i>dextrose-sodium chloride solution 2.5-0.45 % intravenous</i>                                                                                                       | \$0 (Tier 1)                             |                                                  |
| <i>dextrose-sodium chloride solution 2.5-0.45 % intravenous</i>                                                                                                       | \$0 (Tier 2)                             |                                                  |
| ISOLYTE-P IN D5W INTRAVENOUS SOLUTION                                                                                                                                 | \$0 (Tier 2)                             |                                                  |
| ISOLYTE-S INTRAVENOUS SOLUTION                                                                                                                                        | \$0 (Tier 2)                             |                                                  |
| ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION                                                                                                                                 | \$0 (Tier 2)                             |                                                  |
| <i>kcl (0.149%) in nacl intravenous solution 20-0.45 meq/l-%</i>                                                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-, 20-5-0.2 meq/l-%-, 20-5-0.45 meq/l-%-, 20-5-0.9 meq/l-%-, 30-5-0.45 meq/l-%-, 40-5-0.45 meq/l-%-</i> | \$0 (Tier 1)                             |                                                  |
| <i>kcl in dextrose-nacl solution 40-5-0.9 meq/l-%- intravenous</i>                                                                                                    | \$0 (Tier 1)                             |                                                  |
| <i>kcl in dextrose-nacl solution 40-5-0.9 meq/l-%- intravenous</i>                                                                                                    | \$0 (Tier 2)                             |                                                  |
| <i>lactated ringers intravenous solution</i>                                                                                                                          | \$0 (Tier 1)                             |                                                  |
| <i>magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%</i>                                                                                                   | \$0 (Tier 2)                             |                                                  |
| <i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>                                                                                                 | \$0 (Tier 2)                             |                                                  |
| <i>magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml</i>                                                             | \$0 (Tier 2)                             |                                                  |
| <i>multiple electro type 1 ph 5.5 intravenous solution</i>                                                                                                            | \$0 (Tier 1)                             |                                                  |
| <i>multiple electro type 1 ph 7.4 intravenous solution</i>                                                                                                            | \$0 (Tier 1)                             |                                                  |
| PLASMA-LYTE 148 INTRAVENOUS SOLUTION                                                                                                                                  | \$0 (Tier 2)                             |                                                  |
| PLASMA-LYTE A INTRAVENOUS SOLUTION                                                                                                                                    | \$0 (Tier 2)                             |                                                  |
| <i>potassium chloride in nacl solution 20-0.45 meq/l-% intravenous</i>                                                                                                | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride in nacl solution 20-0.45 meq/l-% intravenous</i>                                                                                                | \$0 (Tier 2)                             |                                                  |
| <i>potassium chloride in nacl solution 20-0.9 meq/l-% intravenous</i>                                                                                                 | \$0 (Tier 1)                             |                                                  |

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|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>potassium chloride in nacl solution 20-0.9 meq/l-% intravenous</i>                                                            | \$0 (Tier 2)                             |                                                  |
| <i>potassium chloride in nacl solution 40-0.9 meq/l-% intravenous</i>                                                            | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride in nacl solution 40-0.9 meq/l-% intravenous</i>                                                            | \$0 (Tier 2)                             |                                                  |
| <i>potassium chloride intravenous solution 10 meq/100ml, 2 meq/ml, 2 meq/ml (20 ml), 20 meq/100ml, 20 meq/50ml, 40 meq/100ml</i> | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride intravenous solution 10 meq/50ml</i>                                                                       | \$0 (Tier 2)                             |                                                  |
| <i>potassium cl in dextrose 5% intravenous solution 20 meq/l</i>                                                                 | \$0 (Tier 1)                             |                                                  |
| <i>sodium chloride injection solution 2.5 meq/ml</i>                                                                             | \$0 (Tier 1)                             |                                                  |
| <i>sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %</i>                                                              | \$0 (Tier 1)                             |                                                  |
| TPN ELECTROLYTES INTRAVENOUS CONCENTRATE                                                                                         | \$0 (Tier 2)                             | B/D                                              |
| <b>Electrolytes/Minerals/Vitamins, Oral</b>                                                                                      |                                          |                                                  |
| KLOR-CON 10 ORAL TABLET EXTENDED RELEASE 10 MEQ                                                                                  | \$0 (Tier 1)                             |                                                  |
| KLOR-CON M10 ORAL TABLET EXTENDED RELEASE 10 MEQ                                                                                 | \$0 (Tier 1)                             |                                                  |
| KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ                                                                                 | \$0 (Tier 1)                             |                                                  |
| KLOR-CON M20 ORAL TABLET EXTENDED RELEASE 20 MEQ                                                                                 | \$0 (Tier 1)                             |                                                  |
| KLOR-CON ORAL PACKET 20 MEQ                                                                                                      | \$0 (Tier 1)                             |                                                  |
| KLOR-CON ORAL TABLET EXTENDED RELEASE 8 MEQ                                                                                      | \$0 (Tier 1)                             |                                                  |
| <i>m-natal plus oral tablet 27-1 mg</i>                                                                                          | \$0 (Tier 2)                             |                                                  |
| <i>potassium chloride crys er oral tablet extended release 10 meq, 15 meq, 20 meq</i>                                            | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride er oral capsule extended release 10 meq, 8 meq</i>                                                         | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</i>                                                  | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride oral packet 20 meq</i>                                                                                     | \$0 (Tier 1)                             |                                                  |
| <i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>                                                     | \$0 (Tier 1)                             |                                                  |
| <i>prenatal oral tablet 27-1 mg</i>                                                                                              | \$0 (Tier 2)                             |                                                  |
| <i>sodium fluoride oral tablet 2.2 (1 f) mg</i>                                                                                  | \$0 (Tier 1)                             |                                                  |
| <b>Electrolytes</b>                                                                                                              |                                          |                                                  |
| ADVANTAGE CARE ELECTROLYTE PED SOLUTION ORAL                                                                                     | \$0 (Tier 3)                             | DP                                               |

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| BIOLYTE SOLUTION ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| CERALYTE 70 SOLUTION ORAL                                | \$0 (Tier 3)                             | DP                                               |
| CERASPORT EX1 SOLUTION ORAL                              | \$0 (Tier 3)                             | DP                                               |
| CERASPORT SOLUTION ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>cvs electrolyte solution solution oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>cvs ped electrolyte freeze pop solution oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>cvs pediatric electrolyte solution oral</i>           | \$0 (Tier 3)                             | DP                                               |
| ENFAMIL ENFALYTE SOLUTION ORAL                           | \$0 (Tier 3)                             | DP                                               |
| <i>h-e-b oral electrolyte solution oral</i>              | \$0 (Tier 3)                             | DP                                               |
| HYDRALYTE SOLUTION ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| KINDERLYTE PREMAX SOLUTION ORAL                          | \$0 (Tier 3)                             | DP                                               |
| KINDERLYTE SOLUTION ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| <i>oral electrolytes solution oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| ORALYTE SOLUTION ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>ped electrolyte freeze pops solution oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>ped electrolyte freezer pops solution oral</i>        | \$0 (Tier 3)                             | DP                                               |
| PEDIA VANCE SOLUTION ORAL                                | \$0 (Tier 3)                             | DP                                               |
| PEDIALYTE ADVANCED CARE SOLUTION ORAL                    | \$0 (Tier 3)                             | DP                                               |
| PEDIALYTE FREEZER POPS SOLUTION ORAL                     | \$0 (Tier 3)                             | DP                                               |
| PEDIALYTE SINGLES SOLUTION ORAL                          | \$0 (Tier 3)                             | DP                                               |
| PEDIALYTE SOLUTION ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>pediatric electrolyte solution oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>pediatric electrolyte-zinc solution oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>ra pediatric electrolyte solution oral</i>            | \$0 (Tier 3)                             | DP                                               |
| REHYDRALYTE SOLUTION ORAL                                | \$0 (Tier 3)                             | DP                                               |
| <i>sb pediatric electrolyte solution oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sm pediatric electrolyte solution oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <b>Iv Nutrition</b>                                      |                                          |                                                  |
| <i>chromic chloride solution 40 mcg/10ml intravenous</i> | \$0 (Tier 3)                             | DP                                               |
| CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 %  | \$0 (Tier 2)                             | B/D                                              |
| CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 %   | \$0 (Tier 2)                             | B/D                                              |
| CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 %        | \$0 (Tier 2)                             | B/D                                              |
| CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 %        | \$0 (Tier 2)                             | B/D                                              |
| <i>clanimix/dextrose (6/5) intravenous solution 6 %</i>  | \$0 (Tier 2)                             | B/D                                              |
| <i>clanimix/dextrose (8/10) intravenous solution 8 %</i> | \$0 (Tier 2)                             | B/D                                              |
| <i>clanimix/dextrose (8/14) intravenous solution 8 %</i> | \$0 (Tier 2)                             | B/D                                              |
| CLINISOL SF INTRAVENOUS SOLUTION 15 %                    | \$0 (Tier 1)                             | B/D                                              |

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| CLINOLIPID INTRAVENOUS EMULSION 20 %                            | \$0 (Tier 2)                             | B/D                                              |
| <i>cupric chloride solution 0.4 mg/ml intravenous</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>dextrose intravenous solution 10 %, 5 %</i>                  | \$0 (Tier 1)                             |                                                  |
| <i>dextrose intravenous solution 50 %, 70 %</i>                 | \$0 (Tier 1)                             | B/D                                              |
| INTRALIPID INTRAVENOUS EMULSION 20 %, 30 %                      | \$0 (Tier 2)                             | B/D                                              |
| NUTRILIPID INTRAVENOUS EMULSION 20 %                            | \$0 (Tier 2)                             | B/D                                              |
| PLENAMINE INTRAVENOUS SOLUTION 15 %                             | \$0 (Tier 1)                             | B/D                                              |
| PREMASOL INTRAVENOUS SOLUTION 10 %                              | \$0 (Tier 2)                             | B/D; NDS                                         |
| PROSOL INTRAVENOUS SOLUTION 20 %                                | \$0 (Tier 2)                             | B/D                                              |
| <i>selenious acid solution 60 mcg/ml intravenous</i>            | \$0 (Tier 3)                             | DP                                               |
| TRALEMENT SOLUTION 300-55-60-3000 MCG/ML INTRAVENOUS            | \$0 (Tier 3)                             | DP                                               |
| TRAVASOL INTRAVENOUS SOLUTION 10 %                              | \$0 (Tier 2)                             | B/D                                              |
| TROPHAMINE INTRAVENOUS SOLUTION 10 %                            | \$0 (Tier 2)                             | B/D                                              |
| <i>zinc chloride solution 1 mg/ml intravenous</i>               | \$0 (Tier 3)                             | DP                                               |
| <b>Minerals</b>                                                 |                                          |                                                  |
| <i>600+d3 tablet 600-20 mg-mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>cal-citrate plus vitamin d tablet 250-2.5 mg-mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>calcium + vitamin d3 tablet 600-10 mg-mcg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium + vitamin d3 tablet 600-5 mg-mcg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 1000 + d tablet 1000-20 mg-mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 1200 tablet chewable 1200-1000 mg-unit oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500 + d tablet 500-3.125 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500 + d tablet 500-5 mg-mcg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500 + d3 tablet 500-15 mg-mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500/d tablet 500-5 mg-mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500/vitamin d tablet 500-3.125 mg-mcg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500+d high potency tablet 500-10 mg-mcg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500+d tablet 500-10 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500+d tablet 500-5 mg-mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500+d3 tablet 500-10 mg-mcg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 500+d3 tablet 500-5 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600 + d tablet 600-5 mg-mcg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600 high potency tablet 600 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600 tablet 1500 (600 ca) mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600 tablet 600 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600/vitamin d tablet 600-10 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600/vitamin d tablet chewable 600-10 mg-mcg oral</i> | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                           | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>calcium 600/vitamin d3 tablet 600-20 mg-mcg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d high potency tablet 600-10 mg-mcg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d tablet 600-10 mg-mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d3 plus minerals tablet 600-800 mg-unit oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d3 tablet 600-10 mg-mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d3 tablet 600-20 mg-mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium 600+d3 tablet 600-5 mg-mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carb-cholecalciferol tablet 500-10 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carb-cholecalciferol tablet 600-10 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carb-cholecalciferol tablet 600-20 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carb-cholecalciferol tablet 600-5 mg-mcg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carb-cholecalciferol tablet chewable 500-10 mg-mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate powder (otc)</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate powder 800 mg/2gm oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate tablet 1250 (500 ca) mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate tablet 1500 (600 ca) mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate tablet 600 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate tablet chewable 1250 (500 ca) mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>calcium carbonate tablet chewable 260 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate + d tablet 250-5 mg-mcg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate + d tablet 315-5 mg-mcg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate + d3 maximum tablet 315-6.25 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate + d3 tablet 200-6.25 mg-mcg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate + d3 tablet 315-5 mg-mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate tablet 250 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate tablet 950 (200 ca) mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate+d3 petites tablet 200-6.25 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate+d3 tablet 315-6.25 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate-vitamin d tablet 200-3.125 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate-vitamin d tablet 315-5 mg-mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>calcium citrate-vitamin d3 tablet 315-6.25 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium creamies tablet chewable 600-10 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>calcium gluconate capsule 50 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>calcium high potency tablet 1500 (600 ca) mg oral</i>               | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                       | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>calcium high potency/vitamin d tablet 600-5 mg-mcg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>calcium lactate tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium lactate tablet 750 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>calcium oyster shell tablet 1250 (500 ca) mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium plus vitamin d tablet 500-5 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>calcium plus vitamin d3 tablet 600-20 mg-mcg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium tablet chewable 500-2.5 mg-mcg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calcium+d3 tablet 500-10 mg-mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium+d3 tablet 500-15 mg-mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium+d3 tablet 600-20 mg-mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>calcium-magnesium-zinc tablet 333-133-5 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>calcium-magnesium-zinc tablet 333-133-8.3 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>calcium-magnesium-zinc-d3 tablet oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>calcium-vitamin d3 tablet 250-3.125 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>cal-mint tablet chewable 260 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| CALTRATE 600+D3 SOFT TABLET CHEWABLE 600-20 MG-MCG ORAL            | \$0 (Tier 3)                             | DP                                               |
| CALTRATE MINIS PLUS MINERALS TABLET 300-800 MG-UNIT ORAL           | \$0 (Tier 3)                             | DP                                               |
| <i>chelated magnesium tablet 100 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| CITRACAL MAXIMUM TABLET 315-6.25 MG-MCG ORAL                       | \$0 (Tier 3)                             | DP                                               |
| CITRACAL PETITES/VITAMIN D TABLET 200-6.25 MG-MCG ORAL             | \$0 (Tier 3)                             | DP                                               |
| <i>citrus calcium/vitamin d tablet 200-6.25 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium + d3 tablet 600-20 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium 600 &amp; vitamin d3 tablet 600-20 mg-mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium 600 + d/minerals tablet 600-800 mg-unit oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium 600+d tablet 600-20 mg-mcg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium carbonate tablet 1250 (500 ca) mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>cvs calcium citrate+d3 petites tablet 200-6.25 mg-mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>cvs magnesium oxide tablet 250 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>cvs magnesium tablet 500 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>cvs oyster shell calcium-vit d tablet 500-3.125 mg-mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>cvs zinc gluconate tablet 50 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium 500+d tablet 500-5 mg-mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium 600+d tablet 600-20 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>eq calcium 600+d+minerals tablet 600-800 mg-unit oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium citrate+d tablet 315-6.25 mg-mcg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium citrate/vitamin d tablet 315-6.25 mg-mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium citrate/vitamin d3 tablet 315-6.25 mg-mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium/vitamin d tablet 600-10 mg-mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>eq calcium/vitamin d3 tablet 600-20 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>fluoritab solution 0.275 (0.125 f) mg/drop oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp calcium 500 +d3 tablet 500-15 mg-mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>gnp calcium 600 +d/minerals tablet 600-800 mg-unit oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp calcium 600 +d3 tablet 600-20 mg-mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>gnp calcium citrate +d3 tablet 315-6.25 mg-mcg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp calcium tablet 1500 (600 ca) mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>hm calcium citrate+d3 petite tablet 200-6.25 mg-mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>kp calcium 600+d tablet 600-10 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>kp calcium 600+d tablet 600-20 mg-mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>kp calcium citrate+d tablet 315-6.25 mg-mcg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>kp calcium-magnesium-zinc tablet 333-133-5 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>kp mag-oxide magnesium tablet 200 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| MAG64 TABLET DELAYED RELEASE 64 MG ORAL                            | \$0 (Tier 3)                             | DP                                               |
| MAGDELAY TABLET DELAYED RELEASE 64 MG ORAL                         | \$0 (Tier 3)                             | DP                                               |
| <i>mag-g tablet 500 (27 mg) mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| MAGNEBIND 300 TABLET 250-300 MG ORAL                               | \$0 (Tier 3)                             | DP                                               |
| MAGNEBIND 400 TABLET 80-115 MG ORAL                                | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium gluconate tablet 250 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium gluconate tablet 27.5 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium gluconate tablet 500 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium lactate tablet extended release 84 mg (7meq) oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide -mg supplement tablet 250 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide -mg supplement tablet 400 (240 mg) mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide -mg supplement tablet 500 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium oxide -mg supplement tablet chewable 200 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>magnesium tablet 200 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| MAGNESIUM-OXIDE TABLET 400 (240 MG) MG ORAL                     | \$0 (Tier 3)                             | DP                                               |
| MAGOX 400 TABLET 400 (240 MG) MG ORAL                           | \$0 (Tier 3)                             | DP                                               |
| MAG-OXIDE TABLET 200 MG ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>manganese chloride solution 0.1 mg/ml intravenous</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>mgo tablet 400 (240 mg) mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| NU-MAG TABLET DELAYED RELEASE 71.5-119 MG ORAL                  | \$0 (Tier 3)                             | DP                                               |
| ORAZINC CAPSULE 220 (50 ZN) MG ORAL                             | \$0 (Tier 3)                             | DP                                               |
| ORAZINC TABLET 110 MG ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| OS-CAL CALCIUM + D3 TABLET 500-5 MG-MCG ORAL                    | \$0 (Tier 3)                             | DP                                               |
| OS-CAL EXTRA D3 TABLET 500-15 MG-MCG ORAL                       | \$0 (Tier 3)                             | DP                                               |
| OS-CAL TABLET CHEWABLE 500-15 MG-MCG ORAL                       | \$0 (Tier 3)                             | DP                                               |
| OYSCO 500+D TABLET 500-5 MG-MCG ORAL                            | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium + d tablet 500-10 mg-mcg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium + d tablet 500-5 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium + d3 tablet 500-10 mg-mcg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium plus d tablet 500-5 mg-mcg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium tablet 500 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium tablet 500-10 mg-mcg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium w/d tablet 500-5 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/d tablet 500-10 mg-mcg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/d tablet 500-5 mg-mcg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/d3 tablet 500-10 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/d3 tablet 500-5 mg-mcg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/vit d3 tablet 250-3.125 mg-mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>oyster shell calcium/vitamin d tablet 500-5 mg-mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| PRONUTRIENTS CALCIUM+D3 TABLET 600-20 MG-MCG ORAL               | \$0 (Tier 3)                             | DP                                               |
| <i>pure calcium carbonate tablet 1500 (600 ca) mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>px calcium&amp;d tablet 600-10 mg-mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>qc calcium fast dissolution tablet 1500 (600 ca) mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium 600 tablet 1500 (600 ca) mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium 600/vitamin d-3 tablet 600-10 mg-mcg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium cit plus vit d-3 tablet 315-6.25 mg-mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium citrate plus vit d tablet 315-5 mg-mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |

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|-------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>ra calcium cit-vit d-3 petites tablet 200-6.25 mg-mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium plus vitamin d tablet 600-10 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>ra calcium plus vitamin d tablet 600-5 mg-mcg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| RA HI CAL TABLET 500-5 MG-MCG ORAL                                | \$0 (Tier 3)                             | DP                                               |
| <i>ra natural magnesium tablet 250 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>ra zinc tablet 50 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>sb calcium + d tablet 600-5 mg-mcg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>sb oyster shell calcium tablet 500 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium 500/vitamin d3 tablet 500-10 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium 600/vitamin d tablet 600-10 mg-mcg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium 600+d3 tablet 600-20 mg-mcg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium citrate+/vit d3 tablet 315-6.25 mg-mcg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium citrate+d3 petite tablet 200-6.25 mg-mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium citrate+vit d3 max tablet 315-6.25 mg-mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium/vitamin d tablet 500-5 mg-mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium/vitamin d tablet 600-20 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium/vitamin d3 tablet 600-800 mg-unit oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium-vitamin d tablet 500-5 mg-mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm calcium-vitamin d tablet 600-10 mg-mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>sm magnesium oxide tablet 250 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm oyster shell calcium/vit d tablet 500-10 mg-mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>sm oyster shell calcium/vit d3 tablet 500-10 mg-mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>sm zinc gluconate tablet 50 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>sodium fluoride solution 1.1 (0.5 f) mg/ml oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sodium phosphates solution 45 mmole/15ml intravenous</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>super calcium 600 + d 400 tablet 600-10 mg-mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>super calcium 600 + d3 tablet 600-10 mg-mcg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>super calcium tablet 1500 (600 ca) mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| ZINC 15 TABLET 66 MG ORAL                                         | \$0 (Tier 3)                             | DP                                               |
| <i>zinc capsule 220 (50 zn) mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>zinc gluconate tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>zinc gluconate tablet 30 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>zinc gluconate tablet 50 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>zinc sulfate capsule 220 (50 zn) mg oral (otc)</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>zinc sulfate tablet 220 (50 zn) mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>zinc tablet 30 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>zinc tablet 50 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <b>Miscellaneous</b>                                   |                                          |                                                  |
| <i>co q 10 capsule 100 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>co q-10 capsule 100 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>co q-10 capsule 200 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>co q10 capsule 30 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>co q-10 capsule 300 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>coenzyme q10 capsule 100 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>coenzyme q-10 capsule 100 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>co-enzyme q10 capsule 100 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>coenzyme q-10 capsule 200 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>co-enzyme q10 capsule 200 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>coenzyme q-10 capsule 30 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>coq-10 capsule 100 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>coq10 capsule 100 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>coq10 capsule 200 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>coq10 capsule 30 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>coq-10 capsule 30 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>coq-10 capsule 400 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>coq10 maximum strength capsule 400 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>cvs coenzyme q-10 capsule 100 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>cvs coq-10 capsule 200 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>cvs coq-10 capsule 400 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>eq1 coq10 capsule 100 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>eq1 coq10 capsule 200 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>glutamine powder oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp co q-10 capsule 100 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp co q10 capsule 100 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp co q10 capsule 200 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp melatonin maximum strength tablet 5 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>gnp melatonin tablet 3 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>kp melatonin tablet 3 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin liquid 1 mg/4ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin liquid 2.5 mg/10ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin maximum strength tablet 5 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin tablet 1 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin tablet 3 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>melatonin tablet 300 mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                        | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>melatonin tablet 5 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| NEOQ10 CAPSULE 125 MG ORAL                          | \$0 (Tier 3)                             | DP                                               |
| Q-SORB CO Q-10 CAPSULE 100 MG ORAL                  | \$0 (Tier 3)                             | DP                                               |
| Q-SORB CO Q-10 CAPSULE 200 MG ORAL                  | \$0 (Tier 3)                             | DP                                               |
| <i>ra coenzyme q-10 capsule 100 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>ra coenzyme q-10 capsule 200 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>sm co q-10 capsule 100 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>sm co q-10 capsule 200 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>sm coenzyme q-10 capsule 100 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>yl coenzyme q10 capsule 30 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <b>Vitamins</b>                                     |                                          |                                                  |
| <i>50+ adult eye health capsule oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>a thru z select tablet chewable oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>a-10000 capsule 3 mg (10000 ut) oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>a-25 capsule 7.5 mg (25000 ut) oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>acerola c-500 tablet chewable 500 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| ACTIVNUTRIENTS TABLET CHEWABLE ORAL                 | \$0 (Tier 3)                             | DP                                               |
| <i>adc/f (0.5mg/ml) solution 0.5 mg/ml oral</i>     | \$0 (Tier 3)                             | DP                                               |
| ADEK GUMMIES PLUS ZN TABLET CHEWABLE ORAL           | \$0 (Tier 3)                             | DP                                               |
| <i>adult one daily gummies tablet chewable oral</i> | \$0 (Tier 3)                             | DP                                               |
| ADVANCED MULTI EA TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE GUMMIES TABLET CHEWABLE ORAL               | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE KIDS TABLET CHEWABLE ORAL                  | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE TABLET CHEWABLE ORAL                       | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE+GOOD REST TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE+NATURAL ENERGY LIQUID ORAL                 | \$0 (Tier 3)                             | DP                                               |
| AIRBORNE+PROBIOTIC TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| ALIVE HAIR, SKIN & NAILS TABLET CHEWABLE ORAL       | \$0 (Tier 3)                             | DP                                               |
| ALIVE MULTI-VITAMIN LIQUID ORAL                     | \$0 (Tier 3)                             | DP                                               |
| ALIVE WOMENS 50+ GUMMY TABLET CHEWABLE ORAL         | \$0 (Tier 3)                             | DP                                               |
| ALIVE WOMENS 50+ TABLET CHEWABLE ORAL               | \$0 (Tier 3)                             | DP                                               |
| ALIVE WOMENS GUMMY TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| ALLBEE/C TABLET ORAL                                | \$0 (Tier 3)                             | DP                                               |
| AMLADEX TABLET ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| <i>antioxidant capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>anti-oxidant tablet oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| APPE-CURB CAPSULE ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| AQUA-E LIQUID 50.25 MG/ML (75 UT/ML) ORAL              | \$0 (Tier 3)                             | DP                                               |
| AQUASOL A SOLUTION 50000 UNIT/ML INTRAMUSCULAR         | \$0 (Tier 3)                             | DP                                               |
| <i>aqueous vitamin d liquid 10 mcg/ml oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>ascorbic acid solution 500 mg/ml injection</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>ascorbic acid tablet 500 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>b complex (folic acid) tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>b complex capsule oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>b complex vitamins capsule oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>b complex-c tablet oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>b complex-c-folic acid tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>b-1 tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>b-1 tablet 250 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet 100 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet 1000 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet 2000 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet 50 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet 500 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tablet extended release 1000 mcg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tr tablet extended release 1000 mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>b-12 tr tablet extended release 2000 mcg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>b6 natural tablet 100 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>b-6 tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>b-6 tablet 250 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>b-6 tablet 50 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>baby super daily d3 liquid 10 mcg /0.028ml oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>baby vitamin d3 liquid 10 mcg /0.028ml oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>balance b-50 tablet oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>bariatric multivitamins/iron capsule oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex (folic acid) tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex balanced tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex/b-12 tablet oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex/vitamin c tablet oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex-c (w/folic acid) tablet oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>b-complex-c tablet oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>better b complex tablet oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| BIO-35 GLUTEN-FREE CAPSULE ORAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>biocal capsule oral</i>                             | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| BIO-D-MULSION FORTE LIQUID 50 MCG/0.04ML ORAL        | \$0 (Tier 3)                             | DP                                               |
| BIO-D-MULSION LIQUID 10 MCG/0.04ML ORAL              | \$0 (Tier 3)                             | DP                                               |
| <i>biotin capsule 1 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>biotin capsule 10 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>biotin capsule 5 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>biotin capsule 5000 mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>biotin maximum strength capsule 5000 mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>biotin tablet 1000 mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>biotin tablet 5 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>body/hair/skin/nails capsule oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>bp vit 3 capsule 1 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| BPROTECTED MULTI-VITE LIQUID ORAL                    | \$0 (Tier 3)                             | DP                                               |
| BPROTECTED PEDIA D-VITE LIQUID 10 MCG/ML ORAL        | \$0 (Tier 3)                             | DP                                               |
| BPROTECTED PEDIA POLY-VITE SOLUTION ORAL             | \$0 (Tier 3)                             | DP                                               |
| BPROTECTED PEDIA POLY-VITE/FE SOLUTION 10 MG/ML ORAL | \$0 (Tier 3)                             | DP                                               |
| <i>c 1000 tablet 1000 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>c 500 tablet 500 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>c-1000 tablet 1000 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>c-1000 tablet extended release 1000 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>c-1000/rose hips tablet 1000 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>c-250 tablet 250 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>c-500 tablet 500 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>c-500 tablet chewable 500 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>c-500 tablet extended release 500 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>c-500/rose hips tablet 500 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>c-chewable tablet chewable 500 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| CENTRUM FLAVOR BURST ADULT TABLET CHEWABLE ORAL      | \$0 (Tier 3)                             | DP                                               |
| CENTRUM FLAVOR BURST KIDS TABLET CHEWABLE ORAL       | \$0 (Tier 3)                             | DP                                               |
| CENTRUM FRESH/FRUITY 50+ TABLET CHEWABLE ORAL        | \$0 (Tier 3)                             | DP                                               |
| CENTRUM FRESH/FRUITY ADULT TABLET CHEWABLE ORAL      | \$0 (Tier 3)                             | DP                                               |
| CENTRUM KIDS TABLET CHEWABLE ORAL                    | \$0 (Tier 3)                             | DP                                               |
| CENTRUM LIQUID ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| CENTRUM SILVER TABLET CHEWABLE ORAL                  | \$0 (Tier 3)                             | DP                                               |
| CEROVITE JR TABLET CHEWABLE 18 MG ORAL               | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>childrens animal shapes tablet chewable 18 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>childrens chew multivitamin tablet chewable oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>childrens chewable vitamins tablet chewable oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>childrens gummies tablet chewable oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>classic prenatal tablet 28-0.8 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>cod liver oil capsule 4000-200 unit oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>cod liver oil w/vit a &amp; d capsule oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>complete multivitamin/mineral liquid oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| CORVITA TABLET ORAL                                              | \$0 (Tier 3)                             | DP                                               |
| CULTURELLE KIDS COMPLETE TABLET CHEWABLE ORAL                    | \$0 (Tier 3)                             | DP                                               |
| CULTURELLE KIDS PROBIOTIC-MV TABLET CHEWABLE ORAL                | \$0 (Tier 3)                             | DP                                               |
| CULTURELLE PROBIOTICS + MULTIV TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs adult 50+ eye health capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| CVS AIRSHIELD IMMUNITY SUPPORT TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| CVS AIRSHIELD TABLET CHEWABLE ORAL                               | \$0 (Tier 3)                             | DP                                               |
| <i>cvs b complex plus c tablet oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>cvs b-1 tablet 100 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>cvs b-12 tablet 500 mcg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs b6 tablet 100 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>cvs biotin capsule 10 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>cvs biotin capsule 5000 mcg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>cvs biotin high potency tablet 1000 mcg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs chewable c with rose hips tablet chewable 500 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>cvs chewable childrens vitamin tablet chewable 18 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>cvs childrens complete tablet chewable 18 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>cvs d3 capsule 10 mcg (400 unit) oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>cvs d3 capsule 125 mcg (5000 ut) oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>cvs d3 capsule 25 mcg (1000 ut) oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>cvs d3 capsule 50 mcg (2000 ut) oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>cvs daily gummies adult tablet chewable oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>cvs daily gummies tablet chewable oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>cvs e capsule 90 mg (200 unit) oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>cvs eye health adult 50+ capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>cvs folic acid tablet 800 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>cvs gummy dinos tablet chewable oral</i>                      | \$0 (Tier 3)                             | DP                                               |

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|---------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>cvx gummy multivitamin kids tablet chewable oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>cvx mens daily gummies tablet chewable oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>cvx spectravite adult 50+ tablet chewable oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>cvx super b complex/c tablet oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vision health capsule oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin b12 tablet 1000 mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin b-12 tablet 1000 mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin b12 tablet extended release 1000 mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin b-12 tablet extended release 2000 mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin c tablet 1000 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin c tablet 250 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin c tablet 500 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin c-rose hips tablet 1000 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin c-rose hips tablet 500 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin d3 capsule 250 mcg (10000 ut) oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>cvx vitamin e capsule 450 mg (1000 ut) oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>cvx womens daily gummies tablet chewable oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>cyanocobalamin solution 1000 mcg/ml injection</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>d 1000 capsule 25 mcg (1000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>d 10000 capsule 250 mcg (10000 ut) oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>d 5000 capsule 125 mcg (5000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>d-1000 extra strength tablet 25 mcg (1000 ut) oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>d2000 ultra strength capsule 50 mcg (2000 ut) oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>d3 2000 capsule 50 mcg (2000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>d3 5000 capsule 125 mcg (5000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>d3 baby drops liquid 10 mcg /0.025ml oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>d3 high potency capsule 125 mcg (5000 ut) oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>d3 high potency capsule 25 mcg (1000 ut) oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>d3 high potency capsule 50 mcg (2000 ut) oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>d3 high potency tablet 10 mcg (400 unit) oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>d3 maximum strength capsule 125 mcg (5000 ut) oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>d3 super strength capsule 50 mcg (2000 ut) oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>d3 tablet 50 mcg (2000 ut) oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>d3-1000 capsule 25 mcg (1000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>d3-1000 tablet 25 mcg (1000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>d-3-5 capsule 125 mcg (5000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>d-400 tablet 10 mcg (400 unit) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>d-5000 tablet 125 mcg (5000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>daily multiple vitamins tablet oral</i>                    | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                            | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|---------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>daily multivitamin capsule oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>daily value multivitamin tablet oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>daily vitamins tablet oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>daily vite multivitamin/iron tablet oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>daily vite tablet oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>daily vites tablet oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>daily-vite multivitamin tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>daily-vite tablet oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| DDROPS LIQUID 25 MCG /0.028ML ORAL                      | \$0 (Tier 3)                             | DP                                               |
| DDROPS LIQUID 50 MCG /0.028ML ORAL                      | \$0 (Tier 3)                             | DP                                               |
| DECARA CAPSULE 1.25 MG (50000 UT) ORAL                  | \$0 (Tier 3)                             | DP                                               |
| DECARA CAPSULE 625 MCG (25000 UT) ORAL                  | \$0 (Tier 3)                             | DP                                               |
| DECUBI-VITE CAPSULE ORAL                                | \$0 (Tier 3)                             | DP                                               |
| <i>dekas bariatric tablet chewable oral</i>             | \$0 (Tier 3)                             | DP                                               |
| DEKAS PLUS CAPSULE ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| DEKAS PLUS OCEAN CAPSULE ORAL                           | \$0 (Tier 3)                             | DP                                               |
| DEKAS PLUS TABLET CHEWABLE ORAL                         | \$0 (Tier 3)                             | DP                                               |
| <i>delta d3 tablet 10 mcg (400 unit) oral</i>           | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE 3000 TABLET 3 MG ORAL                         | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE 5000 TABLET 5 MG ORAL                         | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE 800 TABLET 0.8 MG ORAL                        | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE 800/ZINC TABLET 0.8 MG ORAL                   | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE 800-ZINC 15 TABLET 0.8 MG ORAL                | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE SUPREME D TABLET ORAL                         | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE TABLET ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE VITAMIN D 5000 CAPSULE 125 MCG (5000 UT) ORAL | \$0 (Tier 3)                             | DP                                               |
| DIALYVITE/ZINC TABLET ORAL                              | \$0 (Tier 3)                             | DP                                               |
| DRISDOL CAPSULE 1.25 MG (50000 UT) ORAL                 | \$0 (Tier 3)                             | DP                                               |
| DRY EYE FORMULA CAPSULE ORAL                            | \$0 (Tier 3)                             | DP                                               |
| D-VI-SOL LIQUID 10 MCG/ML ORAL                          | \$0 (Tier 3)                             | DP                                               |
| <i>d-vite pediatric liquid 10 mcg/ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>e 1000 capsule 450 mg (1000 ut) oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>e200 capsule 90 mg (200 unit) oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>e-200 capsule 90 mg (200 unit) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| ELDERTONIC LIQUID ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| ELFOLATE PLUS TABLET 3-35-2 MG ORAL                     | \$0 (Tier 3)                             | DP                                               |
| EMERGEN-C VITAMIN C TABLET CHEWABLE ORAL                | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                     | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ENDUR-ACIN TABLET EXTENDED RELEASE 250 MG ORAL                   | \$0 (Tier 3)                             | DP                                               |
| ENDUR-C TABLET EXTENDED RELEASE 1000 MG ORAL                     | \$0 (Tier 3)                             | DP                                               |
| ENDUR-C TABLET EXTENDED RELEASE 500 MG ORAL                      | \$0 (Tier 3)                             | DP                                               |
| <i>eq complete multivitamin child tablet chewable 18 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>eq multivitamin gummies tablet chewable oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>eq b complex 50 tablet oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>eq b-6 tablet 100 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>eq child multivit/minerals tablet chewable 18 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>eq super b complex/vitamin c tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin b-12 tablet 500 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin c tablet 1000 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin c tablet 500 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin c/rose hips tablet 1000 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin c/rose hips tablet 500 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin d3 capsule 10 mcg (400 unit) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin d3 capsule 125 mcg (5000 ut) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin d3 capsule 25 mcg (1000 ut) oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin d3 capsule 50 mcg (2000 ut) oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>eq vitamin e capsule 400 unit oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>ergocalciferol capsule 1.25 mg (50000 ut) oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>ergocalciferol solution 200 mcg/ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| ESTER-C TABLET ORAL                                              | \$0 (Tier 3)                             | DP                                               |
| <i>eye multivitamin capsule oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>eye multivitamin/lutein capsule oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>fabb tablet 2.2-25-1 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| FLINSTONES GUMMIES OMEGA-3 DHA TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES COMPLETE TABLET CHEWABLE 18 MG ORAL                  | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES COMPLETE TABLET CHEWABLE ORAL                        | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES GUMMIES BONE BUILD TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES GUMMIES COMPLETE TABLET CHEWABLE ORAL                | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES GUMMIES TABLET CHEWABLE ORAL                         | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------|------------------------------------------|--------------------------------------------------|
| FLINTSTONES GUMMIES-IMMUNITY TABLET CHEWABLE ORAL   | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES PLUS CALCIUM TABLET CHEWABLE ORAL       | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES SOUR GUMMIES TABLET CHEWABLE ORAL       | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES W/IRON TABLET CHEWABLE 18 MG ORAL       | \$0 (Tier 3)                             | DP                                               |
| FLINTSTONES/MY FIRST TABLET CHEWABLE ORAL           | \$0 (Tier 3)                             | DP                                               |
| FLORIVA PLUS SOLUTION 0.25 MG/ML ORAL               | \$0 (Tier 3)                             | DP                                               |
| <i>folagent dha capsule oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>folamed dha capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>folate tablet 400 mcg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>folbee plus tablet oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>folbee tablet 2.5-25-1 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>folic acid solution 5 mg/ml injection</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>folic acid tablet 1 mg oral (rx)</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>folic acid tablet 400 mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>folic acid tablet 800 mcg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>folite tablet oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| FOLIXAPURE TABLET 1-5000 MG-UNIT ORAL               | \$0 (Tier 3)                             | DP                                               |
| <i>folplex 2.2 tablet 2.2-25-0.5 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| FOLTABS 800 TABLET 800-10-115 MCG-MG-MCG ORAL       | \$0 (Tier 3)                             | DP                                               |
| FOLTANX TABLET 3-35-2 MG ORAL                       | \$0 (Tier 3)                             | DP                                               |
| FOLTRATE TABLET 500-1 MCG-MG ORAL                   | \$0 (Tier 3)                             | DP                                               |
| FOLTREXYL TABLET 1-5000 MG-UNIT ORAL                | \$0 (Tier 3)                             | DP                                               |
| <i>fruit c 500 tablet chewable 500 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>fruit c tablet chewable 100 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>fruity c tablet chewable 250 mg oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>fruity chews tablet chewable oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>full spectrum b/vitamin c tablet 0.8 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>genadek step 1 capsule oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>genadek step 2 capsule oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| GERBER GROW MIGHTY TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| GERBER LIL' BRAINIES TABLET CHEWABLE ORAL           | \$0 (Tier 3)                             | DP                                               |
| GERITOL COMPLETE TABLET ORAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>glucoten capsule oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp biotin capsule 5000 mcg oral</i>             | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>gnp childrens chewables/ex c tablet chewable oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp d 1000 capsule 25 mcg (1000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>gnp essential one daily tablet oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp folic acid tablet 400 mcg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp little ones childrens tablet chewable oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>gnp prenatal tablet 28-0.8 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin a capsule 3 mg (10000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin b-1 tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin b-12 tablet 500 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin b-12 tablet extended release 1000 mcg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin b-6 tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c drops lozenge 60 mg mouth/throat</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c tablet 1000 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c tablet 250 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c tablet 500 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c tablet chewable 500 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c tablet extended release 500 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c w/rose hips tablet 500-37 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin c/rose hips tablet 1000 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin d maximum strength tablet 50 mcg (2000 ut) oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin d super strength tablet 125 mcg (5000 ut) oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin d tablet 25 mcg (1000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin d3 extra strength tablet 25 mcg (1000 ut) oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin d-400 tablet 10 mcg (400 unit) oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin e capsule 400 unit oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin e capsule 450 mg (1000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp vitamin e capsule 90 mg (200 unit) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| GUMMI BEAR MULTIVITAMIN/MIN TABLET CHEWABLE ORAL                   | \$0 (Tier 3)                             | DP                                               |
| <i>hair skin nails capsule oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>hair/skin/nails capsule oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>healthy eyes supervision 2 capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>healthy eyes/lutein-zeaxanthin capsule oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>healthy hair/skin/nails tablet oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>healthy kids gummies tablet chewable oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>high potency multivitamin tablet oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>hm biotin capsule 5000 mcg oral</i>                             | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>hm vitamin b-12 tablet 500 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>hm vitamin c tablet chewable 500 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| HONEY BEARS W/IRON-ZINC TABLET CHEWABLE 30-200-3 ORAL              | \$0 (Tier 3)                             | DP                                               |
| <i>hydroxocobalamin acetate solution 1000 mcg/ml intramuscular</i> | \$0 (Tier 3)                             | DP                                               |
| ICAPS CAPSULE ORAL                                                 | \$0 (Tier 3)                             | DP                                               |
| ICAPS LUTEIN & OMEGA-3 CAPSULE ORAL                                | \$0 (Tier 3)                             | DP                                               |
| ICAPS LUTEIN & ZEAXANTHIN TABLET DELAYED RELEASE ORAL              | \$0 (Tier 3)                             | DP                                               |
| <i>immune support tablet chewable oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| IMMUNERX CAPSULE ORAL                                              | \$0 (Tier 3)                             | DP                                               |
| INFUVITE ADULT INJECTABLE INTRAVENOUS                              | \$0 (Tier 3)                             | DP                                               |
| INFUVITE PEDIATRIC SOLUTION INTRAVENOUS                            | \$0 (Tier 3)                             | DP                                               |
| IS-D 10,000 CAPSULE 250 MCG (10000 UT) ORAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>just 4 kidz multivit/probiotic tablet chewable oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>kobee tablet oral</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>kp b complex-c tablet oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>kp folic acid tablet 800 mcg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>kp niacin tablet 500 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>kp prenatal multivitamins tablet 28-0.8 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>kp vitamin b-12 tablet 1000 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>kp vitamin b-6 tablet 100 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>kp vitamin d capsule 25 mcg (1000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>kp vitamin d3 capsule 25 mcg (1000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>kp vitamin d3 capsule 50 mcg (2000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>l-methylfolate calcium tablet 15 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>l-methylfolate calcium tablet 7.5 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>l-methyl-mc tablet 6-1-50-5 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| LYSIPLEX PLUS LIQUID ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| MACULAR HEALTH FORMULA CAPSULE ORAL                                | \$0 (Tier 3)                             | DP                                               |
| MAXIMUM D3 CAPSULE 325 MCG (13000 UT) ORAL                         | \$0 (Tier 3)                             | DP                                               |
| <i>meijer c tablet 500 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>mens 50+ advanced capsule oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>mens daily formulalycopene capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>mens multivitamin tablet chewable oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| MERIBIN CAPSULE 5 MG ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| METAFOLBIC PLUS TABLET 6-2-600 MG ORAL                             | \$0 (Tier 3)                             | DP                                               |
| MOOD FOOD ES CAPSULE ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| <i>multi + omega-3 adult gummies tablet chewable oral</i>          | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>multi adult gummies tablet chewable oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>multi for her 50+ capsule oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>multi for her capsule oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>multi vitamin tablet oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>multi vitamin w/d-3 tablet oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>multiple vitamins essential tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>multiple vitamins tablet oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>multiple vitamins/iron tablet oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>multipro capsule oral</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vit/iron/fluoride solution 0.25-10 mg/ml oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin &amp; mineral liquid oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin adult tablet oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin childrens (w/ fa) tablet chewable oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin childrens gummies tablet chewable oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin childrens tablet chewable oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin gummies adult tablet chewable oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin gummies mens tablet chewable oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin gummies tablet chewable oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin gummies womens tablet chewable oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin infant &amp; toddler solution 11 mg/ml oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin infant &amp; toddler solution oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin liquid oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin tablet oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin tablet oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin/fluoride solution 0.25 mg/ml oral (otc)</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin/fluoride solution 0.25 mg/ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin/fluoride solution 0.5 mg/ml oral (otc)</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin/fluoride solution 0.5 mg/ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin/fluoride tablet chewable 0.25 mg oral (rx)</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin/fluoride tablet chewable 0.5 mg oral (rx)</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamin/fluoride tablet chewable 1 mg oral (rx)</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin/fluoride/iron solution 0.25-10 mg/ml oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vitamin/iron tablet oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>multivitamins plus iron child tablet chewable 18 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>multi-vite liquid oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| <i>multivit-min gummies childrens tablet chewable oral</i>      | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION CAPSULE ORAL                           | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION D3000 CAPSULE ORAL                     | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                             | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|----------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| MVW COMPLETE FORMULATION D3000 TABLET CHEWABLE ORAL      | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION D5000 CAPSULE ORAL              | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION D5000 TABLET CHEWABLE ORAL      | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION MINIS CAPSULE ORAL              | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION SOLUTION ORAL                   | \$0 (Tier 3)                             | DP                                               |
| MVW COMPLETE FORMULATION TABLET CHEWABLE ORAL            | \$0 (Tier 3)                             | DP                                               |
| NASCOBAL SOLUTION 500 MCG/0.1ML NASAL                    | \$0 (Tier 3)                             | DP                                               |
| <i>natural close hips tablet 1000 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>natural vitamin d-3 tablet 125 mcg (5000 ut) oral</i> | \$0 (Tier 3)                             | DP                                               |
| NEPHPLEX RX TABLET ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>nephro vitamins tablet 0.8 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| NEPHRO-VITE TABLET 0.8 MG ORAL (OTC)                     | \$0 (Tier 3)                             | DP                                               |
| <i>niacin er capsule extended release 250 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>niacin er tablet extended release 250 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>niacin tablet 250 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>niacin tablet 50 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>niacin tablet 500 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>niacinamide tablet 500 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| NICOMIDE TABLET 750-27-2-0.5 MG ORAL                     | \$0 (Tier 3)                             | DP                                               |
| NIVA-FOL TABLET 2.5-25-2 MG ORAL                         | \$0 (Tier 3)                             | DP                                               |
| <i>norwegian cod liver oil capsule oral</i>              | \$0 (Tier 3)                             | DP                                               |
| OCUVITE ADULT 50+ CAPSULE ORAL                           | \$0 (Tier 3)                             | DP                                               |
| OCUVITE ADULT FORMULA CAPSULE ORAL                       | \$0 (Tier 3)                             | DP                                               |
| OCUVITE EYE HEALTH GUMMIES TABLET CHEWABLE ORAL          | \$0 (Tier 3)                             | DP                                               |
| OCUVITE-LUTEIN CAPSULE ORAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>omnicap tablet oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| ONE DAILY ESSENTIAL TABLET ORAL                          | \$0 (Tier 3)                             | DP                                               |
| <i>one daily multivitamin adult tablet oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>one daily multivitamin/iron tablet oral</i>           | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY ESSENTIAL TABLET ORAL                          | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY FOR HER VITACRAVES TABLET CHEWABLE ORAL        | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY FOR HIM VITACRAVES TABLET CHEWABLE ORAL        | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY JOLLY RANCHER TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| ONE-A-DAY MENS TABLET ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY MENS VITACRAVES TABLET CHEWABLE ORAL               | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY VITACRAVES ADULT TABLET CHEWABLE ORAL              | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY VITACRAVES IMMUNITY TABLET CHEWABLE ORAL           | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY VITACRAVES SOUR TABLET CHEWABLE ORAL               | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY VITACRAVES TABLET CHEWABLE ORAL                    | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY VITACRAVES+OMEGA-3 TABLET CHEWABLE ORAL            | \$0 (Tier 3)                             | DP                                               |
| ONE-A-DAY WOMENS VITACRAVES TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| <i>one-daily multi caps capsule oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>one-daily multi vitamins tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>one-daily multi-vitamin tablet oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>one-daily multi-vitamin/iron tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>one-daily/iron tablet oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| OPTIFAST POST BARIATRIC TABLET CHEWABLE ORAL                 | \$0 (Tier 3)                             | DP                                               |
| OPTIMAL D3 M CAPSULE 350 MCG (14000 UT) ORAL                 | \$0 (Tier 3)                             | DP                                               |
| OPTISOURCE POST BARIATRIC SURG TABLET CHEWABLE ORAL          | \$0 (Tier 3)                             | DP                                               |
| OPURITY BYPASS OPTIMIZED TABLET CHEWABLE ORAL                | \$0 (Tier 3)                             | DP                                               |
| <i>pan-c 500/bioflavonoids tablet oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>pc pediatric poly-vitalfe drop solution 10 mg/ml oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>pc pediatric poly-vitamin drop solution oral</i>          | \$0 (Tier 3)                             | DP                                               |
| PERIDIN-C TABLET 200-50-150 MG ORAL                          | \$0 (Tier 3)                             | DP                                               |
| <i>pharmacist choice d-vitamin liquid 400 unit/ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>phytonadione solution 1 mg/0.5ml injection</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>phytonadione solution 10 mg/ml injection</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>phytonadione tablet 5 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>plain niacin tablet 250 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>plain niacin tablet 500 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| POLY-VI-SOL SOLUTION ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| POLY-VI-SOL/IRON SOLUTION 11 MG/ML ORAL                      | \$0 (Tier 3)                             | DP                                               |
| <i>poly-vita solution oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>poly-vitaliron solution 10 mg/ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>poly-vite pediatric solution oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>poly-viteliron solution 11 mg/ml oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal 19 tablet oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal one daily tablet 27-0.8 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal tablet 27-0.8 mg oral (otc)</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal tablet 28-0.8 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal tablet 6.75-0.2 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal vitamin and mineral tablet 28-0.8 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>prenatal vitamins tablet 28-0.8 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>prenataliron tablet 28-0.8 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| PRESERVISION AREDS 2 CAPSULE ORAL                         | \$0 (Tier 3)                             | DP                                               |
| PRESERVISION AREDS 2 TABLET CHEWABLE ORAL                 | \$0 (Tier 3)                             | DP                                               |
| PRESERVISION AREDS CAPSULE ORAL                           | \$0 (Tier 3)                             | DP                                               |
| PRESERVISION/LUTEIN CAPSULE ORAL                          | \$0 (Tier 3)                             | DP                                               |
| PRORENAL + D W/ OMEGA-3 CAPSULE ORAL                      | \$0 (Tier 3)                             | DP                                               |
| PROTECT CARDIO AF CAPSULE ORAL                            | \$0 (Tier 3)                             | DP                                               |
| PROTECT PLUS SO CAPSULE ORAL                              | \$0 (Tier 3)                             | DP                                               |
| PROTEGRA CAPSULE ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| PUREWAY-C TABLET 500 MG ORAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>px b complex/vitamin c tablet oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| PX CHILDRENS VITAMIN TABLET CHEWABLE 18 MG ORAL           | \$0 (Tier 3)                             | DP                                               |
| <i>px folic acid tablet 400 mcg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>px vitamin c tablet 500 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>px vitamin e capsule 400 unit oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>pyridoxine hcl solution 100 mg/ml injection</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>pyridoxine hcl tablet 25 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>pyridoxine hcl tablet 50 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>qc childrens complete tablet chewable 18 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>qc childrens vitamins/extra c tablet chewable oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>qc daily multivitamins/iron tablet oral</i>            | \$0 (Tier 3)                             | DP                                               |
| QUFLORA FE PEDIATRIC LIQUID 0.25-9.5 MG/ML ORAL           | \$0 (Tier 3)                             | DP                                               |
| QUFLORA FE TABLET CHEWABLE 0.25 MG ORAL                   | \$0 (Tier 3)                             | DP                                               |
| QUFLORA GUMMIES TABLET CHEWABLE 0.125 MG ORAL             | \$0 (Tier 3)                             | DP                                               |
| QUFLORA PEDIATRIC SOLUTION 0.25 MG/ML ORAL                | \$0 (Tier 3)                             | DP                                               |
| QUFLORA PEDIATRIC SOLUTION 0.5 MG/ML ORAL                 | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| QUFLORA PEDIATRIC TABLET CHEWABLE 0.25 MG ORAL                   | \$0 (Tier 3)                             | DP                                               |
| QUFLORA PEDIATRIC TABLET CHEWABLE 0.5 MG ORAL                    | \$0 (Tier 3)                             | DP                                               |
| QUFLORA PEDIATRIC TABLET CHEWABLE 1 MG ORAL                      | \$0 (Tier 3)                             | DP                                               |
| <i>quintabs tablet oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>ra balanced b-100 tablet oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>ra balanced b-50 tablet oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>ra b-complex tablet oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>ra b-complex with b-12 tablet oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>ra biotin capsule 2500 mcg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>ra folic acid tablet 400 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>ra folic acid tablet 800 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>ra niacin tablet 500 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>ra no flush niacin tablet 500 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin a capsule 3 mg (10000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b-1 tablet 100 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b-12 tablet 100 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b12 tablet extended release 2000 mcg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b-12 tr tablet extended release 1000 mcg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b-6 tablet 100 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin b-6 tablet 50 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c cr tablet extended release 500 mg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c tablet 250 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c tablet 500 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c tablet chewable 500 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c/rose hips tablet 1000 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin c/rose hips tablet 500 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin d-3 capsule 125 mcg (5000 ut) oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin d-3 capsule 50 mcg (2000 ut) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamin d-3 tablet 25 mcg (1000 ut) oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>ra vitamins complete childrens tablet chewable 18 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| RADIANCE PLATINUM VITAMIN D3 TABLET 125 MCG (5000 UT) ORAL       | \$0 (Tier 3)                             | DP                                               |
| RENAL CAPSULE 1 MG ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| <i>renal vitamin tablet 0.8 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>rena-vite tablet oral (otc)</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>sb vitamin c tablet 500 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |

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|----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm animal shapes complete tablet chewable 18 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>sm animal shapes kids first tablet chewable oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>sm b super vitamin complex tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm b100 complex tablet oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>sm balanced b-50 tablet oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm b-complex tablet oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>sm b-complex/vitamin c tablet oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm biotin capsule 5000 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>sm chewable vitamin c tablet chewable 500 mg oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>sm folic acid tablet 400 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm multiple vitamins essential tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm multiple vitaminsliron tablet oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm niacin cr tablet extended release 250 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>sm super b complex/c tablet oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm vit c/rose hips tablet 1000 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b complex/vitamin c tablet oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b1 tablet 100 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b-12 tablet 500 mcg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b12 tr tablet extended release 1000 mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b12 tr tablet extended release 2000 mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b6 tablet 100 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin b-6 tablet 100 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c cr tablet extended release 500 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c tablet 1000 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c tablet 250 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c tablet 500 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c tablet chewable 500 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin c/rose hips tablet 500 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin d tablet 10 mcg (400 unit) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin d3 capsule 100 mcg (4000 ut) oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin d3 capsule 50 mcg (2000 ut) oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin d3 capsule 50 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin d3 tablet 25 mcg (1000 ut) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin e capsule 450 mg (1000 ut) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm vitamin e capsule 90 mg (200 unit) oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>span c tablet oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>stress formula (folic acid) tablet oral</i>                 | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>stress formula tablet oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>stress formula/iron tablet oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| STRESSTABS ENERGY TABLET ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| STROVITE ONE TABLET ORAL                                        | \$0 (Tier 3)                             | DP                                               |
| <i>super antioxidant capsule oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>super b complex/fal/vit c tablet oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>super b complex/vitamin c tablet oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>super b-complex + vitamin c tablet oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>super b-complex/vit c/fa tablet oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>super biotin capsule 5000 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>super daily d3 liquid 25 mcg /0.028ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>super daily d3 liquid 50 mcg /0.028ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| SUPER QUINTS B-50 TABLET ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| <i>sv vitamin b-12 er tablet extended release 1000 mcg oral</i> | \$0 (Tier 3)                             | DP                                               |
| SYSTANE ICAPS AREDS2 CAPSULE ORAL                               | \$0 (Tier 3)                             | DP                                               |
| SYSTANE ICAPS AREDS2 TABLET CHEWABLE ORAL                       | \$0 (Tier 3)                             | DP                                               |
| TAB-A-VITE TABLET ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| TAB-A-VITE/BETA CAROTENE TABLET ORAL                            | \$0 (Tier 3)                             | DP                                               |
| <i>tab-a-vite/iron tablet oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| TAB-A-VITE/IRON/BETA CAROTENE TABLET ORAL                       | \$0 (Tier 3)                             | DP                                               |
| THERA TABLET ORAL                                               | \$0 (Tier 3)                             | DP                                               |
| THERA-D 2000 TABLET 50 MCG (2000 UT) ORAL                       | \$0 (Tier 3)                             | DP                                               |
| THERA-D 4000 TABLET 100 MCG (4000 UT) ORAL                      | \$0 (Tier 3)                             | DP                                               |
| THERA-D RAPID REPLETION TABLET 50 MCG (2000 UT) ORAL            | \$0 (Tier 3)                             | DP                                               |
| THERAMILL FORTE CAPSULE ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>thera-tabs tablet oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| THEREMS TABLET ORAL                                             | \$0 (Tier 3)                             | DP                                               |
| <i>thiamine hcl solution 100 mg/ml injection</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>thiamine hcl tablet 100 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>thiamine mononitrate tablet 100 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>triphrocaps capsule 1 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>tri-vite/fluoride solution 0.25 mg/ml oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>tri-vite/fluoride solution 0.5 mg/ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>tropical liquid nutrition liquid oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| UDAMIN SP TABLET ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| ULTRA CHOICE MULTIVITAMIN KIDS TABLET CHEWABLE 18 MG ORAL       | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                    | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| UPSPRING BABY VIT D LIQUID 10 MCG /0.025ML ORAL                 | \$0 (Tier 3)                             | DP                                               |
| <i>v-c forte capsule oral</i>                                   | \$0 (Tier 3)                             | DP                                               |
| VENEXA FE TABLET ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| VENEXA TABLET ORAL                                              | \$0 (Tier 3)                             | DP                                               |
| VIC-FORTE CAPSULE ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| <i>virt-caps capsule 1 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| VIRT-GARD TABLET 2.2-25-1 MG ORAL                               | \$0 (Tier 3)                             | DP                                               |
| <i>vision health capsule oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| VISTA ADVANCED AREDS2 FORMULA CAPSULE ORAL                      | \$0 (Tier 3)                             | DP                                               |
| VISTA ADVANCED DRY EYE FORMULA CAPSULE ORAL                     | \$0 (Tier 3)                             | DP                                               |
| <i>vit e-vit c-beta carotene tablet 200-250-5000 oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>vita c/bioflavonoids/rose hips tablet 1000-30-18 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>vitabex plus capsule oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>vitachew adult multi vitamin tablet chewable oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>vitachew multiple vitamin tablet chewable oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>vitachew vit c citrus burst tablet chewable 125 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| VITAJoy DAILY C GUMMIES TABLET CHEWABLE 125 MG ORAL             | \$0 (Tier 3)                             | DP                                               |
| VITAL-D RX TABLET 1 MG ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| <i>vitalee tablet oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| VITALETS CHILDRENS TABLET CHEWABLE ORAL                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin a capsule 3 mg (10000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b + c complex tablet oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b 12 tablet 500 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b complex tablet oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b1 tablet 100 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-1 tablet 100 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-1 tablet 250 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-1 tablet 50 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 er tablet extended release 1000 mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 er tablet extended release 2000 mcg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b12 tablet 100 mcg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 tablet 100 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 tablet 1000 mcg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 tablet 250 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 tablet 500 mcg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-12 tablet dispersible 5000 mcg oral</i>            | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                       | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>vitamin b12 tr tablet extended release 2000 mcg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b6 tablet 100 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-6 tablet 100 mg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-6 tablet 25 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b6 tablet 250 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b6 tablet 50 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin b-6 tablet 50 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c drops lozenge 60 mg mouth/throat</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c er capsule extended release 500 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c er tablet extended release 1500 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c er tablet extended release 500 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c plus wild rose hips tablet chewable 500 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet 100 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet 1000 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet 250 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet 500 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet chewable 250 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c tablet chewable 500 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c/rose hips tablet 500 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c/rose hips tr tablet extended release 1000 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c-rose hips er tablet extended release 1000 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c-rose hips er tablet extended release 500 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c-rose hips tablet 1000 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c-rose hips tablet 500 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin c-rose hips tr tablet extended release 500 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (cholecalciferol) capsule 10 mcg (400 unit) oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (cholecalciferol) capsule 25 mcg (1000 ut) oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (cholecalciferol) capsule 50 mcg (2000 ut) oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (cholecalciferol) tablet 10 mcg (400 unit) oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (cholecalciferol) tablet 25 mcg (1000 ut) oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (ergocalciferol) capsule 1.25 mg (50000 ut) oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d (ergocalciferol) capsule 50 mcg (2000 ut) oral</i>    | \$0 (Tier 3)                             | DP                                               |

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|-------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>vitamin d capsule 50 mcg (2000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d high potency capsule 25 mcg (1000 ut) oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d infant liquid 10 mcg/ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d liquid 10 mcg/ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d tablet 25 mcg (1000 ut) oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d tablet 50 mcg (2000 ut) oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| VITAMIN D-1000 MAX ST TABLET 25 MCG (1000 UT) ORAL                | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 capsule 10 mcg (400 unit) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 capsule 125 mcg (5000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 capsule 25 mcg (1000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d-3 capsule 25 mcg (1000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 capsule 250 mcg (10000 ut) oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 capsule 50 mcg (2000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| VITAMIN D3 IMMUNE HEALTH LIQUID 25 MCG/10ML ORAL                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 liquid 10 mcg/ml oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 liquid 125 mcg/0.5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 liquid 125 mcg/ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 liquid 25 mcg/spray oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 liquid 30 mcg/15ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 maximum strength capsule 125 mcg (5000 ut) oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 10 mcg (400 unit) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 125 mcg (5000 ut) oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 25 mcg (1000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 25 mcg oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 250 mcg (10000 ut) oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 50 mcg (2000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin d3 tablet 75 mcg (3000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e blend capsule 400 unit oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e capsule 1000 unit oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e capsule 400 unit oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e capsule 450 mg (1000 ut) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e capsule 90 mg (200 unit) oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin e water soluble capsule 450 mg (1000 ut) oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin k1 solution 1 mg/0.5ml injection</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin k1 solution 10 mg/ml injection</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>vitamin-b complex tablet oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>vitamins acd-fluoride solution 0.25 mg/ml oral</i>             | \$0 (Tier 3)                             | DP                                               |

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|----------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>vitamins for hair capsule oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>vitatrum tablet chewable oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| VITRANOL FE TABLET ORAL                                        | \$0 (Tier 3)                             | DP                                               |
| VITRANOL TABLET ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| VITREXATE FE TABLET ORAL                                       | \$0 (Tier 3)                             | DP                                               |
| VITREXATE TABLET ORAL                                          | \$0 (Tier 3)                             | DP                                               |
| VITREXYL + IRON TABLET ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| VITREXYL TABLET ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| <i>vp-vite rx tablet 1 mg oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>westab one tablet 2.5-25-1 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>womens 50+ advanced capsule oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>womens multi capsule oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>womens multi gummies tablet chewable oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>yl folic acid tablet 400 mcg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>yl vitamin b-6 tablet 100 mg oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>yl vitamin c tablet 1000 mg oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>yl vitamin c-rose hips tablet 1000 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>yl vitamin c-rose hips tablet 500 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| YOUR LIFE MULTI ADULT GUMMIES TABLET CHEWABLE ORAL             | \$0 (Tier 3)                             | DP                                               |
| ZOO FRIENDS/EXTRA C TABLET CHEWABLE ORAL                       | \$0 (Tier 3)                             | DP                                               |
| <b>OPHTHALMIC</b>                                              |                                          |                                                  |
| <b>Antiallergics</b>                                           |                                          |                                                  |
| <i>azelastine hcl ophthalmic solution 0.05 %</i>               | \$0 (Tier 1)                             |                                                  |
| <i>cromolyn sodium ophthalmic solution 4 %</i>                 | \$0 (Tier 1)                             |                                                  |
| NAPHCON-A SOLUTION 0.025-0.3 % OPHTHALMIC                      | \$0 (Tier 3)                             | DP                                               |
| OPCON-A SOLUTION 0.027-0.315 % OPHTHALMIC                      | \$0 (Tier 3)                             | DP                                               |
| ZERVIAE OPHTHALMIC SOLUTION 0.24 %                             | \$0 (Tier 2)                             |                                                  |
| <b>Antiglaucoma</b>                                            |                                          |                                                  |
| <i>betaxolol hcl ophthalmic solution 0.5 %</i>                 | \$0 (Tier 1)                             |                                                  |
| BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 %                        | \$0 (Tier 2)                             |                                                  |
| <i>brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %</i>  | \$0 (Tier 1)                             |                                                  |
| <i>brinzolamide ophthalmic suspension 1 %</i>                  | \$0 (Tier 1)                             |                                                  |
| <i>carteolol hcl ophthalmic solution 1 %</i>                   | \$0 (Tier 1)                             |                                                  |
| COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 %                         | \$0 (Tier 2)                             |                                                  |
| <i>dorzolamide hcl ophthalmic solution 2 %</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %</i> | \$0 (Tier 1)                             |                                                  |
| <i>latanoprost ophthalmic solution 0.005 %</i>                 | \$0 (Tier 1)                             |                                                  |

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|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>levobunolol hcl ophthalmic solution 0.5 %</i>                       | \$0 (Tier 1)                             |                                                  |
| LUMIGAN OPHTHALMIC SOLUTION 0.01 %                                     | \$0 (Tier 2)                             |                                                  |
| <i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>               | \$0 (Tier 1)                             |                                                  |
| RHOPRESSA OPHTHALMIC SOLUTION 0.02 %                                   | \$0 (Tier 2)                             |                                                  |
| ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 %                             | \$0 (Tier 2)                             |                                                  |
| SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 %                                | \$0 (Tier 2)                             |                                                  |
| <i>timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %</i>   | \$0 (Tier 1)                             |                                                  |
| <i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>               | \$0 (Tier 1)                             |                                                  |
| VYZULTA OPHTHALMIC SOLUTION 0.024 %                                    | \$0 (Tier 2)                             |                                                  |
| <b>Anti-Infective/Anti-Inflammatory</b>                                |                                          |                                                  |
| <i>bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %</i>           | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1</i>   | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i> | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>         | \$0 (Tier 1)                             |                                                  |
| NEO-POLYCIN HC OPHTHALMIC OINTMENT 1 %                                 | \$0 (Tier 1)                             |                                                  |
| <i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>        | \$0 (Tier 1)                             |                                                  |
| TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %                                 | \$0 (Tier 2)                             |                                                  |
| TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 %                           | \$0 (Tier 2)                             |                                                  |
| <i>tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %</i>        | \$0 (Tier 1)                             |                                                  |
| ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 %                                  | \$0 (Tier 2)                             |                                                  |
| <b>Anti-Infectives</b>                                                 |                                          |                                                  |
| <i>bacitracin ophthalmic ointment 500 unit/gm</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>    | \$0 (Tier 1)                             |                                                  |
| BESIVANCE OPHTHALMIC SUSPENSION 0.6 %                                  | \$0 (Tier 2)                             |                                                  |
| CILOXAN OPHTHALMIC OINTMENT 0.3 %                                      | \$0 (Tier 2)                             |                                                  |
| <i>ciprofloxacin hcl ophthalmic solution 0.3 %</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>erythromycin ophthalmic ointment 5 mg/gm</i>                        | \$0 (Tier 1)                             |                                                  |
| <i>gatifloxacin ophthalmic solution 0.5 %</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>gentamicin sulfate ophthalmic solution 0.3 %</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>moxifloxacin hcl ophthalmic solution 0.5 %</i>                      | \$0 (Tier 1)                             |                                                  |
| NATACYN OPHTHALMIC SUSPENSION 5 %                                      | \$0 (Tier 2)                             |                                                  |

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|--------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>    | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i> | \$0 (Tier 1)                             |                                                  |
| NEO-POLYCIN OPHTHALMIC OINTMENT 3.5-400-10000                            | \$0 (Tier 1)                             |                                                  |
| <i>ofloxacin ophthalmic solution 0.3 %</i>                               | \$0 (Tier 1)                             |                                                  |
| POLYCIN OPHTHALMIC OINTMENT 500-10000 UNIT/GM                            | \$0 (Tier 1)                             |                                                  |
| <i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i>  | \$0 (Tier 1)                             |                                                  |
| <i>sulfacetamide sodium ophthalmic ointment 10 %</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>sulfacetamide sodium ophthalmic solution 10 %</i>                     | \$0 (Tier 1)                             |                                                  |
| <i>tobramycin ophthalmic solution 0.3 %</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>trifluridine ophthalmic solution 1 %</i>                              | \$0 (Tier 1)                             |                                                  |
| ZIRGAN OPHTHALMIC GEL 0.15 %                                             | \$0 (Tier 2)                             |                                                  |
| <b>Anti-Inflammatories</b>                                               |                                          |                                                  |
| ALREX OPHTHALMIC SUSPENSION 0.2 %                                        | \$0 (Tier 2)                             |                                                  |
| <i>bromfenac sodium ophthalmic solution 0.07 %, 0.075 %</i>              | \$0 (Tier 1)                             |                                                  |
| BROMSITE OPHTHALMIC SOLUTION 0.075 %                                     | \$0 (Tier 2)                             |                                                  |
| <i>dexamethasone sodium phosphate ophthalmic solution 0.1 %</i>          | \$0 (Tier 1)                             |                                                  |
| <i>diclofenac sodium ophthalmic solution 0.1 %</i>                       | \$0 (Tier 1)                             |                                                  |
| EYSUVIS OPHTHALMIC SUSPENSION 0.25 %                                     | \$0 (Tier 2)                             |                                                  |
| FLAREX OPHTHALMIC SUSPENSION 0.1 %                                       | \$0 (Tier 2)                             |                                                  |
| <i>fluorometholone ophthalmic suspension 0.1 %</i>                       | \$0 (Tier 1)                             |                                                  |
| <i>flurbiprofen sodium ophthalmic solution 0.03 %</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %</i>           | \$0 (Tier 1)                             |                                                  |
| LOTEMAX OPHTHALMIC OINTMENT 0.5 %                                        | \$0 (Tier 2)                             |                                                  |
| <i>loteprednol etabonate ophthalmic suspension 0.2 %</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>prednisolone acetate ophthalmic suspension 1 %</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>prednisolone sodium phosphate ophthalmic solution 1 %</i>             | \$0 (Tier 2)                             |                                                  |
| PROLENSA OPHTHALMIC SOLUTION 0.07 %                                      | \$0 (Tier 2)                             |                                                  |
| <b>Miscellaneous</b>                                                     |                                          |                                                  |
| ALCON TEARS SOLUTION 0.5 % OPHTHALMIC                                    | \$0 (Tier 3)                             | DP                                               |
| <i>atropine sulfate solution 1 % ophthalmic</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>atropine sulfate solution 1 % ophthalmic</i>                          | \$0 (Tier 2)                             |                                                  |
| CYSTADROPS OPHTHALMIC SOLUTION 0.37 %                                    | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| CYSTARAN OPHTHALMIC SOLUTION 0.44 %                                      | \$0 (Tier 2)                             | PA; LA; NDS                                      |

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| NAME OF DRUG                                                     | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| GENTEAL SEVERE GEL 0.3 % OPHTHALMIC                              | \$0 (Tier 3)                             | DP                                               |
| GENTEAL TEARS MODERATE PF SOLUTION 0.1-0.3 % OPHTHALMIC          | \$0 (Tier 3)                             | DP                                               |
| GENTEAL TEARS SOLUTION 0.1-0.2-0.3 % OPHTHALMIC                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp artificial tears solution 5-6 mg/ml ophthalmic</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp lubricating plus eye drops solution 0.5 % ophthalmic</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense lubricating eye drop solution 0.5 % ophthalmic</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>hm dry eye relief solution 0.2-0.2-1 % ophthalmic</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>hm lubricating tears solution 0.4-0.3 % ophthalmic</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>lubricant eye drops solution 0.4-0.3 % ophthalmic</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>lubricating eye drops solution 0.4-0.3 % ophthalmic</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>lubricating plus eye drops solution 0.5 % ophthalmic</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>lubricating tears eye drops solution 0.1-0.3 % ophthalmic</i> | \$0 (Tier 3)                             | DP                                               |
| MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML                            | \$0 (Tier 2)                             |                                                  |
| MURO 128 OINTMENT 5 % OPHTHALMIC                                 | \$0 (Tier 3)                             | DP                                               |
| MURO 128 SOLUTION 5 % OPHTHALMIC                                 | \$0 (Tier 3)                             | DP                                               |
| <i>polyvinyl alcohol solution 1.4 % ophthalmic (otc)</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>proparacaine hcl ophthalmic solution 0.5 %</i>                | \$0 (Tier 1)                             |                                                  |
| REFRESH CELLUVISC GEL 1 % OPHTHALMIC                             | \$0 (Tier 3)                             | DP                                               |
| REFRESH LIQUIGEL GEL 1 % OPHTHALMIC                              | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE ADVANCED PF SOLUTION 0.5-1-0.5 % OPHTHALMIC       | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE ADVANCED SOLUTION 0.5-1-0.5 % OPHTHALMIC          | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE GEL 1-0.9 % OPHTHALMIC                            | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE MEGA-3 SOLUTION 0.5-1-0.5 % OPHTHALMIC            | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE PF SOLUTION 0.5-0.9 % OPHTHALMIC                  | \$0 (Tier 3)                             | DP                                               |
| REFRESH OPTIVE SOLUTION 0.5-0.9 % OPHTHALMIC                     | \$0 (Tier 3)                             | DP                                               |
| REFRESH PLUS SOLUTION 0.5 % OPHTHALMIC                           | \$0 (Tier 3)                             | DP                                               |
| REFRESH RELIEVA SOLUTION 0.5-0.9 % OPHTHALMIC                    | \$0 (Tier 3)                             | DP                                               |
| REFRESH SOLUTION 1.4-0.6 % OPHTHALMIC                            | \$0 (Tier 3)                             | DP                                               |
| REFRESH TEARS SOLUTION 0.5 % OPHTHALMIC                          | \$0 (Tier 3)                             | DP                                               |
| RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %                    | \$0 (Tier 2)                             |                                                  |
| RESTASIS OPHTHALMIC EMULSION 0.05 %                              | \$0 (Tier 2)                             |                                                  |

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|--------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm lubricant eye drops solution 0.4-0.3 % ophthalmic</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>sm lubricating plus solution 0.5 % ophthalmic</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>sm lubricating tears solution 0.4-0.3 % ophthalmic</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>sodium chloride (hypertonic) solution 5 % ophthalmic</i>              | \$0 (Tier 3)                             | DP                                               |
| SYSTANE BALANCE SOLUTION 0.6 % OPTHALMIC                                 | \$0 (Tier 3)                             | DP                                               |
| SYSTANE COMPLETE SOLUTION 0.6 % OPTHALMIC                                | \$0 (Tier 3)                             | DP                                               |
| SYSTANE GEL 0.4-0.3 % OPTHALMIC                                          | \$0 (Tier 3)                             | DP                                               |
| SYSTANE PRESERVATIVE FREE SOLUTION 0.4-0.3 % OPTHALMIC                   | \$0 (Tier 3)                             | DP                                               |
| SYSTANE SOLUTION 0.4-0.3 % OPTHALMIC                                     | \$0 (Tier 3)                             | DP                                               |
| SYSTANE ULTRA PF SOLUTION 0.4-0.3 % OPTHALMIC                            | \$0 (Tier 3)                             | DP                                               |
| SYSTANE ULTRA SOLUTION 0.4-0.3 % OPTHALMIC                               | \$0 (Tier 3)                             | DP                                               |
| TYRVAYA NASAL SOLUTION 0.03 MG/ACT                                       | \$0 (Tier 2)                             |                                                  |
| <i>ultra lubricating eye drops solution 0.4-0.3 % ophthalmic</i>         | \$0 (Tier 3)                             | DP                                               |
| XIIDRA OPTHALMIC SOLUTION 5 %                                            | \$0 (Tier 2)                             |                                                  |
| <b>OTIC</b>                                                              |                                          |                                                  |
| <b>Otic Agents</b>                                                       |                                          |                                                  |
| <i>acetic acid otic solution 2 %</i>                                     | \$0 (Tier 1)                             |                                                  |
| <i>ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %</i>             | \$0 (Tier 1)                             |                                                  |
| FLAC OTIC OIL 0.01 %                                                     | \$0 (Tier 1)                             |                                                  |
| <i>fluocinolone acetone otic oil 0.01 %</i>                              | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-hc otic solution 1 %</i>                           | \$0 (Tier 1)                             |                                                  |
| <i>neomycin-polymyxin-hc otic suspension 3.5-10000-1</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>ofloxacin otic solution 0.3 %</i>                                     | \$0 (Tier 1)                             |                                                  |
| <b>RESPIRATORY</b>                                                       |                                          |                                                  |
| <b>Anticholinergic/Beta Agonist Combinations</b>                         |                                          |                                                  |
| ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT                      | \$0 (Tier 2)                             | QL (10.7 per 30 days)                            |
| BREZTRI AEROSPHERE AEROSOL 160-9-4.8 MCG/ACT INHALATION                  | \$0 (Tier 2)                             | QL (10.7 per 30 days)                            |
| BREZTRI AEROSPHERE AEROSOL 160-9-4.8 MCG/ACT INHALATION                  | \$0 (Tier 2)                             | QL (23.6 per 28 days)                            |
| COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT            | \$0 (Tier 2)                             | QL (8 per 30 days)                               |

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| NAME OF DRUG                                                                                        | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-----------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml</i>                                 | \$0 (Tier 1)                             | B/D                                              |
| TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <b>Anticholinergics</b>                                                                             |                                          |                                                  |
| ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT                                                 | \$0 (Tier 2)                             | QL (25.8 per 30 days)                            |
| INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT                             | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>ipratropium bromide inhalation solution 0.02 %</i>                                               | \$0 (Tier 1)                             | B/D                                              |
| <i>ipratropium bromide nasal solution 0.03 %, 0.06 %</i>                                            | \$0 (Tier 1)                             |                                                  |
| <b>Antihistamines</b>                                                                               |                                          |                                                  |
| <i>24hr allergy relief tablet 180 mg oral</i>                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>all day allergy childrens solution 5 mg/5ml oral</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>all day allergy tablet 10 mg oral</i>                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>all-day allergy childrens solution 5 mg/5ml oral</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>aller-chlor tablet 4 mg oral</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>allergy 24-hr tablet 180 mg oral</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>allergy childrens liquid 12.5 mg/5ml oral</i>                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>allergy childrens solution 5 mg/5ml oral</i>                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>allergy rel child (loratadine) solution 5 mg/5ml oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief capsule 25 mg oral</i>                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief childrens liquid 12.5 mg/5ml oral</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief childrens solution 1 mg/ml oral</i>                                               | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief tablet 10 mg oral</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief tablet 25 mg oral</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief tablet 4 mg oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief tablet 5 mg oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>allergy tablet 4 mg oral</i>                                                                     | \$0 (Tier 3)                             | DP                                               |
| <i>azelastine hcl nasal solution 0.1 %</i>                                                          | \$0 (Tier 1)                             |                                                  |
| BANOPHEN CAPSULE 25 MG ORAL                                                                         | \$0 (Tier 3)                             | DP                                               |
| BANOPHEN CAPSULE 50 MG ORAL                                                                         | \$0 (Tier 3)                             | DP                                               |
| BANOPHEN TABLET 25 MG ORAL                                                                          | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl allergy child solution 5 mg/5ml oral (otc)</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl childrens alrgy solution 1 mg/ml oral</i>                                         | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl childrens solution 5 mg/5ml oral</i>                                              | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl oral solution 5 mg/5ml</i>                                                        | \$0 (Tier 1)                             | QL (300 per 30 days)                             |
| <i>cetirizine hcl tablet 10 mg oral</i>                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl tablet 5 mg oral</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine hcl tablet chewable 10 mg oral</i>                                                    | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>cetirizine hcl tablet chewable 5 mg oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>childrens loratadine solution 5 mg/5ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>complete allergy medicine capsule 25 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>cyproheptadine hcl oral syrup 2 mg/5ml</i>                | \$0 (Tier 2)                             | PA                                               |
| <i>cyproheptadine hcl oral tablet 4 mg</i>                   | \$0 (Tier 2)                             | PA                                               |
| <i>diphenhydramine hcl capsule 25 mg oral (otc)</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>diphenhydramine hcl capsule 50 mg oral (otc)</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>diphenhydramine hcl childrens liquid 12.5 mg/5ml oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>diphenhydramine hcl injection solution 50 mg/ml</i>       | \$0 (Tier 1)                             |                                                  |
| <i>diphenhydramine hcl liquid 12.5 mg/5ml oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>diphenhydramine hcl tablet 25 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>ed chlorped jr syrup 2 mg/5ml oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>fexofenadine hcl tablet 180 mg oral (otc)</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>fexofenadine hcl tablet 60 mg oral (otc)</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>gnp all day allergy childrens solution 1 mg/ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp all day allergy childrens solution 5 mg/5ml oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp all day allergy tablet 10 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief 24 hr tablet 5 mg oral</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief capsule 25 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief max st liquid 12.5 mg/5ml oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief tablet 180 mg oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief tablet 25 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy relief tablet 4 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy tablet 25 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp childrens allergy liquid 12.5 mg/5ml oral</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp loratadine childrens solution 5 mg/5ml oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>gnp loratadine solution 5 mg/5ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp loratadine tablet 10 mg oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp loratadine tablet dispersible 10 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense all day allergy solution 5 mg/5ml oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense all day allergy tablet 10 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense aller-ease tablet 180 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense allergy relief tablet 10 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>hm all day allergy childrens solution 5 mg/5ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>hm allergy relief (cetirizine) tablet 10 mg oral</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>hm allergy relief capsule 25 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>hm allergy relief tablet 180 mg oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>hm allergy relief tablet 4 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>hm cetirizine hcl tablet 10 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |

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|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>hm loratadine childrens solution 5 mg/5ml oral</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>hm loratadine tablet 10 mg oral</i>                                                                                | \$0 (Tier 3)                             | DP                                               |
| <i>hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml</i>                                                      | \$0 (Tier 2)                             | PA                                               |
| <i>hydroxyzine hcl oral syrup 10 mg/5ml</i>                                                                           | \$0 (Tier 2)                             | PA                                               |
| <i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>                                                                | \$0 (Tier 2)                             | PA                                               |
| <i>hydroxyzine pamoate oral capsule 25 mg, 50 mg</i>                                                                  | \$0 (Tier 2)                             | PA                                               |
| <i>levocetirizine dihydrochloride oral solution 2.5 mg/5ml</i>                                                        | \$0 (Tier 1)                             | QL (300 per 30 days)                             |
| <i>levocetirizine dihydrochloride oral tablet 5 mg</i>                                                                | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>liquid allergy relief liquid 12.5 mg/5ml oral</i>                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine childrens solution 5 mg/5ml oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine childrens tablet chewable 5 mg oral</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine solution 5 mg/5ml oral</i>                                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine tablet 10 mg oral</i>                                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>m-dryl liquid 12.5 mg/5ml oral</i>                                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>pharbedryl capsule 25 mg oral</i>                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>pharbedryl capsule 50 mg oral</i>                                                                                  | \$0 (Tier 3)                             | DP                                               |
| <i>qc all day allergy tablet 10 mg oral</i>                                                                           | \$0 (Tier 3)                             | DP                                               |
| <i>qc allergy childrens liquid 12.5 mg/5ml oral</i>                                                                   | \$0 (Tier 3)                             | DP                                               |
| <i>qc childrens allergy solution 5 mg/5ml oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>qc loratadine allergy relief tablet 10 mg oral</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>siladryl allergy liquid 12.5 mg/5ml oral</i>                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>sm all day allergy childrens solution 5 mg/5ml oral</i>                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm all day allergy tablet 10 mg oral</i>                                                                           | \$0 (Tier 3)                             | DP                                               |
| <i>sm allergy childrens solution 5 mg/5ml oral</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>sm allergy relief tablet 25 mg oral</i>                                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>sm childrens loratadine solution 5 mg/5ml oral</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>sm fexofenadine hcl tablet 180 mg oral</i>                                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>sm fexofenadine hcl tablet 60 mg oral</i>                                                                          | \$0 (Tier 3)                             | DP                                               |
| <i>sm loratadine solution 5 mg/5ml oral</i>                                                                           | \$0 (Tier 3)                             | DP                                               |
| <i>sm loratadine tablet 10 mg oral</i>                                                                                | \$0 (Tier 3)                             | DP                                               |
| <b>Beta Agonists</b>                                                                                                  |                                          |                                                  |
| <i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>                                        | \$0 (Tier 1)                             | QL (17 per 30 days)                              |
| <i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020503)</i>                            | \$0 (Tier 1)                             | QL (13.4 per 30 days)                            |
| <i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020983)</i>                            | \$0 (Tier 1)                             | QL (36 per 30 days)                              |
| <i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml</i> | \$0 (Tier 1)                             | B/D                                              |

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|---------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>albuterol sulfate oral syrup 2 mg/5ml</i>                                                                  | \$0 (Tier 1)                             |                                                  |
| <i>albuterol sulfate oral tablet 2 mg, 4 mg</i>                                                               | \$0 (Tier 1)                             |                                                  |
| <i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i> | \$0 (Tier 1)                             | B/D                                              |
| <i>levalbuterol tartrate inhalation aerosol 45 mcg/act</i>                                                    | \$0 (Tier 1)                             | ST; QL (30 per 30 days)                          |
| SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT                                         | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| <i>terbutaline sulfate oral tablet 2.5 mg, 5 mg</i>                                                           | \$0 (Tier 1)                             |                                                  |
| VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION                                                | \$0 (Tier 2)                             | QL (36 per 30 days)                              |
| VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION                                                | \$0 (Tier 2)                             | QL (48 per 30 days)                              |
| <b>Cough And Cold</b>                                                                                         |                                          |                                                  |
| <i>12 hour decongestant tablet extended release 12 hour 120 mg oral</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>12 hour nasal decongestant solution 0.05 % nasal</i>                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>12 hour nasal decongestant tablet extended release 12 hour 120 mg oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>12 hour nasal spray solution 0.05 % nasal</i>                                                              | \$0 (Tier 3)                             | DP                                               |
| <i>all day allergy d tablet extended release 12 hour 5-120 mg oral</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief d tablet extended release 12 hour 5-120 mg oral</i>                                         | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief d-12 tablet extended release 12 hour 5-120 mg oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief d-24 tablet extended release 24 hour 10-240 mg oral</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief/nasal decongest tablet extended release 12 hour 5-120 mg oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>allergy relief/nasal decongest tablet extended release 24 hour 10-240 mg oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>allergy/congestion relief tablet extended release 12 hour 5-120 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>aquanaz tablet 10-15-400 mg oral</i>                                                                       | \$0 (Tier 3)                             | DP                                               |
| BENZEDREX INHALER NASAL                                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>benzonatate capsule 100 mg oral</i>                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>benzonatate capsule 150 mg oral</i>                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>benzonatate capsule 200 mg oral</i>                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>capcof syrup 5-2-10 mg/5ml oral</i>                                                                        | \$0 (Tier 3)                             | DP                                               |
| <i>cetirizine-pseudoephedrine er tablet extended release 12 hour 5-120 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>chest congestion relief dm syrup 10-100 mg/5ml oral</i>                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>chest congestion relief liquid 100 mg/5ml oral</i>                                                         | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                        | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>childrens mucus relief cough liquid 5-100 mg/5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>coditussin ac liquid 200-10 mg/5ml oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>coditussin dac liquid 30-10-200 mg/5ml oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>cough dm childrens suspension extended release 30 mg/5ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>cough dm suspension extended release 30 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>cvs cough dm suspension extended release 30 mg/5ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| DECONEX IR TABLET 10-385 MG ORAL                                                    | \$0 (Tier 3)                             | DP                                               |
| DELSYM CGH/CHEST CONG DM CHILD LIQUID 5-100 MG/5ML ORAL                             | \$0 (Tier 3)                             | DP                                               |
| DELSYM COUGH CHILDRENS SUSPENSION EXTENDED RELEASE 30 MG/5ML ORAL                   | \$0 (Tier 3)                             | DP                                               |
| DELSYM COUGH/CHEST CONGEST DM LIQUID 5-100 MG/5ML ORAL                              | \$0 (Tier 3)                             | DP                                               |
| DELSYM SUSPENSION EXTENDED RELEASE 30 MG/5ML ORAL                                   | \$0 (Tier 3)                             | DP                                               |
| <i>dextromethorphan hbr capsule 15 mg oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>dextromethorphan polistirex er suspension extended release 30 mg/5ml oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>ed-a-hist dm liquid 10-4-15 mg/5ml oral (otc)</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>eq cough dm suspension extended release 30 mg/5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>gnp all day allergy-d tablet extended release 12 hour 5-120 mg oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy &amp; congestion tablet extended release 24 hour 10-240 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp allergy/congestion relief tablet extended release 24 hour 10-240 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>gnp cough dm er suspension extended release 30 mg/5ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp mucus er tablet extended release 12 hour 1200 mg oral</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>gnp mucus er tablet extended release 12 hour 600 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp mucus relief tablet extended release 12 hour 1200 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nasal decongestant pe tablet 10 mg oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nasal decongestant tablet 30 mg oral</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nasal spray extra moist solution 0.05 % nasal</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>gnp nasal spray fast acting solution 1 % nasal</i>                               | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                         | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|--------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>gnp nasal spray solution 0.05 % nasal</i>                                         | \$0 (Tier 3)                             | DP                                               |
| <i>gnp no drip nasal spray solution 0.05 % nasal</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp pseudoephedrine hcl 12 hr tablet extended release 12 hour 120 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin cf cough &amp; cold syrup 5-10-100 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin cough long acting syrup 15 mg/5ml oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin dm cough liquid 100-10 mg/5ml oral</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin dm liquid 20-200 mg/20ml oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin dm max liquid 20-400 mg/20ml oral</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tussin mucus &amp; chest cong liquid 100 mg/5ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense cough dm childrens suspension extended release 30 mg/5ml oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense cough dm suspension extended release 30 mg/5ml oral</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense mucus er maximum str tablet extended release 12 hour 1200 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense mucus er tablet extended release 12 hour 600 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense mucus relief child liquid 2.5-5-100 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense tussin cf liquid 5-10-100 mg/5ml oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense tussin dm liquid 20-200 mg/20ml oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense tussin dm max liquid 20-400 mg/20ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin er tablet extended release 12 hour 600 mg oral (otc)</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin liquid 100 mg/5ml oral</i>                                            | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin tablet 200 mg oral (otc)</i>                                          | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin-codeine solution 100-10 mg/5ml oral (otc)</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin-codeine solution 200-20 mg/10ml oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>guaifenesin-dm syrup 100-10 mg/5ml oral</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>hm allergy relief/nasal decong tablet extended release 24 hour 10-240 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>hm cough dm suspension extended release 30 mg/5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>hm nasal decongestant 12 hour tablet extended release 12 hour 120 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>hm nasal decongestant pe tablet 10 mg oral</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>hm nose drops solution 1 % nasal</i>                                              | \$0 (Tier 3)                             | DP                                               |
| <b>HYCODAN SOLUTION 5-1.5 MG/5ML ORAL</b>                                            | \$0 (Tier 3)                             | DP                                               |
| <i>hydrocod poli-chlorphe poli er suspension extended release 10-8 mg/5ml oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>hydrocodone bit-homatrop mbr solution 5-1.5 mg/5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |

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|-------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>hydrocodone bit-homatrop mbr tablet 5-1.5 mg oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>hydromet solution 5-1.5 mg/5ml oral</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>lohist-dm syrup 5-2-10 mg/5ml oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine-d 12hr tablet extended release 12 hour 5-120 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| <i>loratadine-d 24hr tablet extended release 24 hour 10-240 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| MAR-COF BP LIQUID 30-2-7.5 MG/5ML ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| MAR-COF CG EXPECTORANT LIQUID 225-7.5 MG/5ML ORAL                       | \$0 (Tier 3)                             | DP                                               |
| MAXIFED TABLET 60-360 MG ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| <i>maxi-tuss ac solution 100-10 mg/5ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>maxi-tuss cd liquid 10-4-10 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>maxi-tuss g liquid 10-100 mg/5ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>maxi-tuss gmx liquid 10-200 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>m-clear wc solution 100-6.33 mg/5ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| M-END PE LIQUID 3.33-1.33-6.33 MG/5ML ORAL                              | \$0 (Tier 3)                             | DP                                               |
| MUCINEX CHILDRENS FREEFROM LIQUID 5-100 MG/5ML ORAL                     | \$0 (Tier 3)                             | DP                                               |
| MUCINEX CHILDRENS STUFFY NOSE SOLUTION 0.05 % NASAL                     | \$0 (Tier 3)                             | DP                                               |
| MUCINEX COUGH CHILDRENS LIQUID 5-100 MG/5ML ORAL                        | \$0 (Tier 3)                             | DP                                               |
| MUCINEX DM TABLET EXTENDED RELEASE 12 HOUR 30-600 MG ORAL (OTC)         | \$0 (Tier 3)                             | DP                                               |
| MUCINEX FAST-MAX CHEST CONG MS LIQUID 400 MG/20ML ORAL                  | \$0 (Tier 3)                             | DP                                               |
| MUCINEX FAST-MAX CONGEST COUGH TABLET 5-10-200 MG ORAL                  | \$0 (Tier 3)                             | DP                                               |
| MUCINEX FAST-MAX DM MAX LIQUID 20-400 MG/20ML ORAL                      | \$0 (Tier 3)                             | DP                                               |
| MUCINEX FREEFROM SEV CNGST/CGH LIQUID 10-20-400 MG/20ML ORAL            | \$0 (Tier 3)                             | DP                                               |
| MUCINEX MAXIMUM STRENGTH TABLET EXTENDED RELEASE 12 HOUR 1200 MG ORAL   | \$0 (Tier 3)                             | DP                                               |
| MUCINEX SINUS-MAX CLEAR & COOL SOLUTION 0.05 % NASAL                    | \$0 (Tier 3)                             | DP                                               |
| MUCINEX TABLET EXTENDED RELEASE 12 HOUR 600 MG ORAL                     | \$0 (Tier 3)                             | DP                                               |
| <i>mucus &amp; chest congestion liquid 100 mg/5ml oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief childrens liquid 2.5-5-100 mg/5ml oral</i>              | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief cough childrens liquid 5-100 mg/5ml oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief dm liquid 20-400 mg/20ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |

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|---------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>mucus relief dm max liquid 20-400 mg/20ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief dm tablet extended release 12 hour 30-600 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief er tablet extended release 12 hour 600 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief max st tablet extended release 12 hour 1200 mg oral</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>mucus relief tablet extended release 12 hour 600 mg oral</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>nasal decongestant pe tablet 10 mg oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>nasal decongestant spray solution 0.05 % nasal</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>nasal decongestant tablet 30 mg oral</i>                               | \$0 (Tier 3)                             | DP                                               |
| <i>nasal four solution 1 % nasal</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>nasal relief solution 0.05 % nasal</i>                                 | \$0 (Tier 3)                             | DP                                               |
| <i>nasal spray 12 hour solution 0.05 % nasal</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>nasal spray extra moisturizing solution 0.05 % nasal</i>               | \$0 (Tier 3)                             | DP                                               |
| NINJACOF-XG LIQUID 200-8 MG/5ML ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| NIVANEX DMX TABLET 10-15-380 MG ORAL                                      | \$0 (Tier 3)                             | DP                                               |
| <i>no drip nasal spray solution 0.05 % nasal</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>nohist-dm liquid 10-4-15 mg/5ml oral (otc)</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>phenylephrine-dm-gg liquid 10-18-200 mg/15ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>phenylephrine-dm-gg tablet 10-17.5-385 mg oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>poly-tussin ac liquid 10-4-10 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| POLY-VENT IR TABLET 60-380 MG ORAL                                        | \$0 (Tier 3)                             | DP                                               |
| <i>promethazine vc/codeine syrup 6.25-5-10 mg/5ml oral</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>promethazine-codeine solution 6.25-10 mg/5ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>promethazine-codeine syrup 6.25-10 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>promethazine-dm syrup 6.25-15 mg/5ml oral</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>pseudoeph-bromphen-dm syrup 30-2-10 mg/5ml oral (rx)</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>pseudoephedrine hcl er tablet extended release 12 hour 120 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>pseudoephedrine hcl tablet 30 mg oral (otc)</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>pseudoephedrine hcl tablet 60 mg oral (otc)</i>                        | \$0 (Tier 3)                             | DP                                               |
| <i>qc loratadine-d tablet extended release 24 hour 10-240 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>qc mucus relief er tablet extended release 12 hour 1200 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>qc mucus relief tablet extended release 12 hour 600 mg oral</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>qc nasal decongestant pe tablet 30 mg oral</i>                         | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>qc suphedrine maximum strength tablet extended release 12 hour 120 mg oral</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>qc tussin cf liquid 5-10-100 mg/5ml oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>qc tussin dm cough/congestion liquid 10-100 mg/5ml oral</i>                       | \$0 (Tier 3)                             | DP                                               |
| <i>qc tussin mucus/congestion liquid 100 mg/5ml oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>qc vapor inhaler inhaler 50 mg inhalation</i>                                     | \$0 (Tier 3)                             | DP                                               |
| <i>robafen cf multi-symptom cold liquid 5-10-100 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| ROBAFEN DM LIQUID 20-200 MG/20ML ORAL                                                | \$0 (Tier 3)                             | DP                                               |
| ROBAFEN MUCUS/CHEST CONGESTION LIQUID 200 MG/10ML ORAL                               | \$0 (Tier 3)                             | DP                                               |
| ROBITUSSIN 12 HOUR COUGH SUSPENSION EXTENDED RELEASE 30 MG/5ML ORAL                  | \$0 (Tier 3)                             | DP                                               |
| <i>rynex pse liquid 1-15 mg/5ml oral</i>                                             | \$0 (Tier 3)                             | DP                                               |
| <i>sb allergy relief/nasal decong tablet extended release 24 hour 10-240 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| <i>siltussin sa liquid 100 mg/5ml oral</i>                                           | \$0 (Tier 3)                             | DP                                               |
| <i>siltussin-dm alcohol free syrup 100-10 mg/5ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>sinus nasal spray solution 0.05 % nasal</i>                                       | \$0 (Tier 3)                             | DP                                               |
| <i>sinus relief extra strength solution 1 % nasal</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>sm all day allergy-d tablet extended release 12 hour 5-120 mg oral</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sm lorata-dine d tablet extended release 24 hour 10-240 mg oral</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>sm mucus relief max strength tablet extended release 12 hour 1200 mg oral</i>     | \$0 (Tier 3)                             | DP                                               |
| <i>sm mucus relief tablet extended release 12 hour 600 mg oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal decongestant max st tablet 30 mg oral</i>                                | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal decongestant pe tablet 10 mg oral</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal spray 12 hour solution 0.05 % nasal</i>                                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal spray moisturizing solution 0.05 % nasal</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal spray sinus solution 0.05 % nasal</i>                                    | \$0 (Tier 3)                             | DP                                               |
| <i>sm nasal spray solution 0.05 % nasal</i>                                          | \$0 (Tier 3)                             | DP                                               |
| <i>sm nose drops nasal decongest solution 1 % nasal</i>                              | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin cf liquid 5-10-100 mg/5ml oral</i>                                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin cough/chest congest liquid 20-200 mg/10ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin cough/chest congest liquid 20-200 mg/20ml oral</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin cough/chest congest syrup 100-10 mg/5ml oral</i>                        | \$0 (Tier 3)                             | DP                                               |

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|----------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>sm tussin dm max liquid 20-400 mg/20ml oral</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin dm syrup 100-10 mg/5ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>sm tussin mucus+chest congest liquid 100 mg/5ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>sodium chloride nebulization solution 7 % inhalation</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>sudogest 12 hour tablet extended release 12 hour 120 mg oral</i>  | \$0 (Tier 3)                             | DP                                               |
| SUDOGEST MAXIMUM STRENGTH TABLET 30 MG ORAL                          | \$0 (Tier 3)                             | DP                                               |
| SUDOGEST TABLET 30 MG ORAL                                           | \$0 (Tier 3)                             | DP                                               |
| SUDOGEST TABLET 60 MG ORAL (OTC)                                     | \$0 (Tier 3)                             | DP                                               |
| <i>suphadrine 12hour tablet extended release 12 hour 120 mg oral</i> | \$0 (Tier 3)                             | DP                                               |
| TUSNEL C SYRUP 30-10-100 MG/5ML ORAL                                 | \$0 (Tier 3)                             | DP                                               |
| <i>tusnel diabetic liquid 10-100 mg/5ml oral</i>                     | \$0 (Tier 3)                             | DP                                               |
| TUSNEL DM LIQUID 10-20-400 MG/5ML ORAL                               | \$0 (Tier 3)                             | DP                                               |
| TUSNEL DM PEDIATRIC LIQUID 2.5-5-75 MG/5ML ORAL                      | \$0 (Tier 3)                             | DP                                               |
| TUSNEL LIQUID 30-15-200 MG/5ML ORAL                                  | \$0 (Tier 3)                             | DP                                               |
| TUSNEL PEDIATRIC LIQUID 15-5-50 MG/5ML ORAL                          | \$0 (Tier 3)                             | DP                                               |
| TUSNEL-DM PEDIATRIC LIQUID 7.5-2.5-25 MG/ML ORAL                     | \$0 (Tier 3)                             | DP                                               |
| TUSNEL-EX LIQUID 100 MG/5ML ORAL                                     | \$0 (Tier 3)                             | DP                                               |
| <i>tussin cf liquid 5-10-100 mg/5ml oral</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>tussin cough syrup 15 mg/5ml oral</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>tussin dm liquid 100-10 mg/5ml oral</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>tussin dm max adult liquid 5-100 mg/5ml oral</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>tussin dm syrup 100-10 mg/5ml oral</i>                            | \$0 (Tier 3)                             | DP                                               |
| <i>tussin mucus &amp; chest congest liquid 100 mg/5ml oral</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>tussin mucus+chest congestion liquid 100 mg/5ml oral</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>tussin multi-symptom cold cf liquid 5-10-100 mg/5ml oral</i>      | \$0 (Tier 3)                             | DP                                               |
| VANATAB DM TABLET 5-9-198 MG ORAL                                    | \$0 (Tier 3)                             | DP                                               |
| <b>Leukotriene Modulators</b>                                        |                                          |                                                  |
| <i>montelukast sodium oral packet 4 mg</i>                           | \$0 (Tier 1)                             |                                                  |
| <i>montelukast sodium oral tablet 10 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>montelukast sodium oral tablet chewable 4 mg, 5 mg</i>            | \$0 (Tier 1)                             |                                                  |
| <i>zafirlukast oral tablet 10 mg, 20 mg</i>                          | \$0 (Tier 1)                             |                                                  |
| <b>Miscellaneous</b>                                                 |                                          |                                                  |
| <i>acetylcysteine inhalation solution 10 %, 20 %</i>                 | \$0 (Tier 1)                             | B/D                                              |
| AEROCHAMBER MINI CHAMBER DEVICE                                      | \$0 (Tier 3)                             | DP                                               |

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| NAME OF DRUG                                                                                    | WHAT THE DRUG WILL COST YOU (TIER LEVEL) | NECESSARY ACTIONS, RESTRICTIONS OR LIMITS ON USE |
|-------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| AEROCHAMBER MV                                                                                  | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLO-VU                                                                         | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLO-VU LARGE                                                                   | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLO-VU MEDIUM                                                                  | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLO-VU SMALL                                                                   | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLO-VU W/MASK                                                                  | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER PLUS FLOW VU                                                                        | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER W/FLOWSIGNAL                                                                        | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER Z-STAT PLUS                                                                         | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER Z-STAT PLUS CHAMBR                                                                  | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER Z-STAT PLUS/LARGE                                                                   | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER Z-STAT PLUS/MEDIUM                                                                  | \$0 (Tier 3)                             | DP                                               |
| AEROCHAMBER Z-STAT PLUS/SMALL                                                                   | \$0 (Tier 3)                             | DP                                               |
| AEROVENT PLUS DEVICE                                                                            | \$0 (Tier 3)                             | DP                                               |
| ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG                                   | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| BRONCHITOL INHALATION CAPSULE 40 MG                                                             | \$0 (Tier 2)                             | PA; LA; QL (560 per 28 days); NDS                |
| CLEVER CHOICE HOLDING CHAMBER DEVICE (OTC)                                                      | \$0 (Tier 3)                             | DP                                               |
| CLEVER CHOICE HOLDING CHAMBER DEVICE (RX)                                                       | \$0 (Tier 3)                             | DP                                               |
| COMPACT SPACE CHAMBER DEVICE                                                                    | \$0 (Tier 3)                             | DP                                               |
| COMPACT SPACE CHAMBER/LG MASK DEVICE                                                            | \$0 (Tier 3)                             | DP                                               |
| COMPACT SPACE CHAMBER/MED MASK DEVICE                                                           | \$0 (Tier 3)                             | DP                                               |
| COMPACT SPACE CHAMBER/SM MASK DEVICE                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>cromolyn sodium aerosol solution 5.2 mg/act nasal</i>                                        | \$0 (Tier 3)                             | DP                                               |
| <i>cromolyn sodium inhalation nebulization solution 20 mg/2ml</i>                               | \$0 (Tier 1)                             | B/D                                              |
| EASIVENT                                                                                        | \$0 (Tier 3)                             | DP                                               |
| EASIVENT MASK LARGE                                                                             | \$0 (Tier 3)                             | DP                                               |
| EASIVENT MASK MEDIUM                                                                            | \$0 (Tier 3)                             | DP                                               |
| EASIVENT MASK SMALL                                                                             | \$0 (Tier 3)                             | DP                                               |
| <i>epinephrine injection solution 0.3 mg/0.3ml</i>                                              | \$0 (Tier 1)                             |                                                  |
| <i>epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml</i> | \$0 (Tier 1)                             |                                                  |
| <i>eq space chamber anti-static device</i>                                                      | \$0 (Tier 3)                             | DP                                               |
| <i>eq space chamber anti-static l device</i>                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>eq space chamber anti-static m device</i>                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>eq space chamber anti-static s device</i>                                                    | \$0 (Tier 3)                             | DP                                               |
| FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML                                        | \$0 (Tier 2)                             | PA; LA; NDS                                      |

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|-----------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML  | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| FLEXICHAMBER DEVICE                                       | \$0 (Tier 3)                             | DP                                               |
| INSPIRACHAMBER/LARGE DEVICE                               | \$0 (Tier 3)                             | DP                                               |
| INSPIRACHAMBER/MEDIUM DEVICE                              | \$0 (Tier 3)                             | DP                                               |
| INSPIRACHAMBER/MOUTHPIECE DEVICE                          | \$0 (Tier 3)                             | DP                                               |
| INSPIRACHAMBER/SMALL DEVICE                               | \$0 (Tier 3)                             | DP                                               |
| INSPIREASE                                                | \$0 (Tier 3)                             | DP                                               |
| KALYDECO ORAL PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| KALYDECO ORAL TABLET 150 MG                               | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| MICROCHAMBER                                              | \$0 (Tier 3)                             | DP                                               |
| MICROCHAMBER DEVICE                                       | \$0 (Tier 3)                             | DP                                               |
| MICROSPACER                                               | \$0 (Tier 3)                             | DP                                               |
| <i>neti pot sinus wash kit 2300-700 mg nasal</i>          | \$0 (Tier 3)                             | DP                                               |
| OFEV ORAL CAPSULE 100 MG, 150 MG                          | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| OPTICHAMBER DIAMOND                                       | \$0 (Tier 3)                             | DP                                               |
| OPTICHAMBER DIAMOND DEVICE                                | \$0 (Tier 3)                             | DP                                               |
| OPTICHAMBER DIAMOND-LG MASK DEVICE                        | \$0 (Tier 3)                             | DP                                               |
| OPTICHAMBER DIAMOND-MD MASK                               | \$0 (Tier 3)                             | DP                                               |
| OPTICHAMBER DIAMOND-SM MASK                               | \$0 (Tier 3)                             | DP                                               |
| ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG      | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG                | \$0 (Tier 2)                             | PA; LA; QL (112 per 28 days); NDS                |
| <i>pirfenidone oral capsule 267 mg</i>                    | \$0 (Tier 2)                             | PA; QL (270 per 30 days); NDS                    |
| <i>pirfenidone oral tablet 267 mg</i>                     | \$0 (Tier 2)                             | PA; QL (270 per 30 days); NDS                    |
| <i>pirfenidone oral tablet 534 mg, 801 mg</i>             | \$0 (Tier 2)                             | PA; QL (90 per 30 days); NDS                     |
| POCKET CHAMBER DEVICE                                     | \$0 (Tier 3)                             | DP                                               |
| POCKET SPACER DEVICE                                      | \$0 (Tier 3)                             | DP                                               |
| <i>pro comfort spacer adult</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>pro comfort spacer child</i>                           | \$0 (Tier 3)                             | DP                                               |
| <i>pro comfort spacer infant device</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>procare spacer/adult mask device</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>procare spacer/child mask device</i>                   | \$0 (Tier 3)                             | DP                                               |
| PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML             | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML                | \$0 (Tier 2)                             | PA; NDS                                          |
| <i>pure comfort spacer chamber device</i>                 | \$0 (Tier 3)                             | DP                                               |
| RITEFLO DEVICE                                            | \$0 (Tier 3)                             | DP                                               |
| <i>roflumilast oral tablet 250 mcg</i>                    | \$0 (Tier 1)                             | QL (56 per 365 days)                             |

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|-------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>roflumilast oral tablet 500 mcg</i>                                                                | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| <i>theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg, 450 mg</i>            | \$0 (Tier 1)                             |                                                  |
| <i>theophylline er oral tablet extended release 24 hour 400 mg, 600 mg</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>theophylline oral elixir 80 mg/15ml</i>                                                            | \$0 (Tier 1)                             |                                                  |
| <i>theophylline oral solution 80 mg/15ml</i>                                                          | \$0 (Tier 1)                             |                                                  |
| TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG                              | \$0 (Tier 2)                             | PA; LA; QL (84 per 28 days); NDS                 |
| TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG                                      | \$0 (Tier 2)                             | PA; LA; QL (56 per 28 days); NDS                 |
| VORTEX VALVED HOLDING CHAMBER DEVICE                                                                  | \$0 (Tier 3)                             | DP                                               |
| XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML                         | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG                                                     | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 4000 MG, 5000 MG                                  | \$0 (Tier 2)                             | PA; LA; NDS                                      |
| <b>Nasal Steroids</b>                                                                                 |                                          |                                                  |
| <i>flunisolide nasal solution 25 mcg/act (0.025%)</i>                                                 | \$0 (Tier 1)                             | QL (75 per 30 days)                              |
| <i>fluticasone propionate nasal suspension 50 mcg/act</i>                                             | \$0 (Tier 1)                             | QL (16 per 30 days)                              |
| XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT                                                            | \$0 (Tier 2)                             | PA; QL (32 per 30 days)                          |
| <b>Steroid Inhalants</b>                                                                              |                                          |                                                  |
| ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT                                                       | \$0 (Tier 2)                             | QL (12.2 per 30 days)                            |
| ALVESCO INHALATION AEROSOL SOLUTION 80 MCG/ACT                                                        | \$0 (Tier 2)                             | QL (18.3 per 30 days)                            |
| ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT       | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| <i>budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml</i>                                       | \$0 (Tier 1)                             | B/D                                              |
| <b>Steroid/Beta-Agonist Combinations</b>                                                              |                                          |                                                  |
| ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT                           | \$0 (Tier 2)                             | QL (12 per 30 days)                              |
| BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH | \$0 (Tier 2)                             | QL (60 per 30 days)                              |
| DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT                                  | \$0 (Tier 2)                             | QL (39 per 30 days)                              |

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|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i> | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT                  | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <b>TOPICAL</b>                                                                                                          |                                          |                                                  |
| <b>Dermatology, Acne</b>                                                                                                |                                          |                                                  |
| ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG                                                                        | \$0 (Tier 1)                             | PA                                               |
| <i>adapalene gel 0.1 % external (otc)</i>                                                                               | \$0 (Tier 3)                             | DP                                               |
| AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 40 MG                                                                              | \$0 (Tier 1)                             | PA                                               |
| BENZEPRO FOAM 5.3 % EXTERNAL                                                                                            | \$0 (Tier 3)                             | DP                                               |
| <i>benzoyl peroxide-erythromycin external gel 5-3 %</i>                                                                 | \$0 (Tier 1)                             | QL (46.6 per 30 days)                            |
| CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG                                                                        | \$0 (Tier 1)                             | PA                                               |
| <i>clindamycin phosphate external gel 1 %, 1 % (twice daily)</i>                                                        | \$0 (Tier 1)                             | QL (75 per 30 days)                              |
| <i>clindamycin phosphate external lotion 1 %</i>                                                                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clindamycin phosphate external solution 1 %</i>                                                                      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| DIFFERIN GEL 0.1 % EXTERNAL (OTC)                                                                                       | \$0 (Tier 3)                             | DP                                               |
| <i>ery external pad 2 %</i>                                                                                             | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>erythromycin external gel 2 %</i>                                                                                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>erythromycin external solution 2 %</i>                                                                               | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>                                                             | \$0 (Tier 1)                             | PA                                               |
| <i>sulfacetamide sodium (acne) external lotion 10 %</i>                                                                 | \$0 (Tier 1)                             | QL (118 per 30 days)                             |
| <i>tretinoin external cream 0.025 %, 0.05 %, 0.1 %</i>                                                                  | \$0 (Tier 1)                             | PA; QL (45 per 30 days)                          |
| <i>tretinoin external gel 0.01 %, 0.025 %</i>                                                                           | \$0 (Tier 1)                             | PA; QL (45 per 30 days)                          |
| ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG                                                                        | \$0 (Tier 1)                             | PA                                               |
| <b>Dermatology, Antibiotics</b>                                                                                         |                                          |                                                  |
| <i>bacitracin ointment 500 unit/gm external</i>                                                                         | \$0 (Tier 3)                             | DP                                               |
| <i>bacitracin zinc ointment 500 unit/gm external</i>                                                                    | \$0 (Tier 3)                             | DP                                               |
| <i>bacitracin zinc-aloe ointment 500 unit/gm external</i>                                                               | \$0 (Tier 3)                             | DP                                               |
| <i>gentamicin sulfate external cream 0.1 %</i>                                                                          | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>gentamicin sulfate external ointment 0.1 %</i>                                                                       | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>gnp bacitracin zinc ointment 500 unit/gm external</i>                                                                | \$0 (Tier 3)                             | DP                                               |
| <i>gnp triple antibiotic ointment external</i>                                                                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp triple antibiotic plus ointment 1 % external</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>goodsense first aid antibiotic ointment external</i>                                                                 | \$0 (Tier 3)                             | DP                                               |
| <i>hm bacitracin zinc ointment 500 unit/gm external</i>                                                                 | \$0 (Tier 3)                             | DP                                               |

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|---------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>hm triple antibiotic max st ointment 1 % external</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>hm triple antibiotic ointment 3.5-400-5000 external</i>    | \$0 (Tier 3)                             | DP                                               |
| <i>mupirocin external ointment 2 %</i>                        | \$0 (Tier 1)                             | QL (220 per 30 days)                             |
| <i>qc triple antibiotic max st ointment 1 % external</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>silver sulfadiazine external cream 1 %</i>                 | \$0 (Tier 1)                             |                                                  |
| <i>sm antibiotic ointment 500 unit/gm external</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>sm triple antibiotic max st ointment 1 % external</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>sm triple antibiotic ointment 3.5-400-5000 external</i>    | \$0 (Tier 3)                             | DP                                               |
| SSD EXTERNAL CREAM 1 %                                        | \$0 (Tier 1)                             |                                                  |
| SULFAMYLON EXTERNAL CREAM 85 MG/GM                            | \$0 (Tier 2)                             | QL (453.6 per 30 days)                           |
| <i>triple antibiotic ointment 3.5-400-5000 external</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>triple antibiotic ointment external</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>triple antibiotic plus ointment 1 % external</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>triple antibiotic+pain relief ointment 1 % external</i>    | \$0 (Tier 3)                             | DP                                               |
| <b>Dermatology, Antifungals</b>                               |                                          |                                                  |
| <i>antifungal (clotrimazole) cream 1 % external</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>antifungal (tolnaftate) cream 1 % external</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>antifungal clotrimazole cream 1 % external</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>anti-fungal cream 1 % external</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>antifungal powder 2 % external</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>athletes foot (clotrimazole) cream 1 % external</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>athletes foot (terbinafine) cream 1 % external</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>athletes foot powder spray aerosol powder 1 % external</i> | \$0 (Tier 3)                             | DP                                               |
| <i>baza antifungal cream 2 % external</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>butenafine hcl cream 1 % external</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>castellani paint modified liquid 1.5 % external</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>ciclopirox olamine external cream 0.77 %</i>               | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>ciclopirox olamine external suspension 0.77 %</i>          | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clotrimazole anti-fungal cream 1 % external (otc)</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>clotrimazole cream 1 % external (otc)</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>clotrimazole external cream 1 %</i>                        | \$0 (Tier 1)                             | QL (45 per 30 days)                              |
| <i>clotrimazole external solution 1 %</i>                     | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clotrimazole solution 1 % external (otc)</i>               | \$0 (Tier 3)                             | DP                                               |
| <i>clotrimazole-betamethasone external cream 1-0.05 %</i>     | \$0 (Tier 1)                             | QL (45 per 30 days)                              |
| DESENEX POWDER 2 % EXTERNAL                                   | \$0 (Tier 3)                             | DP                                               |
| FUNGOID TINCTURE SOLUTION 2 % EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp athletes foot cream 1 % external</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>gnp terbinafine hydrochloride cream 1 % external</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>gnp tolnaftate cream 1 % external</i>                      | \$0 (Tier 3)                             | DP                                               |

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|--------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>ketoconazole external cream 2 %</i>                       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| KLAYESTA EXTERNAL POWDER 100000 UNIT/GM                      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>miconazole nitrate cream 2 % external (otc)</i>           | \$0 (Tier 3)                             | DP                                               |
| NYAMYC EXTERNAL POWDER 100000 UNIT/GM                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>nystatin external cream 100000 unit/gm</i>                | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>nystatin external ointment 100000 unit/gm</i>             | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| <i>nystatin external powder 100000 unit/gm</i>               | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| NYSTOP EXTERNAL POWDER 100000 UNIT/GM                        | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>qc antifungal (tolnaftate) cream 1 % external</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>qc tolnaftate cream 1 % external</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm antifungal clotrimazole cream 1 % external</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>sm antifungal miconazole cream 2 % external</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>sm antifungal tolnaftate cream 1 % external</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>sm athletes foot cream 1 % external</i>                   | \$0 (Tier 3)                             | DP                                               |
| <i>terbinafine hcl cream 1 % external</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>tolnaftate cream 1 % external</i>                         | \$0 (Tier 3)                             | DP                                               |
| <i>tolnaftate powder 1 % external</i>                        | \$0 (Tier 3)                             | DP                                               |
| TRIPLE PASTE AF OINTMENT 2 % EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| ZEASORB-AF POWDER 2 % EXTERNAL                               | \$0 (Tier 3)                             | DP                                               |
| <b>Dermatology, Antipsoriatics</b>                           |                                          |                                                  |
| <i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>          | \$0 (Tier 1)                             | PA                                               |
| <i>calcipotriene external cream 0.005 %</i>                  | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>calcipotriene external ointment 0.005 %</i>               | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>calcipotriene external solution 0.005 %</i>               | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| CALCITRENE EXTERNAL OINTMENT 0.005 %                         | \$0 (Tier 1)                             | PA; QL (120 per 30 days)                         |
| <i>tazarotene external cream 0.1 %</i>                       | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| TAZORAC EXTERNAL CREAM 0.05 %                                | \$0 (Tier 2)                             | PA; QL (60 per 30 days)                          |
| <b>Dermatology, Antiseborrheics</b>                          |                                          |                                                  |
| <i>ketoconazole external shampoo 2 %</i>                     | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>selenium sulfide external lotion 2.5 %</i>                | \$0 (Tier 1)                             |                                                  |
| <b>Dermatology, Corticosteroids</b>                          |                                          |                                                  |
| <i>ala-cort external cream 1 %, 2.5 %</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>alclometasone dipropionate external cream 0.05 %</i>      | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>alclometasone dipropionate external ointment 0.05 %</i>   | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>betamethasone dipropionate aug external cream 0.05 %</i>  | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone dipropionate aug external gel 0.05 %</i>    | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone dipropionate aug external lotion 0.05 %</i> | \$0 (Tier 1)                             | QL (120 per 30 days)                             |

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|------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>betamethasone dipropionate aug external ointment 0.05 %</i>         | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone dipropionate external cream 0.05 %</i>                | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone dipropionate external lotion 0.05 %</i>               | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone dipropionate external ointment 0.05 %</i>             | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone valerate external cream 0.1 %</i>                     | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone valerate external lotion 0.1 %</i>                    | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>betamethasone valerate external ointment 0.1 %</i>                  | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>clobetasol propionate e external cream 0.05 %</i>                   | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clobetasol propionate external cream 0.05 %</i>                     | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clobetasol propionate external gel 0.05 %</i>                       | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clobetasol propionate external ointment 0.05 %</i>                  | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>clobetasol propionate external solution 0.05 %</i>                  | \$0 (Tier 1)                             | QL (50 per 30 days)                              |
| ENSTILAR EXTERNAL FOAM 0.005-0.064 %                                   | \$0 (Tier 2)                             | PA; QL (120 per 30 days)                         |
| <i>fluocinolone acetonide body external oil 0.01 %</i>                 | \$0 (Tier 1)                             | QL (118.28 per 30 days)                          |
| <i>fluocinolone acetonide external cream 0.01 %</i>                    | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>fluocinolone acetonide external cream 0.025 %</i>                   | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>fluocinolone acetonide external ointment 0.025 %</i>                | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>fluocinolone acetonide external solution 0.01 %</i>                 | \$0 (Tier 1)                             | QL (90 per 30 days)                              |
| <i>fluocinolone acetonide scalp external oil 0.01 %</i>                | \$0 (Tier 1)                             | QL (118.28 per 30 days)                          |
| <i>fluocinonide emulsified base external cream 0.05 %</i>              | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>fluocinonide external cream 0.05 %</i>                              | \$0 (Tier 1)                             | QL (120 per 30 days)                             |
| <i>fluocinonide external gel 0.05 %</i>                                | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>fluocinonide external ointment 0.05 %</i>                           | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>fluocinonide external solution 0.05 %</i>                           | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| <i>fluticasone propionate external cream 0.05 %</i>                    | \$0 (Tier 1)                             |                                                  |
| <i>fluticasone propionate external ointment 0.005 %</i>                | \$0 (Tier 1)                             |                                                  |
| <i>halobetasol propionate external cream 0.05 %</i>                    | \$0 (Tier 1)                             | QL (50 per 30 days)                              |
| <i>halobetasol propionate external ointment 0.05 %</i>                 | \$0 (Tier 1)                             | QL (50 per 30 days)                              |
| <i>hydrocortisone external cream 1 %, 2.5 %</i>                        | \$0 (Tier 1)                             |                                                  |
| <i>hydrocortisone external lotion 2.5 %</i>                            | \$0 (Tier 1)                             |                                                  |
| <i>hydrocortisone external ointment 2.5 %</i>                          | \$0 (Tier 1)                             |                                                  |
| <i>mometasone furoate external cream 0.1 %</i>                         | \$0 (Tier 1)                             |                                                  |
| <i>mometasone furoate external ointment 0.1 %</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>mometasone furoate external solution 0.1 %</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %</i>    | \$0 (Tier 1)                             | QL (454 per 30 days)                             |
| <i>triamcinolone acetonide external lotion 0.025 %, 0.1 %</i>          | \$0 (Tier 1)                             |                                                  |
| <i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i> | \$0 (Tier 1)                             |                                                  |

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|------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <b>Dermatology, Local Anesthetics</b>                      |                                          |                                                  |
| GLYDO EXTERNAL PREFILLED SYRINGE 2 %                       | \$0 (Tier 1)                             | PA; QL (60 per 30 days)                          |
| <i>lidocaine external ointment 5 %</i>                     | \$0 (Tier 1)                             | PA; QL (50 per 30 days)                          |
| <i>lidocaine external patch 5 %</i>                        | \$0 (Tier 1)                             | PA; QL (3 per 1 day)                             |
| <i>lidocaine hcl external solution 4 %</i>                 | \$0 (Tier 1)                             | PA; QL (50 per 30 days)                          |
| <i>lidocaine-prilocaine external cream 2.5-2.5 %</i>       | \$0 (Tier 1)                             | B/D; QL (30 per 30 days)                         |
| LIDOCAN EXTERNAL PATCH 5 %                                 | \$0 (Tier 1)                             | PA; QL (3 per 1 day)                             |
| <b>Dermatology, Miscellaneous Skin And Mucous Membrane</b> |                                          |                                                  |
| <i>ammonium lactate cream 12 % external (otc)</i>          | \$0 (Tier 3)                             | DP                                               |
| <i>ammonium lactate external cream 12 %</i>                | \$0 (Tier 1)                             |                                                  |
| <i>ammonium lactate external lotion 12 %</i>               | \$0 (Tier 1)                             |                                                  |
| <i>ammonium lactate lotion 12 % external (otc)</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>anti-itch cream 2-0.1 % external</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>antiseptic skin cleanser solution 4 % external</i>      | \$0 (Tier 3)                             | DP                                               |
| AQUA GLYCOLIC FACE CREAM EXTERNAL                          | \$0 (Tier 3)                             | DP                                               |
| <i>arthritis pain relieving cream 0.075 % external</i>     | \$0 (Tier 3)                             | DP                                               |
| BANOPHEN CREAM 2-0.1 % EXTERNAL                            | \$0 (Tier 3)                             | DP                                               |
| BASLE CREAM EXTERNAL                                       | \$0 (Tier 3)                             | DP                                               |
| <i>benzoin tincture external (otc)</i>                     | \$0 (Tier 3)                             | DP                                               |
| <i>beta care cream external</i>                            | \$0 (Tier 3)                             | DP                                               |
| BETA XMA CREAM EXTERNAL                                    | \$0 (Tier 3)                             | DP                                               |
| <i>bexarotene external gel 1 %</i>                         | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |
| <i>calamine phenolated lotion external</i>                 | \$0 (Tier 3)                             | DP                                               |
| <i>calamine-zinc oxide lotion 8-8 % external</i>           | \$0 (Tier 3)                             | DP                                               |
| CALMOSEPTINE OINTMENT 0.44-20.6 % EXTERNAL                 | \$0 (Tier 3)                             | DP                                               |
| <i>capsaicin cream 0.025 % external</i>                    | \$0 (Tier 3)                             | DP                                               |
| <i>capsaicin cream 0.1 % external</i>                      | \$0 (Tier 3)                             | DP                                               |
| <i>capsaicin pain relief cream 0.1 % external</i>          | \$0 (Tier 3)                             | DP                                               |
| CERAVE MOISTURIZING CREAM EXTERNAL                         | \$0 (Tier 3)                             | DP                                               |
| CERAVE SA ROUGH & BUMPY SKIN CREAM EXTERNAL                | \$0 (Tier 3)                             | DP                                               |
| CETAPHIL MOISTURIZING CREAM EXTERNAL                       | \$0 (Tier 3)                             | DP                                               |
| CETAPHIL THERAPEUTIC HAND CREAM EXTERNAL                   | \$0 (Tier 3)                             | DP                                               |
| CLORPACTIN POWDER 2 GM                                     | \$0 (Tier 3)                             | DP                                               |
| <i>coconut oil beauty cream external</i>                   | \$0 (Tier 3)                             | DP                                               |
| DERMABASE CREAM EXTERNAL                                   | \$0 (Tier 3)                             | DP                                               |
| DIABETIDERM CREAM EXTERNAL                                 | \$0 (Tier 3)                             | DP                                               |

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|------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| DIABETIDERM FOOT REJUVENATING CREAM EXTERNAL               | \$0 (Tier 3)                             | DP                                               |
| <i>diclofenac sodium external gel 1 %</i>                  | \$0 (Tier 1)                             | QL (1000 per 30 days)                            |
| <i>diphenhydramine-zinc acetate cream 2-0.1 % external</i> | \$0 (Tier 3)                             | DP                                               |
| DML FORTE CREAM EXTERNAL                                   | \$0 (Tier 3)                             | DP                                               |
| DYNA-HEX 4 SOLUTION 4 % EXTERNAL                           | \$0 (Tier 3)                             | DP                                               |
| EMOLLIA-CREME CREAM EXTERNAL                               | \$0 (Tier 3)                             | DP                                               |
| <i>eq therapeutic moisturizing cream external</i>          | \$0 (Tier 3)                             | DP                                               |
| EUCERIN ADVANCED REPAIR HAND CREAM EXTERNAL                | \$0 (Tier 3)                             | DP                                               |
| EUCERIN CALMING DAILY MOIST CREAM EXTERNAL                 | \$0 (Tier 3)                             | DP                                               |
| EUCERIN PLUS CREAM 2.5-10 % EXTERNAL                       | \$0 (Tier 3)                             | DP                                               |
| EUCERIN SKIN CALMING CREAM EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>first aid antiseptic ointment 10 % external</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>fluorouracil external cream 5 %</i>                     | \$0 (Tier 1)                             | QL (40 per 30 days)                              |
| <i>fluorouracil external solution 2 %, 5 %</i>             | \$0 (Tier 1)                             | QL (10 per 30 days)                              |
| <i>gnp anti-itch cream 2-0.1 % external</i>                | \$0 (Tier 3)                             | DP                                               |
| <i>gnp antiseptic skin cleanser solution 4 % external</i>  | \$0 (Tier 3)                             | DP                                               |
| GOLD BOND ULTIMATE HEALING CREAM EXTERNAL                  | \$0 (Tier 3)                             | DP                                               |
| <i>hm antiseptic skin cleanser solution 4 % external</i>   | \$0 (Tier 3)                             | DP                                               |
| <i>hm lidocaine patch patch 4 % external</i>               | \$0 (Tier 3)                             | DP                                               |
| HYDRASYN25 CREAM EXTERNAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>hydrocortisone (perianal) external cream 1 %, 2.5 %</i> | \$0 (Tier 1)                             |                                                  |
| <i>imiquimod external cream 5 %</i>                        | \$0 (Tier 1)                             | QL (24 per 30 days)                              |
| <i>itch relief extra strength cream 2-0.1 % external</i>   | \$0 (Tier 3)                             | DP                                               |
| KERADAN CREAM EXTERNAL                                     | \$0 (Tier 3)                             | DP                                               |
| KERR TRIPLE DYE SWABS SWAB EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| LAC-HYDRIN FIVE LOTION 5 % EXTERNAL                        | \$0 (Tier 3)                             | DP                                               |
| <i>leader finger cream cream external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>lidocaine pain relief patch 4 % external</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>lidocaine pain relieving patch 4 % external</i>         | \$0 (Tier 3)                             | DP                                               |
| <i>metronidazole external cream 0.75 %</i>                 | \$0 (Tier 1)                             | QL (45 per 30 days)                              |
| <i>metronidazole external gel 0.75 %</i>                   | \$0 (Tier 1)                             | QL (45 per 30 days)                              |
| <i>metronidazole external lotion 0.75 %</i>                | \$0 (Tier 1)                             | QL (59 per 30 days)                              |
| <i>moisturizing cream cream external</i>                   | \$0 (Tier 3)                             | DP                                               |
| NEUTROGENA HAND CREAM EXTERNAL                             | \$0 (Tier 3)                             | DP                                               |
| <i>nitroglycerin rectal ointment 0.4 %</i>                 | \$0 (Tier 1)                             | QL (30 per 30 days)                              |
| NUTRADERM CREAM EXTERNAL                                   | \$0 (Tier 3)                             | DP                                               |
| PANRETIN EXTERNAL GEL 0.1 %                                | \$0 (Tier 2)                             | PA; QL (60 per 30 days); NDS                     |

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| PEN-KERA CREAM EXTERNAL                                        | \$0 (Tier 3)                             | DP                                               |
| PENTRAVAN CREAM EXTERNAL                                       | \$0 (Tier 3)                             | DP                                               |
| PENTRAVAN PLUS CREAM EXTERNAL                                  | \$0 (Tier 3)                             | DP                                               |
| <i>podofilox external solution 0.5 %</i>                       | \$0 (Tier 1)                             | QL (7 per 28 days)                               |
| <i>povidone-iodine solution 10 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| PRETTY FEET/HANDS CREAM EXTERNAL                               | \$0 (Tier 3)                             | DP                                               |
| PROCTO-MED HC EXTERNAL CREAM 2.5 %                             | \$0 (Tier 1)                             |                                                  |
| PROCTOSOL HC EXTERNAL CREAM 2.5 %                              | \$0 (Tier 1)                             |                                                  |
| PROCTOZONE-HC EXTERNAL CREAM 2.5 %                             | \$0 (Tier 1)                             |                                                  |
| <i>qc calamine lotion external</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>qc povidone iodine solution 10 % external</i>               | \$0 (Tier 3)                             | DP                                               |
| RECTIV RECTAL OINTMENT 0.4 %                                   | \$0 (Tier 2)                             | QL (30 per 30 days)                              |
| RISABAL-PH CREAM EXTERNAL                                      | \$0 (Tier 3)                             | DP                                               |
| <i>sm anti-itch extra strength cream 2-0.1 % external</i>      | \$0 (Tier 3)                             | DP                                               |
| <i>sm antiseptic skin cleanser solution 4 % external</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>sm calamine lotion external</i>                             | \$0 (Tier 3)                             | DP                                               |
| <i>sm calamine phenolated lotion external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>sm povidone-iodine solution 10 % external</i>               | \$0 (Tier 3)                             | DP                                               |
| SORBOLENE CREAM EXTERNAL                                       | \$0 (Tier 3)                             | DP                                               |
| STUDIO 35 MOISTURIZING SKIN CREAM EXTERNAL                     | \$0 (Tier 3)                             | DP                                               |
| <i>tacrolimus external ointment 0.03 %, 0.1 %</i>              | \$0 (Tier 1)                             | QL (100 per 30 days)                             |
| <i>therapeutic moisturizing cream external</i>                 | \$0 (Tier 3)                             | DP                                               |
| VALCHLOR EXTERNAL GEL 0.016 %                                  | \$0 (Tier 2)                             | PA; LA; QL (60 per 30 days); NDS                 |
| VANICREAM CREAM EXTERNAL                                       | \$0 (Tier 3)                             | DP                                               |
| VELVACHOL CREAM EXTERNAL                                       | \$0 (Tier 3)                             | DP                                               |
| XERAC AC SOLUTION 6.25 % EXTERNAL                              | \$0 (Tier 3)                             | DP                                               |
| <i>zinc oxide ointment 20 % external</i>                       | \$0 (Tier 3)                             | DP                                               |
| ZOSTRIX NATURAL PAIN RELIEF CREAM 0.033 % EXTERNAL             | \$0 (Tier 3)                             | DP                                               |
| <b>Dermatology, Scabicides And Pediculides</b>                 |                                          |                                                  |
| <i>cvs lice treatment liquid 1 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>eq lice killing max st shampoo 0.33-4 % external</i>        | \$0 (Tier 3)                             | DP                                               |
| <i>gnp lice treatment liquid 1 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>gnp lice treatment shampoo 0.33-4 % external</i>            | \$0 (Tier 3)                             | DP                                               |
| <i>lice killing maximum strength shampoo 0.33-4 % external</i> | \$0 (Tier 3)                             | DP                                               |
| <i>lice killing shampoo 0.33-4 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>lice killing shampoo 4-0.33 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <i>lice treatment creme rinse liquid 1 % external</i>          | \$0 (Tier 3)                             | DP                                               |

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|---------------------------------------------------------------|------------------------------------------|--------------------------------------------------|
| <i>malathion external lotion 0.5 %</i>                        | \$0 (Tier 1)                             | QL (59 per 30 days)                              |
| <i>permethrin external cream 5 %</i>                          | \$0 (Tier 1)                             | QL (60 per 30 days)                              |
| RID LICE KILLING SHAMPOO SHAMPOO 0.33-4 % EXTERNAL            | \$0 (Tier 3)                             | DP                                               |
| <i>sb lice killing max st shampoo 0.33-4 % external</i>       | \$0 (Tier 3)                             | DP                                               |
| <i>sm lice killing max strength shampoo 0.33-4 % external</i> | \$0 (Tier 3)                             | DP                                               |
| <i>sm lice treatment liquid 1 % external</i>                  | \$0 (Tier 3)                             | DP                                               |
| <b>Dermatology, Wound Care Agents</b>                         |                                          |                                                  |
| REGRANEX EXTERNAL GEL 0.01 %                                  | \$0 (Tier 2)                             | PA; QL (30 per 30 days); NDS                     |
| SANTYL EXTERNAL OINTMENT 250 UNIT/GM                          | \$0 (Tier 2)                             | QL (180 per 30 days)                             |
| <i>sodium chloride irrigation solution 0.9 %</i>              | \$0 (Tier 1)                             |                                                  |
| <i>sterile water for irrigation irrigation solution</i>       | \$0 (Tier 1)                             |                                                  |
| <b>Mouth/Throat/Dental Agents</b>                             |                                          |                                                  |
| <i>cevimeline hcl oral capsule 30 mg</i>                      | \$0 (Tier 1)                             |                                                  |
| <i>chlorhexidine gluconate mouth/throat solution 0.12 %</i>   | \$0 (Tier 1)                             |                                                  |
| <i>clotrimazole mouth/throat troche 10 mg</i>                 | \$0 (Tier 1)                             | QL (150 per 30 days)                             |
| KOURZEQ MOUTH/THROAT PASTE 0.1 %                              | \$0 (Tier 1)                             |                                                  |
| <i>lidocaine viscous hcl mouth/throat solution 2 %</i>        | \$0 (Tier 1)                             |                                                  |
| <i>nystatin mouth/throat suspension 100000 unit/ml</i>        | \$0 (Tier 1)                             |                                                  |
| ORASEP SOLUTION 2-0.5-0.1 % MOUTH/THROAT                      | \$0 (Tier 3)                             | DP                                               |
| PERIOGARD MOUTH/THROAT SOLUTION 0.12 %                        | \$0 (Tier 1)                             |                                                  |
| PERIOMED CONCENTRATE 0.63 % MOUTH/THROAT                      | \$0 (Tier 3)                             | DP                                               |
| <i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>               | \$0 (Tier 1)                             |                                                  |
| <i>triamcinolone acetonide mouth/throat paste 0.1 %</i>       | \$0 (Tier 1)                             |                                                  |
| <b>Otic</b>                                                   |                                          |                                                  |
| <i>ear drops solution 6.5 % otic</i>                          | \$0 (Tier 3)                             | DP                                               |
| <i>gnp earwax removal drops solution 6.5 % otic</i>           | \$0 (Tier 3)                             | DP                                               |
| <i>gnp earwax removal kit solution 6.5 % otic</i>             | \$0 (Tier 3)                             | DP                                               |
| <i>sm ear drops solution 6.5 % otic</i>                       | \$0 (Tier 3)                             | DP                                               |

PA - Prior Authorization QL - Quantity Limits ST - Step Therapy B/D - Covered under Medicare B or D LA - Limited Access NDS - Non-Extended Days Supply DP - The drug is not a Part D drug

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**Neighborhood INTEGRITY (Medicare-Medicaid Plan)**  
**2024 Formulary: List of Covered Drugs**

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## Multi-Language Insert

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**Spanish:** Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-844-812-6896 (TTY 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

**Chinese Mandarin:** 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-844-812-6896 (TTY 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

**Chinese Cantonese:** 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-844-812-6896 (TTY 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

**Tagalog:** Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-844-812-6896 (TTY 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-844-812-6896 (TTY 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-844-812-6896 (TTY 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-844-812-6896 (TTY 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-844-812-6896 (TTY 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-844-812-6896 (TTY 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

**Arabic:** إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على الرقم 1-844-812-6896 (TTY 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

**Hindi:** हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-844-812-6896 (TTY 711) पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-844-812-6896 (TTY 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

**Português:** Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-844-812-6896 (TTY 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

**French Creole:** Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-844-812-6896 (TTY 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

**Polish:** Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-844-812-6896 (TTY 711). Ta usługa jest bezpłatna.

**Japanese:** 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-844-812-6896 (TTY 711)にお電話ください。日本語を話す人 者 が支援いたします。これは無料のサービスです。

**Khmer:** យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដើម្បីឆ្លើយរាល់សំណួរដែលអ្នកអាចមានអំពីគម្រោងសុខភាព និងថ្នាំរបស់យើងខ្ញុំ។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ គ្រាន់តែហៅទូរសព្ទមកយើងខ្ញុំតាមរយៈលេខ 1-844-812-6896 (TTY 711)។ អ្នកដែលនិយាយខ្មែរជួយអ្នកបាន។ នេះជាសេវាកម្មឥតគិតថ្លៃ។