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2017 Aetna Pharmacy Drug Guide

Four Tier Open Aetna Commercial

(Self Insured and Custom Fully Insured Plans)

www.aetna.com



Do you have questions?

Call the toll-free number on your member ID card. Or visit www.aetna.com/formulary for the most up-to-date information.

Dear Member:

We are pleased to provide you with a copy of our 2017 Aetna Pharmacy drug guide that includes information about your pharmacy benefits plan. Take this guide with you when you see your doctor if you want to talk about what medicines are covered under your plan and what they may cost.

Many commonly prescribed drugs are listed in this guide.

Note: this is not a complete list of drugs covered under your plan. We list only the most commonly prescribed medicines as thousands of drugs are covered by your plan.

Want to learn more your plan's drug coverage? Just visit the website on your member ID card and log in to your account.

What pharmacy benefits plan do I have?

You are enrolled in the Aetna Commercial Four Tier Open Formulary for self insured and custom fully insured plans.

Here's what that means to you:

Think of **tier** as a level. **Four Tier** means you could pay four different amounts, depending on the drug you take.

A **formulary** is a list of generic and brand-name drugs that your plan covers. An **open formulary** means your plan covers most prescription drugs. But it may not cover some others.

What can I expect to pay?

With this health benefits and health insurance plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percent of the prescription's price. Each drug your plan covers falls under a different level or tier. The lower the tier, the lower the price. The higher the tier, the higher the price.

What you pay falls into one of these tiers or levels:

Tier One: You pay **the lowest cost** for drugs in this level. Your plan may include an additional benefit where some Tier 1 drugs would be provided at an even lower cost to you. These are considered Value Drugs/Tier 1a and include generics and some over-the-counter brand and generic products. These would be available at the lowest cost share indicated in your plan materials.

Tier Two: You pay **a slightly higher cost** for drugs in this level.

Tier Three: You pay **the highest cost** for drugs in this level.

Tier Four: You pay **a higher cost** for specialty drugs in this level. Specialty prescription drugs typically include high-cost drugs that require special handling, special storage or monitoring and include but are not limited to oral, topical, inhaled and injected ways of giving them.

To find your exact costs

Check your Plan Design and Benefits summary in your enrollment kit.

Your pharmacy benefits plan may include a program that encourages you to choose a generic drug over a brand-name drug to help reduce what you pay. This means that if you fill a brand-name drug when a generic is available, that in addition to your standard copay or coinsurance, you must also pay the difference in cost between the brand-name and generic drug.

For a summary of your pharmacy benefits plan, including out-of-pocket costs, visit the website on your member ID card and log in to your account. Or call the toll-free number on your member ID card.



Where can I find more formulary information?

You and your doctor can search for a drug, find out if it's covered and see what tier it's in. You can also see if there are alternatives that cost less. **Tell your doctor that you pay more for tier four drugs** so he or she can consider this when writing a prescription.

Visit www.aetna.com/formulary. You arrive at a page that says "Find a Medication." This is where you can learn more about the types of drug coverage reviews required for your medicine(s); things like precertification, step therapy or quantity limits. You will arrive at a menu page where you can view various drug lists, including your Aetna Pharmacy drug guide and more.

How is the formulary developed?

Aetna's Pharmacy and Therapeutics (P&T) Committee meets regularly to review new drugs and new information about drugs that are already on the market. It reviews available information concerning safety, effectiveness and current use in therapy. The P&T Committee reviews scientific evidence, including relevant findings of federal government agencies, pharmaceutical manufacturers, medical professional associations, national commissions and peer-reviewed journals.

Our P&T Committee includes licensed pharmacists and doctors, including those who are currently in practice and others who are Aetna employees. All committee members must tell us if they are in a situation that can create a conflict of interest or if they have a financial stake that might affect their decisions.

Once the P&T Committee completes its clinical review, we also consider overall value (including cost and manufacturer rebate arrangements) and other factors before adding or removing a drug from the formulary. The Aetna Pharmacy drug guide shows you recent changes to the guide. For example, it could show what drugs started requiring coverage reviews like precertification, step therapy or quantity limits. Or which drugs no longer do. The P&T Committee can make recommendations to change the tier level of a drug or to place it on our Formulary Exclusions List, designating it as a drug that is no longer covered.

Why is the formulary subject to change?

We may add or remove drugs for certain reasons. We might also move a drug from one coverage tier to another.

Here are some reasons why:

- As brand-name drugs lose their patents and generic versions become available, the brand-name may be covered at a higher out-of-pocket cost while the generic may be covered at a lower out-of-pocket cost.
- The U.S. Food and Drug Administration (FDA) approves many new drugs throughout the year.
- Drugs can be withdrawn from the market or may become available without a prescription. Over-the-counter (OTC) drugs are not generally covered under a prescription plan, unless required by law.

Our website, www.aetna.com/formulary, reflects the most up-to-date formulary information – so please visit it often.

Why do some drugs require prior authorization or precertification?

This drug coverage review encourages appropriate and cost-effective use of prescription drugs by allowing coverage only when certain conditions are met.

Reasons for precertification include:

- Compliance with dosing guidelines
- Avoiding duplicate therapies
- Helping health care providers check that a drug is being used based on generally accepted medical criteria

The precertification program is based on current medical findings, FDA-approved manufacturer labeling information, and cost and manufacturer rebate arrangements.

If your plan requires precertification, you will find a list of drugs that are subject to precertification with this guide. Please keep in mind that:

- Your doctor must contact Aetna to request approval of coverage for these drugs.
- If we approve the request, we will notify your doctor. The drug will then be covered at the applicable out-of-pocket cost under your plan. You will also be notified of approvals where the state requires notification to members.

If the request is denied, you and your doctor will be notified. You can still purchase the drug, but for the full price.

Medical exceptions for non-covered drugs

In certain circumstances*, You or your prescriber can request a medical exception for a non-covered drug. To submit a request, call our Precertification Department at 1-855-582-2025, or fax a request to 1-855-330-1716. You also can mail a written request to CVS Health, ATTN: Aetna PA, 1300 E. Campbell Rd., Richardson, TX 75081. If the request is expedited a coverage determination will be made within 24 hours of receiving the request, and notify you or your prescriber of our decision. All medically necessary outpatient prescription drugs will be covered. If a medical exception is approved the member is responsible for the highest applicable copay after deductible depending upon the members pharmacy plan design.

Why do some drugs have quantity limits?

This drug coverage review limits coverage of quantities for certain drugs. These limits help your doctor and pharmacist check that your prescribed drug is used correctly and safely.

We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- **Dose Efficiency Edits** – Limit coverage of prescriptions to one dose per day for drugs that are approved for once-daily dosing.
- **Maximum Daily Dose** – A message is sent to the pharmacy if a prescription is less than the minimum or higher than the maximum allowed dose.
- **Quantity Limits Over Time** – Limit coverage of prescriptions to a specific number of units in a defined amount of time.

What is step therapy?

This drug coverage review promotes the appropriate use of equally effective but lower-cost drugs first. These lower-cost drugs are FDA-approved and treat the same condition as the corresponding step therapy drugs.

What is therapeutic duplication?

Therapeutic duplication means that two or more drugs of the same type are prescribed at the same time. This can occur when two doctors prescribe similar drugs or when your doctor switches from one drug to another drug in the same class without cancelling the first prescription.

It is rare that you should ever need two drugs from the same class to treat a medical condition. Since serious side effects may occur, we help bring such duplications to your pharmacist's and doctor's attention.

Learn more about drug coverage reviews

If you have a medical need for a drug that requires precertification, quantity limits or step therapy, your doctor can ask for a medical exception. The list of drugs requiring precertification, quantity limits or step therapy is subject to change. Find the most up-to-date information at www.aetna.com/formulary.

You may be able to save with generic drugs

Generic drugs are approved by FDA and proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name drugs. The difference is that generics may be a different color, shape or size.

When appropriate, your doctor may decide to prescribe, or allow substitution with, a generic drug. Please talk to your doctor to find out if a generic is right for you.

Saving on prescriptions

Here are some other tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Pharmacy Drug (formulary) Guide.
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Check to see if your plan includes our mail-order pharmacy service. Depending upon your plan, mail order may save you money. See Aetna Rx Home Delivery in this guide for details.
- Remind your doctor to check your plan to make sure you get maximum coverage.

*These circumstances exist when you are suffering from a health condition that may seriously jeopardize your life, health, or ability to regain maximum function, or undergoing a current course of treatment using a non-covered drug.

What is Aetna Rx Home Delivery?

Check your plan documents to see if your plan includes our Aetna Rx Home Delivery mail order pharmacy. It fills prescriptions for maintenance medicine. This type of medicine is used regularly, to treat conditions like arthritis, asthma, diabetes or high cholesterol. If you need this type of drug, you can get up to a 90-day supply, or the maximum supply allowed by your plan, and free delivery right to your mailbox.

You also get:

- Quick, confidential service
- Free standard shipping
- Pharmacists who check all prescriptions for accuracy and can answer questions any time

It's easy and fast to order – choose one of these ways:

- 1. CourtesyStartSM** – Fill your new mail order prescription online by visiting the website on your member ID card and logging in to your account. Or, call us toll-free at 1-888-RX AETNA (1-888-792-3862) or TDD: 1-800-823-6373. We will contact your doctor to try and get a new prescription for you. You may need to schedule a visit with your doctor before he or she will write a new prescription.
- 2. Mail** – Get a new 90-day prescription from your doctor. Mail it to us with a completed order form. Access the order form online. You'll find it by visiting the website on your member ID card.
- 3. Fax** – Ask your doctor to fax your new prescription, with your completed order form to 1-877-270-3317. Make sure your doctor includes your member ID number, your date of birth and your mailing address on the fax cover sheet. Only a doctor may fax a prescription.

If your prescription is for a controlled medicine, a written prescription from your doctor may be needed.

Generally, if your order is complete, you will receive your medicine within 10-14 days from when Aetna Rx Home Delivery receives your order. You can request expedited delivery for an additional charge.

What is Aetna Specialty Pharmacy?

Aetna Specialty Pharmacy is Aetna's in-house specialty pharmacy. It can fill your prescription specialty medicine. These types of drugs may be injected, infused or taken by mouth. Specialty medicine often needs special storage and handling. It must be delivered quickly. And a nurse or pharmacist should monitor you during your treatment. Use Aetna Specialty Pharmacy to get this medicine sent right to your mailbox. You also get:

- Free delivery that is reliable, secure and sent anywhere you choose
- Extra help when you need it – like injection training and side effect monitoring
- Refill reminders
- Proactive outreach to confirm your refills
- Free standard supplies
- Nurses and pharmacists to help 24 hours a day, every day

It's easy and fast to order – choose one of these ways:

- **Fax** – Your doctor can fax your prescription to **1-866-FAX-ASRX (1-866-329-2779)**.
- **Mail** – You or your doctor can mail your prescription order to: Aetna Specialty Pharmacy, 503 Sunport Lane, Orlando, FL 32809. If you mail in your own prescription, please send it along with a completed Patient Profile Form. Find the form at www.AetnaSpecialtyRx.com by clicking on "Specialty pharmacy: How to enroll."
- **Phone** – Your doctor can also call and speak to one of our registered pharmacists at **1-866-782-ASRX (1-866-782-2779)** during normal business hours of 8 a.m. until 7 p.m. ET.

To transfer an existing prescription order and have it filled by Aetna Specialty Pharmacy, call toll-free at **1-866-353-1892**.

Nondiscrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,
P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),
1-800-648-7817, TTY: 711,
Fax: 859-425-3379 (CA HMO customers: 860-262-7705), CRCoordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company, Coventry Health Care plans and their affiliates (Aetna).

TTY: 711

For language assistance in your language call the number listed on your ID card at no cost. (English)

Para obtener asistencia lingüística en español, llame sin cargo al número que figura en su tarjeta de identificación. (Spanish)

欲取得繁體中文語言協助，請撥打您 ID 卡上所列的號碼，無需付費。(Chinese)

Pour une assistance linguistique en français appeler le numéro indiqué sur votre carte d'identité sans frais. (French)

Para sa tulong sa wika na nasa Tagalog, tawagan ang nakalistang numero sa iyong ID card nang walang bayad. (Tagalog)

T'áá shí shizaad k'ehjí bee shiká a' doowoł nínízingo ÍDiné k'ehjíÓ naaltsoos bee atah nílįigo nanitinígíí béesh bee hane'é bikáá' áají' t'áá jíík'e hółne'. (Navajo)

Benötigen Sie Hilfe oder Informationen auf Deutsch? Rufen Sie kostenlos die auf Ihrer Versicherungskarte aufgeführte Nummer an. (German)

Për asistencë në gjuhën shqipe telefononi falas në numrin e regjistruar në kartën tuaj të identitetit (ID). (Albanian)

ለአማርኛ ቋንቋ እገዛ በመታወቅያዎ ላይ በተጠቀሰው ቁጥር በነጻ ይደውሉ (Amharic)

للمساعدة في (اللغة العربية)، الرجاء الاتصال على الرقم المجاني المذكور في بطاقتك التعريفية. (Arabic)

Լեզվի ցուցաբերած աջակցություն (հայերեն) Ձանգահարեք թիվը նշված է ձեր ID քարտի առանց գնով: (Armenian)

Niba urondera uwugufasha mu Kirundi, twakure ku busa ku inomeri iri ku ikarata karangamuntu yawe. (Bantu-Kirundi)

Alang sa pag-abag sa pinulongan sa (Binisayang Sinugboanon) tawga ang numero nga gilista sa imong kard sa kailhanan nga walay bayad. (Bisayan-Visayan)

বাংলায় ভাষা সহায়তার জন্য আপনার আইডি কার্ডে যে নম্বরটি তালিকাভুক্ত রয়েছে বিনামূল্যে তাতে কল করুন। (Bengali-Bangala)

ငွေကုန်ကျခံစရာမလိုဘဲ (မြန်မာဘာသာစကား) ဖြင့် ဘာသာစကားအကူအညီရယူရန် သင့်အိုင်ဒီကတ် ပေါ်တွင် ပေးထားသည့်ဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။ (Burmese)

Per rebre assistència en (català), truqui al número de telèfon gratuït que apareix a la seva targeta d'identificació. (Catalan)

Para ayuda gi fino' (Chamoru), ágang l numiru ni mangaige gi iyo-mu 'ID card', sin gástu.. (Chamorro)

Θεωρῶ τὸ Ἑλληνοῦς Ἰθακῶν (GWY) ὁμιλοῦντὸς ἑαυτὸν ὡς ἄνθρωπο ὁμιλοῦντὸς τὴν ἑλληνικὴν γλῶσσην. (Cherokee)

(Chahta) anumpa ya apela a chi bvnna hokmvt chj holisso kallo iskitini ma holhtena yvt takanli. Na aivlli keyu hq ish l paya hinla. (Choctaw)

Tajaajila afaan Oromiffa argachuuf lakkoofsota bilbilaa waraqaa eenyummaa keessan irra jiran irratti bilisaan bilbilaa. (Cushite)

Bel voor tolk- en vertaaldiensten in het Nederlands gratis naar het nummer dat op uw identiteitskaart vermeld staat. (Dutch)

Pou jwenn asistans nan lang Kreyòl Ayisyen, rele nimewo a yo endike nan kat idantifikasyon ou gratis. (French Creole)

Για γλωσσική βοήθεια στα Ελληνικά καλέστε χωρίς χρέωση τον αριθμό που αναγράφεται στην κάρτα αναγνώρισης. (Greek)

(Gujarati) ગુજરાતીમાં ભાષા સહાય માટે તમારા આઈડી કાર્ડ પર લખેલ નંબર પર કોઈ ખર્ચ વગર કોલ કરો.

No ke kōkua ma ka ‘ōlelo Hawai‘i e kahea aku i ka helu kelepona ma kāu kaleka ID, kāki ‘ole ‘ia kēia kōkua nei. (Hawaiian)

(Hindi) हिन्दी में भाषा सहायता के लिए, अपने आईडी कार्ड पर दिये गये नम्बर पर मुफ्त कॉल करें।

Yog xav tau kev pab txhais lus Hmoob hu dawb tau rau tus xov tooj ntawm koj daim npav. (Hmong)

Maka enyemaka asusu na Igbo kpononmba edeputara na kaadi ID gi na akwughị ugwo o bula. (Ibo)

Para iti tulong ti pagsasao iti pagsasao tawagan ti numero a nakalista iti ID card yo nga awan ti bayadan yo. (Ilocano)

Untuk bantuan dalam bahasa Indonesia, silakan hubungi nomor yang tercantum di kartu ID Anda tanpa dikenakan biaya. (Indonesian)

Per ricevere assistenza linguistica in italiano, può chiamare gratuitamente il numero riportato sulla Sua scheda identificativa. (Italian)

日本語で援助をご希望の方は、IDカードに記載されている番号まで無料でお電話ください。(Japanese)

လားရှိုးဘာသာစကားတို့အတွက် ကျင့်စဉ်အား အကူအညီအတွက် အလေးအနက်အားဖြင့် လားရှိုးဘာသာစကားတို့အတွက် (Karen)

한국어로 언어 지원을 받고 싶으시면 보험 ID 카드에 수록된 무료 통화번호로 전화해 주십시오. (Korean)

Bé n̄ ké gbo-kpá-kpá dyé dé Bāsóò wùdùün wēē, dǎ nòbà bé ɔ cééà bó n̄ dyí-dyoìn-bě̀ kōē bó pídyi.
(Kru-Bassa)

بو وەرگرتتی رینوینی پیوهندیدار به زمان به زمان به زمان به زمانه ی خۆراییی نووسراو له کارتیی پیناسی خۆتاندا پهیوهندی بکهن. (Kurdish)

ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນການເປັນພາສາລາວ,
ກະລຸນາໂທຫາໜ້າຂອງພວກເຮົາໃນບັດປະຈຳຕົວຂອງທ່ານໂດຍບໍ່ສອບຄຳໂທ. (Laotian)

तील भाषा (मराठी) सहाय्यासाठी तुमच्या आयडी कार्डवर सूचिबद्ध करण्यात आलेल्या क्रमांकावर
कोणत्याही खर्चाशिवाय कॉल करा. (Marathi)

Ñan bōk jipañ ilo Kajin Majol kwon kallok nōmba eo ej walok ilo kaat in ID eo aṃ ejjelok wōnān.
(Marshallese)

Ohng palien sawas en soun kawewe ni omw lokaia Ponape koahl nempe me sansal pohn noumw ID
koard ni sohte isais. (Micronesian-Pohnpeian)

សម្រាប់ជំនួយភាសាជា ភាសាខ្មែរ
សូមទូរស័ព្ទតាមលេខដែលមាននៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នកដោយឥតគិតថ្លៃ។ (Mon-Khmer,
Cambodian)

(नेपाली) मा निःशुल्क भाषा सहायता पाउनका लागि तपाईंको परिचय-पत्रमा उल्लेख गरिएको नम्बरमा फोन
गर्नुहोस् । (Nepali)

Tën kuwoony ë thok ë Thuwɔŋjǎŋ cɔl akuën cī reec ë kaaddu këu kecīn aɣöc. (Nilotic-Dinka)

For språkassistanse på norsk, ring nummeret på ID-kortet ditt kostnadsfritt. (Norwegian)

Fer Hefle in Deitsch, ruf die Fonnummer aa die uff dei ID Kaarde iss. Es Aaruf koschtet nix.
(Pennsylvania Dutch)

برای راهنمایی به زبان فارسی، بدون هیچ هزینه ای با شماره ای که بر روی کارت شناسایی شما آمده است تماس بگیرید. انگلیسی
(Persian)

Aby uzyskać pomoc w języku polskim, zadzwoń bezpłatnie pod numer podany na karcie ID. (Polish)

Para obter assistência linguística em português ligue para o número grátis listado no seu cartão de
identificação. (Portuguese)

(Punjabi) ਪੰਜਾਬੀ ਵਿੱਚ ਭਾਸ਼ਾਈ ਸਹਾਇਤਾ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ।

Pentru asistență lingvistică în românește telefonați la numărul gratuit indicat pe cardul dvs. de membru de
la Aetna. (Romanian)

Чтобы получить помощь русскоязычного переводчика, позвоните по бесплатному номеру, указанному в вашей ID-карте удостоверения личности. (Russian)

Mo fesoasoani tau gagana I le Gagana Samoa vala'au le numera o lo'o lisiina I luga o lau pepa ID e aunoa ma se totogi. (Samoan)

Za jezičnu pomoć na hrvatskom jeziku pozovite besplatan broj naveden na poledini Vaše identifikacijske kartice. (Serbo-Croatian)

Fii yo on hefu balal e ko yowitii e haala Pular noddee e dñi numero ji lintaađi ka kaydi dantite mon. Njodi woo fawaaki on. (Sudanic-Fulfulde)

Ukikitaji usaidizi katika lugha ya Kiswahili piga simu kwa nambari iliyoorodheshwa kwenye Kitambulisho chako bila malipo. (Swahili)

ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ

(Syriac-Assyrian). ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ ܕܡܘܫܐ ܕܥܘܠܡܐ

భాషతో సాయం కొరకు ఎలాంటి ఖర్చు లేకుండా మీ ఐడి కార్డు మీద ఉన్న నెంబరుకు కాల్ చేయండి. (తెలుగు) (Telugu)

สำหรับความช่วยเหลือทางด้านภาษาเป็น (ภาษาไทย) โทรหมายเลขที่แสดงไว้บนบัตรประจำตัวของท่าน หากไม่มีคำให้จ่าย (Thai)

Kapau 'oku fiema'u hā tōkoni 'i he lea faka-Tonga telefoni ki he fika 'oku lisi 'i ho'o kaati ID 'o 'ikai hā tōtōngi (Tongan)

Ren áninnisin chiakú ren (Kapasen Chuuk) kopwe kékkéeri ena nampaan tengewa aa makketiw wóon noumw ena chéén taropween ID nge esapw kamé ngonuk. (Turkese)

(Dilde) dil yardım için sayı hiçbir ücret ödmeden kimlik kartı listelenen diyoruz. (Turkish)

Щоб отримати допомогу перекладача української мови, зателефонуйте за безкоштовним номером, наданим у вашій ID-картці посвідчення особи. (Ukrainian)

اردو میں لسانی معاونت کے لیے اپنے ID کارڈ پر درج نمبر پر مفت کال کریں۔ (Urdu)

Để được hỗ trợ ngôn ngữ bằng (ngôn ngữ), hãy gọi miễn phí đến số được ghi trên thẻ ID của quý vị. (Vietnamese)

פאר שפראך הילף אין אידיש רופט דעם נומער וואס שטייט אויף אייער אידענטיטעט קארטל פון אפאצאל.
(Yiddish)

Fún iránlọwọ nípa èdè (Yorùbá) pe nọmbà tí a kọ sórí káàdi idánimọ ẹ lái san owó kankan rárá. (Yoruba)

Need more information?

Visit www.aetna.com/formulary or call the appropriate toll-free number on your member ID card.

Please note that if your prescription drug benefits plan changes, the information herein may no longer apply.

A copayment is a flat fee. Coinsurance is a percentage of the rate that Aetna negotiates with the plan sponsor for covered prescriptions except as required by law to be otherwise. Some drugs on the Preferred Drug List are subject to manufacturer rebates. Coinsurance is calculated before any rebates are subtracted. That means it may be possible for your cost of a preferred drug to be higher than your cost of a non-preferred drug.

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products. Aetna Pharmacy Management refers to an internal business unit of Aetna Health Management, LLC. Aetna Specialty Pharmacy refers to Aetna Specialty Pharmacy, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy that operates through specialty pharmacy prescription fulfillment.

Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Pharmacy Drug (formulary) Guide. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Information is subject to change. For more information about Aetna plans, refer to www.aetna.com.

The drugs on the Pharmacy Drug (formulary) Guide, Formulary Exclusions, Precertification, Quantity Limit and Step Therapy Lists are subject to change. The quantity limits and step therapy drug coverage review programs are not available in all service areas. For example, step therapy programs do not apply to fully-insured members in Indiana. Step therapy does not apply to fully-insured members in New Jersey. However, these programs are available to self-funded plans.

In accordance with state law, commercial fully-insured members in Louisiana and Texas (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added or removed from the Pharmacy Drug (formulary) Guide, Precertification, Quantity Limits or Step-Therapy Lists during the plan year will continue to have those medications covered at the same benefit level until their plan's renewal date. In Texas, precertification approval is known as "pre-service utilization review." It is not "verification" as defined by Texas law.

In accordance with state law, fully-insured Commercial California HMO members (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added to the Precertification or Step-therapy Lists will continue to have those medications covered, for as long as the treating physician continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. In accordance with state law, fully-insured Commercial Connecticut PPO members (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added to the Precertification or Step-therapy Lists will continue to have those medications covered for as long as the treating physician prescribes them, provided the drug is medically necessary and more medically beneficial than other covered drugs. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. For more information about Aetna plans, refer to www.aetna.com.

www.aetna.com

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2017 Aetna Pharmacy Drug Guide - Four Tier Open Commercial Self Insured Formulary

CURRENT AS OF 12/1/2017

Drug Details

= Brand-name drug expected to become available generically in the near future. After the generic drug becomes available, the brand-name drug may be covered at a higher non-preferred copay and/or added to the Formulary Exclusion List. The brand-name drug may also be subject to precertification and/or step-therapy.

AL = Age Limit

MA = Step Therapy does not apply to members residing in Massachusetts.

N1 = Refer to member plan documents for Erectile Dysfunction use/coverage.

PA = Prior Authorization

QL = Quantity Limit

SP = You may pay higher out of pocket costs and may be required to get these products at an Aetna Specialty Pharmacy network provider, like Aetna Specialty Pharmacy. Specialty products are limited to a 30 day supply.

ST = Step Therapy

Drug Status

CE = Copay Exception: Available to some members at no cost with a prescription from your provider when obtained at an in-network pharmacy. Certain limitations may apply.

Tier 1 = Generic

Tier 2 = Preferred Brand

Tier 3 = Non-Preferred Brand

Tier 4 = Tier 4

lowercase italics = Generic drugs

UPPERCASE = Brand name drugs

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| *ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS* | | |
| ADDERALL | Tier 3 | ST; QL |
| ADDERALL XR | Tier 3 | ST; QL |
| ADZENYS XR-ODT | Tier 3 | PA; ST; QL |
| <i>amphetamine-dextroamphet er</i> | Tier 1 | QL |
| <i>amphetamine-dextroamphetamine</i> | Tier 1 | QL |
| APTENSIO XR | Tier 3 | PA; ST; QL |
| <i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i> | Tier 1 | PA; QL |
| <i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>caffeine citrate oral</i> | Tier 1 | |
| <i>clonidine hcl er</i> | Tier 1 | PA; QL |
| CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG | Tier 3 | ST; QL |
| COTEMPLA XR-ODT | Tier 3 | PA; ST; QL |
| DAYTRANA | Tier 3 | PA; ST; #; QL |
| DESOXYN | Tier 3 | PA; ST; QL |
| DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | ST; QL |
| <i>dexmethylphenidate hcl</i> | Tier 1 | QL |
| <i>dexmethylphenidate hcl er</i> | Tier 1 | QL |
| <i>dextroamphetamine sulfate er</i> | Tier 1 | QL |
| <i>dextroamphetamine sulfate oral solution</i> | Tier 1 | QL |
| <i>dextroamphetamine sulfate oral tablet</i> | Tier 1 | QL |
| DYANAVAL XR | Tier 3 | PA; ST; QL |
| EVEKEO | Tier 3 | PA; ST; QL |
| FOCALIN | Tier 3 | ST; QL |
| FOCALIN XR | Tier 3 | ST; QL |
| <i>guanfacine hcl er</i> | Tier 1 | PA; QL |
| INTUNIV | Tier 3 | PA; ST; QL |
| KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR | Tier 3 | PA; ST; QL |
| METADATE ER ORAL TABLET EXTENDED RELEASE 20 MG | Tier 1 | QL |
| <i>methamphetamine hcl</i> | Tier 1 | QL |
| METHYLIN ORAL SOLUTION 10 MG/5ML, 5 MG/5ML | Tier 3 | ST; QL |
| <i>methylphenidate hcl er (cd)</i> | Tier 1 | QL |
| <i>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg</i> | Tier 1 | QL |
| <i>methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 36 mg, 54 mg</i> | Tier 1 | QL |
| <i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg</i> | Tier 1 | QL |
| <i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>methylphenidate hcl oral tablet</i> | Tier 1 | QL |
| <i>methylphenidate hcl oral tablet chewable</i> | Tier 1 | QL |
| <i>modafinil</i> | Tier 1 | PA; QL |
| MYDAYIS | Tier 3 | PA; ST; QL |
| NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG | Tier 3 | PA; #; QL |
| PROCENTRA | Tier 3 | PA; ST; QL |
| PROVIGIL | Tier 3 | PA; QL |
| QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 30 MG, 40 MG | Tier 3 | PA; ST; QL |
| QUILLIVANT XR | Tier 3 | PA; ST; QL |
| RITALIN | Tier 3 | ST; QL |
| RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG | Tier 3 | ST; #; QL |
| RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG | Tier 3 | ST; QL |
| STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG | Tier 3 | ST; #; QL |
| VYVANSE | Tier 2 | QL |
| ZENZEDI ORAL TABLET 10 MG, 5 MG | Tier 1 | QL |
| ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG | Tier 3 | ST; QL |
| *ALTERNATIVE MEDICINES* | | |
| QUINZYME | Tier 3 | |
| *AMINOGLYCOSIDES* | | |
| BETHKIS | Tier 4 | SP |
| <i>neomycin sulfate oral</i> | Tier 1 | |
| <i>paromomycin sulfate oral</i> | Tier 1 | |
| TOBI | Tier 4 | SP |
| TOBI PODHALER | Tier 4 | SP; QL |
| <i>tobramycin inhalation</i> | Tier 4 | SP |
| *ANALGESICS - ANTI-INFLAMMATORY* | | |
| ACTEMRA | Tier 4 | PA; ST; SP |
| ANAPROX DS | Tier 3 | |
| ARAVA | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| ARCALYST | Tier 4 | PA; SP |
| ARTHROTEC ORAL TABLET DELAYED RELEASE | Tier 3 | |
| CELEBREX | Tier 3 | QL |
| <i>celecoxib oral</i> | Tier 1 | QL |
| DAYPRO | Tier 3 | |
| <i>diclofenac potassium</i> | Tier 1 | |
| <i>diclofenac sodium er</i> | Tier 1 | |
| <i>diclofenac sodium oral</i> | Tier 1 | |
| <i>diclofenac-misoprostol oral tablet delayed release</i> | Tier 1 | |
| DUEXIS | Tier 3 | ST; QL |
| EC-NAPROSYN | Tier 3 | |
| ENBREL MINI | Tier 4 | PA; ST; SP; QL |
| ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML | Tier 4 | PA; ST; SP; QL |
| ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR | Tier 4 | PA; ST; SP; QL |
| <i>etodolac er</i> | Tier 1 | |
| <i>etodolac oral</i> | Tier 1 | |
| FELDENE | Tier 3 | |
| <i>fenoprofen calcium oral capsule</i> | Tier 1 | |
| <i>flurbiprofen oral</i> | Tier 1 | |
| HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML | Tier 4 | PA; ST; SP; QL |
| HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT | Tier 4 | PA; ST; SP; QL |
| HUMIRA PEN-CROHNS STARTER SUBCUTANEOUS PEN-INJECTOR KIT | Tier 4 | PA; ST; SP; QL |
| HUMIRA PEN-PSORIASIS STARTER SUBCUTANEOUS PEN-INJECTOR KIT | Tier 4 | PA; ST; SP; QL |
| HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML | Tier 4 | PA; ST; SP; QL |
| <i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i> | Tier 1 | |
| ILARIS | Tier 4 | PA; SP |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| ILARIS (150MG DELIVERED) | Tier 4 | PA; SP |
| INDOCIN ORAL | Tier 3 | |
| INDOCIN RECTAL | Tier 3 | |
| <i>indomethacin er</i> | Tier 1 | |
| <i>indomethacin oral</i> | Tier 1 | QL |
| <i>ketoprofen er</i> | Tier 1 | |
| <i>ketoprofen oral</i> | Tier 1 | |
| <i>ketorolac tromethamine oral</i> | Tier 1 | QL |
| KEVZARA | Tier 4 | PA; ST; SP; QL |
| KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| <i>leflunomide oral</i> | Tier 1 | |
| <i>mefenamic acid oral</i> | Tier 1 | |
| MELOXICAM COMFORT PAC | Tier 3 | |
| <i>meloxicam oral tablet</i> | Tier 1 | |
| MOBIC ORAL TABLET | Tier 3 | |
| <i>nabumetone oral</i> | Tier 1 | |
| NALFON ORAL CAPSULE 400 MG | Tier 3 | |
| NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG | Tier 3 | ST |
| NAPROSYN ORAL SUSPENSION | Tier 3 | |
| NAPROSYN ORAL TABLET 250 MG, 500 MG | Tier 3 | |
| <i>naproxen dr</i> | Tier 1 | |
| <i>naproxen oral</i> | Tier 1 | |
| <i>naproxen sodium er</i> | Tier 1 | |
| <i>naproxen sodium oral tablet 275 mg, 550 mg</i> | Tier 1 | |
| ORENCIA CLICKJECT | Tier 4 | PA; ST; SP; QL |
| ORENCIA INTRAVENOUS | Tier 4 | PA; ST; SP |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML | Tier 4 | PA; ST; SP |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML | Tier 4 | PA; ST; SP; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML | Tier 4 | ST; SP |
| OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.4ML | Tier 4 | ST |
| <i>oxaprozin</i> | Tier 1 | |
| <i>piroxicam oral</i> | Tier 1 | |
| PONSTEL | Tier 3 | |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML | Tier 4 | ST; SP |
| RIDAURA | Tier 3 | |
| SIMPONI ARIA | Tier 4 | PA; ST; SP |
| SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR | Tier 4 | PA; ST; SP |
| SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| SPRIX | Tier 3 | ST; #; QL |
| <i>sulindac oral</i> | Tier 1 | |
| TIVORBEX | Tier 3 | QL |
| <i>tolmetin sodium oral capsule</i> | Tier 1 | |
| <i>tolmetin sodium oral tablet 200 mg</i> | Tier 1 | |
| VIMOVO | Tier 3 | ST; QL |
| VIVLODEX | Tier 3 | ST; QL |
| XELJANZ | Tier 4 | PA; ST; SP; QL |
| XELJANZ XR | Tier 4 | PA; ST; SP; QL |
| ZIPSOR | Tier 3 | |
| ZORVOLEX | Tier 3 | QL |
| *ANALGESICS - NONNARCOTIC* | | |
| ALLZITAL | Tier 3 | |
| <i>aspirin oral tablet 325 mg</i> | CE | |
| <i>aspirin oral tablet chewable</i> | CE | |
| <i>aspirin oral tablet delayed release 325 mg, 81 mg</i> | CE | |
| BUPAP ORAL TABLET 50-300 MG | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>butalbital-acetaminophen oral tablet 50-325 mg</i> | Tier 1 | |
| <i>butalbital-apap-caffeine oral capsule</i> | Tier 1 | |
| <i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i> | Tier 1 | |
| <i>butalbital-asa-caffeine</i> | Tier 1 | |
| CAPACET | Tier 1 | |
| <i>choline-mag trisalicylate</i> | Tier 1 | |
| <i>diflunisal oral</i> | Tier 1 | |
| <i>duraxin</i> | Tier 1 | |
| ESGIC ORAL TABLET | Tier 3 | |
| FIORICET ORAL CAPSULE | Tier 3 | |
| FIORINAL | Tier 3 | |
| <i>marten-tab</i> | Tier 1 | |
| MINIPRIN LOW DOSE | CE | |
| PRIALT | Tier 4 | SP |
| <i>salsalate oral</i> | Tier 1 | |
| ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE | CE | |
| TENCON ORAL TABLET 50-325 MG | Tier 1 | |
| VANATOL LQ | Tier 3 | ST; QL |
| ZEBUTAL ORAL CAPSULE 50-325-40 MG | Tier 1 | |
| *ANALGESICS - OPIOID* | | |
| ABSTRAL | Tier 3 | PA; ST; QL |
| <i>acetaminophen-codeine #2</i> | Tier 1 | PA; QL |
| <i>acetaminophen-codeine #3</i> | Tier 1 | PA; QL |
| <i>acetaminophen-codeine #4</i> | Tier 1 | PA; QL |
| <i>acetaminophen-codeine oral solution</i> | Tier 1 | PA |
| <i>acetaminophen-codeine oral tablet</i> | Tier 1 | PA; QL |
| ACTIQ BUCCAL LOZENGE ON A HANDLE 1200 MCG, 1600 MCG, 400 MCG, 600 MCG, 800 MCG | Tier 3 | PA; ST; QL |
| ACTIQ BUCCAL LOZENGE ON A HANDLE 200 MCG | Tier 3 | QL |
| <i>apap-caff-dihydrocodeine oral capsule</i> | Tier 1 | PA; QL |
| <i>apap-caff-dihydrocodeine oral tablet 325-30-16 mg</i> | Tier 1 | PA; QL |
| ARYMO ER | Tier 3 | PA; ST; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| ASCOMP-CODEINE | Tier 1 | PA; QL |
| BELBUCA | Tier 3 | PA; QL |
| BUNAVAIL BUCCAL FILM 2.1-0.3 MG, 4.2-0.7 MG, 6.3-1 MG | Tier 3 | ST; MA; QL |
| <i>buprenorphine</i> | Tier 1 | PA; QL |
| <i>buprenorphine hcl sublingual</i> | Tier 1 | MA; QL |
| <i>buprenorphine hcl-naloxone hcl</i> | Tier 1 | MA; QL |
| <i>butalbital-apap-caff-cod</i> | Tier 1 | PA; QL |
| <i>butalbital-asa-caff-codeine</i> | Tier 1 | PA; QL |
| <i>butorphanol tartrate nasal</i> | Tier 1 | PA; QL |
| BUTRANS | Tier 3 | PA; #; QL |
| <i>codeine sulfate oral tablet</i> | Tier 1 | PA; QL |
| DEMEROL ORAL | Tier 3 | PA; QL |
| DILAUDID ORAL LIQUID | Tier 3 | PA |
| DILAUDID ORAL TABLET | Tier 3 | PA; QL |
| DOLOPHINE ORAL TABLET 5 MG | Tier 3 | PA; QL |
| DURAGESIC-100 | Tier 3 | PA; QL |
| DURAGESIC-12 | Tier 3 | PA; QL |
| DURAGESIC-25 | Tier 3 | PA; QL |
| DURAGESIC-50 | Tier 3 | PA; QL |
| DURAGESIC-75 | Tier 3 | PA; QL |
| EMBEDA | Tier 2 | PA; QL |
| ENDOCET ORAL TABLET 10-325 MG, 2.5- 325 MG, 5-325 MG, 7.5-325 MG | Tier 1 | PA; QL |
| EXALGO ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 12 MG, 16 MG, 32 MG, 8 MG | Tier 3 | PA; QL |
| <i>fentanyl</i> | Tier 1 | PA; QL |
| <i>fentanyl citrate buccal</i> | Tier 1 | PA; ST; QL |
| FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG | Tier 3 | PA; ST; #; QL |
| FIORICET/CODEINE ORAL CAPSULE 50- 300-40-30 MG | Tier 3 | PA; QL |
| FIORINAL/CODEINE #3 | Tier 3 | PA; QL |
| HYCET | Tier 3 | PA |
| <i>hydrocodone-acetaminophen oral solution 2.5- 108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml</i> | Tier 1 | PA |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i> | Tier 1 | PA; QL |
| <i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i> | Tier 1 | PA; QL |
| <i>hydromorphone hcl er oral tablet er 24 hour abuse-deterrent 12 mg, 16 mg, 32 mg, 8 mg</i> | Tier 1 | PA; QL |
| <i>hydromorphone hcl oral liquid</i> | Tier 1 | PA |
| <i>hydromorphone hcl oral tablet</i> | Tier 1 | PA; QL |
| HYSINGLA ER | Tier 2 | PA; #; QL |
| IBUDONE ORAL TABLET 10-200 MG | Tier 3 | PA; QL |
| IBUDONE ORAL TABLET 5-200 MG | Tier 1 | PA; QL |
| KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG | Tier 3 | PA; QL |
| LAZANDA | Tier 3 | PA; ST; QL |
| <i>levorphanol tartrate oral</i> | Tier 1 | PA; QL |
| LORCET | Tier 1 | PA; QL |
| LORCET HD | Tier 1 | PA; QL |
| LORCET PLUS ORAL TABLET 7.5-325 MG | Tier 1 | PA; QL |
| LORTAB ORAL ELIXIR 10-300 MG/15ML | Tier 3 | PA |
| <i>meperidine hcl oral tablet</i> | Tier 1 | PA; QL |
| METHADONE HCL INTENSOL | Tier 1 | PA |
| <i>methadone hcl oral concentrate</i> | Tier 1 | PA |
| <i>methadone hcl oral solution 10 mg/5ml, 5 mg/5ml</i> | Tier 1 | PA; QL |
| <i>methadone hcl oral tablet</i> | Tier 1 | PA; QL |
| <i>methadone hcl oral tablet soluble</i> | Tier 1 | PA; QL |
| METHADOSE ORAL CONCENTRATE 10 MG/ML | Tier 3 | PA |
| METHADOSE SUGAR-FREE | Tier 3 | PA |
| MORPHABOND ER | Tier 3 | PA; ST; QL |
| <i>morphine sulfate er beads</i> | Tier 1 | PA; QL |
| <i>morphine sulfate er oral capsule extended release 24 hour</i> | Tier 1 | PA; QL |
| <i>morphine sulfate er oral tablet extended release</i> | Tier 1 | PA |
| <i>morphine sulfate oral tablet</i> | Tier 1 | PA; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| MS CONTIN ORAL TABLET EXTENDED RELEASE | Tier 3 | PA; QL |
| NORCO | Tier 3 | PA; QL |
| NUCYNTA | Tier 2 | PA; ST; QL |
| NUCYNTA ER | Tier 2 | PA; QL |
| OPANA ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT | Tier 3 | PA; QL |
| OPANA ORAL | Tier 3 | PA; QL |
| OXAYDO | Tier 2 | PA; QL |
| <i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 20 mg, 40 mg, 80 mg</i> | Tier 1 | PA; QL |
| <i>oxycodone hcl oral capsule</i> | Tier 1 | PA; QL |
| <i>oxycodone hcl oral concentrate 100 mg/5ml</i> | Tier 1 | PA |
| <i>oxycodone hcl oral solution</i> | Tier 1 | PA |
| <i>oxycodone hcl oral tablet</i> | Tier 1 | PA; QL |
| <i>oxycodone-acetaminophen oral solution</i> | Tier 1 | PA |
| <i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i> | Tier 1 | PA; QL |
| <i>oxycodone-aspirin oral tablet 4.8355-325 mg</i> | Tier 1 | PA; QL |
| <i>oxycodone-ibuprofen</i> | Tier 1 | PA; QL |
| OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT | Tier 2 | PA; QL |
| <i>oxymorphone hcl</i> | Tier 1 | PA; QL |
| <i>oxymorphone hcl er</i> | Tier 1 | PA; QL |
| <i>pentazocine-naloxone hcl</i> | Tier 1 | PA; QL |
| PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG | Tier 3 | PA; QL |
| PRIMLEV | Tier 3 | PA; QL |
| PROBUPHINE IMPLANT KIT | Tier 3 | |
| ROXICODONE ORAL TABLET | Tier 3 | PA; QL |
| SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG | Tier 3 | MA; #; QL |
| SUBSYS | Tier 3 | PA; ST; QL |
| SYNALGOS-DC | Tier 3 | PA; QL |
| <i>tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg</i> | Tier 1 | PA |
| <i>tramadol hcl er (biphasic) oral tablet extended release 24 hour 300 mg</i> | Tier 1 | PA; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| <i>tramadol hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg</i> | Tier 1 | PA; QL |
| <i>tramadol hcl er oral tablet extended release 24 hour</i> | Tier 1 | PA; QL |
| <i>tramadol hcl oral</i> | Tier 1 | PA; QL |
| <i>tramadol-acetaminophen</i> | Tier 1 | PA; QL |
| TREZIX ORAL CAPSULE 320.5-30-16 MG | Tier 3 | PA; QL |
| TYLENOL WITH CODEINE #3 | Tier 3 | PA; QL |
| TYLENOL WITH CODEINE #4 | Tier 3 | PA; QL |
| ULTRACET | Tier 3 | PA; QL |
| ULTRAM | Tier 3 | PA; QL |
| VERDROCET | Tier 1 | PA; QL |
| VICODIN ES ORAL TABLET 7.5-300 MG | Tier 1 | PA; QL |
| VICODIN HP ORAL TABLET 10-300 MG | Tier 1 | PA; QL |
| VICODIN ORAL TABLET 5-300 MG | Tier 1 | PA; QL |
| XODOL | Tier 3 | PA; QL |
| XTAMPZA ER | Tier 3 | PA; ST; QL |
| XYLON | Tier 1 | QL |
| ZAMICET | Tier 3 | PA |
| ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT | Tier 3 | PA; ST; QL |
| ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG | Tier 3 | ST; QL |
| ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG | Tier 3 | ST; MA; #; QL |
| *ANDROGENS-ANABOLIC* | | |
| ANADROL-50 | Tier 3 | |
| ANDRODERM TRANSDERMAL PATCH 24 HOUR | Tier 3 | PA; ST; QL |
| ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%) | Tier 2 | PA; #; QL |
| ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 40.5 MG/2.5GM (1.62%) | Tier 2 | PA; #; QL |
| ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 50 MG/5GM (1%) | Tier 3 | PA; ST; #; QL |
| ANDROID | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>danazol oral</i> | Tier 1 | |
| FORTESTA | Tier 3 | PA; ST; QL |
| <i>methitest</i> | Tier 3 | |
| <i>methyltestosterone oral</i> | Tier 1 | |
| NATESTO | Tier 3 | PA; ST; QL |
| OXANDRIN | Tier 3 | |
| <i>oxandrolone oral</i> | Tier 1 | |
| STRIANT | Tier 3 | PA; ST; QL |
| TESTIM | Tier 3 | PA; ST; QL |
| <i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i> | Tier 1 | |
| <i>testosterone enanthate intramuscular solution</i> | Tier 1 | |
| <i>testosterone transdermal gel 10 mg/lact (2%)</i> | Tier 1 | QL |
| <i>testosterone transdermal gel 12.5 mg/lact (1%), 50 mg/5gm (1%)</i> | Tier 1 | PA; ST; QL |
| <i>testosterone transdermal gel 25 mg/2.5gm (1%)</i> | Tier 3 | PA; ST; QL |
| <i>testosterone transdermal solution</i> | Tier 1 | PA; QL |
| VOGELXO PUMP | Tier 3 | PA; ST; QL |
| VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%) | Tier 3 | PA; ST; QL |
| *ANORECTAL AGENTS* | | |
| ANUSOL-HC RECTAL CREAM | Tier 3 | |
| COLOCORT | Tier 1 | |
| CORTENEMA | Tier 3 | |
| CORTIFOAM | Tier 3 | |
| <i>hydrocortisone ace-pramoxine rectal cream 1-1 %</i> | Tier 1 | |
| <i>hydrocortisone rectal enema</i> | Tier 1 | |
| <i>pramcort rectal</i> | Tier 1 | |
| PROCTOCARE-HC | Tier 1 | |
| PROCTOCORT RECTAL CREAM | Tier 3 | ST |
| PROCTOFOAM HC | Tier 3 | |
| PROCTO-PAK | Tier 1 | |
| PROCTOSOL HC | Tier 1 | |
| PROCTOZONE-HC RECTAL | Tier 1 | |
| RECTIV | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| UCERIS RECTAL | Tier 3 | PA; #; QL |
| *ANTHELMINTICS* | | |
| ALBENZA | Tier 3 | QL |
| BILTRICIDE | Tier 2 | |
| EMVERM | Tier 1 | QL |
| <i>ivermectin oral</i> | Tier 1 | |
| STROMEKTOL | Tier 3 | |
| *ANTIANGINAL AGENTS* | | |
| DILATRATE-SR | Tier 3 | |
| GONITRO | Tier 3 | |
| ISORDIL TITRADOSE | Tier 3 | |
| <i>isosorbide dinitrate er</i> | Tier 1 | |
| <i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 5 mg</i> | Tier 1 | |
| <i>isosorbide mononitrate</i> | Tier 1 | |
| <i>isosorbide mononitrate er</i> | Tier 1 | |
| MINITRAN | Tier 1 | |
| NITRO-BID | Tier 3 | |
| NITRO-DUR | Tier 3 | |
| <i>nitroglycerin er oral capsule extended release 9 mg</i> | Tier 1 | |
| <i>nitroglycerin sublingual</i> | Tier 1 | |
| <i>nitroglycerin transdermal patch 24 hour</i> | Tier 1 | |
| <i>nitroglycerin translingual solution</i> | Tier 1 | |
| NITROLINGUAL | Tier 3 | |
| NITROMIST | Tier 3 | |
| NITROSTAT | Tier 3 | ST; # |
| NITRO-TIME | Tier 1 | |
| RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR 1000 MG, 500 MG | Tier 2 | QL |
| *ANTIANSIETY AGENTS* | | |
| <i>alprazolam er</i> | Tier 1 | QL |
| ALPRAZOLAM INTENSOL | Tier 3 | |
| <i>alprazolam oral</i> | Tier 1 | |
| <i>alprazolam xr</i> | Tier 1 | QL |
| ATIVAN ORAL | Tier 3 | ST |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>bupirone hcl oral</i> | Tier 1 | |
| <i>chlordiazepoxide hcl</i> | Tier 1 | |
| <i>clorazepate dipotassium</i> | Tier 1 | |
| DIAZEPAM INTENSOL | Tier 3 | |
| <i>diazepam oral tablet</i> | Tier 1 | |
| <i>hydroxyzine hcl oral syrup</i> | Tier 1 | |
| <i>hydroxyzine hcl oral tablet</i> | Tier 1 | |
| <i>hydroxyzine pamoate oral capsule 25 mg, 50 mg</i> | Tier 1 | |
| LORAZEPAM INTENSOL | Tier 3 | |
| <i>lorazepam oral tablet</i> | Tier 1 | |
| <i>meprobamate</i> | Tier 1 | |
| <i>oxazepam</i> | Tier 1 | |
| TRANXENE-T ORAL TABLET 7.5 MG | Tier 3 | |
| VALIUM | Tier 3 | |
| VISTARIL | Tier 3 | |
| XANAX | Tier 3 | ST |
| XANAX XR | Tier 3 | ST; QL |
| *ANTIARRHYTHMICS* | | |
| <i>amiodarone hcl oral</i> | Tier 1 | |
| <i>disopyramide phosphate oral</i> | Tier 1 | |
| <i>dofetilide</i> | Tier 1 | |
| <i>flecainide acetate</i> | Tier 1 | |
| <i>mexiletine hcl oral</i> | Tier 1 | |
| MULTAQ | Tier 2 | |
| NORPACE | Tier 3 | |
| NORPACE CR | Tier 3 | |
| PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG | Tier 1 | |
| <i>propafenone hcl</i> | Tier 1 | |
| <i>propafenone hcl er</i> | Tier 1 | |
| <i>quinidine gluconate er</i> | Tier 1 | |
| <i>quinidine sulfate oral</i> | Tier 1 | |
| RYTHMOL SR | Tier 3 | |
| TIKOSYN | Tier 3 | # |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| *ANTIASTHMATIC AND BRONCHODILATOR AGENTS* | | |
| ACCOLATE | Tier 3 | QL |
| ADVAIR DISKUS | Tier 2 | #, QL |
| ADVAIR HFA | Tier 2 | QL |
| AEROSPAN | Tier 3 | QL |
| AIRDUO RESPICLICK 113/14 | Tier 3 | PA; ST; QL |
| AIRDUO RESPICLICK 232/14 | Tier 3 | PA; ST; QL |
| AIRDUO RESPICLICK 55/14 | Tier 3 | PA; ST; QL |
| <i>albuterol sulfate er</i> | Tier 1 | |
| <i>albuterol sulfate inhalation</i> | Tier 1 | |
| <i>albuterol sulfate oral</i> | Tier 1 | |
| ALVESCO | Tier 3 | QL |
| ANORO ELLIPTA | Tier 2 | QL |
| ARCAPTA NEOHALER | Tier 3 | PA; QL |
| ARMONAIR RESPICLICK 113 | Tier 3 | PA; ST; QL |
| ARMONAIR RESPICLICK 232 | Tier 3 | PA; ST; QL |
| ARMONAIR RESPICLICK 55 | Tier 3 | PA; ST; QL |
| ARNUITY ELLIPTA | Tier 3 | QL |
| ASMANEX 120 METERED DOSES | Tier 2 | |
| ASMANEX 14 METERED DOSES | Tier 2 | |
| ASMANEX 30 METERED DOSES | Tier 2 | |
| ASMANEX 60 METERED DOSES | Tier 2 | |
| ASMANEX 7 METERED DOSES | Tier 2 | |
| ASMANEX HFA | Tier 2 | |
| ATROVENT HFA | Tier 3 | QL |
| BEVESPI AEROSPHERE | Tier 3 | PA; ST; QL |
| BREO ELLIPTA | Tier 2 | QL |
| BROVANA | Tier 3 | PA; ST; QL |
| <i>budesonide inhalation</i> | Tier 1 | QL |
| COMBIVENT RESPIMAT | Tier 2 | QL |
| <i>cromolyn sodium inhalation</i> | Tier 1 | |
| DALIRESP | Tier 3 | PA; ST |
| DIFIL-G FORTE | Tier 1 | |
| DULERA | Tier 2 | QL |
| ELIXOPHYLLIN | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| FLOVENT DISKUS | Tier 2 | #; QL |
| FLOVENT HFA | Tier 2 | QL |
| <i>fluticasone-salmeterol</i> | Tier 1 | QL |
| INCRUSE ELLIPTA | Tier 2 | QL |
| <i>ipratropium bromide inhalation</i> | Tier 1 | |
| <i>ipratropium-albuterol</i> | 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> | Tier 1 | |
| <i>metaproterenol sulfate oral</i> | Tier 1 | |
| <i>montelukast sodium oral</i> | Tier 1 | QL |
| PERFOROMIST | Tier 3 | PA; ST; QL |
| PROAIR HFA | Tier 2 | # |
| PROAIR RESPICLICK | Tier 2 | QL |
| PROVENTIL HFA | Tier 3 | ST; # |
| PULMICORT | Tier 3 | QL |
| PULMICORT FLEXHALER | Tier 3 | ST |
| QVAR INHALATION AEROSOL SOLUTION | Tier 2 | |
| SEEBRI NEOHALER | Tier 3 | PA; ST; QL |
| SEREVENT DISKUS | Tier 2 | QL |
| SINGULAIR | Tier 3 | QL |
| SPIRIVA HANDIHALER | Tier 2 | QL |
| SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT | Tier 2 | QL |
| STIOLTO RESPIMAT | Tier 2 | QL |
| STRIVERDI RESPIMAT | Tier 3 | PA; ST; QL |
| SYMBICORT | Tier 2 | QL |
| <i>terbutaline sulfate oral</i> | Tier 1 | |
| THEO-24 | Tier 2 | |
| THEOCHRON ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG | Tier 1 | |
| <i>theophylline</i> | Tier 1 | |
| <i>theophylline er</i> | Tier 1 | |
| TRELEGY ELLIPTA | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED | Tier 3 | ST; QL |
| UTIBRON NEOHALER | Tier 3 | PA; ST; QL |
| VENTOLIN HFA | Tier 2 | |
| VOSPIRE ER | Tier 3 | |
| XOLAIR | Tier 4 | PA; ST; SP |
| XOPENEX | Tier 3 | |
| XOPENEX CONCENTRATE | Tier 3 | |
| XOPENEX HFA | Tier 3 | ST; QL |
| <i>zafirlukast</i> | Tier 1 | QL |
| <i>zileuton er</i> | Tier 1 | QL |
| ZYFLO | Tier 3 | QL |
| ZYFLO CR | Tier 3 | QL |
| *ANTICOAGULANTS* | | |
| <i>acd formula a</i> | Tier 3 | |
| <i>acd formula b</i> | Tier 3 | |
| ACD-A NOCLOT-50 | Tier 3 | |
| <i>anticoagulant cit dext soln a</i> | Tier 3 | |
| ANTICOAGULANT COMPOUND | Tier 3 | |
| ARIXTRA | Tier 3 | |
| BEVYXXA | Tier 3 | PA; ST; QL |
| COUMADIN ORAL | Tier 3 | |
| ELIQUIS | Tier 2 | |
| <i>enoxaparin sodium</i> | Tier 1 | |
| <i>fondaparinux sodium</i> | Tier 1 | |
| FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNIT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML | Tier 3 | |
| <i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i> | Tier 1 | |
| <i>heparin sodium (porcine) pf</i> | Tier 1 | |
| IPRIVASK | Tier 3 | |
| JANTOVEN | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| LOVENOX | Tier 3 | |
| PRADAXA | Tier 2 | |
| SAVAYSA | Tier 3 | |
| <i>warfarin sodium oral</i> | Tier 1 | |
| XARELTO | Tier 2 | |
| XARELTO STARTER PACK | Tier 2 | |
| *ANTICONVULSANTS* | | |
| APTIOM | Tier 3 | |
| BANZEL ORAL SUSPENSION | Tier 3 | # |
| BANZEL ORAL TABLET | Tier 3 | #, QL |
| BRIVIACT ORAL TABLET | Tier 3 | PA; QL |
| <i>carbamazepine er</i> | Tier 1 | |
| <i>carbamazepine oral</i> | Tier 1 | |
| CARBATROL | Tier 2 | |
| CELONTIN | Tier 2 | |
| <i>clonazepam oral</i> | Tier 1 | |
| DEPAKENE ORAL CAPSULE | Tier 3 | |
| DEPAKOTE | Tier 3 | |
| DEPAKOTE ER | Tier 3 | |
| DIASTAT ACUDIAL | Tier 2 | QL |
| DIASTAT PEDIATRIC | Tier 2 | QL |
| DILANTIN | Tier 2 | |
| DILANTIN INFATABS | Tier 2 | |
| <i>divalproex sodium er oral tablet extended release 24 hour</i> | Tier 1 | |
| <i>divalproex sodium oral tablet delayed release</i> | Tier 1 | |
| EPITOL | Tier 1 | |
| <i>ethosuximide oral</i> | Tier 1 | |
| <i>felbamate</i> | Tier 1 | |
| FELBATOL | Tier 3 | |
| FYCOMPA ORAL SUSPENSION | Tier 3 | |
| FYCOMPA ORAL TABLET | Tier 3 | QL |
| <i>gabapentin oral capsule</i> | Tier 1 | QL |
| <i>gabapentin oral solution 250 mg/5ml</i> | Tier 1 | QL |
| <i>gabapentin oral tablet</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| GABITRIL ORAL TABLET 12 MG, 16 MG, 2 MG, 4 MG | Tier 3 | QL |
| KEPPRA ORAL | Tier 3 | |
| KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG | Tier 3 | QL |
| KLONOPIN | Tier 3 | |
| LAMICTAL ODT ORAL KIT | Tier 3 | |
| LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG | Tier 3 | QL |
| LAMICTAL ORAL TABLET | Tier 3 | |
| LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG | Tier 3 | |
| LAMICTAL STARTER | Tier 3 | |
| LAMICTAL XR ORAL KIT | Tier 3 | |
| LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG | Tier 3 | QL |
| <i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i> | Tier 1 | QL |
| <i>lamotrigine oral tablet</i> | Tier 1 | |
| <i>lamotrigine oral tablet chewable</i> | Tier 1 | |
| <i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i> | Tier 1 | QL |
| <i>lamotrigine starter kit-blue</i> | Tier 1 | |
| <i>lamotrigine starter kit-green</i> | Tier 1 | |
| <i>lamotrigine starter kit-orange</i> | Tier 1 | |
| <i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i> | Tier 1 | QL |
| <i>levetiracetam oral</i> | Tier 1 | |
| LYRICA | Tier 2 | |
| MYSOLINE | Tier 3 | |
| NEURONTIN ORAL CAPSULE | Tier 3 | QL |
| NEURONTIN ORAL SOLUTION | Tier 3 | |
| NEURONTIN ORAL TABLET | Tier 3 | QL |
| ONFI ORAL SUSPENSION | Tier 3 | |
| ONFI ORAL TABLET 10 MG, 20 MG | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| <i>oxcarbazepine</i> | Tier 1 | |
| OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG | Tier 3 | QL |
| PEGANONE | Tier 3 | |
| PHENYTEK | Tier 2 | |
| PHENYTOIN INFATABS | Tier 1 | |
| <i>phenytoin oral suspension 125 mg/5ml</i> | Tier 1 | |
| <i>phenytoin oral tablet chewable</i> | Tier 1 | |
| <i>phenytoin sodium extended</i> | Tier 1 | |
| <i>primidone oral</i> | Tier 1 | |
| QUDEXY XR | Tier 3 | QL |
| SABRIL ORAL PACKET | Tier 4 | PA; #; SP |
| SABRIL ORAL TABLET | Tier 4 | PA; #; SP; QL |
| SPRITAM | Tier 3 | ST; QL |
| TEGRETOL ORAL SUSPENSION | Tier 2 | |
| TEGRETOL ORAL TABLET | Tier 2 | |
| TEGRETOL-XR | Tier 2 | |
| <i>tiagabine hcl oral tablet 2 mg, 4 mg</i> | Tier 1 | QL |
| TOPAMAX | Tier 3 | |
| TOPAMAX SPRINKLE | Tier 3 | QL |
| <i>topiramate oral capsule sprinkle</i> | Tier 1 | QL |
| <i>topiramate oral tablet</i> | Tier 1 | |
| TRILEPTAL | Tier 3 | |
| TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG | Tier 3 | #; QL |
| <i>valproic acid oral capsule</i> | Tier 1 | |
| <i>valproic acid oral solution</i> | Tier 1 | |
| <i>vigabatrin</i> | Tier 4 | PA; SP; QL |
| VIMPAT ORAL SOLUTION | Tier 3 | #; QL |
| VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG | Tier 3 | #; QL |
| ZARONTIN | Tier 3 | |
| ZONEGRAN | Tier 3 | |
| <i>zonisamide oral</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *ANTIDEMENTIA AGENT COMBINATIONS*** | | |
| NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK | Tier 2 | |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 28-10 MG | Tier 2 | AL |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 21-10 MG, 7-10 MG | Tier 2 | |
| *ANTIDEPRESSANTS* | | |
| <i>amitriptyline hcl oral</i> | Tier 1 | |
| ANAFRANIL | Tier 3 | |
| APLENZIN | Tier 3 | ST; QL |
| <i>bupropion hcl er (sr)</i> | Tier 1 | QL |
| <i>bupropion hcl er (xl)</i> | Tier 1 | QL |
| <i>bupropion hcl oral</i> | Tier 1 | QL |
| CELEXA ORAL TABLET | Tier 3 | QL |
| <i>citalopram hydrobromide oral solution</i> | Tier 1 | |
| <i>citalopram hydrobromide oral tablet</i> | Tier 1 | QL |
| <i>clomipramine hcl oral</i> | Tier 1 | |
| CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG, 30 MG, 60 MG | Tier 3 | QL |
| <i>desipramine hcl oral</i> | Tier 1 | |
| <i>desvenlafaxine er</i> | Tier 3 | PA; ST |
| <i>desvenlafaxine succinate er</i> | Tier 1 | PA; QL |
| <i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg</i> | Tier 1 | |
| <i>doxepin hcl oral concentrate</i> | Tier 1 | |
| <i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 40 mg, 60 mg</i> | Tier 1 | QL |
| EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 37.5 MG, 75 MG | Tier 3 | QL |
| EMSAM | Tier 3 | QL |
| <i>escitalopram oxalate oral solution</i> | Tier 1 | QL |
| <i>escitalopram oxalate oral tablet</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| FETZIMA | Tier 3 | PA; ST; QL |
| FETZIMA TITRATION | Tier 3 | PA; ST; QL |
| <i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i> | Tier 1 | QL |
| <i>fluoxetine hcl oral capsule delayed release</i> | Tier 1 | QL |
| <i>fluoxetine hcl oral solution</i> | Tier 1 | QL |
| <i>fluoxetine hcl oral tablet 10 mg, 20 mg</i> | Tier 1 | QL |
| <i>fluoxetine hcl oral tablet 60 mg</i> | Tier 3 | QL |
| <i>fluvoxamine maleate er</i> | Tier 1 | QL |
| <i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i> | Tier 1 | QL |
| FORFIVO XL | Tier 3 | QL |
| <i>imipramine hcl oral</i> | Tier 1 | |
| <i>imipramine pamoate</i> | Tier 1 | |
| KHEDEZLA | Tier 3 | PA; ST; QL |
| LEXAPRO ORAL TABLET | Tier 3 | QL |
| MARPLAN | Tier 3 | |
| <i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg</i> | Tier 1 | QL |
| <i>mirtazapine oral tablet dispersible</i> | Tier 1 | QL |
| NARDIL | Tier 3 | |
| <i>nefazodone hcl oral tablet 250 mg</i> | Tier 3 | ST |
| <i>nefazodone hcl oral tablet 50 mg</i> | Tier 1 | ST |
| NORPRAMIN ORAL TABLET 10 MG, 25 MG | Tier 3 | |
| <i>nortriptyline hcl oral capsule</i> | Tier 1 | |
| PAMELOR ORAL CAPSULE | Tier 3 | |
| PARNATE | Tier 3 | |
| <i>paroxetine hcl er</i> | Tier 1 | QL |
| <i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i> | Tier 1 | QL |
| PAXIL CR | Tier 3 | QL |
| PAXIL ORAL SUSPENSION | Tier 3 | QL |
| PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG | Tier 3 | QL |
| PEXEVA ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG | Tier 3 | ST; QL |
| <i>phenelzine sulfate oral</i> | Tier 1 | |
| PRISTIQ | Tier 3 | PA; ST; #; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>protriptyline hcl</i> | Tier 1 | |
| PROZAC ORAL CAPSULE 10 MG, 20 MG, 40 MG | Tier 3 | QL |
| REMERON | Tier 3 | QL |
| REMERON SOLTAB | Tier 3 | QL |
| <i>sertraline hcl oral concentrate</i> | Tier 1 | QL |
| <i>sertraline hcl oral tablet 100 mg, 25 mg, 50 mg</i> | Tier 1 | QL |
| SURMONTIL | Tier 3 | |
| TOFRANIL | Tier 3 | |
| <i>tranylcypromine sulfate</i> | Tier 1 | |
| <i>trazodone hcl oral</i> | Tier 1 | |
| TRINTELLIX | Tier 3 | PA; ST; QL |
| <i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i> | Tier 1 | QL |
| <i>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 75 mg</i> | Tier 3 | QL |
| <i>venlafaxine hcl er oral tablet extended release 24 hour 225 mg</i> | Tier 1 | QL |
| <i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i> | Tier 1 | QL |
| VIIBRYD ORAL TABLET | Tier 3 | PA; ST; QL |
| VIIBRYD STARTER PACK | Tier 3 | PA; ST |
| WELLBUTRIN SR | Tier 3 | QL |
| WELLBUTRIN XL | Tier 3 | ST; QL |
| ZOLOFT ORAL CONCENTRATE | Tier 3 | QL |
| ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG | Tier 3 | QL |
| *ANTIDIABETICS* | | |
| <i>acarbose</i> | Tier 1 | |
| ACTOPLUS MET | Tier 3 | |
| ACTOPLUS MET XR | Tier 3 | |
| ACTOS | Tier 3 | |
| ADLYXIN | Tier 3 | ST; QL |
| ADLYXIN STARTER PACK | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| AFREZZA INHALATION POWDER 12 UNIT, 4 & 8 & 12 UNIT, 4 (30) & 8 (60) UNIT, 4 (60) & 8 (30) UNIT, 4 (90) & 8 (90) UNIT, 4 UNIT, 8 (60)& 12 (30) UNIT, 8 UNIT | Tier 3 | PA |
| <i>alogliptin benzoate</i> | Tier 1 | QL |
| <i>alogliptin-metformin hcl</i> | Tier 1 | QL |
| <i>alogliptin-pioglitazone</i> | Tier 1 | QL |
| AMARYL | Tier 3 | |
| APIDRA | Tier 3 | ST |
| APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 3 | ST |
| AVANDIA ORAL TABLET 2 MG, 4 MG | Tier 3 | |
| BASAGLAR KWIKPEN | Tier 3 | |
| BD GLUCOSE | Tier 3 | |
| BYDUREON SUBCUTANEOUS PEN-INJECTOR | Tier 3 | QL |
| BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 3 | #; QL |
| BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 3 | #; QL |
| <i>chlorpropamide oral tablet 100 mg</i> | Tier 1 | |
| <i>cvs glucose bits</i> | Tier 3 | |
| <i>cvs glucose oral gel</i> | Tier 1 | |
| <i>cvs glucose oral tablet chewable</i> | Tier 3 | |
| <i>cvs glucose shot oral liquid 15 gm/59ml</i> | Tier 1 | |
| CYCLOSET | Tier 3 | QL |
| DEX4 GLUCOSE ORAL LIQUID | Tier 3 | |
| DEX4 NATURALS | Tier 3 | |
| DEX4 ORAL TABLET CHEWABLE 4-6 GM-MG | Tier 3 | |
| DEX4 POUCH PACK | Tier 3 | |
| DEX4 QUICK DISSOLVE GLUCOSE | Tier 3 | |
| DUETACT | Tier 3 | |
| FARXIGA | Tier 3 | QL |
| FIASP | Tier 3 | ST |
| FIASP FLEXTOUCH | Tier 3 | ST |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| FORTAMET ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG | Tier 3 | ST; QL |
| <i>glimepiride</i> | Tier 1 | |
| <i>glipizide er</i> | Tier 1 | |
| <i>glipizide oral</i> | Tier 1 | |
| <i>glipizide xl</i> | Tier 1 | |
| <i>glipizide-metformin hcl</i> | Tier 1 | |
| GLUCAGEN HYPOKIT | Tier 3 | |
| GLUCAGON EMERGENCY | Tier 2 | |
| GLUCO BURST ORAL GEL | Tier 1 | |
| GLUCOPHAGE | Tier 3 | |
| GLUCOPHAGE XR | Tier 3 | |
| <i>glucose oral gel 40 %</i> | Tier 1 | |
| <i>glucose oral tablet chewable</i> | Tier 3 | |
| GLUCOTROL | Tier 3 | |
| GLUCOTROL XL | Tier 3 | |
| GLUCOVANCE ORAL TABLET 2.5-500 MG, 5-500 MG | Tier 3 | |
| GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG | Tier 3 | ST; #; QL |
| GLUTOSE 15 | Tier 1 | |
| <i>glyburide micronized</i> | Tier 1 | |
| <i>glyburide oral</i> | Tier 1 | |
| <i>glyburide-metformin</i> | Tier 1 | |
| GLYNASE | Tier 3 | |
| GLYSET | Tier 3 | |
| <i>gnp glucose oral tablet chewable</i> | Tier 3 | |
| <i>gnp quick dissolve glucose</i> | Tier 3 | |
| <i>hm glucose</i> | Tier 3 | |
| HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML | Tier 2 | |
| HUMALOG MIX 50/50 | Tier 2 | |
| HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR | Tier 2 | |
| HUMALOG MIX 75/25 | Tier 2 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR | Tier 2 | |
| HUMULIN 70/30 | Tier 2 | |
| HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR | Tier 2 | |
| HUMULIN N | Tier 2 | |
| HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR | Tier 2 | |
| HUMULIN R | Tier 2 | |
| HUMULIN R U-500 (CONCENTRATED) | Tier 2 | |
| HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR | Tier 2 | |
| <i>hy-vee glucose</i> | Tier 3 | |
| INVOKANA | Tier 2 | QL |
| JANUMET | Tier 2 | QL |
| JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG | Tier 2 | QL |
| JANUVIA | Tier 2 | QL |
| JARDIANCE | Tier 2 | QL |
| JENTADUETO | Tier 2 | QL |
| JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG | Tier 2 | QL |
| KAZANO | Tier 3 | ST; QL |
| KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG | Tier 2 | QL |
| KORLYM | Tier 4 | PA; SP; QL |
| <i>kroger glucose oral tablet chewable</i> | Tier 3 | |
| LANTUS | Tier 2 | |
| LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 2 | |
| <i>leader glucose</i> | Tier 3 | |
| <i>leader quick dissolve glucose</i> | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| LEVEMIR | Tier 2 | |
| LEVEMIR FLEXTOUCH | Tier 2 | |
| <i>longs glucose oral tablet chewable 4-6 gm-mg</i> | Tier 3 | |
| <i>meijer glucose oral tablet chewable 4-6 gm-mg</i> | Tier 3 | |
| <i>metformin hcl er</i> | Tier 1 | |
| <i>metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg, 500 mg</i> | Tier 1 | QL |
| <i>metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg</i> | Tier 1 | QL |
| <i>metformin hcl oral</i> | Tier 1 | |
| <i>miglitol</i> | Tier 1 | |
| <i>nateglinide</i> | Tier 1 | |
| NESINA | Tier 3 | ST; QL |
| NOVOLIN 70/30 | Tier 3 | ST |
| NOVOLIN 70/30 RELION | Tier 3 | ST |
| NOVOLIN N | Tier 3 | ST |
| NOVOLIN N RELION | Tier 3 | ST |
| NOVOLIN R | Tier 3 | ST |
| NOVOLIN R RELION | Tier 3 | ST |
| NOVOLOG | Tier 3 | ST |
| NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 3 | ST |
| NOVOLOG MIX 70/30 | Tier 3 | ST |
| NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR | Tier 3 | ST |
| NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE | Tier 3 | ST |
| ONGLYZA | Tier 2 | QL |
| OSENI | Tier 3 | ST; QL |
| <i>pioglitazone hcl</i> | Tier 1 | |
| <i>pioglitazone hcl-glimepiride</i> | Tier 1 | |
| <i>pioglitazone hcl-metformin hcl</i> | Tier 1 | |
| PRANDIN ORAL TABLET 1 MG, 2 MG | Tier 3 | |
| PRECOSE | Tier 3 | |
| <i>preferred plus glucose</i> | Tier 3 | |
| PROGLYCEM | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>px glucose</i> | Tier 3 | |
| <i>ra glucose oral gel</i> | Tier 1 | |
| <i>ra glucose oral tablet chewable</i> | Tier 3 | |
| RA TRUEPLUS GLUCOSE | Tier 3 | |
| RELION GLUCOSE DRINK | Tier 1 | |
| RELION GLUCOSE ORAL GEL | Tier 1 | |
| RELION GLUCOSE ORAL TABLET CHEWABLE | Tier 3 | |
| <i>repaglinide</i> | Tier 1 | |
| <i>repaglinide-metformin hcl</i> | Tier 1 | |
| RIOMET | Tier 3 | |
| <i>sm glucose</i> | Tier 3 | |
| SMART SENSE GLUCOSE | Tier 3 | |
| STARLIX | Tier 3 | |
| SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 2 | PA |
| SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 2 | PA |
| TANZEUM | Tier 3 | QL |
| <i>tgt glucose oral tablet chewable 4-6 gm-mg</i> | Tier 3 | |
| <i>tolazamide oral tablet 250 mg</i> | Tier 1 | |
| <i>tolbutamide</i> | Tier 1 | |
| TOUJEO SOLOSTAR | Tier 2 | |
| TRADJENTA | Tier 2 | QL |
| TRESIBA FLEXTOUCH | Tier 2 | |
| TRULICITY | Tier 2 | QL |
| <i>up & up glucose</i> | Tier 3 | |
| <i>value plus glucose oral gel</i> | Tier 1 | |
| <i>value plus glucose oral tablet chewable</i> | Tier 3 | |
| VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 2 | QL |
| <i>walgreens glucose</i> | Tier 3 | |
| *ANTIDIARRHEALS* | | |
| <i>diphenatol</i> | Tier 1 | |
| <i>diphenoxylate-atropine oral tablet</i> | Tier 1 | |
| LOMOTIL ORAL TABLET | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| MOTOFEN | Tier 3 | |
| MYTESI | Tier 3 | PA; ST; QL |
| <i>opium</i> | Tier 1 | |
| *ANTIDOTES AND SPECIFIC ANTAGONISTS* | | |
| <i>deferoxamine mesylate</i> | Tier 4 | SP |
| DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG | Tier 4 | SP |
| RADIOGARDASE | Tier 2 | |
| VISTOGARD | Tier 4 | SP; QL |
| *ANTIDOTES* | | |
| CHEMET | Tier 2 | |
| <i>deferoxamine mesylate</i> | Tier 4 | SP |
| DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG | Tier 4 | SP |
| EVZIO INJECTION SOLUTION AUTO-INJECTOR 0.4 MG/0.4ML | Tier 3 | PA; ST |
| EXJADE | Tier 4 | PA; SP |
| FERRIPROX ORAL SOLUTION | Tier 4 | PA |
| FERRIPROX ORAL TABLET | Tier 4 | PA; SP |
| JADENU | Tier 4 | PA; SP |
| JADENU SPRINKLE | Tier 4 | PA; SP |
| <i>naltrexone hcl oral</i> | Tier 1 | |
| NARCAN | Tier 2 | |
| RADIOGARDASE | Tier 2 | |
| VISTOGARD | Tier 4 | SP; QL |
| VIVITROL | Tier 3 | |
| *ANTIEMETICS* | | |
| AKYNZEO | Tier 3 | PA; ST; QL |
| ANZEMET ORAL | Tier 3 | QL |
| <i>aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg</i> | Tier 1 | QL |
| CESAMET | Tier 3 | QL |
| DICLEGIS | Tier 3 | PA; #; QL |
| <i>dronabinol</i> | Tier 1 | PA; QL |
| EMEND ORAL CAPSULE 125 MG, 40 MG, 80 MG | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|-------------------------------------|-------------|--------------|
| EMEND ORAL SUSPENSION RECONSTITUTED | Tier 2 | # |
| <i>granisetron hcl oral</i> | Tier 1 | |
| MARINOL | Tier 3 | PA; QL |
| <i>ondansetron</i> | Tier 1 | |
| <i>ondansetron hcl oral</i> | Tier 1 | |
| SANCUSO | Tier 3 | QL |
| <i>scopolamine</i> | Tier 1 | |
| SYNDROS | Tier 3 | PA; QL |
| TIGAN ORAL | Tier 3 | |
| <i>trimethobenzamide hcl oral</i> | Tier 1 | |
| VARUBI ORAL | Tier 3 | QL |
| ZOFRAN ODT | Tier 3 | |
| ZOFRAN ORAL | Tier 3 | |
| ZUPLENZ | Tier 3 | QL |
| *ANTIFUNGALS* | | |
| <i>bio-statin oral capsule</i> | Tier 3 | |
| <i>bio-statin oral powder</i> | Tier 1 | |
| CRESEMBA ORAL | Tier 3 | |
| DIFLUCAN | Tier 3 | |
| <i>fluconazole oral</i> | Tier 1 | |
| <i>flucytosine oral</i> | Tier 1 | |
| <i>griseofulvin microsize oral</i> | Tier 1 | |
| <i>griseofulvin ultramicrosize</i> | Tier 1 | |
| GRIS-PEG | Tier 3 | |
| <i>itraconazole oral</i> | Tier 1 | |
| <i>ketoconazole oral</i> | Tier 1 | |
| LAMISIL ORAL TABLET | Tier 3 | |
| NOXAFIL | Tier 3 | |
| <i>nystatin oral tablet</i> | Tier 1 | |
| ONMEL | Tier 3 | |
| SPORANOX | Tier 3 | |
| SPORANOX PULSEPAK | Tier 3 | |
| <i>terbinafine hcl oral</i> | Tier 1 | |
| VFEND | Tier 3 | |
| <i>voriconazole oral</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *ANTI-HISTAMINES* | | |
| <i>carbinoxamine maleate oral solution</i> | Tier 1 | |
| <i>carbinoxamine maleate oral tablet</i> | Tier 1 | |
| CLARINEX ORAL SYRUP | Tier 3 | QL |
| CLARINEX ORAL TABLET | Tier 3 | QL |
| <i>clemastine fumarate oral tablet 2.68 mg</i> | Tier 1 | |
| <i>cyproheptadine hcl oral</i> | Tier 1 | |
| <i>desloratadine</i> | Tier 1 | QL |
| PHENADOZ | Tier 1 | PA; AL |
| <i>promethazine hcl oral</i> | Tier 1 | PA; AL |
| <i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i> | Tier 1 | PA; AL |
| PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG | Tier 1 | PA; AL |
| PROMETHEGAN RECTAL SUPPOSITORY 50 MG | Tier 3 | PA; AL |
| RYVENT | Tier 3 | PA; ST; QL |
| *ANTIHYPERLIPIDEMICS* | | |
| ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG, 40 MG, 60 MG | Tier 3 | QL |
| ANTARA ORAL CAPSULE 30 MG, 90 MG | Tier 3 | QL |
| <i>atorvastatin calcium oral tablet 10 mg</i> | CE | QL |
| <i>atorvastatin calcium oral tablet 20 mg, 40 mg, 80 mg</i> | Tier 1 | QL |
| <i>cholestyramine light</i> | Tier 1 | |
| <i>cholestyramine oral</i> | Tier 1 | |
| COLESTID FLAVORED ORAL PACKET | Tier 3 | |
| COLESTID ORAL PACKET | Tier 3 | |
| COLESTID ORAL TABLET | Tier 3 | |
| <i>colestipol hcl</i> | Tier 1 | |
| CRESTOR | Tier 3 | ST; #; QL |
| <i>ezetimibe</i> | Tier 1 | QL |
| <i>ezetimibe-simvastatin</i> | Tier 1 | QL |
| <i>fenofibrate micronized</i> | Tier 1 | QL |
| <i>fenofibrate oral</i> | Tier 1 | QL |
| <i>fenofibric acid oral capsule delayed release</i> | Tier 1 | |
| FENOGLIDE | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| FIBRICOR | Tier 3 | |
| <i>flolipid oral suspension 20 mg/5ml, 40 mg/5ml</i> | Tier 3 | PA; ST; QL |
| <i>fluvastatin sodium</i> | Tier 1 | QL |
| <i>fluvastatin sodium er</i> | Tier 1 | QL |
| <i>gemfibrozil oral</i> | Tier 1 | |
| JUXTAPID ORAL CAPSULE 10 MG, 5 MG | Tier 4 | PA; ST; SP; QL |
| JUXTAPID ORAL CAPSULE 20 MG, 30 MG, 40 MG, 60 MG | Tier 4 | PA; ST; SP |
| KYNAMRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP; QL |
| LESCOL ORAL CAPSULE 20 MG | Tier 3 | QL |
| LESCOL XL | Tier 3 | QL |
| LIPITOR | Tier 3 | QL |
| LIPOFEN | Tier 3 | QL |
| LIVALO | Tier 3 | ST; QL |
| LOFIBRA ORAL CAPSULE 134 MG, 67 MG | Tier 3 | QL |
| LOFIBRA ORAL TABLET 54 MG | Tier 3 | QL |
| LOPID | Tier 3 | |
| <i>lovastatin</i> | Tier 1 | QL |
| LOVAZA | Tier 3 | QL |
| MEVACOR ORAL TABLET 40 MG | Tier 3 | QL |
| <i>niacin er (antihyperlipidemic)</i> | Tier 1 | |
| NIACOR | Tier 3 | |
| NIASPAN | Tier 3 | |
| <i>omega-3-acid ethyl esters</i> | Tier 1 | QL |
| PRAVACHOL ORAL TABLET 20 MG, 40 MG, 80 MG | Tier 3 | QL |
| <i>pravastatin sodium</i> | Tier 1 | QL |
| PREVALITE | Tier 1 | |
| QUESTRAN | Tier 3 | |
| QUESTRAN LIGHT ORAL POWDER | Tier 3 | |
| <i>rosuvastatin calcium</i> | Tier 1 | QL |
| <i>simvastatin oral tablet 10 mg, 5 mg</i> | CE | QL |
| <i>simvastatin oral tablet 20 mg, 40 mg, 80 mg</i> | Tier 1 | QL |
| TRICOR | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| TRIGLIDE ORAL TABLET 160 MG | Tier 3 | QL |
| TRILIPIX | Tier 3 | |
| VASCEPA ORAL CAPSULE 0.5 GM, 1 GM | Tier 2 | QL |
| VYTORIN | Tier 3 | ST; #; QL |
| WELCHOL | Tier 3 | # |
| ZETIA | Tier 3 | ST; QL |
| ZOCOR | Tier 3 | QL |
| *ANTIHYPERTENSIVES* | | |
| ACCUPRIL | Tier 3 | |
| ACCURETIC | Tier 3 | |
| ACEON ORAL TABLET 4 MG, 8 MG | Tier 3 | |
| ALTACE ORAL CAPSULE | Tier 3 | |
| <i>amlodipine besy-benazepril hcl</i> | Tier 1 | |
| <i>amlodipine besylate-valsartan</i> | Tier 1 | QL |
| <i>amlodipine-olmesartan</i> | Tier 1 | QL |
| <i>amlodipine-valsartan-hctz</i> | Tier 1 | QL |
| ATACAND HCT ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG | Tier 3 | QL |
| ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG | Tier 3 | QL |
| <i>atenolol-chlorthalidone</i> | Tier 1 | |
| AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG | Tier 3 | QL |
| AVAPRO | Tier 3 | QL |
| AZOR | Tier 3 | ST; QL |
| <i>benazepril hcl oral</i> | Tier 1 | |
| <i>benazepril-hydrochlorothiazide</i> | Tier 1 | |
| BENICAR HCT | Tier 3 | QL |
| BENICAR ORAL TABLET 20 MG, 5 MG | Tier 3 | QL |
| BENICAR ORAL TABLET 40 MG | Tier 3 | |
| <i>bisoprolol-hydrochlorothiazide</i> | Tier 1 | |
| <i>candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i> | Tier 1 | QL |
| <i>candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i> | Tier 1 | QL |
| <i>captopril oral</i> | Tier 1 | |
| CARDURA | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| CATAPRES | Tier 3 | |
| CATAPRES-TTS-1 | Tier 3 | |
| CATAPRES-TTS-2 | Tier 3 | |
| CATAPRES-TTS-3 | Tier 3 | |
| <i>clonidine hcl oral</i> | Tier 1 | |
| <i>clonidine hcl transdermal</i> | Tier 3 | |
| CLORPRES | Tier 3 | |
| CORZIDE | Tier 3 | |
| COZAAR ORAL TABLET 100 MG | Tier 3 | |
| COZAAR ORAL TABLET 25 MG, 50 MG | Tier 3 | QL |
| DEMSER | Tier 3 | |
| DIBENZYLINE | Tier 4 | PA; ST |
| DIOVAN HCT | Tier 3 | QL |
| DIOVAN ORAL TABLET 160 MG, 40 MG, 80 MG | Tier 3 | QL |
| DIOVAN ORAL TABLET 320 MG | Tier 3 | |
| <i>doxazosin mesylate</i> | Tier 1 | |
| DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR 100-12.5 MG, 25-12.5 MG, 50-12.5 MG | Tier 3 | ST; QL |
| EDARBI | Tier 3 | QL |
| EDARBYCLOR | Tier 3 | QL |
| <i>enalapril maleate oral</i> | Tier 1 | |
| <i>enalapril-hydrochlorothiazide</i> | Tier 1 | |
| EPANED ORAL SOLUTION | Tier 3 | PA; QL |
| <i>eplerenone</i> | Tier 1 | |
| <i>eprosartan mesylate</i> | Tier 1 | QL |
| EXFORGE | Tier 3 | QL |
| EXFORGE HCT | Tier 3 | QL |
| <i>fosinopril sodium</i> | Tier 1 | |
| <i>fosinopril sodium-hctz</i> | Tier 1 | |
| <i>guanfacine hcl oral</i> | Tier 1 | |
| <i>hydralazine hcl oral</i> | Tier 1 | |
| HYZAAR | Tier 3 | |
| INSPRA | Tier 3 | |
| <i>irbesartan</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| <i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg</i> | Tier 1 | QL |
| <i>irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg</i> | Tier 1 | |
| <i>lisinopril oral</i> | Tier 1 | |
| <i>lisinopril-hydrochlorothiazide</i> | Tier 1 | |
| LOPRESSOR HCT ORAL TABLET 50-25 MG | Tier 3 | |
| <i>losartan potassium oral tablet 100 mg</i> | Tier 1 | |
| <i>losartan potassium oral tablet 25 mg, 50 mg</i> | Tier 1 | QL |
| <i>losartan potassium-hctz</i> | Tier 1 | |
| LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG | Tier 3 | |
| LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG | Tier 3 | |
| LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG | Tier 3 | |
| MAVIK ORAL TABLET 4 MG | Tier 3 | |
| <i>methyldopa oral</i> | Tier 1 | |
| <i>metoprolol-hctz er oral tablet extended release 24 hour 100-12.5 mg, 25-12.5 mg, 50-12.5 mg</i> | Tier 3 | ST; QL |
| <i>metoprolol-hydrochlorothiazide</i> | Tier 1 | |
| MICARDIS | Tier 3 | QL |
| MICARDIS HCT | Tier 3 | QL |
| MINIPRESS | Tier 3 | |
| <i>minoxidil oral</i> | Tier 1 | |
| <i>moexipril hcl</i> | Tier 1 | |
| <i>moexipril-hydrochlorothiazide</i> | Tier 1 | |
| <i>nadolol-bendroflumethiazide</i> | Tier 1 | |
| <i>olmesartan medoxomil oral tablet 20 mg, 5 mg</i> | Tier 1 | QL |
| <i>olmesartan medoxomil oral tablet 40 mg</i> | Tier 1 | |
| <i>olmesartan medoxomil-hctz</i> | Tier 1 | QL |
| <i>olmesartan-amlodipine-hctz</i> | Tier 1 | QL |
| <i>perindopril erbumine</i> | Tier 1 | |
| <i>phenoxybenzamine hcl oral</i> | Tier 4 | PA |
| <i>prazosin hcl oral</i> | Tier 1 | |
| PRESTALIA | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| PRINIVIL | Tier 3 | |
| QBRELIS | Tier 3 | PA |
| <i>quinapril hcl</i> | Tier 1 | |
| <i>quinapril-hydrochlorothiazide</i> | Tier 1 | |
| <i>ramipril</i> | Tier 1 | |
| TARKA | Tier 3 | |
| TEKTURNA | Tier 3 | ST; QL |
| TEKTURNA HCT | Tier 3 | ST; QL |
| <i>telmisartan</i> | Tier 1 | QL |
| <i>telmisartan-hctz</i> | Tier 1 | QL |
| TENORETIC 100 | Tier 3 | |
| TENORETIC 50 | Tier 3 | |
| <i>terazosin hcl oral</i> | Tier 1 | |
| <i>trandolapril</i> | Tier 1 | |
| <i>trandolapril-verapamil hcl er</i> | Tier 1 | |
| TRIBENZOR | Tier 3 | ST; QL |
| TWYNSTA | Tier 3 | |
| <i>valsartan</i> | Tier 1 | |
| <i>valsartan-hydrochlorothiazide</i> | Tier 1 | QL |
| VASERETIC | Tier 3 | |
| VASOTEC | Tier 3 | ST |
| VECAMYL | Tier 4 | PA; ST; SP; QL |
| ZESTORETIC | Tier 3 | |
| ZESTRIL | Tier 3 | |
| ZIAC | Tier 3 | |
| *ANTI-INFECTIVE AGENTS - MISC.* | | |
| ALINIA ORAL SUSPENSION RECONSTITUTED | Tier 3 | #; QL |
| ALINIA ORAL TABLET | Tier 3 | #; QL |
| BACTRIM | Tier 3 | |
| BACTRIM DS | Tier 3 | |
| CAYSTON | Tier 4 | SP |
| CLEOCIN ORAL CAPSULE 150 MG, 300 MG | Tier 3 | |
| CLEOCIN ORAL SOLUTION RECONSTITUTED | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>clindamycin hcl oral</i> | Tier 1 | |
| <i>clindamycin palmitate hcl</i> | Tier 1 | |
| <i>colistimethate sodium injection</i> | Tier 4 | SP |
| COLY-MYCIN M | Tier 4 | SP |
| <i>dapsone oral</i> | Tier 1 | |
| FIRST-VANCOMYCIN 25 | Tier 3 | |
| FIRST-VANCOMYCIN 50 | Tier 3 | |
| FLAGYL ORAL TABLET | Tier 3 | |
| IMPAVIDO | Tier 3 | PA; QL |
| <i>linezolid oral</i> | Tier 1 | |
| MEPRON | Tier 3 | |
| <i>metronidazole oral tablet</i> | Tier 1 | |
| NEBUPENT | Tier 2 | |
| PRIMSOL | Tier 3 | |
| SIVEXTRO ORAL | Tier 3 | QL |
| <i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i> | Tier 1 | |
| <i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg</i> | Tier 1 | |
| SULFATRIM PEDIATRIC | Tier 1 | |
| TINDAMAX ORAL TABLET 500 MG | Tier 3 | |
| <i>tinidazole oral</i> | Tier 1 | |
| <i>trimethoprim oral</i> | Tier 1 | |
| <i>trimpex</i> | Tier 3 | |
| VANCOCIN HCL | Tier 3 | |
| <i>vancomycin hcl oral</i> | Tier 1 | |
| XIFAXAN ORAL TABLET 200 MG | Tier 3 | QL |
| XIFAXAN ORAL TABLET 550 MG | Tier 2 | PA; QL |
| ZYVOX ORAL SUSPENSION RECONSTITUTED | Tier 2 | # |
| ZYVOX ORAL TABLET | Tier 3 | |
| *ANTIMALARIALS* | | |
| <i>atovaquone-proguanil hcl oral tablet 250-100 mg</i> | Tier 1 | PA |
| <i>atovaquone-proguanil hcl oral tablet 62.5-25 mg</i> | Tier 1 | |
| <i>chloroquine phosphate oral</i> | Tier 1 | |
| COARTEM | Tier 3 | PA |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| DARAPRIM | Tier 2 | |
| <i>hydroxychloroquine sulfate oral</i> | Tier 1 | |
| MALARONE | Tier 3 | PA |
| <i>mefloquine hcl</i> | Tier 1 | PA |
| PLAQUENIL | Tier 3 | |
| QUALAQUIN | Tier 3 | |
| <i>quinine sulfate oral</i> | Tier 1 | |
| *ANTIMYASTHENIC AGENTS* | | |
| MESTINON ORAL SYRUP | Tier 2 | |
| MESTINON ORAL TABLET | Tier 3 | |
| MESTINON ORAL TABLET EXTENDED RELEASE | Tier 2 | |
| <i>pyridostigmine bromide er</i> | Tier 1 | |
| <i>pyridostigmine bromide oral</i> | Tier 1 | |
| *ANTIMYASTHENIC/CHOLINERGIC AGENTS* | | |
| MESTINON ORAL SYRUP | Tier 2 | |
| MESTINON ORAL TABLET | Tier 3 | |
| MESTINON ORAL TABLET EXTENDED RELEASE | Tier 2 | |
| <i>pyridostigmine bromide er</i> | Tier 1 | |
| <i>pyridostigmine bromide oral</i> | Tier 1 | |
| *ANTIMYCOBACTERIAL AGENTS* | | |
| <i>ethambutol hcl oral</i> | Tier 1 | |
| <i>isoniazid oral tablet</i> | Tier 1 | |
| MYAMBUTOL | Tier 3 | |
| PASER | Tier 3 | |
| PRIFTIN | Tier 3 | |
| <i>pyrazinamide oral</i> | Tier 1 | |
| <i>rifabutin</i> | Tier 1 | |
| RIFADIN ORAL | Tier 3 | |
| RIFAMATE | Tier 3 | |
| <i>rifampin oral</i> | Tier 1 | |
| RIFATER | Tier 3 | |
| SIRTURO | Tier 4 | PA; SP; QL |
| TRECTOR | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *ANTINEOPLASTIC - BCL-2 INHIBITORS*** | | |
| VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG | Tier 4 | PA; SP; QL |
| VENCLEXTA STARTING PACK | Tier 4 | PA; SP; QL |
| *ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES* | | |
| ACTIMMUNE | Tier 4 | PA; SP |
| AFINITOR | Tier 4 | PA; SP; QL |
| AFINITOR DISPERZ | Tier 4 | PA; SP; QL |
| ALECENSA | Tier 4 | PA; SP; QL |
| ALFERON N | Tier 4 | SP |
| ALKERAN ORAL | Tier 2 | |
| ALUNBRIG | Tier 4 | PA; SP; QL |
| <i>anastrozole oral</i> | Tier 1 | |
| ARIMIDEX | Tier 3 | |
| AROMASIN | Tier 3 | |
| <i>bexarotene</i> | Tier 4 | SP |
| <i>bicalutamide</i> | Tier 1 | PA |
| BOSULIF | Tier 4 | PA; SP; QL |
| CABOMETYX | Tier 4 | PA; SP; QL |
| <i>capecitabine</i> | Tier 4 | PA; SP; QL |
| CAPRELSA | Tier 4 | PA; SP; QL |
| CASODEX | Tier 3 | PA |
| COMETRIQ (100 MG DAILY DOSE) | Tier 4 | PA; SP; QL |
| COMETRIQ (140 MG DAILY DOSE) | Tier 4 | PA; SP; QL |
| COMETRIQ (60 MG DAILY DOSE) | Tier 4 | PA; SP; QL |
| COTELLIC | Tier 4 | PA; SP; QL |
| <i>cyclophosphamide oral capsule</i> | Tier 2 | |
| ELIGARD | Tier 4 | PA; SP |
| EMCYT | Tier 2 | |
| ERIVEDGE | Tier 4 | PA; SP; QL |
| <i>etoposide oral</i> | Tier 1 | |
| <i>exemestane</i> | Tier 1 | |
| FARESTON | Tier 3 | |
| FARYDAK | Tier 4 | PA; SP; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|-------------------|
| FASLODEX INTRAMUSCULAR SOLUTION 250 MG/5ML | Tier 4 | PA; SP |
| FEMARA | Tier 3 | |
| FIRMAGON | Tier 4 | PA; SP |
| <i>flutamide</i> | Tier 1 | |
| GILOTRIF | Tier 4 | PA; SP; QL |
| GLEEVEC ORAL TABLET 100 MG, 400 MG | Tier 4 | PA; ST; #; SP; QL |
| GLEOSTINE | Tier 3 | |
| HEXALEN | Tier 2 | |
| HYCAMTIN ORAL | Tier 4 | PA; SP; QL |
| <i>hydroxyurea oral</i> | Tier 1 | |
| ICLUSIG | Tier 4 | PA; ST; SP; QL |
| <i>imatinib mesylate oral tablet 100 mg, 400 mg</i> | Tier 1 | PA; SP; QL |
| IMBRUVICA | Tier 4 | PA; SP; QL |
| INLYTA | Tier 4 | PA; SP; QL |
| INTRON A | Tier 4 | PA; SP |
| IRESSA | Tier 4 | PA; QL |
| JAKAFI | Tier 4 | PA; SP; QL |
| KISQALI FEMARA 200 DOSE | Tier 4 | PA; SP; QL |
| KISQALI FEMARA 400 DOSE | Tier 4 | PA; SP; QL |
| KISQALI FEMARA 600 DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 10 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 14 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 18 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 20 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 24 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| LENVIMA 8 MG DAILY DOSE | Tier 4 | PA; SP; QL |
| <i>letrozole oral</i> | Tier 1 | |
| <i>leucovorin calcium oral tablet 25 mg, 5 mg</i> | Tier 1 | |
| LEUKERAN | Tier 2 | |
| <i>leuprolide acetate injection</i> | Tier 4 | PA; SP |
| LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG | Tier 4 | PA; QL |
| LUPRON DEPOT (1-MONTH) | Tier 4 | PA; #; SP |
| LUPRON DEPOT (3-MONTH) | Tier 4 | PA; #; SP |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| LUPRON DEPOT (4-MONTH) | Tier 4 | PA; #; SP |
| LUPRON DEPOT (6-MONTH) | Tier 4 | PA; #; SP |
| LYSODREN | Tier 3 | |
| MATULANE | Tier 2 | |
| <i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml</i> | Tier 1 | |
| <i>megestrol acetate oral tablet</i> | Tier 1 | |
| MEKINIST | Tier 4 | PA; SP; QL |
| <i>melphalan</i> | Tier 1 | |
| <i>mercaptopurine oral</i> | Tier 1 | |
| MESNEX ORAL | Tier 3 | |
| <i>methotrexate oral</i> | Tier 1 | |
| MYLERAN | Tier 2 | |
| NERLYNX | Tier 4 | PA; SP; QL |
| NEXAVAR | Tier 4 | PA; SP; QL |
| NILANDRON | Tier 2 | |
| <i>nilutamide</i> | Tier 1 | |
| NINLARO | Tier 4 | PA; QL |
| ODOMZO | Tier 4 | PA; QL |
| POMALYST | Tier 4 | PA; SP; QL |
| PURIXAN | Tier 4 | PA; ST; SP; QL |
| RYDAPT | Tier 4 | PA; SP; QL |
| SOLTAMOX | Tier 3 | |
| SPRYCEL | Tier 4 | PA; ST; SP; QL |
| STIVARGA | Tier 4 | PA; SP; QL |
| SUTENT | Tier 4 | PA; SP; QL |
| SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG | Tier 4 | PA; SP; QL |
| TABLOID | Tier 2 | |
| TAFINLAR | Tier 4 | PA; SP; QL |
| TAGRISSO | Tier 4 | PA; SP; QL |
| <i>tamoxifen citrate oral</i> | CE | |
| TARCEVA | Tier 4 | PA; SP; QL |
| TARGRETIN ORAL | Tier 4 | SP |
| TASIGNA | Tier 4 | PA; ST; SP; QL |
| TEMODAR ORAL | Tier 4 | PA; SP; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| <i>temozolomide</i> | Tier 4 | PA; SP; QL |
| TRELSTAR MIXJECT | Tier 4 | PA; #; SP |
| <i>tretinoin oral</i> | Tier 4 | SP; QL |
| TREXALL | Tier 3 | |
| TYKERB | Tier 4 | PA; SP; QL |
| VANTAS | Tier 4 | PA; SP |
| VOTRIENT | Tier 4 | PA; SP; QL |
| XALKORI | Tier 4 | PA; SP; QL |
| XATMEP | Tier 3 | PA |
| XELODA | Tier 4 | PA; ST; SP; QL |
| XTANDI | Tier 4 | PA; ST; SP; QL |
| ZELBORAF | Tier 4 | PA; SP; QL |
| ZOLADEX | Tier 4 | PA; SP |
| ZOLINZA | Tier 4 | PA; SP; QL |
| ZYKADIA | Tier 4 | PA; SP; QL |
| ZYTIGA ORAL TABLET 250 MG, 500 MG | Tier 4 | PA; SP; QL |
| *ANTIPARKINSON AGENTS* | | |
| <i>amantadine hcl oral capsule</i> | Tier 1 | |
| <i>amantadine hcl oral syrup</i> | Tier 1 | |
| AZILECT | Tier 3 | QL |
| <i>benztropine mesylate oral</i> | Tier 1 | |
| <i>bromocriptine mesylate oral</i> | Tier 1 | |
| <i>carbidopa-levodopa</i> | Tier 1 | |
| <i>carbidopa-levodopa er oral tablet extended release 50-200 mg</i> | Tier 1 | |
| COMTAN | Tier 3 | |
| DUOPA ENTERAL | Tier 4 | PA; ST |
| ELDEPRYL | Tier 3 | |
| <i>entacapone</i> | Tier 1 | |
| GOCOVRI | Tier 3 | PA; ST; QL |
| MIRAPEX | Tier 3 | |
| MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.375 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG | Tier 3 | QL |
| MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 2.25 MG, 3.75 MG | Tier 3 | #; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| NEUPRO | Tier 3 | #; QL |
| PARLODEL | Tier 3 | |
| <i>pramipexole dihydrochloride</i> | Tier 1 | |
| <i>pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 3 mg</i> | Tier 1 | |
| <i>pramipexole dihydrochloride er oral tablet extended release 24 hour 2.25 mg, 3.75 mg, 4.5 mg</i> | Tier 1 | QL |
| <i>rasagiline mesylate oral</i> | Tier 1 | QL |
| REQUIP | Tier 3 | |
| REQUIP XL ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 2 MG, 4 MG, 6 MG, 8 MG | Tier 3 | QL |
| <i>ropinirole hcl</i> | Tier 1 | |
| <i>ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i> | Tier 1 | QL |
| RYTARY | Tier 3 | |
| <i>selegiline hcl oral</i> | Tier 1 | |
| SINEMET | Tier 3 | |
| SINEMET CR | Tier 3 | |
| STALEVO 100 | Tier 3 | |
| STALEVO 125 | Tier 3 | |
| STALEVO 150 | Tier 3 | |
| STALEVO 200 | Tier 3 | |
| STALEVO 50 | Tier 3 | |
| STALEVO 75 | Tier 3 | |
| TASMAR ORAL TABLET 100 MG | Tier 3 | |
| <i>tolcapone</i> | Tier 1 | |
| <i>trihexyphenidyl hcl</i> | Tier 1 | |
| XADAGO | Tier 3 | PA; ST; QL |
| ZELAPAR | Tier 3 | ST; QL |
| *ANTIPSYCHOTICS/ANTIMANIC AGENTS* | | |
| ABILIFY ORAL TABLET | Tier 3 | PA; ST; QL |
| <i>aripiprazole oral solution</i> | Tier 1 | QL |
| <i>aripiprazole oral tablet</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| <i>aripiprazole oral tablet dispersible</i> | Tier 1 | QL |
| <i>chlorpromazine hcl oral</i> | Tier 1 | |
| <i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i> | Tier 1 | QL |
| <i>clozapine oral tablet dispersible 150 mg, 200 mg</i> | Tier 1 | QL |
| CLOZARIL ORAL TABLET 100 MG, 25 MG | Tier 3 | ST; QL |
| COMPRO | Tier 1 | |
| EQUETRO | Tier 3 | |
| FANAPT | Tier 3 | ST; QL |
| FANAPT TITRATION PACK | Tier 3 | ST; QL |
| FAZACLO ORAL TABLET DISPERSIBLE 100 MG, 12.5 MG, 150 MG, 200 MG, 25 MG | Tier 3 | ST; QL |
| <i>fluphenazine hcl oral tablet</i> | Tier 1 | |
| GEODON ORAL | Tier 3 | ST; QL |
| <i>haloperidol lactate oral</i> | Tier 1 | |
| <i>haloperidol oral</i> | Tier 1 | |
| INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 1.5 MG, 3 MG, 6 MG, 9 MG | Tier 3 | ST; #; QL |
| LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG | Tier 2 | QL |
| <i>lithium carbonate er</i> | Tier 1 | |
| <i>lithium carbonate oral</i> | Tier 1 | |
| LITHOBID | Tier 3 | |
| <i>loxapine succinate oral</i> | Tier 1 | |
| NUPLAZID | Tier 4 | PA; SP; QL |
| <i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i> | Tier 1 | QL |
| <i>olanzapine oral tablet dispersible</i> | Tier 1 | QL |
| <i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg</i> | Tier 1 | QL |
| <i>perphenazine oral</i> | Tier 1 | |
| <i>prochlorperazine</i> | Tier 1 | |
| <i>prochlorperazine maleate oral</i> | Tier 1 | |
| <i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i> | Tier 1 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i> | Tier 1 | QL |
| REXULTI | Tier 3 | ST; QL |
| RISPERDAL M-TAB ORAL TABLET DISPERSIBLE 0.5 MG, 1 MG, 3 MG, 4 MG | Tier 3 | ST; QL |
| RISPERDAL ORAL SOLUTION | Tier 3 | ST |
| RISPERDAL ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | Tier 3 | ST; QL |
| RISPERIDONE M-TAB ORAL TABLET DISPERSIBLE 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | Tier 1 | QL |
| <i>risperidone oral solution</i> | Tier 1 | |
| <i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i> | Tier 1 | QL |
| <i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i> | Tier 1 | QL |
| SAPHRIS | Tier 3 | ST; QL |
| SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG | Tier 3 | ST; QL |
| SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG | Tier 3 | QL |
| <i>thioridazine hcl oral</i> | Tier 1 | |
| <i>thiothixene oral</i> | Tier 1 | |
| <i>trifluoperazine hcl oral</i> | Tier 1 | |
| VERSACLOZ | Tier 3 | ST |
| VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG | Tier 3 | ST; QL |
| VRAYLAR ORAL CAPSULE THERAPY PACK | Tier 3 | ST |
| <i>ziprasidone hcl</i> | Tier 1 | QL |
| ZYPREXA ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG | Tier 3 | ST; QL |
| ZYPREXA ZYDIS | Tier 3 | ST; QL |
| *ANTIRETROVIRALS ADJUVANTS*** | | |
| TYBOST | Tier 3 | QL |
| *ANTISEPTICS & DISINFECTANTS* | | |
| BUCALSEP EXTERNAL SOLUTION | Tier 3 | |
| FORMADON | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| <i>formaldehyde external solution 10 %</i> | Tier 1 | |
| FORMA-RAY | Tier 3 | |
| KERR TRIPLE DYE SWABS | Tier 3 | |
| *ANTIVIRALS* | | |
| <i>abacavir sulfate</i> | Tier 1 | |
| <i>abacavir sulfate-lamivudine</i> | Tier 1 | |
| <i>abacavir-lamivudine-zidovudine</i> | Tier 1 | |
| <i>acyclovir oral</i> | Tier 1 | |
| <i>adefovir dipivoxil</i> | Tier 1 | SP |
| APTIVUS | Tier 2 | |
| ATRIPLA | Tier 2 | |
| BARACLUDE | Tier 4 | SP |
| <i>cidofovir intravenous</i> | Tier 4 | SP |
| COMBIVIR | Tier 3 | |
| COMPLERA | Tier 2 | |
| COPEGUS | Tier 4 | SP |
| CRIXIVAN ORAL CAPSULE 200 MG, 400 MG | Tier 3 | |
| CYTOVENE | Tier 4 | SP |
| DAKLINZA | Tier 4 | PA; ST; SP; QL |
| DESCOVY | Tier 3 | PA; QL |
| <i>didanosine</i> | Tier 1 | |
| EDURANT | Tier 3 | |
| EMTRIVA | Tier 2 | |
| <i>entecavir</i> | Tier 4 | SP |
| EPIVIR | Tier 3 | |
| EPIVIR HBV | Tier 2 | |
| EPZICOM | Tier 3 | |
| EVOTAZ | Tier 3 | |
| <i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i> | Tier 1 | QL |
| FAMVIR ORAL TABLET 500 MG | Tier 3 | QL |
| FLUMADINE | Tier 3 | |
| <i>fosamprenavir calcium</i> | Tier 1 | |
| FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED | Tier 4 | PA; #; SP |
| <i>ganciclovir sodium</i> | Tier 4 | SP |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| GENVOYA | Tier 3 | PA; QL |
| HEPSERA | Tier 4 | SP |
| INTELENCE | Tier 3 | |
| INVIRASE | Tier 3 | |
| ISENTRESS | Tier 2 | |
| ISENTRESS HD | Tier 2 | QL |
| KALETRA ORAL SOLUTION | Tier 3 | # |
| KALETRA ORAL TABLET | Tier 2 | # |
| <i>lamivudine</i> | Tier 1 | |
| <i>lamivudine-zidovudine</i> | Tier 1 | |
| LEXIVA ORAL SUSPENSION | Tier 2 | # |
| LEXIVA ORAL TABLET | Tier 3 | # |
| <i>lopinavir-ritonavir</i> | Tier 1 | |
| MODERIBA 1200 DOSE PACK | Tier 4 | SP |
| MODERIBA 800 DOSE PACK | Tier 4 | SP |
| <i>moderiba oral tablet 200 mg</i> | Tier 4 | SP |
| <i>nevirapine er</i> | Tier 1 | |
| <i>nevirapine oral tablet</i> | Tier 1 | |
| NORVIR ORAL CAPSULE | Tier 2 | # |
| NORVIR ORAL SOLUTION | Tier 2 | |
| NORVIR ORAL TABLET | Tier 2 | |
| ODEFSEY | Tier 3 | QL |
| OLYSIO | Tier 4 | PA; ST; SP; QL |
| <i>oseltamivir phosphate oral capsule</i> | Tier 1 | QL |
| PEGASYS PROCLICK | Tier 4 | PA; SP |
| PEGASYS SUBCUTANEOUS SOLUTION | Tier 4 | PA; SP |
| PEGINTRON | Tier 4 | PA; SP |
| PREZCOBIX | Tier 2 | |
| PREZISTA ORAL SUSPENSION | Tier 2 | |
| PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG | Tier 2 | |
| REBETOL | Tier 4 | SP |
| RELENZA DISKHALER | Tier 3 | QL |
| RESCRIPTOR | Tier 3 | |
| RETROVIR ORAL CAPSULE | Tier 3 | |
| RETROVIR ORAL SYRUP | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG | Tier 2 | # |
| REYATAZ ORAL PACKET | Tier 2 | # |
| <i>ribasphere</i> | Tier 4 | SP |
| <i>ribasphere ribapak oral tablet 400 mg, 600 mg</i> | Tier 4 | SP |
| <i>ribavirin oral capsule</i> | Tier 4 | SP |
| <i>ribavirin oral tablet 200 mg</i> | Tier 4 | SP |
| <i>rimantadine hcl</i> | Tier 1 | |
| SELZENTRY ORAL SOLUTION | Tier 3 | QL |
| SELZENTRY ORAL TABLET 150 MG, 300 MG | Tier 3 | |
| SELZENTRY ORAL TABLET 25 MG, 75 MG | Tier 3 | QL |
| SITAVIG | Tier 3 | ST |
| SOVALDI | Tier 4 | PA; SP; QL |
| <i>stavudine oral capsule</i> | Tier 1 | |
| STRIBILD | Tier 3 | PA |
| SUSTIVA | Tier 2 | # |
| TAMIFLU ORAL CAPSULE | Tier 3 | QL |
| TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML | Tier 3 | #; QL |
| TIVICAY | Tier 2 | |
| TRIUMEQ | Tier 2 | |
| TRIZIVIR | Tier 3 | |
| TRUVADA | Tier 2 | PA |
| <i>valacyclovir hcl oral</i> | Tier 1 | |
| VALCYTE ORAL SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| VALCYTE ORAL TABLET | Tier 4 | PA; SP; QL |
| <i>valganciclovir hcl oral solution reconstituted</i> | Tier 4 | PA; SP; QL |
| <i>valganciclovir hcl oral tablet</i> | Tier 4 | PA; SP; QL |
| VALTREX | Tier 3 | ST |
| VEMLIDY | Tier 4 | PA; ST; SP; QL |
| VIDEX | Tier 2 | |
| VIDEX EC | Tier 3 | |
| VIRACEPT ORAL TABLET | Tier 3 | |
| VIRAMUNE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| VIRAMUNE XR | Tier 3 | |
| VIRAZOLE | Tier 3 | |
| VIREAD | Tier 2 | # |
| ZERIT | Tier 3 | |
| ZIAGEN | Tier 3 | |
| <i>zidovudine</i> | Tier 1 | |
| ZOVIRAX ORAL CAPSULE | Tier 3 | |
| ZOVIRAX ORAL SUSPENSION | Tier 3 | |
| ZOVIRAX ORAL TABLET 800 MG | Tier 3 | |
| *ASSORTED CLASSES* | | |
| ARGYLE STERILE WATER | Tier 1 | |
| ASTAGRAF XL | Tier 4 | SP |
| ATGAM | Tier 4 | SP |
| AZASAN | Tier 3 | |
| <i>azathioprine oral</i> | Tier 1 | |
| BENLYSTA INTRAVENOUS | Tier 4 | PA; ST; SP |
| BENLYSTA SUBCUTANEOUS | Tier 4 | PA; ST; SP; QL |
| CELLCEPT | Tier 4 | SP |
| CUPRIMINE ORAL CAPSULE 250 MG | Tier 4 | PA; ST |
| <i>cyclosporine intravenous</i> | Tier 4 | SP |
| <i>cyclosporine modified</i> | Tier 1 | |
| <i>cyclosporine oral capsule</i> | Tier 1 | |
| DEPEN TITRATABS | Tier 4 | PA |
| ENVARUSUS XR | Tier 4 | |
| <i>engraf oral capsule 100 mg, 25 mg</i> | Tier 1 | |
| GENGRAF ORAL CAPSULE 50 MG | Tier 1 | |
| <i>engraf oral solution</i> | Tier 1 | |
| IMURAN | Tier 3 | |
| KIONEX | Tier 1 | |
| <i>lactated ringers irrigation</i> | Tier 1 | |
| <i>mycophenolate mofetil</i> | Tier 4 | SP |
| MYFORTIC | Tier 4 | SP |
| NEORAL | Tier 4 | SP |
| NULOJIX | Tier 4 | SP |
| PHYSIOLYTE | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| PHYSIOSOL IRRIGATION | Tier 1 | |
| PROGRAF | Tier 4 | SP |
| RAPAMUNE | Tier 4 | SP |
| REVLIMID | Tier 4 | PA; SP |
| <i>ringers irrigation</i> | Tier 1 | |
| SANDIMMUNE | Tier 4 | SP |
| SIMULECT | Tier 4 | SP |
| <i>sirolimus oral</i> | Tier 4 | SP |
| <i>sodium polystyrene sulfonate oral</i> | Tier 1 | |
| <i>sodium polystyrene sulfonate rectal</i> | Tier 1 | |
| SPS | Tier 3 | |
| <i>sterile water for irrigation</i> | Tier 1 | |
| SYPRINE | Tier 4 | PA; ST; # |
| <i>tacrolimus oral</i> | Tier 4 | SP |
| THALOMID | Tier 4 | PA; SP |
| THYMOGLOBULIN | Tier 4 | SP |
| TIS-U-SOL | Tier 1 | |
| VELTASSA | Tier 4 | PA; QL |
| XIAFLEX | Tier 4 | SP |
| ZORTRESS | Tier 4 | SP |
| *ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES*** | | |
| DUPIXENT | Tier 4 | PA; SP; QL |
| *BETA BLOCKER & ANGIOTENSIN II RECEPTOR ANTAGONIST COMB*** | | |
| BYVALSON | Tier 2 | QL |
| *BETA BLOCKERS* | | |
| <i>acebutolol hcl oral</i> | Tier 1 | |
| <i>atenolol oral</i> | Tier 1 | |
| BETAPACE AF | Tier 3 | |
| BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG | Tier 3 | |
| <i>betaxolol hcl oral</i> | Tier 1 | |
| <i>bisoprolol fumarate</i> | Tier 1 | |
| BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG | Tier 2 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>carvedilol</i> | Tier 1 | |
| COREG | Tier 3 | |
| COREG CR | Tier 3 | # |
| CORGARD | Tier 3 | |
| HEMANGEOL | Tier 3 | PA |
| INDERAL LA | Tier 3 | ST |
| INDERAL XL | Tier 3 | |
| <i>labetalol hcl oral</i> | Tier 1 | |
| LOPRESSOR ORAL | Tier 3 | |
| <i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i> | Tier 1 | QL |
| <i>metoprolol tartrate oral</i> | Tier 1 | |
| <i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i> | Tier 1 | |
| <i>propranolol hcl er</i> | Tier 1 | |
| <i>propranolol hcl oral tablet</i> | Tier 1 | |
| SORINE | Tier 1 | |
| <i>sotalol hcl (af)</i> | Tier 1 | |
| <i>sotalol hcl oral</i> | Tier 1 | |
| SOTYLIZE | Tier 3 | |
| TENORMIN | Tier 3 | |
| TOPROL XL | Tier 3 | |
| *BILE ACID SYNTHESIS DISORDER AGENTS*** | | |
| CHOLBAM | Tier 4 | PA |
| *BIOLOGICALS MISC* | | |
| ADAGEN | Tier 4 | SP |
| *CALCIUM CHANNEL BLOCKERS* | | |
| ADALAT CC | Tier 3 | |
| AFEDITAB CR | Tier 1 | |
| <i>amlodipine besylate oral</i> | Tier 1 | |
| CALAN ORAL TABLET 120 MG, 80 MG | Tier 3 | |
| CALAN SR | Tier 3 | |
| CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG | Tier 3 | ST |
| CARDIZEM LA | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG | Tier 3 | |
| CARTIA XT | Tier 1 | |
| <i>diltiazem hcl er beads</i> | Tier 1 | |
| <i>diltiazem hcl er coated beads</i> | Tier 1 | |
| <i>diltiazem hcl er oral capsule extended release 12 hour</i> | Tier 1 | |
| <i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i> | Tier 1 | |
| <i>diltiazem hcl oral</i> | Tier 1 | |
| <i>dilt-xr</i> | Tier 1 | |
| <i>felodipine er</i> | Tier 1 | |
| ISOPTIN SR ORAL TABLET EXTENDED RELEASE 240 MG | Tier 3 | |
| MATZIM LA | Tier 1 | |
| <i>nicardipine hcl oral</i> | Tier 1 | |
| NIFEDIAC CC ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG | Tier 1 | |
| NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG | Tier 1 | |
| <i>nifedipine er</i> | Tier 1 | |
| <i>nifedipine er osmotic release</i> | Tier 1 | |
| <i>nifedipine oral</i> | Tier 1 | |
| <i>nimodipine oral</i> | Tier 1 | |
| <i>nisoldipine er oral tablet extended release 24 hour 17 mg, 34 mg, 8.5 mg</i> | Tier 1 | |
| NORVASC | Tier 3 | |
| NYMALIZE ORAL SOLUTION 60 MG/20ML | Tier 3 | QL |
| PROCARDIA | Tier 3 | |
| PROCARDIA XL | Tier 3 | |
| SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG | Tier 3 | |
| TAZTIA XT | Tier 1 | |
| TIAZAC | Tier 3 | |
| <i>verapamil hcl er oral capsule extended release 24 hour</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|-------------------|
| <i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i> | Tier 1 | |
| <i>verapamil hcl oral</i> | Tier 1 | |
| VERELAN | Tier 3 | |
| VERELAN PM | Tier 3 | |
| *CARDIOTONICS* | | |
| DIGOX | Tier 1 | |
| <i>digoxin oral tablet</i> | Tier 1 | |
| LANOXIN ORAL | Tier 3 | |
| *CARDIOVASCULAR AGENTS - MISC.* | | |
| ADCIRCA | Tier 4 | PA; ST; SP; QL |
| ADEMPAS | Tier 4 | PA; ST; SP; QL |
| BIDIL | Tier 3 | |
| CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG | Tier 3 | QL |
| CAVERJECT | Tier 3 | PA |
| CAVERJECT IMPULSE | Tier 3 | PA |
| CIALIS ORAL TABLET 2.5 MG, 5 MG | Tier 2 | PA; N1 |
| EDEX | Tier 3 | PA |
| <i>epoprostenol sodium</i> | Tier 4 | PA; SP |
| FLOLAN | Tier 4 | PA; SP |
| LETAIRIS | Tier 4 | PA; SP |
| OPSUMIT | Tier 4 | PA; SP; QL |
| ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG | Tier 4 | PA; ST; SP |
| ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG | Tier 4 | PA; SP |
| REMODULIN | Tier 4 | PA; ST; SP |
| REVATIO INTRAVENOUS | Tier 4 | PA; ST; SP |
| REVATIO ORAL SUSPENSION RECONSTITUTED | Tier 4 | PA; ST; #; SP; QL |
| REVATIO ORAL TABLET | Tier 4 | PA; ST; SP; QL |
| <i>sildenafil citrate oral</i> | Tier 4 | PA; SP; QL |
| TRACLEER | Tier 4 | PA; #; SP |
| TYVASO | Tier 4 | PA; ST; SP |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| TYVASO REFILL | Tier 4 | PA; ST; SP |
| TYVASO STARTER | Tier 4 | PA; ST; SP |
| VELETRI | Tier 4 | PA; SP |
| VENTAVIS | Tier 4 | PA; ST; SP |
| *CEPHALOSPORINS* | | |
| CEDAX ORAL CAPSULE | Tier 3 | |
| CEDAX ORAL SUSPENSION RECONSTITUTED 180 MG/5ML | Tier 3 | |
| <i>cefaclor oral capsule</i> | Tier 1 | |
| <i>cefadroxil</i> | Tier 1 | |
| <i>cefдинир</i> | Tier 1 | |
| <i>cefixime</i> | Tier 1 | |
| <i>cefподoxime proxetil</i> | Tier 1 | |
| <i>cefprozil</i> | Tier 1 | |
| CEFTIN ORAL SUSPENSION RECONSTITUTED 250 MG/5ML | Tier 3 | |
| CEFTIN ORAL TABLET | Tier 3 | |
| <i>cefuroxime axetil oral tablet</i> | Tier 1 | |
| <i>cephalexin oral capsule</i> | Tier 1 | |
| <i>cephalexin oral suspension reconstituted</i> | Tier 1 | |
| DAXBIA | Tier 3 | QL |
| KEFLEX | Tier 3 | |
| SPECTRACEF ORAL TABLET 400 MG | Tier 3 | |
| SUPRAX ORAL CAPSULE | Tier 3 | # |
| SUPRAX ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| SUPRAX ORAL TABLET CHEWABLE | Tier 3 | # |
| *CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS*** | | |
| TRULANCE | Tier 3 | PA; ST; QL |
| *CONTRACEPTIVES* | | |
| ALTAVERA | CE | |
| <i>alyacen 1/35</i> | CE | |
| <i>alyacen 7/7/7</i> | Tier 1 | |
| AMETHIA | Tier 1 | |
| AMETHIA LO | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| APRI | CE | |
| ARANELLE | CE | |
| AUBRA | Tier 1 | |
| AVIANE | CE | |
| AZURETTE | CE | |
| BALZIVA | CE | |
| BEYAZ | Tier 3 | |
| BREVICON (28) | Tier 3 | |
| <i>briellyn</i> | CE | |
| CAMILA | Tier 1 | |
| CAMRESE | Tier 1 | |
| CAMRESE LO | Tier 1 | |
| CAZIAN | CE | |
| CESIA | CE | |
| CHATEAL | CE | |
| CRYSSELLE-28 | CE | |
| CYCLAFEM 1/35 | CE | |
| CYCLAFEM 7/7/7 | Tier 1 | |
| CYCLESSA | Tier 3 | |
| DASETTA 1/35 | CE | |
| DASETTA 7/7/7 | Tier 1 | |
| DAYSEE | Tier 1 | |
| DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML | Tier 3 | |
| DESOGEN | Tier 3 | |
| <i>desogestrel-ethinyl estradiol</i> | Tier 1 | |
| <i>drospiren-eth estrad-levomefol oral tablet 3- 0.02-0.451 mg</i> | CE | |
| <i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i> | Tier 1 | |
| ELINEST | CE | |
| ELLA | CE | |
| EMOQUETTE | CE | |
| ENPRESSE-28 | CE | |
| ENSKYCE | Tier 1 | |
| ERRIN | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| ESTARYLLA | Tier 1 | |
| ESTROSTEP FE | Tier 3 | |
| FALMINA | CE | |
| FAYOSIM | CE | |
| GENERESS FE | Tier 3 | |
| GIANVI | Tier 1 | |
| GILDAGIA | CE | |
| GILDESS FE 1.5/30 | CE | |
| GILDESS FE 1/20 | CE | |
| HEATHER | Tier 1 | |
| INTROVALE | Tier 1 | QL |
| JENCYCLA | Tier 1 | |
| JOLESSA | Tier 1 | QL |
| JOLIVETTE | Tier 1 | |
| JUNEL 1.5/30 | CE | |
| JUNEL 1/20 | CE | |
| JUNEL FE 1.5/30 | CE | |
| JUNEL FE 1/20 | CE | |
| KARIVA | CE | |
| KELNOR 1/35 | CE | |
| KURVELO | CE | |
| KYLEENA | CE | |
| LARIN 1/20 | Tier 1 | |
| LARIN FE 1.5/30 | Tier 1 | |
| LARIN FE 1/20 | Tier 1 | QL |
| LEENA | CE | |
| LESSINA | CE | |
| LEVONEST | CE | |
| <i>levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg</i> | Tier 1 | QL |
| <i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg</i> | Tier 1 | |
| <i>levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg</i> | CE | |
| LEVORA 0.15/30 (28) | CE | |
| LILETTA (52 MG) | CE | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| LO LOESTRIN FE | Tier 3 | |
| LOESTRIN 1.5/30 (21) | Tier 3 | |
| LOESTRIN 1/20 (21) | Tier 3 | |
| LOESTRIN FE 1.5/30 | Tier 3 | |
| LOESTRIN FE 1/20 | Tier 3 | |
| LORYNA | Tier 1 | |
| LOSEASONIQUE | Tier 3 | QL |
| LOW-OGESTREL | CE | |
| LUTERA | CE | |
| LYZA | Tier 1 | |
| <i>marlissa</i> | CE | |
| <i>medroxyprogesterone acetate intramuscular suspension</i> | CE | |
| MIBELAS 24 FE | Tier 1 | |
| MICROGESTIN 1.5/30 | CE | |
| MICROGESTIN 1/20 | CE | |
| MICROGESTIN FE 1.5/30 | CE | |
| MICROGESTIN FE 1/20 | CE | QL |
| MINASTRIN 24 FE | Tier 3 | # |
| MIRCETTE | Tier 3 | |
| MIRENA (52 MG) | CE | # |
| MONO-LINYAH | Tier 1 | |
| MONONESSA | Tier 1 | |
| MYZILRA | CE | |
| NATAZIA | Tier 3 | # |
| NECON 0.5/35 (28) | CE | |
| NECON 1/35 (28) | CE | |
| NECON 1/50 (28) | Tier 3 | |
| NECON 7/7/7 | Tier 1 | |
| NEXPLANON | CE | |
| NEXT CHOICE ONE DOSE | CE | QL |
| NORA-BE | Tier 1 | |
| <i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24)</i> | Tier 1 | |
| <i>norethin ace-eth estrad-fe oral tablet chewable</i> | Tier 1 | |
| <i>norethindrone oral</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg</i> | CE | |
| <i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i> | Tier 1 | |
| <i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i> | Tier 1 | |
| NORTREL 0.5/35 (28) | CE | |
| NORTREL 1/35 (21) | CE | |
| NORTREL 1/35 (28) | CE | |
| NORTREL 7/7/7 | Tier 1 | |
| NUVARING | Tier 2 | # |
| OCELLA | Tier 1 | |
| ORSYTHIA | CE | |
| ORTHO MICRONOR | Tier 3 | |
| ORTHO TRI-CYCLEN (28) | Tier 3 | |
| ORTHO TRI-CYCLEN LO | Tier 3 | # |
| ORTHO-CYCLEN (28) | Tier 3 | |
| ORTHO-NOVUM 1/35 (28) | Tier 3 | |
| ORTHO-NOVUM 7/7/7 (28) | Tier 3 | |
| PARAGARD INTRAUTERINE COPPER | CE | |
| PHILITH | CE | |
| PIMTREA | Tier 1 | |
| PIRMELLA 1/35 | Tier 1 | |
| PIRMELLA 7/7/7 | Tier 1 | |
| PORTIA-28 | CE | |
| PREVIFEM | Tier 1 | |
| QUARTETTE | Tier 3 | # |
| QUASENSE | Tier 1 | QL |
| RAJANI | CE | |
| RECLIPSEN | CE | |
| RIVELSA | CE | |
| SAFYRAL | Tier 3 | # |
| SEASONIQUE | Tier 3 | QL |
| SKYLA | Tier 3 | |
| SOLIA | Tier 1 | |
| SPRINTEC 28 | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| SRONYX | CE | |
| SYEDA | Tier 1 | |
| TAYTULLA | Tier 3 | |
| TILIA FE | CE | QL |
| TRI-ESTARYLLA | Tier 1 | |
| TRI-LEGEST FE | CE | QL |
| TRI-LINYAH | Tier 1 | |
| TRINESSA (28) | Tier 1 | |
| TRI-NORINYL (28) | Tier 3 | |
| TRI-PREVIFEM | Tier 1 | |
| TRI-SPRINTEC | Tier 1 | |
| TRIVORA (28) | CE | |
| VELIVET | CE | |
| VESTURA | Tier 1 | |
| <i>viorele</i> | CE | |
| VYFEMLA | Tier 1 | |
| WERA | CE | |
| WYMZYA FE | CE | |
| XULANE | CE | QL |
| YASMIN 28 | Tier 3 | |
| YAZ | Tier 3 | |
| ZARAH | Tier 1 | |
| ZENCHENT | CE | |
| ZOVIA 1/35E (28) | CE | |
| ZOVIA 1/50E (28) | CE | |
| *CORTICOSTEROIDS* | | |
| <i>budesonide oral</i> | Tier 1 | QL |
| CORTEF | Tier 3 | |
| DEXAMETHASONE INTENSOL | Tier 3 | |
| <i>dexamethasone oral elixir</i> | Tier 1 | |
| <i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1.5 mg, 4 mg, 6 mg</i> | Tier 1 | |
| EMFLAZA ORAL SUSPENSION | Tier 4 | PA; SP |
| EMFLAZA ORAL TABLET | Tier 4 | PA; SP; QL |
| ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>fludrocortisone acetate oral</i> | Tier 1 | |
| <i>hydrocortisone oral</i> | Tier 1 | |
| MEDROL ORAL TABLET 16 MG, 2 MG, 32 MG, 4 MG | Tier 3 | |
| <i>methylprednisolone oral tablet</i> | Tier 1 | |
| MILLIPRED | Tier 3 | |
| ORAPRED ODT | Tier 3 | |
| PEDIAPRED | Tier 3 | |
| <i>prednisolone oral solution</i> | Tier 1 | |
| <i>prednisolone oral syrup 15 mg/5ml</i> | Tier 1 | |
| <i>prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 6.7 (5 base) mg/5ml</i> | Tier 1 | |
| <i>prednisolone sodium phosphate oral tablet dispersible</i> | Tier 1 | |
| PREDNISON INTENSOL | Tier 3 | |
| <i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg</i> | Tier 1 | |
| RAYOS | Tier 3 | ST |
| UCERIS ORAL | Tier 3 | PA; #; QL |
| VERIPRED 20 | Tier 3 | |
| ZODEX 12-DAY | Tier 3 | PA; ST |
| ZONACORT 11 DAY | Tier 3 | PA; ST |
| ZONACORT 7 DAY | Tier 3 | PA; ST |
| *COUGH/COLD/ALLERGY* | | |
| <i>acetylcysteine inhalation</i> | Tier 1 | |
| <i>benzonatate</i> | Tier 1 | |
| BROMFED DM | Tier 1 | |
| CARBAPHEN 12 ORAL LIQUID | Tier 3 | |
| CARBAPHEN 12 PED ORAL SUSPENSION 2.5-1.25-7.5 MG/ML | Tier 3 | |
| CLARINEX-D 12 HOUR | Tier 3 | QL |
| DECON-A ORAL ELIXIR | Tier 3 | |
| EXACTUSS | Tier 3 | |
| GILPHEX TR | Tier 3 | |
| GILTUSS ORAL LIQUID | Tier 3 | |
| GILTUSS TR ORAL TABLET | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>guaifenesin-codeine oral syrup</i> | Tier 1 | |
| HISTEX-AC | Tier 3 | |
| HYCOFENIX | Tier 3 | |
| <i>hydrocodone-homatropine</i> | Tier 1 | |
| <i>hydromet</i> | Tier 1 | |
| HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 % | Tier 3 | |
| NEBUSAL INHALATION NEBULIZATION SOLUTION 3 % | Tier 1 | |
| NEBUSAL INHALATION NEBULIZATION SOLUTION 6 % | Tier 3 | |
| NEOTUSS PLUS | Tier 3 | |
| <i>nortuss-ex</i> | Tier 3 | |
| OBREDON | Tier 3 | |
| <i>promethazine vc</i> | Tier 1 | |
| <i>promethazine vclcodeine</i> | Tier 1 | |
| <i>promethazine-codeine</i> | Tier 1 | |
| <i>promethazine-dm</i> | Tier 1 | |
| <i>promethazine-phenylephrine</i> | Tier 1 | |
| <i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i> | Tier 1 | |
| PULMOSAL | Tier 1 | |
| RELHIST | Tier 3 | |
| SEMPREX-D | Tier 3 | QL |
| <i>sodium chloride inhalation nebulization solution 10 %, 3 %, 7 %</i> | Tier 1 | |
| TESSALON PERLES | Tier 3 | |
| <i>tgq 30psel150gfnl15dm</i> | Tier 3 | |
| <i>tgq 30psel3brml15dm</i> | Tier 3 | |
| TUSSICAPS | Tier 3 | |
| TUSSIGON | Tier 1 | |
| *CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS*** | | |
| IBRANCE | Tier 4 | PA; SP; QL |
| KISQALI 200 DOSE | Tier 4 | PA; SP; QL |
| KISQALI 400 DOSE | Tier 4 | PA; SP; QL |
| KISQALI 600 DOSE | Tier 4 | PA; SP; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| VERZENIO | Tier 4 | PA; SP; QL |
| *CYSTIC FIBROSIS AGENT - COMBINATIONS*** | | |
| ORKAMBI | Tier 4 | PA; QL |
| *DERMATOLOGICALS* | | |
| ABSORICA | Tier 3 | PA; QL |
| ACANYA | Tier 3 | |
| <i>acitretin</i> | Tier 1 | QL |
| <i>acyclovir external</i> | Tier 1 | |
| ACZONE EXTERNAL GEL 5 % | Tier 3 | # |
| ACZONE EXTERNAL GEL 7.5 % | Tier 3 | |
| <i>adapalene external cream</i> | Tier 1 | AL |
| <i>adapalene external gel 0.3 %</i> | Tier 1 | |
| <i>adapalene external lotion</i> | Tier 1 | |
| <i>adapalene-benzoyl peroxide</i> | Tier 1 | |
| <i>aif #2 drug preparation kit</i> | Tier 3 | |
| AKTIPAK | Tier 3 | |
| <i>alclometasone dipropionate</i> | Tier 1 | |
| ALDARA | Tier 3 | QL |
| ALTABAX | Tier 3 | |
| <i>amcinonide external cream</i> | Tier 1 | |
| AMELUZ | Tier 3 | |
| AMNESTEEM | Tier 1 | PA; QL |
| ANACAINE | Tier 3 | |
| APEXICON E | Tier 3 | |
| ATRALIN | Tier 3 | PA; ST; # |
| AVAR CLEANSER | Tier 1 | |
| AVAR LS CLEANSER | Tier 3 | |
| AVAR-E EMOLLIENT | Tier 1 | |
| AVAR-E GREEN | Tier 1 | |
| AVAR-E LS | Tier 3 | |
| AVITA | Tier 1 | PA; AL |
| AZELEX | Tier 3 | |
| BACTROBAN EXTERNAL CREAM | Tier 3 | QL |
| BENZACLIN | Tier 3 | |
| BENZACLIN WITH PUMP | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| BENZAMYCIN | Tier 3 | |
| BENZEFOAMULTRA | Tier 3 | ST |
| BENZEPRO | Tier 1 | |
| BENZEPRO SHORT CONTACT | Tier 1 | |
| BENZIQ | Tier 3 | |
| BENZIQ LS | Tier 3 | |
| <i>benzoyl peroxide external foam</i> | Tier 1 | |
| <i>benzoyl peroxide-erythromycin</i> | Tier 3 | |
| <i>betamethasone dipropionate aug external cream</i> | Tier 1 | |
| <i>betamethasone dipropionate aug external gel</i> | Tier 1 | QL |
| <i>betamethasone dipropionate aug external lotion</i> | Tier 1 | QL |
| <i>betamethasone dipropionate aug external ointment</i> | Tier 1 | QL |
| <i>betamethasone dipropionate external</i> | Tier 1 | |
| <i>betamethasone valerate external</i> | Tier 1 | |
| <i>bp 10-1</i> | Tier 1 | |
| <i>bp cleansing wash</i> | Tier 1 | |
| <i>bp foam</i> | Tier 1 | |
| <i>bpo foaming cloths external 6 %</i> | Tier 3 | |
| <i>calcipotriene external</i> | Tier 1 | |
| <i>calcipotriene-betameth diprop</i> | Tier 1 | QL |
| CALCITRENE | Tier 1 | |
| CAPEX | Tier 3 | ST; QL |
| CARAC | Tier 3 | ST |
| CARRINGTON ANTIFUNGAL | Tier 4 | |
| CENTANY | Tier 3 | QL |
| CERISA WASH | Tier 1 | |
| CICLODAN | Tier 1 | |
| <i>ciclopirox</i> | Tier 1 | |
| <i>ciclopirox olamine external</i> | Tier 1 | |
| CLARAVIS | Tier 1 | PA; QL |
| CLEOCIN-T | Tier 3 | |
| CLINDACIN ETZ EXTERNAL SWAB | Tier 1 | |
| CLINDACIN-P | Tier 1 | |
| CLINDAGEL | Tier 3 | |
| <i>clindamycin phos-benzoyl perox</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| <i>clindamycin phosphate external</i> | Tier 1 | |
| <i>clindamycin-tretinoin</i> | Tier 1 | |
| <i>clobetasol propionate e</i> | Tier 1 | QL |
| <i>clobetasol propionate emulsion</i> | Tier 1 | QL |
| <i>clobetasol propionate external cream</i> | Tier 1 | QL |
| <i>clobetasol propionate external foam</i> | Tier 1 | QL |
| <i>clobetasol propionate external gel</i> | Tier 1 | QL |
| <i>clobetasol propionate external liquid</i> | Tier 1 | QL |
| <i>clobetasol propionate external lotion</i> | Tier 1 | QL |
| <i>clobetasol propionate external ointment</i> | Tier 1 | QL |
| <i>clobetasol propionate external shampoo</i> | Tier 1 | QL |
| <i>clobetasol propionate external solution</i> | Tier 1 | QL |
| CLOBEX | Tier 3 | ST; QL |
| CLOBEX SPRAY | Tier 3 | QL |
| CLODAN EXTERNAL SHAMPOO | Tier 1 | QL |
| CLODERM | Tier 3 | ST |
| CLODERM PUMP | Tier 3 | ST |
| <i>clotrimazole-betamethasone</i> | Tier 1 | |
| CONDYLOX EXTERNAL GEL | Tier 3 | |
| CORDRAN EXTERNAL LOTION | Tier 3 | |
| CORDRAN EXTERNAL TAPE | Tier 3 | QL |
| CORMAX SCALP APPLICATION | Tier 1 | QL |
| CORTANE-B EXTERNAL | Tier 3 | |
| CORTISPORIN EXTERNAL | Tier 2 | |
| COSENTYX | Tier 4 | PA; ST; SP |
| COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR 150 MG/ML | Tier 4 | PA; ST; SP |
| CUTIVATE EXTERNAL CREAM | Tier 3 | ST |
| CUTIVATE EXTERNAL LOTION | Tier 3 | ST |
| <i>dapsone external</i> | Tier 1 | QL |
| DENAVIR | Tier 3 | |
| DERMA-SMOOTHIE/FS BODY | Tier 3 | |
| DERMA-SMOOTHIE/FS SCALP | Tier 3 | |
| DERMASORB XM | Tier 3 | |
| DERMATOP EXTERNAL CREAM | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| DESONATE | Tier 3 | ST |
| <i>desonide external</i> | Tier 1 | |
| DESOWEN EXTERNAL CREAM | Tier 3 | |
| DESOWEN EXTERNAL LOTION | Tier 3 | |
| <i>desoximetasone external cream 0.25 %</i> | Tier 1 | |
| <i>desoximetasone external gel</i> | Tier 1 | |
| <i>desoximetasone external ointment 0.25 %</i> | Tier 1 | |
| <i>diclofenac sodium transdermal gel 1 %, 3 %</i> | Tier 1 | QL |
| DIFFERIN EXTERNAL CREAM | Tier 3 | #, AL |
| DIFFERIN EXTERNAL GEL 0.3 % | Tier 3 | PA; # |
| DIFFERIN EXTERNAL LOTION | Tier 3 | #, AL |
| <i>diflorasone diacetate external ointment</i> | Tier 1 | |
| DIPROLENE AF | Tier 3 | |
| DIPROLENE EXTERNAL LOTION | Tier 3 | QL |
| DIPROLENE EXTERNAL OINTMENT | Tier 3 | QL |
| DOVONEX EXTERNAL CREAM | Tier 3 | |
| <i>doxepin hcl external</i> | Tier 1 | QL |
| <i>doxycycline</i> | Tier 1 | QL; AL |
| DRITHO-CREME HP | Tier 3 | |
| DUAC | Tier 3 | |
| DUROLANE | Tier 4 | PA; SP |
| <i>econazole nitrate external</i> | Tier 1 | QL |
| ECOZA | Tier 3 | |
| EFUDEX EXTERNAL CREAM | Tier 3 | ST |
| ELIDEL | Tier 2 | PA; ST |
| ELIMITE | Tier 3 | |
| ELOCON EXTERNAL CREAM | Tier 3 | |
| ELOCON EXTERNAL OINTMENT | Tier 3 | |
| ENSTILAR | Tier 3 | QL |
| EPIDUO | Tier 2 | #, AL |
| EPIDUO FORTE | Tier 2 | # |
| EPIFOAM | Tier 3 | |
| ERTACZO | Tier 3 | ST; QL |
| <i>ery</i> | Tier 1 | |
| ERYGEL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>erythromycin external pad</i> | Tier 1 | |
| <i>erythromycin external solution</i> | Tier 1 | |
| EURAX | Tier 3 | |
| EVOCLIN | Tier 3 | |
| EXELDERM | Tier 3 | ST; QL |
| EXODERM EXTERNAL LOTION | Tier 1 | |
| EXTINA | Tier 3 | ST; QL |
| FABIOR | Tier 3 | |
| FINACEA | Tier 3 | # |
| FLECTOR | Tier 2 | QL |
| <i>fluocinolone acetonide body</i> | Tier 1 | |
| <i>fluocinolone acetonide external</i> | Tier 1 | |
| <i>fluocinolone acetonide scalp</i> | Tier 1 | |
| <i>fluocinonide external</i> | Tier 1 | QL |
| FLUOROPLEX | Tier 3 | ST |
| <i>fluorouracil external</i> | Tier 1 | |
| <i>flurandrenolide</i> | Tier 1 | |
| <i>fluticasone propionate external</i> | Tier 1 | |
| GEBAUERS PAIN EASE | Tier 3 | |
| GEBAUERS SPRAY AND STRETCH | Tier 3 | |
| <i>gentamicin sulfate external</i> | Tier 1 | |
| <i>halobetasol propionate</i> | Tier 1 | QL |
| HALOG | Tier 3 | |
| <i>hydrocortisone butyr lipo base</i> | Tier 1 | |
| <i>hydrocortisone butyrate external</i> | Tier 1 | |
| <i>hydrocortisone external cream 2.5 %</i> | Tier 1 | |
| <i>hydrocortisone external lotion 2.5 %</i> | Tier 1 | |
| <i>hydrocortisone external ointment 2.5 %</i> | Tier 1 | |
| <i>hydrocortisone valerate</i> | Tier 1 | |
| <i>imiquimod external</i> | Tier 1 | QL |
| JUBLIA | Tier 3 | |
| KENALOG EXTERNAL | Tier 3 | |
| <i>ketoconazole external cream</i> | Tier 1 | |
| <i>ketoconazole external foam</i> | Tier 1 | QL |
| <i>ketoconazole external shampoo</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| KLARON | Tier 3 | |
| <i>lactic acid external lotion</i> | Tier 1 | |
| <i>lavare wound wash</i> | Tier 3 | |
| LEVULAN KERASTICK | Tier 3 | QL |
| <i>lidocaine external ointment</i> | Tier 1 | PA; QL |
| <i>lidocaine external patch 5 %</i> | Tier 1 | PA; QL |
| <i>lidocaine hcl external solution</i> | Tier 1 | |
| <i>lidocaine pak</i> | Tier 1 | QL |
| <i>lidocaine-prilocaine external cream</i> | Tier 1 | PA; QL |
| <i>lidocaine-tetracaine</i> | Tier 1 | QL |
| LIDODERM | Tier 1 | PA; ST; QL |
| <i>lindane external shampoo</i> | Tier 1 | |
| LOCOID | Tier 3 | ST |
| LOCOID LIPOCREAM | Tier 3 | ST |
| LOPROX EXTERNAL SHAMPOO | Tier 3 | |
| LOTRISONE EXTERNAL CREAM | Tier 3 | |
| LUXIQ | Tier 3 | ST |
| LUZU | Tier 3 | ST; QL |
| <i>malathion external</i> | Tier 1 | |
| METROCREAM | Tier 3 | |
| METROGEL EXTERNAL GEL | Tier 3 | |
| METROLOTION | Tier 3 | |
| <i>metronidazole external</i> | Tier 1 | |
| MICORT-HC | Tier 3 | ST |
| MIRVASO | Tier 3 | |
| <i>mometasone furoate external</i> | Tier 1 | |
| <i>mupirocin calcium</i> | Tier 1 | QL |
| <i>mupirocin external</i> | Tier 1 | QL |
| MYORISAN | Tier 1 | PA; QL |
| <i>naftifine hcl external cream 1 %</i> | Tier 1 | |
| <i>naftifine hcl external cream 2 %</i> | Tier 1 | QL |
| NAFTIN EXTERNAL CREAM 2 % | Tier 3 | ST; QL |
| NAFTIN EXTERNAL GEL 1 % | Tier 3 | ST; QL |
| NAFTIN EXTERNAL GEL 2 % | Tier 3 | ST; #; QL |
| NATROBA | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| NEUAC EXTERNAL GEL | Tier 1 | |
| NIZORAL | Tier 3 | |
| NORITATE | Tier 3 | |
| NUCORT | Tier 3 | |
| NYAMYC | Tier 1 | |
| <i>nystatin external</i> | Tier 1 | |
| <i>nystatin-triamcinolone</i> | Tier 1 | |
| NYSTOP | Tier 1 | |
| OLUX | Tier 3 | ST; QL |
| OLUX-E | Tier 3 | ST; QL |
| ONEXTON | Tier 3 | |
| ORACEA | Tier 2 | QL; AL |
| OVACE PLUS EXTERNAL CREAM | Tier 3 | |
| OVACE PLUS EXTERNAL SHAMPOO | Tier 3 | |
| OVACE PLUS WASH | Tier 3 | |
| OVACE WASH | Tier 3 | |
| OVIDE | Tier 3 | |
| <i>oxiconazole nitrate</i> | Tier 1 | QL |
| OXISTAT | Tier 3 | ST; QL |
| OXSORALEN ULTRA | Tier 3 | |
| PANDEL | Tier 3 | |
| PANRETIN | Tier 2 | |
| PENLAC | Tier 3 | |
| PENNSAID TRANSDERMAL SOLUTION 2 % | Tier 3 | ST; QL |
| <i>permethrin external cream</i> | Tier 1 | |
| PICATO | Tier 2 | QL |
| PLEXION | Tier 3 | |
| PLEXION CLEANSER EXTERNAL LIQUID | Tier 3 | |
| PLEXION CLEANSING CLOTH EXTERNAL PAD | Tier 3 | ST |
| <i>podocon</i> | Tier 3 | |
| <i>podofilox external</i> | Tier 1 | |
| PRAMOSONE E | Tier 3 | |
| PRAMOSONE EXTERNAL CREAM 1-1 % | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| PRAMOSONE EXTERNAL LOTION | Tier 3 | |
| PRAMOSONE EXTERNAL OINTMENT | Tier 3 | |
| <i>prednicarbate</i> | Tier 1 | |
| PROTOPIC | Tier 2 | PA; ST |
| PRUDOXIN | Tier 3 | QL |
| QUTENZA | Tier 3 | |
| QUTENZA (2 PATCH) | Tier 3 | |
| REGENECARE | Tier 3 | |
| REGRANEX | Tier 3 | PA; QL |
| RETIN-A | Tier 3 | PA; ST; AL |
| RETIN-A MICRO | Tier 3 | PA; ST; #; AL |
| RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 % | Tier 3 | PA; ST; #; AL |
| RETIN-A MICRO PUMP EXTERNAL GEL 0.08 % | Tier 2 | PA; ST; #; AL |
| RHOFADE | Tier 3 | QL |
| RIAX | Tier 3 | ST |
| ROSDAN EXTERNAL CREAM | Tier 1 | |
| ROSDAN EXTERNAL GEL | Tier 1 | |
| ROSANIL CLEANSER | Tier 1 | |
| SALACYN | Tier 1 | |
| <i>salicylic acid external cream</i> | Tier 1 | |
| <i>salicylic acid external liquid 27.5 %</i> | Tier 1 | |
| <i>salicylic acid external lotion</i> | Tier 1 | |
| <i>salicylic acid external shampoo</i> | Tier 1 | |
| <i>salicylic acid wart remover</i> | Tier 1 | |
| SALVAX DUO PLUS | Tier 3 | |
| SANTYL | Tier 3 | QL |
| <i>scalacort</i> | Tier 1 | |
| SEB-PREV WASH | Tier 1 | |
| <i>selenium sulfide external lotion</i> | Tier 1 | |
| SERNIVO | Tier 3 | |
| SILIQ | Tier 4 | PA; ST; SP; QL |
| SILVADENE | Tier 3 | |
| <i>silver sulfadiazine external</i> | Tier 1 | |
| SKLICE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| <i>sodium sulfacetamide external shampoo</i> | Tier 1 | |
| <i>sodium sulfacetamide wash</i> | Tier 3 | |
| SOLARAZE | Tier 3 | QL |
| SOOLANTRA | Tier 3 | |
| SORIATANE ORAL CAPSULE 10 MG, 17.5 MG, 25 MG | Tier 3 | QL |
| SORILUX | Tier 3 | ST; QL |
| SSD | Tier 1 | |
| <i>sss 10-5</i> | Tier 1 | |
| STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| <i>sulfacetamide sodium (acne)</i> | Tier 1 | |
| <i>sulfacetamide sodium external gel</i> | Tier 1 | |
| <i>sulfacetamide sodium external liquid</i> | Tier 1 | |
| <i>sulfacetamide sodium external suspension</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur external cream</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur external emulsion</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur external liquid 10-2 %, 9.8-4.8 %</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur external lotion</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur external pad 10-4 %</i> | Tier 1 | |
| <i>sulfacetamide sodium-sulfur suspension 10-5 % external</i> | Tier 1 | |
| SULFAMYLON | Tier 3 | |
| SYNALAR | Tier 3 | |
| SYNERA | Tier 3 | QL |
| TACLONEX EXTERNAL OINTMENT | Tier 3 | ST; QL |
| TACLONEX EXTERNAL SUSPENSION | Tier 3 | QL |
| <i>tacrolimus external ointment 0.03 %</i> | Tier 1 | PA; ST |
| <i>tacrolimus external ointment 0.1 %</i> | Tier 1 | PA; ST; QL |
| TALTZ | Tier 4 | PA; ST; SP |
| TARGRETIN EXTERNAL | Tier 4 | #; SP |
| <i>tazarotene external</i> | Tier 1 | PA |
| TAZORAC | Tier 2 | PA; #; AL |
| TEMOVATE EXTERNAL CREAM | Tier 3 | #; QL |
| TEMOVATE EXTERNAL GEL | Tier 3 | #; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| TEMOVATE EXTERNAL OINTMENT | Tier 3 | #; QL |
| TEMOVATE EXTERNAL SOLUTION | Tier 3 | #; QL |
| TEXACORT | Tier 3 | |
| THERMAZENE | Tier 1 | |
| TOLAK | Tier 3 | ST |
| TOPICORT EXTERNAL CREAM | Tier 3 | |
| TOPICORT EXTERNAL GEL | Tier 3 | |
| TOPICORT EXTERNAL OINTMENT | Tier 3 | |
| TOPICORT SPRAY | Tier 3 | # |
| TREMFYA | Tier 4 | PA; ST; SP; QL |
| <i>tretinoin external cream</i> | Tier 1 | PA; AL |
| <i>tretinoin external gel 0.01 %, 0.025 %</i> | Tier 1 | PA; AL |
| <i>tretinoin external gel 0.05 %</i> | Tier 1 | PA |
| <i>tretinoin microsphere</i> | Tier 1 | PA; AL |
| <i>tretinoin microsphere pump</i> | Tier 1 | PA; AL |
| TRETIN-X EXTERNAL CREAM 0.075 % | Tier 3 | PA; ST; AL |
| <i>triamcinolone acetonide external</i> | Tier 1 | |
| TRIDERM EXTERNAL CREAM | Tier 1 | |
| ULESFIA | Tier 3 | |
| ULTRAVATE EXTERNAL CREAM | Tier 3 | QL |
| ULTRAVATE EXTERNAL LOTION | Tier 3 | QL |
| ULTRAVATE EXTERNAL OINTMENT | Tier 3 | QL |
| VALCHLOR | Tier 4 | PA; SP |
| VANOS | Tier 3 | QL |
| VANOXIDE-HC | Tier 3 | |
| VECTICAL | Tier 3 | |
| VELTIN | Tier 3 | |
| VERDESO | Tier 3 | ST; QL |
| VEREGEN | Tier 3 | |
| VOLTAREN TRANSDERMAL | Tier 2 | QL |
| VUSION | Tier 3 | |
| WESTCORT | Tier 3 | |
| XERESE | Tier 3 | |
| XOLEGEL | Tier 3 | ST; QL |
| XYLOCAINE EXTERNAL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>zaclir cleansing external lotion 8 %</i> | Tier 3 | |
| ZENATANE | Tier 1 | PA; QL |
| ZIANA | Tier 2 | # |
| ZONALON | Tier 3 | QL |
| ZOVIRAX EXTERNAL CREAM | Tier 3 | |
| ZOVIRAX EXTERNAL OINTMENT | Tier 3 | ST |
| ZYCLARA | Tier 3 | QL |
| ZYCLARA PUMP EXTERNAL CREAM 2.5 %, 3.75 % | Tier 3 | QL |
| *DIAGNOSTIC PRODUCTS* | | |
| ACCU-CHEK AVIVA PLUS IN VITRO | Tier 3 | ST; QL |
| ACCU-CHEK COMPACT PLUS | Tier 3 | ST; QL |
| ACCU-CHEK SMARTVIEW | Tier 3 | ST; QL |
| ACCUTREND GLUCOSE | Tier 3 | ST; QL |
| <i>active-medicated spec collect</i> | Tier 3 | |
| ADVANCE INTUITION TEST | Tier 3 | ST; QL |
| ADVANCE MICRO-DRAW TEST | Tier 3 | ST; QL |
| ADVOCATE REDI-CODE IN VITRO | Tier 3 | ST; QL |
| ADVOCATE REDI-CODE+ TEST | Tier 3 | ST; QL |
| ADVOCATE TEST | Tier 3 | ST; QL |
| AGAMATRIX AMP TEST | Tier 3 | ST; QL |
| AGAMATRIX JAZZ TEST | Tier 3 | ST; QL |
| AGAMATRIX KEYNOTE TEST | Tier 3 | ST; QL |
| AGAMATRIX PRESTO TEST | Tier 3 | ST; QL |
| ALBUSTIX | Tier 3 | |
| ASSURE 3 TEST | Tier 3 | ST; QL |
| ASSURE 4 TEST | Tier 3 | ST; QL |
| ASSURE II | Tier 3 | ST; QL |
| ASSURE II CHECK | Tier 3 | ST; QL |
| ASSURE PLATINUM | Tier 3 | ST; QL |
| ASSURE PRO TEST | Tier 3 | ST; QL |
| AT LAST TEST | Tier 3 | ST; QL |
| BAYER BREEZE 2 TEST | Tier 3 | ST; QL |
| BAYER CONTOUR NEXT TEST | Tier 3 | ST; QL |
| BAYER CONTOUR TEST | Tier 3 | ST; QL |
| BIOSCANNER GLUCOSE TEST | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|--------------------------------------|--------------------|---------------------|
| <i>blood glucose test</i> | Tier 3 | ST; QL |
| CAREONE BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| CARESENS N GLUCOSE TEST | Tier 3 | ST; QL |
| CHEK-STIX CONTROL | Tier 3 | |
| CHEMSTRIP 10 MD | Tier 3 | |
| CHEMSTRIP 10/SG | Tier 3 | |
| CHEMSTRIP 2 GP | Tier 3 | |
| CHEMSTRIP 5 OB | Tier 3 | |
| CHEMSTRIP 7 | Tier 3 | |
| CHEMSTRIP 9 | Tier 3 | |
| CHEMSTRIP K | Tier 3 | |
| CHEMSTRIP MICRAL | Tier 3 | |
| CHEMSTRIP UGK | Tier 3 | |
| CLEVER CHEK AUTO-CODE TEST | Tier 3 | ST; QL |
| CLEVER CHEK AUTO-CODE VOICE IN VITRO | Tier 3 | ST; QL |
| CLEVER CHEK TEST | Tier 3 | ST; QL |
| CLEVER CHOICE AUTO-CODE TEST | Tier 3 | ST; QL |
| CLEVER CHOICE MICRO TEST | Tier 3 | ST; QL |
| COMBISTIX | Tier 3 | |
| CVS KETONE CARE | Tier 3 | |
| CYSTO-CONRAY II | Tier 3 | |
| CYSTOGRAFIN-DILUTE | Tier 3 | |
| DIASTIX | Tier 3 | |
| <i>diatrue plus test</i> | Tier 3 | ST; QL |
| DUO-CARE TEST | Tier 3 | ST; QL |
| <i>easy plus blood glucose test</i> | Tier 3 | ST; QL |
| <i>easy plus ii glucose test</i> | Tier 3 | ST; QL |
| EASY STEP TEST | Tier 3 | ST; QL |
| <i>easy talk blood glucose test</i> | Tier 3 | ST; QL |
| EASY TOUCH TEST | Tier 3 | ST; QL |
| <i>easy trak blood glucose test</i> | Tier 3 | ST; QL |
| EASYGLUCO IN VITRO | Tier 3 | ST; QL |
| EASYMAX 15 TEST | Tier 3 | ST; QL |
| EASYMAX TEST | Tier 3 | ST; QL |
| <i>easyplus blood glucose test</i> | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|--------------------------------|--------------------|---------------------|
| EASYPRO BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EASYPRO PLUS IN VITRO | Tier 3 | ST; QL |
| <i>element compact test</i> | Tier 3 | ST; QL |
| ELEMENT TEST | Tier 3 | ST; QL |
| EMBRACE BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EMBRACE EVO BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EMBRACE PRO GLUCOSE TEST | Tier 3 | ST; QL |
| ENTERO VU ORAL SUSPENSION 24 % | Tier 3 | |
| EVENCARE + BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EVENCARE BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EVENCARE G2 TEST | Tier 3 | ST; QL |
| EVENCARE G3 TEST | Tier 3 | ST; QL |
| EVOLUTION AUTOCODE IN VITRO | Tier 3 | ST; QL |
| EZ SMART BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| EZ SMART PLUS GLUCOSE TEST | Tier 3 | ST; QL |
| E-Z-CAT DRY | Tier 3 | |
| E-Z-DISK | Tier 3 | |
| E-Z-DOSE | Tier 3 | |
| E-Z-HD | Tier 3 | |
| E-Z-PAQUE | Tier 3 | |
| E-Z-PASTE | Tier 3 | |
| FIFTY50 GLUCOSE TEST 2.0 | Tier 3 | ST; QL |
| FORA D15G BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA D20 BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA G20 BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA G30A BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA GD20 TEST | Tier 3 | ST; QL |
| FORA V10 BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA V12 BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA V20 BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORA V30A BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| FORACARE GD40 TEST | Tier 3 | ST; QL |
| FORACARE PREMIUM V10 TEST | Tier 3 | ST; QL |
| FORACARE TEST N GO TEST | Tier 3 | ST; QL |
| FREESTYLE INSULINX TEST | Tier 2 | QL |

| Drug Name | Drug Status | Drug Details |
|------------------------------------|--------------------|---------------------|
| FREESTYLE LITE TEST | Tier 2 | QL |
| FREESTYLE TEST | Tier 2 | QL |
| GASTROGRAFIN | Tier 3 | |
| <i>ge100 blood glucose test</i> | Tier 3 | ST; QL |
| GENSTRIP 50 | Tier 3 | ST; QL |
| GLUCO PERFECT 3 TEST | Tier 3 | ST; QL |
| GLUCOCARD 01 SENSOR PLUS | Tier 3 | ST; QL |
| GLUCOCARD EXPRESSION TEST | Tier 3 | ST; QL |
| GLUCOCARD SHINE TEST | Tier 3 | ST; QL |
| GLUCOCARD VITAL TEST | Tier 3 | ST; QL |
| GLUCOCARD X-SENSOR | Tier 3 | ST; QL |
| GLUCOCOM TEST | Tier 3 | ST; QL |
| GLUCONAVII BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| HEMA-COMBISTIX | Tier 3 | |
| HYSKON | Tier 3 | |
| INFINITY BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| KETOCARE | Tier 3 | |
| KETO-DIASTIX | Tier 3 | |
| KETOSTIX | Tier 3 | |
| <i>kroger blood glucose test</i> | Tier 3 | ST; QL |
| <i>kroger premium glucose test</i> | Tier 3 | ST; QL |
| <i>kroger test</i> | Tier 3 | ST; QL |
| LABSTIX | Tier 3 | |
| LIBERTY NEXT GENERATION TEST | Tier 3 | ST; QL |
| <i>liberty test</i> | Tier 3 | ST; QL |
| LIQUID E-Z-PAQUE | Tier 3 | |
| LIQUID POLIBAR PLUS | Tier 3 | |
| MD-GASTROVIEW | Tier 1 | |
| <i>meijer blood glucose test</i> | Tier 3 | ST; QL |
| <i>meijer premium glucose test</i> | Tier 3 | ST; QL |
| MEIJER TRUETEST TEST | Tier 3 | ST; QL |
| MEIJER TRUETRACK TEST | Tier 3 | ST; QL |
| METOPIRONE | Tier 3 | |
| MICRODOT TEST | Tier 3 | ST; QL |
| MULTISTIX | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--------------------------------|-------------|--------------|
| MULTISTIX 10 SG | Tier 3 | |
| MULTISTIX 5 | Tier 3 | |
| MULTISTIX 7 | Tier 3 | |
| MULTISTIX 8 | Tier 3 | |
| MULTISTIX 9 | Tier 3 | |
| MULTISTIX 9 SG | Tier 3 | |
| MYGLUCOHEALTH TEST | Tier 3 | ST; QL |
| NEUTEK 2TEK TEST | Tier 3 | ST; QL |
| NEXGEN TEST | Tier 3 | ST; QL |
| NOVA MAX GLUCOSE TEST | Tier 3 | ST; QL |
| ON CALL EXPRESS BLOOD GLUCOSE | Tier 3 | ST; QL |
| ON CALL PLUS BLOOD GLUCOSE | Tier 3 | ST; QL |
| ON CALL VIVID BLOOD GLUCOSE | Tier 3 | ST; QL |
| ONETOUCH ULTRA BLUE | Tier 2 | QL |
| ONETOUCH VERIO IN VITRO STRIP | Tier 2 | QL |
| OPTUMRX BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| PHARMACIST CHOICE AUTOCODE | Tier 3 | ST; QL |
| POCKETCHEM EZ TEST | Tier 3 | ST; QL |
| PRECISION PCX | Tier 2 | QL |
| PRECISION PCX PLUS TEST | Tier 2 | QL |
| PRECISION POINT OF CARE TEST | Tier 2 | QL |
| PRECISION QID TEST | Tier 2 | QL |
| PRECISION SOF-TACT TEST | Tier 2 | QL |
| PRECISION XTRA BLOOD GLUCOSE | Tier 2 | QL |
| PRECISION XTRA KETONE | Tier 2 | |
| PRODIGY NO CODING BLOOD GLUC | Tier 3 | ST; QL |
| PROVOCHOLINE | Tier 3 | |
| PTS PANELS GLUCOSE TEST | Tier 3 | ST; QL |
| QUICKTEK TEST | Tier 3 | ST; QL |
| QUINTET AC BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| QUINTET BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| RA TRUETEST TEST | Tier 3 | ST; QL |
| READI-CAT 2 ORAL | Tier 3 | |
| REFUAH PLUS BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| RELION KETONE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--------------------------------|-------------|--------------|
| REVEAL BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| REXALL BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| RIGHTEST GS100 BLOOD GLUCOSE | Tier 3 | ST; QL |
| RIGHTEST GS300 BLOOD GLUCOSE | Tier 3 | ST; QL |
| RIGHTEST GS550 BLOOD GLUCOSE | Tier 3 | ST; QL |
| SITZMARKS | Tier 3 | |
| SMART SENSE PREMIUM TEST | Tier 3 | ST; QL |
| SMART SENSE VALUE TEST | Tier 3 | ST; QL |
| SMARTTEST BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| SOLUS V2 TEST | Tier 3 | ST; QL |
| SUPREME TEST | Tier 3 | ST; QL |
| SURE EDGE TEST | Tier 3 | ST; QL |
| SURECHEK BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| SURE-TEST EASYPLUS MINI TEST | Tier 3 | ST; QL |
| TAGITOL V | Tier 3 | |
| TELCARE BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| <i>tgt blood glucose test</i> | Tier 3 | ST; QL |
| THYROGEN | Tier 4 | SP |
| TRUETEST TEST | Tier 3 | ST; QL |
| TRUETRACK TEST | Tier 3 | ST; QL |
| ULTIMA TEST | Tier 3 | ST; QL |
| ULTRATRAK PRO TEST | Tier 3 | ST; QL |
| ULTRATRAK ULTIMATE TEST | Tier 3 | ST; QL |
| UNISTRIP1 GENERIC | Tier 3 | ST; QL |
| URISTIX | Tier 3 | |
| URISTIX 4 | Tier 3 | |
| VARIBAR HONEY | Tier 3 | |
| VARIBAR NECTAR | Tier 3 | |
| VARIBAR PUDDING | Tier 3 | |
| VARIBAR THIN HONEY | Tier 3 | |
| VARIBAR THIN LIQUID | Tier 3 | |
| VICTORY AGM-4000 TEST | Tier 3 | ST; QL |
| VOCAL POINT BLOOD GLUCOSE TEST | Tier 3 | ST; QL |
| VOLUMEN | Tier 3 | |
| WAVESENSE PRESTO | Tier 3 | ST; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| *DIGESTIVE AIDS* | | |
| CREON | Tier 2 | |
| PANCREAZE | Tier 3 | ST |
| PERTZYE | Tier 3 | ST |
| SUCRAID | Tier 4 | SP |
| VIOKACE | Tier 3 | ST |
| ZENPEP | Tier 2 | |
| *DIRECT-ACTING P2Y12 INHIBITORS*** | | |
| BRILINTA | Tier 2 | QL |
| *DIURETICS* | | |
| <i>acetazolamide er</i> | Tier 1 | |
| <i>acetazolamide oral tablet 250 mg</i> | Tier 1 | |
| ALDACTAZIDE | Tier 3 | |
| ALDACTONE | Tier 3 | |
| <i>amiloride hcl oral</i> | Tier 1 | |
| <i>amiloride-hydrochlorothiazide</i> | Tier 1 | |
| <i>bumetanide oral</i> | Tier 1 | |
| CAROSPIR | Tier 3 | PA; ST; QL |
| <i>chlorothiazide oral tablet 500 mg</i> | Tier 1 | |
| <i>chlorthalidone oral tablet 25 mg, 50 mg</i> | Tier 1 | |
| DEMADEX ORAL TABLET 10 MG, 20 MG | Tier 3 | |
| DIAMOX SEQUELS | Tier 3 | |
| DIURIL | Tier 3 | |
| DYAZIDE | Tier 3 | |
| DYRENIUM | Tier 3 | |
| EDECRIN | Tier 3 | |
| <i>ethacrynic acid oral</i> | Tier 1 | |
| <i>furosemide oral solution 10 mg/ml</i> | Tier 1 | |
| <i>furosemide oral tablet</i> | Tier 1 | |
| <i>hydrochlorothiazide oral</i> | Tier 1 | |
| <i>indapamide oral</i> | Tier 1 | |
| KEVEYIS | Tier 4 | PA; QL |
| LASIX | Tier 3 | |
| MAXZIDE | Tier 3 | |
| MAXZIDE-25 | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>methazolamide oral</i> | Tier 1 | |
| <i>metolazone</i> | Tier 1 | |
| MICROZIDE | Tier 3 | |
| NEPTAZANE | Tier 3 | |
| <i>spironolactone oral</i> | Tier 1 | |
| <i>spironolactone-hctz</i> | Tier 1 | |
| <i>toremide oral</i> | Tier 1 | |
| <i>triamterene-hctz oral capsule 37.5-25 mg</i> | Tier 1 | |
| <i>triamterene-hctz oral tablet</i> | Tier 1 | |
| *ENDOCRINE AND METABOLIC AGENTS - MISC.* | | |
| ACTONEL ORAL TABLET 150 MG, 30 MG, 35 MG, 5 MG | Tier 3 | QL |
| ALDURAZYME | Tier 4 | PA; SP |
| <i>alendronate sodium oral tablet 10 mg, 35 mg, 40 mg, 5 mg, 70 mg</i> | Tier 1 | QL |
| AMMONUL | Tier 4 | SP |
| AELVIA | Tier 2 | QL |
| BINOSTO | Tier 3 | ST; QL |
| BONIVA INTRAVENOUS | Tier 4 | SP |
| BONIVA ORAL TABLET 150 MG | Tier 3 | ST; QL |
| BRAVELLE | Tier 4 | PA; SP |
| BUPHENYL ORAL POWDER 3 GM/TSP | Tier 4 | PA; SP |
| BUPHENYL ORAL TABLET | Tier 4 | PA; SP |
| <i>cabergoline</i> | Tier 1 | |
| <i>calcitonin (salmon)</i> | Tier 1 | QL |
| <i>calcitriol oral</i> | Tier 1 | |
| CARBAGLU | Tier 4 | PA; #; SP |
| CARNITOR ORAL | Tier 3 | |
| CARNITOR SF | Tier 3 | |
| CETROTIDE SUBCUTANEOUS KIT 0.25 MG | Tier 4 | PA; SP |
| <i>chorionic gonadotropin intramuscular</i> | Tier 4 | PA; SP |
| <i>clomiphene citrate oral</i> | Tier 1 | |
| CYSTADANE | Tier 4 | PA; SP |
| DDAVP NASAL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| DDAVP ORAL | Tier 3 | |
| DDAVP RHINAL TUBE | Tier 3 | |
| <i>desmopressin ace rhinal tube</i> | Tier 1 | |
| <i>desmopressin ace spray refrig</i> | Tier 1 | |
| <i>desmopressin acetate oral</i> | Tier 1 | |
| <i>desmopressin acetate spray</i> | Tier 1 | |
| <i>doxercalciferol oral</i> | Tier 1 | QL |
| ELAPRASE | Tier 4 | PA; SP |
| EVISTA | Tier 2 | |
| FABRAZYME | Tier 4 | PA; SP |
| FOLLISTIM AQ INJECTION SOLUTION 75 UNT/0.5ML | Tier 4 | PA; ST; SP |
| FOLLISTIM AQ SUBCUTANEOUS | Tier 4 | PA; ST; SP |
| FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML | Tier 4 | PA; ST; SP |
| FOSAMAX ORAL TABLET 70 MG | Tier 3 | QL |
| FOSAMAX PLUS D | Tier 3 | QL |
| <i>ganirelix acetate</i> | Tier 4 | PA; SP |
| GENOTROPIN | Tier 4 | PA; ST; SP |
| GENOTROPIN MINIQUICK | Tier 4 | PA; ST; SP |
| GONAL-F | Tier 4 | PA; SP |
| GONAL-F RFF | Tier 4 | PA; SP |
| GONAL-F RFF REDIJECT | Tier 4 | PA; SP |
| HECTOROL ORAL | Tier 3 | ST; QL |
| HP ACTHAR | Tier 4 | PA; SP |
| HUMATROPE | Tier 4 | PA; ST; SP |
| <i>ibandronate sodium intravenous solution 3 mg/3ml</i> | Tier 4 | SP |
| <i>ibandronate sodium oral</i> | Tier 1 | QL |
| INCRELEX | Tier 4 | PA; SP |
| KUVAN | Tier 4 | PA; SP |
| <i>levocarnitine oral solution</i> | Tier 1 | |
| <i>levocarnitine oral tablet</i> | Tier 1 | |
| LUMIZYME | Tier 4 | PA; SP |
| LUPRON DEPOT-PED (1-MONTH) | Tier 4 | PA; #; SP |
| LUPRON DEPOT-PED (3-MONTH) | Tier 4 | PA; #; SP |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| MENOPUR | Tier 4 | PA; SP |
| MIACALCIN INJECTION | Tier 3 | ST |
| MIACALCIN NASAL | Tier 3 | ST; QL |
| NAGLAZYME | Tier 4 | PA; SP |
| NATPARA | Tier 4 | PA; QL |
| NITYR | Tier 4 | PA; SP |
| NORDITROPIN FLEXPPO | Tier 4 | PA; ST; SP |
| <i>novarel intramuscular solution reconstituted 10000 unit</i> | Tier 4 | PA; SP |
| NUTROPIN AQ NUSPIN 10 | Tier 4 | PA; ST; SP |
| NUTROPIN AQ NUSPIN 20 | Tier 4 | PA; ST; SP |
| NUTROPIN AQ NUSPIN 5 | Tier 4 | PA; ST; SP |
| <i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i> | Tier 4 | PA; SP |
| OMNITROPE SUBCUTANEOUS SOLUTION | Tier 4 | PA; ST; SP |
| OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG | Tier 4 | PA; SP |
| ORFADIN ORAL CAPSULE 20 MG | Tier 4 | PA |
| ORFADIN ORAL SUSPENSION | Tier 4 | PA; SP |
| OSPHENA | Tier 3 | QL |
| OVIDREL | Tier 4 | PA; SP |
| <i>pamidronate disodium</i> | Tier 4 | SP |
| <i>paricalcitol oral</i> | Tier 1 | QL |
| <i>pregnyl</i> | Tier 4 | PA; SP |
| PROLIA | Tier 4 | PA; ST; SP |
| <i>raloxifene hcl</i> | CE | |
| RAVICTI | Tier 4 | PA; ST; SP |
| RAYALDEE | Tier 3 | PA; ST; QL |
| RECLAST | Tier 4 | SP; QL |
| <i>risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg</i> | Tier 1 | QL |
| <i>risedronate sodium oral tablet delayed release</i> | Tier 1 | |
| ROCALTROL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| SAIZEN | Tier 4 | PA; ST; SP |
| SAIZEN CLICK.EASY | Tier 3 | PA; ST |
| SAMSCA | Tier 4 | PA; SP |
| SANDOSTATIN | Tier 4 | PA; SP |
| SANDOSTATIN LAR DEPOT | Tier 4 | PA; #; SP |
| SENSIPAR | Tier 3 | PA; #; QL |
| SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG | Tier 4 | PA; SP |
| SIGNIFOR | Tier 4 | PA; SP |
| <i>sod benz-sod phenylacet</i> | Tier 1 | |
| <i>sodium phenylbutyrate oral powder 3 gml/sp</i> | Tier 4 | PA; SP |
| <i>sodium phenylbutyrate oral tablet</i> | Tier 4 | PA; SP |
| SOMATULINE DEPOT | Tier 4 | PA; SP |
| SOMAVERT | Tier 4 | PA; #; SP |
| STIMATE | Tier 3 | PA; AL |
| SUPPRELIN LA | Tier 4 | PA; SP |
| SYNAREL | Tier 4 | PA; SP |
| TRIPTODUR | Tier 4 | PA; SP |
| TYMLOS | Tier 4 | PA; ST; SP; QL |
| XGEVA | Tier 4 | PA; SP |
| ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG | Tier 3 | ST; QL |
| <i>zoledronic acid intravenous concentrate</i> | Tier 4 | SP; QL |
| <i>zoledronic acid intravenous solution</i> | Tier 4 | SP; QL |
| ZOMACTON | Tier 4 | PA; ST |
| ZOMETA | Tier 4 | SP; QL |
| ZORBTIVE | Tier 4 | PA; SP |
| *ESTROGENS* | | |
| ACTIVELLA | Tier 3 | QL |
| ALORA | Tier 3 | QL |
| ANGELIQ | Tier 3 | QL |
| CLIMARA | Tier 3 | #; QL |
| CLIMARA PRO | Tier 3 | #; QL |
| COMBIPATCH | Tier 3 | QL |
| DIVIGEL | Tier 3 | |
| ELESTRIN | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| ESTRACE ORAL | Tier 3 | |
| <i>estradiol oral</i> | Tier 1 | |
| <i>estradiol transdermal patch twice weekly</i> | Tier 1 | QL |
| <i>estradiol transdermal patch weekly</i> | Tier 1 | QL |
| <i>estradiol-norethindrone acet</i> | Tier 1 | |
| ESTROGEL | Tier 3 | QL |
| <i>estropipate oral tablet 0.75 mg, 1.5 mg</i> | Tier 1 | |
| EVAMIST | Tier 3 | QL |
| FEMHRT LOW DOSE | Tier 3 | QL |
| MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG | Tier 3 | |
| MENOSTAR | Tier 3 | #; QL |
| MIMVEY | Tier 1 | QL |
| MINIVELLE | Tier 3 | QL |
| <i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg</i> | Tier 1 | QL |
| <i>norethindrone-eth estradiol oral tablet 1-5 mg-mcg</i> | Tier 1 | |
| PREFEST | Tier 3 | QL |
| PREMARIN ORAL | Tier 2 | |
| PREMPHASE | Tier 2 | |
| PREMPRO | Tier 2 | |
| VIVELLE-DOT | Tier 2 | QL |
| *ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB*** | | |
| DUAVEE | Tier 2 | QL |
| *FARNESOID X RECEPTOR (FXR) AGONISTS*** | | |
| OICALIVA ORAL TABLET 5 MG | Tier 4 | PA; ST; SP; QL |
| *FLUOROQUINOLONES* | | |
| AVELOX ORAL | Tier 3 | |
| BAXDELA ORAL | Tier 3 | PA; QL |
| CIPRO ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| CIPRO ORAL TABLET 250 MG, 500 MG | Tier 3 | |
| CIPRO XR | Tier 3 | |
| <i>ciprofloxacin hcl oral</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| <i>ciprofloxacin oral</i> | Tier 1 | |
| <i>ciprofloxacin-ciproflox hcl er</i> | Tier 1 | |
| FACTIVE | Tier 3 | # |
| LEVAQUIN ORAL TABLET | Tier 3 | |
| <i>levofloxacin oral</i> | Tier 1 | |
| <i>moxifloxacin hcl oral</i> | Tier 1 | |
| <i>ofloxacin oral tablet 300 mg, 400 mg</i> | Tier 1 | |
| *GASTROINTESTINAL AGENTS - MISC.* | | |
| ACTIGALL | Tier 3 | |
| <i>alosetron hcl</i> | Tier 1 | PA; ST |
| AMITIZA | Tier 2 | QL |
| APRISO | Tier 2 | QL |
| ASACOL HD | Tier 3 | ST; #; QL |
| AURYXIA | Tier 3 | |
| AZULFIDINE | Tier 3 | ST; QL |
| AZULFIDINE EN-TABS | Tier 3 | ST; QL |
| <i>balsalazide disodium</i> | Tier 1 | QL |
| <i>calcium acetate (phos binder) oral tablet</i> | Tier 1 | |
| CANASA | Tier 2 | QL |
| CHENODAL | Tier 3 | |
| CIMZIA PREFILLED | Tier 4 | PA; ST; SP |
| CIMZIA STARTER KIT | Tier 4 | PA; ST; SP |
| CIMZIA SUBCUTANEOUS KIT 2 X 200 MG | Tier 4 | PA; ST; SP |
| COLAZAL | Tier 3 | ST; QL |
| <i>cromolyn sodium oral</i> | Tier 1 | |
| DELZICOL | Tier 2 | QL |
| DIPENTUM | Tier 3 | ST; QL |
| <i>enulose</i> | Tier 1 | |
| FOSRENOL ORAL PACKET | Tier 2 | |
| FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG | Tier 3 | |
| GASTROCROM | Tier 3 | |
| GATTEX | Tier 4 | PA; SP; QL |
| <i>generlac</i> | Tier 1 | |
| GIAZO | Tier 3 | PA; ST; #; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| INFLECTRA | Tier 4 | PA; ST; SP |
| <i>lactulose encephalopathy</i> | Tier 1 | |
| <i>lanthanum carbonate</i> | Tier 1 | |
| LIALDA | Tier 2 | #; QL |
| LINZESS | Tier 2 | QL |
| LOTRONEX | Tier 3 | PA; ST |
| <i>mesalamine oral tablet delayed release 1.2 gm, 800 mg</i> | Tier 1 | QL |
| <i>mesalamine rectal</i> | Tier 1 | |
| <i>metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml</i> | Tier 1 | |
| <i>metoclopramide hcl oral tablet</i> | Tier 1 | |
| <i>metoclopramide hcl oral tablet dispersible</i> | Tier 1 | |
| MOVANTIK | Tier 2 | QL |
| PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG | Tier 2 | QL |
| PHOSLO | Tier 3 | |
| PHOSLYRA | Tier 2 | |
| REGLAN ORAL | Tier 3 | |
| RELISTOR ORAL | Tier 3 | PA; QL |
| RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML | Tier 2 | QL |
| REMICADE | Tier 4 | PA; ST; SP |
| RENAGEL | Tier 3 | # |
| RENFLEXIS | Tier 4 | PA; ST; SP |
| RENVELA ORAL PACKET | Tier 2 | # |
| RENVELA ORAL TABLET | Tier 2 | |
| <i>sevelamer carbonate</i> | Tier 1 | |
| SFROWASA | Tier 3 | |
| <i>sulfasalazine oral</i> | Tier 1 | QL |
| SULFAZINE | Tier 1 | QL |
| SYMPROIC | Tier 3 | PA; ST; QL |
| URSO 250 | Tier 3 | |
| URSO FORTE | Tier 3 | |
| <i>ursodiol oral</i> | Tier 1 | |
| VELPHORO | Tier 3 | # |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *GENERAL ANESTHETICS* | | |
| FORANE | Tier 3 | |
| <i>isoflurane</i> | Tier 1 | |
| <i>sevoflurane</i> | Tier 1 | |
| SUPRANE | Tier 3 | |
| TERRELL | Tier 1 | |
| ULTANE | Tier 3 | |
| *GENITOURINARY AGENTS - MISCELLANEOUS* | | |
| <i>acetic acid irrigation</i> | Tier 1 | |
| <i>alfuzosin hcl er</i> | Tier 1 | QL |
| <i>aminoacetic acid</i> | Tier 1 | |
| ARGYLE STERILE SALINE | Tier 1 | |
| AVODART | Tier 3 | #; QL |
| CARDURA XL | Tier 3 | QL |
| CURITY STERILE SALINE | Tier 1 | |
| CYSTAGON | Tier 3 | |
| <i>cytra k crystals</i> | Tier 1 | |
| CYTRA-3 | Tier 3 | |
| <i>dutasteride</i> | Tier 1 | QL |
| <i>dutasteride-tamsulosin hcl</i> | Tier 1 | |
| ELMIRON | Tier 2 | QL |
| <i>finasteride oral tablet 5 mg</i> | Tier 1 | PA |
| FLOMAX | Tier 3 | |
| <i>glycine irrigation</i> | Tier 1 | |
| <i>glycine urologic</i> | Tier 1 | |
| JALYN | Tier 3 | # |
| K-PHOS NO 2 | Tier 3 | |
| LITHOSTAT | Tier 3 | |
| <i>neomycin-polymyxin b gu</i> | Tier 1 | |
| NEOSPORIN GU IRRIGANT | Tier 3 | |
| ORACIT | Tier 3 | |
| PHENAZO ORAL TABLET 200 MG | Tier 1 | |
| <i>phenazopyridine hcl oral tablet 100 mg, 200 mg</i> | Tier 1 | |
| <i>potassium citrate-citric acid oral packet</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| PROCYSBI ORAL CAPSULE DELAYED RELEASE 25 MG, 75 MG | Tier 4 | PA; ST; SP; QL |
| PROSCAR | Tier 3 | PA |
| RAPAFLO | Tier 2 | |
| RENACIDIN | Tier 3 | |
| RESECTISOL | Tier 3 | |
| <i>sodium chloride irrigation solution 0.9 %</i> | Tier 1 | |
| <i>tamsulosin hcl</i> | Tier 1 | |
| TARON-CRYSTALS | Tier 1 | |
| THIOLA | Tier 4 | PA; ST |
| UROCIT-K 10 | Tier 3 | |
| UROCIT-K 5 | Tier 3 | |
| UROXATRAL | Tier 3 | QL |
| *GOUT AGENTS* | | |
| <i>allopurinol oral</i> | Tier 1 | |
| <i>colchicine oral tablet</i> | Tier 1 | |
| <i>colchicine-probenecid</i> | Tier 1 | |
| COLCRYS | Tier 3 | ST; QL |
| DUZALLO | Tier 3 | PA; ST; QL |
| KRYSTEXXA | Tier 4 | PA; ST; SP |
| MITIGARE | Tier 2 | QL |
| <i>probenecid oral</i> | Tier 1 | |
| ULORIC | Tier 3 | #; QL |
| ZURAMPIC | Tier 3 | PA; ST; QL |
| ZYLOPRIM | Tier 3 | |
| *HEMATOLOGICAL AGENTS - MISC.* | | |
| ADVATE | Tier 4 | PA; SP |
| <i>adynovate intravenous solution reconstituted 1000 unit, 1500 unit, 2000 unit, 250 unit, 500 unit, 750 unit</i> | Tier 4 | PA |
| <i>adynovate intravenous solution reconstituted 3000 unit</i> | Tier 4 | PA; SP |
| AFSTYLA | Tier 4 | PA; SP |
| AGGRENOX | Tier 3 | |
| AGRYLIN | Tier 3 | |
| ALPHANATE/VWF COMPLEX/HUMAN | Tier 4 | PA; SP |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| ALPHANINE SD | Tier 4 | PA; SP |
| ALPROLIX | Tier 4 | PA; SP |
| <i>anagrelide hcl</i> | Tier 1 | |
| <i>aspirin-dipyridamole er</i> | Tier 1 | |
| BEBULIN | Tier 4 | PA; SP |
| BERINERT | Tier 4 | PA; ST; SP |
| BRILINTA | Tier 2 | QL |
| <i>cilostazol</i> | Tier 1 | |
| CINRYZE | Tier 4 | PA; ST; SP |
| <i>clopidogrel bisulfate oral tablet 300 mg</i> | Tier 1 | |
| <i>clopidogrel bisulfate oral tablet 75 mg</i> | Tier 1 | QL |
| COAGADEX | Tier 4 | PA |
| CORIFACT | Tier 4 | PA; SP |
| <i>dipyridamole oral</i> | Tier 1 | |
| DURLAZA | Tier 3 | |
| EFFIENT | Tier 2 | PA; #; QL |
| ELOCTATE | Tier 4 | PA; SP |
| FEIBA | Tier 4 | PA; SP |
| FIRAZYR | Tier 4 | PA; ST; SP |
| HAEGARDA | Tier 4 | PA; ST; SP; QL |
| HELIXATE FS | Tier 4 | PA; SP |
| HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT | Tier 4 | PA; SP |
| HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT | Tier 4 | PA; SP |
| IDELVION | Tier 4 | PA; SP |
| IXINITY | Tier 4 | PA |
| KALBITOR | Tier 4 | PA; ST; SP |
| KCENTRA | Tier 4 | PA; SP |
| KOATE | Tier 4 | PA |
| KOATE-DVI | Tier 4 | PA; SP |
| KOGENATE FS | Tier 4 | PA; SP |
| KOGENATE FS BIO-SET | Tier 4 | PA; SP |
| KOVALTRY | Tier 4 | PA; SP |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| MONOCLATE-P INTRAVENOUS KIT 1000 UNIT, 1500 UNIT | Tier 4 | PA; SP |
| MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT | Tier 4 | PA; SP |
| NOVOEIGHT | Tier 4 | PA; SP |
| NOVOSEVEN RT | Tier 4 | PA; SP |
| NUWIQ | Tier 4 | PA; SP |
| <i>pentoxifylline er</i> | Tier 1 | |
| PLAVIX ORAL TABLET 300 MG | Tier 3 | |
| PLAVIX ORAL TABLET 75 MG | Tier 3 | QL |
| <i>prasugrel hcl</i> | Tier 1 | PA; QL |
| PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT | Tier 4 | SP |
| PROFILNINE SD | Tier 4 | PA; SP |
| RECOMBINATE | Tier 4 | PA; SP |
| RIASTAP | Tier 4 | PA; SP |
| RIXUBIS | Tier 4 | PA; SP |
| RUCONEST | Tier 4 | PA; SP |
| TRETTEN | Tier 4 | PA; SP |
| VONVENDI | Tier 4 | PA |
| WILATE INTRAVENOUS KIT | Tier 4 | PA; SP |
| XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT | Tier 4 | PA; SP |
| XYNTHA SOLOFUSE | Tier 4 | PA; SP |
| YOSPRALA | Tier 3 | PA; ST; QL |
| *HEMATOPOIETIC AGENTS* | | |
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML | Tier 4 | PA; SP |
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML | Tier 4 | PA; SP |
| CERDELGA | Tier 4 | PA; SP |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT | Tier 4 | PA; SP |
| DROXIA | Tier 3 | |
| ELELYSO | Tier 4 | PA; SP |
| EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML | Tier 4 | PA; SP |
| FER-IN-SOL | CE | |
| FERREX 150 FORTE PLUS | Tier 3 | |
| FERRLECIT | Tier 4 | SP |
| <i>ferrous sulfate oral solution 75 (15 fe) mg/ml</i> | CE | |
| <i>folic acid oral tablet 1 mg, 400 mcg, 800 mcg</i> | CE | |
| GRANIX | Tier 4 | PA; SP |
| IFEREX 150 FORTE | Tier 1 | |
| LEUKINE INTRAVENOUS | Tier 4 | PA; SP |
| MIRCERA INJECTION SOLUTION PREFILLED SYRINGE | Tier 4 | PA |
| <i>myferon 150 forte</i> | Tier 1 | |
| <i>na ferric gluc cplx in sucrose</i> | Tier 4 | SP |
| NASCOBAL | Tier 3 | ST |
| NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA |
| NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML | Tier 4 | PA; SP |
| NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE | Tier 4 | PA |
| NPLATE | Tier 4 | PA; SP |
| <i>poly-iron 150 forte</i> | Tier 1 | |
| <i>polysaccharide iron forte</i> | Tier 1 | |
| PROCRIT | Tier 4 | PA; SP |
| PROMACTA | Tier 4 | PA; SP |
| VENOFER | Tier 4 | SP |
| VPRIV | Tier 4 | PA; SP |
| ZARXIO | Tier 4 | PA |
| ZAVESCA | Tier 4 | PA; SP |
| *HEMOSTATICS* | | |
| AMICAR ORAL SOLUTION | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| AMICAR ORAL TABLET | Tier 3 | |
| ARTISS EXTERNAL SOLUTION | Tier 3 | |
| EVICEL | Tier 3 | |
| LYSTEDA | Tier 3 | ST; QL |
| <i>monsels ferric subsulfate external</i> | Tier 3 | |
| TISSEEL VH | Tier 3 | |
| TISSEEL VHSD | Tier 3 | |
| <i>tranexamic acid oral</i> | Tier 1 | QL |
| *HEPATITIS C AGENT - COMBINATIONS*** | | |
| EPCLUSA | Tier 4 | PA; SP; QL |
| HARVONI | Tier 4 | PA; SP; QL |
| MAVYRET | Tier 4 | PA; ST; SP; QL |
| TECHNIVIE | Tier 4 | PA; ST; QL |
| VIEKIRA PAK | Tier 4 | PA; ST; SP |
| VIEKIRA XR | Tier 4 | PA; ST; QL |
| VOSEVI | Tier 4 | PA; ST; SP; QL |
| ZEPATIER | Tier 4 | PA; SP; QL |
| *HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS** | | |
| XURIDEN | Tier 4 | PA; SP; QL |
| *HYPNOTICS* | | |
| AMBIEN CR | Tier 3 | QL |
| AMBIEN ORAL TABLET 10 MG, 5 MG | Tier 3 | QL |
| BUTISOL SODIUM ORAL TABLET 30 MG | Tier 3 | |
| DORAL | Tier 3 | |
| EDLUAR | Tier 3 | ST; QL |
| <i>estazolam</i> | Tier 1 | |
| <i>eszopiclone</i> | Tier 1 | QL |
| <i>flurazepam hcl</i> | Tier 1 | |
| HALCION | Tier 3 | |
| HETLIOZ | Tier 4 | PA; SP; QL |
| INTERMEZZO | Tier 3 | ST; #; QL |
| LUNESTA | Tier 3 | QL |
| <i>midazolam hcl oral</i> | Tier 1 | |
| <i>phenobarbital oral elixir</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>phenobarbital oral solution</i> | Tier 1 | |
| <i>phenobarbital oral tablet 16.2 mg, 32.4 mg</i> | Tier 1 | |
| RESTORIL ORAL CAPSULE 15 MG, 30 MG | Tier 3 | |
| RESTORIL ORAL CAPSULE 22.5 MG, 7.5 MG | Tier 3 | QL |
| ROZEREM | Tier 3 | ST; QL |
| SECONAL | Tier 3 | |
| SILENOR | Tier 3 | ST; QL |
| SONATA ORAL CAPSULE 10 MG, 5 MG | Tier 3 | QL |
| <i>temazepam oral capsule 15 mg, 30 mg</i> | Tier 1 | |
| <i>temazepam oral capsule 22.5 mg, 7.5 mg</i> | Tier 1 | QL |
| <i>triazolam</i> | Tier 1 | |
| <i>zaleplon oral capsule 10 mg, 5 mg</i> | Tier 1 | QL |
| <i>zolpidem tartrate er</i> | Tier 1 | QL |
| <i>zolpidem tartrate oral tablet 10 mg, 5 mg</i> | Tier 1 | QL |
| <i>zolpidem tartrate sublingual</i> | Tier 1 | QL |
| ZOLPIMIST | Tier 3 | ST; #; QL |
| *HYPOPHOSPHATASIA (HPP) AGENTS*** | | |
| STRENSIQ | Tier 4 | PA; SP |
| *IBS AGENT - MU-OPIOID RECEPTOR AGONISTS*** | | |
| VIBERZI | Tier 2 | QL |
| *INSULIN-INCRETIN MIMETIC COMBINATIONS*** | | |
| SOLIQUA | Tier 2 | ST; QL |
| XULTOPHY | Tier 2 | ST; QL |
| *INTEGRIN RECEPTOR ANTAGONISTS*** | | |
| ENTYVIO | Tier 4 | PA; ST; SP |
| *INTERLEUKIN ANTAGONISTS*** | | |
| STELARA INTRAVENOUS | Tier 4 | PA; ST; SP |
| *INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)*** | | |
| NUCALA | Tier 4 | PA; SP; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *INTERLEUKIN-5 ANTAGONISTS (IGG4 KAPPA)*** | | |
| CINQAIR | Tier 4 | PA; SP |
| *ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS*** | | |
| IDHIFA | Tier 4 | PA; SP; QL |
| *LAXATIVES* | | |
| CLEARLAX ORAL POWDER | Tier 4 | |
| <i>constulose</i> | Tier 1 | |
| <i>gavilax oral packet</i> | CE | |
| GAVILYTE-C | Tier 1 | |
| GAVILYTE-G | Tier 1 | |
| GAVILYTE-H | CE | |
| GAVILYTE-N WITH FLAVOR PACK | Tier 1 | |
| GOLYTELY | Tier 3 | |
| KRISTALOSE | Tier 3 | |
| <i>lactulose oral</i> | Tier 1 | |
| MOVIPREP | CE | |
| NULYTELY WITH FLAVOR PACKS | Tier 3 | |
| OSMOPREP | CE | |
| <i>peg 3350 oral packet</i> | CE | |
| <i>peg 3350/electrolytes</i> | CE | |
| <i>peg 3350-kcl-na bicarb-nacl</i> | Tier 1 | |
| <i>peg-3350/electrolytes</i> | Tier 1 | |
| PEG-PREP | CE | |
| PREPOPIK | CE | # |
| SUPREP BOWEL PREP KIT | CE | |
| TRILYTE | CE | |
| *LEPTIN ANALOGUES*** | | |
| MYALEPT | Tier 4 | PA; SP; QL |
| *LHRH/GNRH AGONIST ANALOG COMBINATIONS*** | | |
| LUPANETA PACK | Tier 4 | PA; SP |
| *LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG*** | | |
| XIIDRA | Tier 2 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS*** | | |
| KANUMA | Tier 4 | PA; SP |
| *MACROLIDES* | | |
| <i>azithromycin oral suspension reconstituted</i> | Tier 1 | |
| <i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i> | Tier 1 | |
| BIAXIN ORAL TABLET | Tier 3 | |
| BIAXIN XL | Tier 3 | |
| BIAXIN XL PAC | Tier 3 | |
| <i>clarithromycin er</i> | Tier 1 | |
| <i>clarithromycin oral</i> | Tier 1 | |
| DIFICID | Tier 3 | QL |
| E.E.S. 400 ORAL TABLET | Tier 3 | |
| E.E.S. GRANULES | Tier 3 | |
| ERYPED 200 | Tier 3 | |
| ERYPED 400 | Tier 3 | |
| ERY-TAB | Tier 3 | |
| ERYTHROCIN STEARATE ORAL TABLET 250 MG | Tier 3 | |
| <i>erythromycin base oral capsule delayed release particles</i> | Tier 1 | |
| PCE | Tier 3 | |
| ZITHROMAX ORAL | Tier 3 | |
| ZITHROMAX TRI-PAK | Tier 3 | |
| ZITHROMAX Z-PAK | Tier 3 | |
| ZMAX | Tier 3 | |
| *MEDICAL DEVICES* | | |
| <i>1st tier unifine pentips</i> | Tier 3 | |
| <i>1st tier unifine pentips plus</i> | Tier 3 | |
| ACCU-CHEK AVIVA IN VITRO SOLUTION | Tier 3 | |
| ACCU-CHEK COMPACT PLUS CONTROL | Tier 3 | |
| ACCU-CHEK FASTCLIX LANCET | Tier 3 | |
| ACCU-CHEK MULTICLIX LANCET DEV | Tier 3 | |
| ACCU-CHEK MULTICLIX LANCETS | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| ACCU-CHEK SMARTVIEW CONTROL | Tier 3 | |
| ACCU-CHEK SOFTCLIX LANCET DEV KIT | Tier 3 | |
| ACCUTREND GLUCOSE CONTROL | Tier 3 | |
| ACE AEROSOL CLOUD ENHANCER | Tier 3 | |
| ACTIVITY POUCH | Tier 3 | |
| <i>adjustable lancing device</i> | Tier 3 | |
| <i>adult aerosol mask</i> | Tier 4 | |
| <i>adult mask</i> | Tier 3 | |
| <i>adult mask large</i> | Tier 3 | |
| ADVANCE INTUITION CONTROL | Tier 3 | |
| ADVANCE MICRO-DRAW CONTROL | Tier 3 | |
| ADVANCE MICRO-DRAW NORMAL | Tier 3 | |
| ADVOCATE CONTROL SOLUTION | Tier 3 | |
| ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM , 31G X 8 MM | Tier 3 | |
| ADVOCATE INSULIN SYRINGE | Tier 3 | |
| ADVOCATE LANCING DEVICE | Tier 3 | |
| ADVOCATE RAPID-SAFE LANCING | Tier 3 | |
| ADVOCATE REDI-CODE+ CONTROL | Tier 3 | |
| AEROCHAMBER MINI CHAMBER | Tier 3 | |
| AEROCHAMBER MV | Tier 3 | |
| AEROCHAMBER PLUS | Tier 3 | |
| AEROCHAMBER PLUS FLO-VU | Tier 3 | |
| AEROCHAMBER PLUS FLO-VU LARGE | Tier 3 | |
| AEROCHAMBER PLUS FLO-VU MEDIUM | Tier 3 | |
| AEROCHAMBER PLUS FLO-VU SMALL | Tier 3 | |
| AEROCHAMBER PLUS FLO-VU W/MASK | Tier 3 | |
| AEROCHAMBER PLUS FLOW VU | Tier 3 | |
| AEROCHAMBER PLUS W/MASK SMALL | Tier 3 | |
| AEROCHAMBER W/FLOWSIGNAL | Tier 3 | |
| AEROCHAMBER Z-STAT PLUS | Tier 3 | |
| AEROCHAMBER Z-STAT PLUS CHAMBR | Tier 3 | |
| AEROCHAMBER Z-STAT PLUS/LARGE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--------------------------------------|--------------------|---------------------|
| AEROCHAMBER Z-STAT PLUS/MEDIUM | Tier 3 | |
| AEROCHAMBER Z-STAT PLUS/SMALL | Tier 3 | |
| AEROTRACH PLUS | Tier 3 | |
| AGAMATRIX CONTROL | Tier 3 | |
| ALCOH-GLOVE CONTOURED WIPE | Tier 3 | |
| <i>alcohol pads</i> | Tier 3 | |
| <i>alcohol prep pad 70 %</i> | Tier 3 | |
| <i>alcohol swabs</i> | Tier 3 | |
| <i>alcohol wipes pad 70 %</i> | Tier 3 | |
| ALL FLOW 1000 PFT FILTER | Tier 3 | |
| <i>alternate site lancing device</i> | Tier 3 | |
| <i>aqua lance adjustable lancing</i> | Tier 3 | |
| ARIAL CHAMBER | Tier 4 | |
| ASSURE 3 CONTROL | Tier 3 | |
| ASSURE 4 CONTROL LEVEL 1 & 2 | Tier 3 | |
| ASSURE DOSE CONTROL | Tier 3 | |
| ASSURE DOSE NORM/HIGH CONTROL | Tier 3 | |
| ASSURE ID INSULIN SAFETY SYR | Tier 3 | |
| ASSURE II CONTROL | Tier 3 | |
| ASSURE II CONTROL LEVEL 1 & 2 | Tier 3 | |
| ASSURE PRO CONTROL LEVEL 1 & 2 | Tier 3 | |
| AT LAST CONTROL | Tier 3 | |
| <i>aurora pen needles</i> | Tier 3 | |
| <i>aurora unifine pentips</i> | Tier 3 | |
| AUTOJECT 2 | Tier 3 | |
| AUTO-LANCET | Tier 3 | |
| AUTO-LANCET MINI | Tier 3 | |
| AUTOLET II CLINISAFE | Tier 3 | |
| AUTOLET LANCING DEVICE | Tier 3 | |
| AUTOLET LITE CLINISAFE | Tier 3 | |
| AUTOLET LITE STARTER PACK | Tier 3 | |
| AUTOLET MINI | Tier 3 | |
| AUTOLET PLATFORMS | Tier 3 | |
| BAYER BREEZE 2 CONTROL | Tier 3 | |
| BAYER CONTOUR | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| BAYER CONTOUR NEXT CONTROL | Tier 3 | |
| BAYER MICROLET 2 LANCING DEVIC | Tier 3 | |
| BAYER MICROLET LANCETS | Tier 3 | |
| BD AUTOSHIELD 29G X 5MM , 29G X 8MM | Tier 2 | |
| BD AUTOSHIELD DUO | Tier 2 | |
| BD INSULIN SYR ULTRAFINE II | Tier 2 | |
| BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.3 ML | Tier 2 | |
| BD INSULIN SYRINGE 29G X 1/2" 1 ML, U-100 1 ML | Tier 3 | |
| BD INSULIN SYRINGE HALF-UNIT | Tier 2 | |
| BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML | Tier 2 | |
| BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.5 ML | Tier 2 | |
| BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.3 ML, 31G X 5/16" 1 ML | Tier 3 | |
| BD LANCET ULTRAFINE 30G | Tier 3 | |
| BD LANCET ULTRAFINE 33G | Tier 3 | |
| BD MICROTAINER LANCETS | Tier 3 | |
| BD PEN | Tier 2 | |
| BD PEN MINI | Tier 2 | |
| BD PEN NEEDLE MINI U/F | Tier 2 | |
| BD PEN NEEDLE NANO U/F | Tier 2 | |
| BD PEN NEEDLE SHORT U/F | Tier 2 | |
| BD PEN NEEDLE ULTRAFINE | Tier 2 | |
| BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML | Tier 2 | |
| BD SAFETY-LOK INSULIN SYRINGE | Tier 2 | |
| BD SWAB SINGLE USE REGULAR | Tier 3 | |
| BD SWABS SINGLE USE BUTTERFLY | Tier 3 | |
| BREATHERITE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| BREATHERITE COLL SPACER ADULT | Tier 3 | |
| BREATHERITE COLL SPACER CHILD | Tier 3 | |
| BREATHERITE COLL SPACER INFANT | Tier 3 | |
| BREATHERITE RIGID SPACER/MASK | Tier 3 | |
| BREATHERITE SPACER NEONATE | Tier 3 | |
| BREATHERITE SPACER SMALL CHILD | Tier 3 | |
| BREATHERITE/LARGE MASK | Tier 3 | |
| BREATHERITE/MEDIUM MASK | Tier 3 | |
| BREATHERITE/SMALL MASK | Tier 3 | |
| CARDIOCOM LANCING DEVICE | Tier 3 | |
| <i>careone advanced lancing dev</i> | Tier 3 | |
| <i>careone unifine pentips</i> | Tier 3 | |
| <i>careone unifine pentips plus</i> | Tier 3 | |
| CARESENS CONTROL A | Tier 3 | |
| CLEVER CHOICE GLUCOSE CONTROL | Tier 3 | |
| <i>clickfine pen needles</i> | Tier 3 | |
| CLOSERCARE | Tier 3 | |
| <i>co monitor replacement pieces</i> | Tier 3 | |
| COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | Tier 3 | |
| COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML | Tier 2 | |
| COMFORT EZ PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM | Tier 3 | |
| <i>control</i> | Tier 3 | |
| CURITY ALCOHOL PREPS | Tier 3 | |
| CURITY ALCOHOL SWABS | Tier 3 | |
| <i>cvs lancing device</i> | Tier 3 | |
| <i>diatrue control level 1</i> | Tier 3 | |
| <i>diatrue control level 2</i> | Tier 3 | |
| <i>diatrue control level 3</i> | Tier 3 | |
| DROPLET LANCING DEVICE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| DRUG MART LANCING DEVICE | Tier 3 | |
| <i>drug mart unifine pentips</i> | Tier 3 | |
| DUO-CARE CONTROL SOLUTION | Tier 3 | |
| EASIVENT | Tier 3 | |
| EASIVENT MASK LARGE | Tier 3 | |
| EASIVENT MASK MEDIUM | Tier 3 | |
| EASIVENT MASK SMALL | Tier 3 | |
| <i>easy comfort insulin syringe 30g x 1/2" 1 ml</i> | Tier 2 | |
| <i>easy comfort pen needles 31g x 5 mm , 31g x 8 mm</i> | Tier 3 | |
| <i>easy mini lancing device</i> | Tier 3 | |
| <i>easy plus ii control</i> | Tier 3 | |
| EASY STEP CONTROL | Tier 3 | |
| <i>easy talk control</i> | Tier 3 | |
| EASY TOUCH ALCOHOL PREP MEDIUM | Tier 3 | |
| EASY TOUCH CONTROL HIGH & LOW | Tier 3 | |
| EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML | Tier 3 | |
| EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML | Tier 2 | |
| EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML | Tier 2 | |
| EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | Tier 3 | |
| EASY TOUCH LANCING DEVICE | Tier 3 | |
| EASY TOUCH PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 5 MM , 32G X 6 MM | Tier 3 | |
| <i>easy trak control</i> | Tier 3 | |
| EASYGLUCO CONTROL | Tier 3 | |
| EASYMAX 15 LEVEL 1 CONTROL | Tier 3 | |
| EASYMAX 15 LEVEL 2 CONTROL | Tier 3 | |
| EASYMAX CONTROL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| EFLOW SCF AEROSOL HEAD | Tier 3 | |
| <i>element compact control 2</i> | Tier 3 | |
| <i>element compact control 3</i> | Tier 3 | |
| ELEMENT CONTROL | Tier 3 | |
| ELITE DC AUTO ADAPTER | Tier 3 | |
| <i>elite-thin insulin syringe 28g x 5/16" 0.5 ml, 28g x 5/16" 1 ml, 29g x 5/16" 0.5 ml, 29g x 5/16" 1 ml</i> | Tier 3 | |
| EMBRACE CONTROL | Tier 3 | |
| EVENCARE CONTROL LOW/HIGH | Tier 3 | |
| EVENCARE G2 LOW/HIGH CONTROL | Tier 3 | |
| EVENCARE G3 LOW/HIGH CONTROL | Tier 3 | |
| EVOLUTION CONTROL | Tier 3 | |
| E-Z SPACER | Tier 3 | |
| E-Z SPACER THE BODY GUARDS PK | Tier 3 | |
| FC FEMALE CONDOM | CE | |
| FC2 FEMALE CONDOM | CE | |
| FEMCAP | CE | |
| FIFTY50 ALCOHOL PREP | Tier 3 | |
| FIFTY50 PEN NEEDLES 31G X 5 MM , 31G X 8 MM | Tier 3 | |
| FIFTY50 SUPERIOR COMFORT SYR | Tier 3 | |
| <i>filter air pp</i> | Tier 3 | |
| FORA CONTROL | Tier 3 | |
| FORA LANCING DEVICE | Tier 3 | |
| FORACARE GDH CONTROL | Tier 3 | |
| <i>freds pharmacy autolet lancing</i> | Tier 3 | |
| <i>freds pharmacy unifine pentip+</i> | Tier 3 | |
| <i>freds pharmacy unifine pentips</i> | Tier 3 | |
| FREESTYLE CONTROL SOLUTION | Tier 3 | |
| FREESTYLE LANCETS | Tier 3 | |
| FREESTYLE PRECISION INS SYR | Tier 3 | |
| <i>full kit nebulizer set</i> | Tier 3 | |
| <i>ge100 control</i> | Tier 3 | |
| GENTLE-LET PLATFORMS | Tier 3 | |
| <i>global alcohol prep ease</i> | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>global ease inject pen needles</i> | Tier 3 | |
| <i>global inject ease insulin syr 30g x 1/2" 0.3 ml, 30g x 1/2" 1 ml</i> | Tier 2 | |
| <i>global lancing device</i> | Tier 3 | |
| GLUCOCARD 01 CONTROL | Tier 3 | |
| GLUCOCARD EXPRESSION CONTROL | Tier 3 | |
| GLUCOCARD SHINE CONTROL | Tier 3 | |
| GLUCOCARD X-SENSOR CONTROL | Tier 3 | |
| GLUCOCOM CONTROL | Tier 3 | |
| GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML | Tier 2 | |
| GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | Tier 3 | |
| <i>glucose control</i> | Tier 3 | |
| <i>gnp alcohol swabs pad 70 %</i> | Tier 3 | |
| <i>gnp clickfine pen needles</i> | Tier 3 | |
| HEALTH CARE LANCING DEVICE | Tier 3 | |
| <i>healthwise mini pen needles</i> | Tier 3 | |
| <i>healthwise pen needles</i> | Tier 3 | |
| <i>healthwise short pen needles</i> | Tier 3 | |
| <i>healthwise unifine pentips</i> | Tier 3 | |
| <i>healthy accents lancing device</i> | Tier 3 | |
| <i>healthy accents unifine pentip</i> | Tier 3 | |
| <i>h-e-b incontrol adv lancing</i> | Tier 3 | |
| <i>h-e-b incontrol pen needles</i> | Tier 3 | |
| HUMATROPEN FOR 12MG | Tier 3 | |
| HUMATROPEN FOR 24MG | Tier 3 | |
| HUMATROPEN FOR 6MG | Tier 3 | |
| HYPOLANCE AST LANCING | Tier 3 | |
| INFINITY CONTROL | Tier 3 | |
| INNOSPIRE REPLACEMENT FILTER | Tier 3 | |
| INSPIREASE | Tier 3 | |
| INSPIREASE RESERVOIR BAGS | Tier 3 | |
| <i>insupen pen needles 32g x 4 mm</i> | Tier 3 | |
| INSUPEN SENSITIVE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| INSUPEN ULTRAFIN | Tier 3 | |
| J-TIP KIT W/VIAL ADAPTERS | Tier 3 | |
| <i>kmart valu insulin syringe 29g</i> | Tier 3 | |
| <i>kmart valu insulin syringe 30g</i> | Tier 3 | |
| <i>kroger lancing device</i> | Tier 3 | |
| <i>kroger pen needles</i> | Tier 3 | |
| <i>lancet device</i> | Tier 3 | |
| <i>lancets</i> | Tier 1 | |
| LANCETS ULTRA THIN | Tier 3 | |
| <i>lancing device</i> | Tier 3 | |
| <i>leader advanced lancing device</i> | Tier 3 | |
| LEADER UNIFINE PENTIPS | Tier 3 | |
| LEADER UNIFINE PENTIPS PLUS | Tier 3 | |
| LIBERTY GLUCOSE CONTROL IN VITRO LIQUID | Tier 3 | |
| LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION HIGH , NORMAL | Tier 3 | |
| LIBERTY GLUCOSE CONTROL MID | Tier 3 | |
| LIBERTY MINI LANCING DEVICE | Tier 3 | |
| LITE TOUCH LANCING PEN | Tier 3 | |
| LITE TOUCH PEN NEEDLES | Tier 3 | |
| LITEAIRE | Tier 3 | |
| LITETOUCH INSULIN SYRINGE | Tier 3 | |
| LITETOUCH MASK LARGE | Tier 3 | |
| LITETOUCH MASK MEDIUM | Tier 3 | |
| LITETOUCH MASK SMALL | Tier 3 | |
| LITETOUCH PEN NEEDLES | Tier 3 | |
| <i>live better adv lancing device</i> | Tier 3 | |
| MAGELLAN INSULIN SAFETY SYR | Tier 3 | |
| MAXI-COMFORT INSULIN SYRINGE | Tier 3 | |
| <i>medicine shoppe pen needles</i> | Tier 3 | |
| MEDISENSE GLUCOSE KETONE CONTR | Tier 3 | |
| MEDISENSE HI/MID/LOW CONTROL | Tier 3 | |
| MEDISENSE HIGH/LOW CONTROL | Tier 3 | |
| MEDISENSE MID CONTROL | Tier 3 | |
| <i>meijer alcohol swabs</i> | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>meijer pen needles</i> | Tier 3 | |
| MICROCHAMBER | Tier 3 | |
| MICRODOT CONTROL HIGH/LOW | Tier 3 | |
| MICROLET LANCETS | Tier 3 | |
| MICROSPACER | Tier 3 | |
| <i>mini lancing device</i> | Tier 3 | |
| MINIELITE RECHARGEABLE BATTERY | Tier 3 | |
| MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML, 27G X 1/2" 1 ML | Tier 2 | |
| MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML, U-100 1 ML | Tier 3 | |
| MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML | Tier 3 | |
| MONOJECTOR END CAPS | Tier 3 | |
| MONOJECTOR OPD END CAPS | Tier 3 | |
| <i>multi-lancet device</i> | Tier 3 | |
| MYGLUCOHEALTH CONTROL | Tier 3 | |
| <i>nebulizer air tubelplugs</i> | Tier 3 | |
| <i>nebulizer mask pediatric</i> | Tier 3 | |
| NEUTEK 2TEK CONTROL | Tier 3 | |
| NEXGEN CONTROL | Tier 3 | |
| NORDIPEN 5 INJECTION DEVICE | Tier 3 | |
| NORDIPEN DELIVERY SYSTEM | Tier 3 | |
| NOVA MAX PLUS GLU/KET CONTROL | Tier 3 | |
| NOVA SUREFLEX LANCING DEVICE | Tier 3 | |
| NOVOFINE | Tier 3 | |
| NOVOFINE AUTOCOVER | Tier 3 | |
| NOVOTWIST 32G X 5 MM | Tier 3 | |
| OMNIFLEX DIAPHRAGM | Tier 3 | |
| ON CALL EXPRESS GLUCOSE CONTR | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| ON CALL LANCING DEVICE | Tier 3 | |
| ON CALL PLUS GLUCOSE CONTROL | Tier 3 | |
| ON CALL PLUS LANCING DEVICE | Tier 3 | |
| ON CALL VIVID GLUCOSE CONTROL | Tier 3 | |
| ONETOUCH DELICA LANCING DEV | Tier 3 | |
| ONETOUCH LANCETS | Tier 3 | |
| ONETOUCH SURESOFT LANCING DEV | Tier 3 | |
| ONETOUCH ULTRA CONTROL | Tier 3 | |
| ONETOUCH VERIO IN VITRO SOLUTION | Tier 3 | |
| OPTICHAMBER ADVANTAGE | Tier 3 | |
| OPTICHAMBER ADVANTAGE-LG MASK | Tier 3 | |
| OPTICHAMBER ADVANTAGE-MED MASK | Tier 3 | |
| OPTICHAMBER ADVANTAGE-SM MASK | Tier 3 | |
| OPTICHAMBER DIAMOND | Tier 3 | |
| OPTICHAMBER DIAMOND-LG MASK | Tier 3 | |
| OPTICHAMBER DIAMOND-MD MASK | Tier 3 | |
| OPTICHAMBER DIAMOND-SM MASK | Tier 3 | |
| OPTIHALER | Tier 3 | |
| OPTUMRX GLUCOSE CONTROL | Tier 3 | |
| PARI ALTERA NEBULIZER HANDSET | Tier 3 | |
| PARI BABY CONVERSION KIT | Tier 3 | |
| PARI ERAPID NEBULIZER HANDSET | Tier 3 | |
| PARI EXPIRATORY FILTER SET | Tier 3 | |
| PARI MASK SET | Tier 3 | |
| PARI SOFT PLASTIC ADULT MASK | Tier 3 | |
| PARI SOFT PLASTIC PED MASK | Tier 3 | |
| <i>pc unifine pentips</i> | Tier 3 | |
| <i>pediatric aerosol mask</i> | Tier 3 | |
| <i>pen needles 1/2"</i> | Tier 3 | |
| <i>pen needles 29g x 12mm , 31g x 6 mm</i> | Tier 3 | |
| <i>pen needles 3/16"</i> | Tier 3 | |
| <i>pen needles 5/16"</i> | Tier 3 | |
| PENLET II BLOOD SAMPLER | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---------------------------------------|--------------------|---------------------|
| PENLET II REPLACEMENT CAP | Tier 3 | |
| PFLEX | Tier 3 | |
| PHARMACIST CHOICE ALCOHOL | Tier 3 | |
| <i>pillow mask/adult</i> | Tier 3 | |
| <i>pillow mask/child</i> | Tier 3 | |
| <i>pillow mask/pediatric</i> | Tier 3 | |
| POCKET CHAMBER | Tier 3 | |
| POCKET SPACER | Tier 3 | |
| POCKETCHEM EZ CONTROL | Tier 3 | |
| PRECISION GLUCOSE CONTROL | Tier 3 | |
| PRECISION GLUCOSE CONTROL SOLN | Tier 3 | |
| PRECISION GLUCOSE KETONE CONTR | Tier 3 | |
| PRECISION GLUCOSE/KETONE CONTR | Tier 3 | |
| PRECISION SUREDOSE PLUS SYR | Tier 3 | |
| PRECISION SURE-DOSE SYRINGE | Tier 3 | |
| <i>preferred plus unifine pentips</i> | Tier 3 | |
| PRODIGY CONTROL SOLUTION | Tier 3 | |
| PRODIGY INSULIN SYRINGE | Tier 3 | |
| PRODIGY LANCING DEVICE | Tier 3 | |
| PSS SELECT PLATFORMS | Tier 3 | |
| <i>px advanced lancing device</i> | Tier 3 | |
| <i>px extra short pen needles</i> | Tier 3 | |
| <i>px lancet auto injector</i> | Tier 3 | |
| <i>px pen needle</i> | Tier 3 | |
| <i>px shortlength pen needles</i> | Tier 3 | |
| <i>qc advanced lancing device</i> | Tier 3 | |
| <i>qc alcohol swabs</i> | Tier 3 | |
| <i>qc pen needles</i> | Tier 3 | |
| <i>qc unifine pentips</i> | Tier 3 | |
| QUICKTEK CONTROL SOLUTION | Tier 3 | |
| QUINTET CONTROL HIGH/NORMAL | Tier 3 | |
| <i>ra alcohol swabs</i> | Tier 3 | |
| <i>ra lancing device</i> | Tier 3 | |
| <i>ra pen needles</i> | Tier 3 | |
| <i>reality swabs</i> | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| REFUAH PLUS GLUCOSE CONTROL | Tier 3 | |
| RELION ALCOHOL SWABS | Tier 3 | |
| RELI-ON INSULIN SYRINGE | Tier 3 | |
| RELION INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | Tier 3 | |
| RELION LANCING DEVICE | Tier 3 | |
| RELION MINI PEN NEEDLES | Tier 3 | |
| RELION PEN NEEDLES 29G X 12MM , 31G X 8 MM , 32G X 4 MM | Tier 3 | |
| RELION SHORT PEN NEEDLES | Tier 3 | |
| <i>replacement air filter</i> | Tier 3 | |
| RIGHTEST ALTERNATE SITE ADAPT | Tier 3 | |
| RIGHTEST GC300 CONTROL | Tier 3 | |
| RIGHTEST GD500 LANCING DEVICE | Tier 3 | |
| RITEFLO | Tier 3 | |
| SAFESNAP INSULIN SYRINGE | Tier 3 | |
| SAFETY-GLIDE SYRINGE | Tier 3 | |
| <i>sb alcohol prep</i> | Tier 3 | |
| <i>select-lite devicelancets</i> | Tier 1 | |
| <i>select-lite lancing device</i> | Tier 3 | |
| SHOPKO ALCOHOL SWABS | Tier 3 | |
| SHOPKO AUTOLET LANCING DEVICE | Tier 3 | |
| SHOPKO UNIFINE PENTIPS | Tier 3 | |
| SIDESTREAM ADULT FACE MASK | Tier 3 | |
| SIDESTREAM PEDIATRIC FACE MASK | Tier 3 | |
| <i>silicone mask/adult</i> | Tier 3 | |
| <i>silicone mask/infant</i> | Tier 3 | |
| <i>silicone mask/pediatric</i> | Tier 3 | |
| SIMPLE DIAGNOSTICS LANCING DEV | Tier 3 | |
| <i>sm alcohol prep</i> | Tier 3 | |
| SMART DIABETES VANTAGE LANCING | Tier 3 | |
| SMARTTEST CONTROL MEDIUM | Tier 3 | |
| SOLARTEK GLUCOSE CONTROL | Tier 3 | |
| SOLUS V2 CONTROL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| SOLUS V2 LANCING DEVICE | Tier 3 | |
| STERILANCE PA | Tier 3 | |
| <i>supreme ii high/low control</i> | Tier 3 | |
| <i>sure comfort alcohol prep</i> | Tier 3 | |
| <i>sure comfort insulin syringe 30g x 1/2" 0.3 ml, 30g x 1/2" 1 ml</i> | Tier 2 | |
| <i>sure comfort lancing pen</i> | Tier 3 | |
| <i>sure comfort pen needles 29g x 12.7mm , 30g x 8 mm , 31g x 5 mm , 31g x 8 mm , 32g x 4 mm</i> | Tier 3 | |
| SURE-FINE PEN NEEDLES | Tier 3 | |
| SURE-JECT INSULIN SYRINGE | Tier 3 | |
| SURE-PEN | Tier 3 | |
| SURE-PREP ALCOHOL PREP | Tier 3 | |
| SURESTEP GLUCOSE CONTROL | Tier 3 | |
| SURESTEP PRO HIGH GLUCOSE | Tier 3 | |
| SURESTEP PRO LOW GLUCOSE | Tier 3 | |
| SURESTEP PRO NORMAL GLUCOSE | Tier 3 | |
| TAI DOC CONTROL | Tier 3 | |
| TELCARE GLUCOSE CONTROL | Tier 3 | |
| <i>tgt alcohol swabs</i> | Tier 3 | |
| <i>tgt lancing device</i> | Tier 3 | |
| THRESHOLD IMT | Tier 3 | |
| <i>todays health lancing device</i> | Tier 3 | |
| <i>todays health mini pen needles</i> | Tier 3 | |
| <i>todays health pen needles</i> | Tier 3 | |
| <i>todays health short pen needle</i> | Tier 3 | |
| <i>topcare clickfine pen needles</i> | Tier 3 | |
| TRUECONTROL GLUCOSE CONT LEV 0 | Tier 3 | |
| TRUECONTROL GLUCOSE CONT LEV 1 | Tier 3 | |
| TRUEDRAW LANCING DEVICE | Tier 3 | |
| TRUEPLUS INSULIN SYRINGE | Tier 3 | |
| TRUEPLUS LANCETS 30G | Tier 3 | |
| TRUZONE PEAK FLOW METER | Tier 3 | |
| ULTICARE INSULIN SAFETY SYR | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | Tier 3 | |
| ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML | Tier 2 | |
| ULTICARE MICRO PEN NEEDLES 32G X 4 MM | Tier 3 | |
| ULTICARE MINI PEN NEEDLES | Tier 3 | |
| ULTICARE PEN NEEDLES 29G X 12.7MM, 29G X 12MM | Tier 3 | |
| ULTICARE SHORT PEN NEEDLES | Tier 3 | |
| ULTI-LANCE AUTOMATIC | Tier 3 | |
| <i>ultilet alcohol swabs</i> | Tier 3 | |
| ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML | Tier 3 | |
| ULTRALANCE | Tier 3 | |
| ULTRA-THIN II INS SYR SHORT | Tier 3 | |
| ULTRA-THIN II INSULIN SYRINGE | Tier 3 | |
| ULTRA-THIN II MINI PEN NEEDLE | Tier 3 | |
| ULTRA-THIN II PEN NEEDLE SHORT | Tier 3 | |
| ULTRA-THIN II PEN NEEDLES | Tier 3 | |
| ULTRATRAK PRO CONTROL | Tier 3 | |
| ULTRATRAK ULTIMATE CONTROL | Tier 3 | |
| UNIFINE PENTIPS | Tier 3 | |
| <i>unifine pentips plus 32g x 4 mm</i> | Tier 3 | |
| UNISTIK 1 | Tier 3 | |
| UNISTIK 2 | Tier 3 | |
| UNISTIK 2 COMFORT | Tier 3 | |
| UNISTIK 2 EXTRA | Tier 3 | |
| UNISTIK 2 NEONATAL | Tier 3 | |
| UNISTIK 2 NORMAL | Tier 3 | |
| UNISTIK 2 SUPER | Tier 3 | |
| UNISTIK 3 | Tier 3 | |
| UNISTIK 3 COMFORT | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| UNISTIK 3 EXTRA | Tier 3 | |
| UNISTIK 3 NEONATAL | Tier 3 | |
| UNISTIK 3 NORMAL | Tier 3 | |
| UNISTIK CZT COMFORT | Tier 3 | |
| UNISTIK CZT NORMAL | Tier 3 | |
| UNISTRIP CONTROL | Tier 3 | |
| <i>value plus lancing device</i> | Tier 3 | |
| <i>valumark pen needles</i> | Tier 3 | |
| <i>valved holding chamber</i> | Tier 3 | |
| VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML, 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML | Tier 3 | |
| VICTORY CONTROL LEVEL 1/2 | Tier 3 | |
| VIDA MIA AUTOLET LANCING DEV | Tier 3 | |
| VIDA MIA UNIFINE PENTIPS | Tier 3 | |
| VORTEX VALVED HOLDING CHAMBER | Tier 3 | |
| WATCHHALER | Tier 3 | |
| WEBCOL ALCOHOL PREP LARGE | Tier 3 | |
| WEBCOL ALCOHOL PREP MEDIUM | Tier 3 | |
| <i>wegmans unifine pentips plus</i> | Tier 3 | |
| WIDE-SEAL DIAPHRAGM 60 | CE | |
| WIDE-SEAL DIAPHRAGM 65 | CE | |
| WIDE-SEAL DIAPHRAGM 70 | CE | |
| WIDE-SEAL DIAPHRAGM 75 | CE | |
| WIDE-SEAL DIAPHRAGM 80 | CE | |
| WIDE-SEAL DIAPHRAGM 85 | CE | |
| WIDE-SEAL DIAPHRAGM 90 | CE | |
| WIDE-SEAL DIAPHRAGM 95 | CE | |
| WINDMILL TRAINER | Tier 3 | |
| *MIGRAINE PRODUCTS* | | |
| <i>almotriptan malate</i> | Tier 1 | QL |
| AMERGE | Tier 3 | QL |
| AXERT | Tier 3 | ST; QL |
| CAFERGOT | Tier 3 | |
| CAMBIA | Tier 3 | #; QL |
| D.H.E. 45 | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>dihydroergotamine mesylate injection</i> | Tier 1 | |
| <i>dihydroergotamine mesylate nasal</i> | Tier 1 | ST |
| <i>eletriptan hydrobromide</i> | Tier 1 | QL |
| ERGOMAR | Tier 3 | |
| FROVA | Tier 3 | #; QL |
| <i>frovatriptan succinate</i> | Tier 1 | QL |
| IMITREX NASAL | Tier 3 | QL |
| IMITREX ORAL | Tier 3 | QL |
| IMITREX SUBCUTANEOUS | Tier 3 | QL |
| MAXALT | Tier 3 | QL |
| MAXALT-MLT | Tier 3 | QL |
| MIGERGOT | Tier 3 | |
| MIGRANAL | Tier 3 | ST; QL |
| <i>naratriptan hcl</i> | Tier 1 | QL |
| ONZETRA XSAIL | Tier 3 | ST; QL |
| RELPAK | Tier 3 | ST; #; QL |
| <i>rizatriptan benzoate</i> | Tier 1 | QL |
| <i>sumatriptan succinate oral</i> | Tier 1 | QL |
| SUMAVEL DOSEPRO SUBCUTANEOUS SOLUTION JET-INJECTOR | Tier 3 | QL |
| TREXIMET | Tier 3 | ST; QL |
| ZEMBRACE SYMTOUCH | Tier 3 | ST; QL |
| <i>zolmitriptan oral</i> | Tier 1 | QL |
| ZOMIG NASAL SOLUTION 2.5 MG, 5 MG | Tier 3 | QL |
| ZOMIG ORAL | Tier 3 | QL |
| ZOMIG ZMT | Tier 3 | QL |
| *MINERALS & ELECTROLYTES* | | |
| CALCIFOL | Tier 3 | |
| <i>calcium-folic acid plus d</i> | Tier 3 | |
| EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ | Tier 3 | |
| EFFER-K ORAL TABLET EFFERVESCENT 25 MEQ | Tier 1 | |
| <i>effervescent pot chloride</i> | Tier 1 | |
| FLUORABON | CE | |
| FLUOR-A-DAY ORAL SOLUTION | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| FLUOR-A-DAY ORAL TABLET CHEWABLE 0.25 (F)-236.79 MG | Tier 3 | |
| FLUOR-A-DAY ORAL TABLET CHEWABLE 1 (F)-236.79 MG | CE | |
| <i>fluoritab oral solution</i> | Tier 1 | |
| <i>fluoritab oral tablet chewable 0.55 (0.25 f) mg</i> | Tier 1 | |
| <i>fluoritab oral tablet chewable 1.1 (0.5 f) mg, 2.2 (1 f) mg</i> | CE | |
| FLURA-DROPS ORAL SOLUTION 0.275 (0.125 F) MG/DROP | Tier 1 | |
| FLURA-DROPS ORAL SOLUTION 0.55 (0.25 F) MG/DROP | CE | |
| GALZIN | Tier 3 | |
| <i>k-effervescent</i> | Tier 1 | |
| KLOR-CON 10 | Tier 1 | |
| KLOR-CON M10 | Tier 1 | |
| KLOR-CON M15 | Tier 3 | |
| KLOR-CON M20 | Tier 1 | |
| KLOR-CON ORAL TABLET EXTENDED RELEASE | Tier 1 | |
| KLOR-CON/EF | Tier 1 | |
| K-PHOS | Tier 3 | |
| K-PRIME | Tier 1 | |
| <i>k-vescent oral tablet effervescent</i> | Tier 1 | |
| LUDENT | CE | |
| MICRO-K | Tier 3 | |
| NAFRINSE | Tier 1 | |
| NAFRINSE DROPS | Tier 1 | |
| PHOSPHA 250 NEUTRAL | Tier 1 | |
| <i>pot bicarb-pot chloride</i> | Tier 1 | |
| <i>potassium bicarbonate oral</i> | Tier 1 | |
| <i>potassium chloride crys er</i> | Tier 1 | |
| <i>potassium chloride er oral capsule extended release</i> | Tier 1 | |
| <i>potassium chloride er oral tablet extended release 10 meq, 8 meq</i> | Tier 1 | |
| <i>potassium chloride oral packet</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>potassium chloride oral solution 20 meq/15ml (10%)</i> | Tier 1 | |
| <i>sodium fluoride oral solution</i> | CE | |
| <i>sodium fluoride oral tablet 2.2 (1 f) mg</i> | CE | |
| <i>sodium fluoride oral tablet chewable</i> | CE | |
| SSKI | Tier 3 | |
| *MOUTH/THROAT/DENTAL AGENTS* | | |
| <i>cevimeline hcl</i> | Tier 1 | |
| <i>chlorhexidine gluconate mouth/throat</i> | Tier 1 | |
| <i>clotrimazole mouth/throat</i> | Tier 1 | |
| DEBACTEROL | Tier 3 | |
| DENTA 5000 PLUS | Tier 1 | |
| <i>dentall 1100 plus</i> | Tier 1 | |
| EVOXAC | Tier 3 | |
| <i>lidocaine viscous</i> | Tier 1 | |
| NAFRINSE DAILY ACIDULATED | Tier 3 | |
| NAFRINSE DAILY/NEUTRAL | Tier 3 | |
| NAFRINSE WEEKLY | Tier 3 | |
| <i>nystatin mouth/throat</i> | Tier 1 | |
| ORALONE | Tier 1 | |
| ORAMAGICRX | Tier 3 | |
| ORAVIG | Tier 3 | QL |
| PERIDEX | Tier 3 | |
| PERIOGARD | Tier 1 | |
| <i>pilocarpine hcl oral</i> | Tier 1 | |
| SALAGEN | Tier 3 | |
| SALICEPT MOUTH/THROAT SUSPENSION RECONSTITUTED | Tier 3 | |
| <i>sf 5000 plus</i> | Tier 1 | |
| <i>triamcinolone acetonide mouth/throat</i> | Tier 1 | |
| *MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS*** | | |
| VIMIZIM | Tier 4 | PA; SP |
| *MULTIPLE VITAMINS W/ MINERALS & FLUORIDE-IRON-FOLIC ACID*** | | |
| QUFLORA FE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| *MULTIVITAMINS* | | |
| <i>active ob</i> | Tier 3 | |
| <i>advanced amlpm</i> | Tier 3 | |
| ATABEX EC | Tier 3 | |
| BAL-CARE DHA | Tier 3 | |
| CITRANATAL 90 DHA ORAL 90-1 & 300 MG | Tier 3 | |
| CITRANATAL B-CALM | Tier 3 | |
| CITRANATAL BLOOM | Tier 3 | |
| CITRANATAL DHA | Tier 3 | |
| CITRANATAL HARMONY ORAL CAPSULE 27-1-260 MG | Tier 3 | |
| CITRANATAL RX | Tier 3 | |
| <i>c-nate dha</i> | Tier 3 | |
| <i>completenate</i> | Tier 3 | |
| CO-NATAL FA | Tier 3 | |
| CONCEPT DHA | Tier 3 | |
| CONCEPT OB | Tier 3 | |
| CORVITA | Tier 1 | |
| DIALYVITE | Tier 1 | |
| DIALYVITE 3000 | Tier 3 | |
| DIALYVITE 5000 | Tier 3 | |
| DIALYVITE SUPREME D | Tier 3 | |
| DIALYVITE/ZINC | Tier 3 | |
| DUET DHA 400 | Tier 3 | |
| DUET DHA BALANCED ORAL 25-1 & 267 MG | Tier 3 | |
| ELITE-OB | Tier 3 | |
| ESCAVITE | Tier 3 | |
| <i>folbee plus</i> | Tier 1 | |
| FOLBEE PLUS CZ | Tier 1 | |
| <i>folcal dha oral capsule 27-1.25-300 mg</i> | Tier 3 | |
| FOLCAPS OMEGA 3 ORAL CAPSULE 27-1 MG | Tier 3 | |
| FOLGARD OS | Tier 3 | |
| FOLIVANE-OB | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|--------------------|---------------------|
| <i>hemenatal ob</i> | Tier 3 | |
| <i>hemenatal ob + dha</i> | Tier 3 | |
| INATAL ADVANCE | Tier 3 | |
| INATAL GT | Tier 3 | |
| INATAL ULTRA ORAL TABLET | Tier 3 | |
| <i>infanate balance</i> | Tier 3 | |
| <i>levomefolate dha</i> | Tier 3 | |
| MARNATAL-F | Tier 3 | |
| <i>multi vit/fl</i> | Tier 1 | |
| <i>multi vita-bets/fluoride oral tablet chewable 0.25 mg</i> | Tier 1 | |
| <i>multiple vitamins/fluoride</i> | Tier 1 | |
| <i>multi-vit/fluoride oral solution</i> | Tier 1 | |
| <i>multi-vit/fluorideliron</i> | Tier 3 | |
| <i>multi-vitamin/fluoride oral solution 0.25 mg/ml</i> | Tier 1 | |
| <i>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i> | Tier 1 | |
| <i>multi-vitamin/fluorideliron</i> | Tier 3 | |
| <i>multivitamins/fluoride</i> | Tier 1 | |
| <i>mult-vitamin/fluoride</i> | Tier 1 | |
| MVC-FLUORIDE | Tier 1 | |
| MYNATAL ADVANCE | Tier 1 | |
| MYNATAL ORAL CAPSULE | Tier 3 | |
| MYNATAL ORAL TABLET | Tier 1 | |
| <i>mynatal plus</i> | Tier 1 | |
| <i>mynatal-z</i> | Tier 1 | |
| <i>mynephrocaps</i> | Tier 1 | |
| NATACHEW ORAL TABLET CHEWABLE 28-1 MG | Tier 3 | |
| NATALVIT | Tier 3 | |
| NATELLE ONE ORAL CAPSULE 28-1-250 MG | Tier 3 | |
| NEEVO DHA ORAL CAPSULE 27-1.13 MG | Tier 3 | |
| NEPHPLEX RX | Tier 3 | |
| NEPHROCAPS | Tier 3 | |
| NEPHRONEX ORAL TABLET | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| NESTABS | Tier 3 | |
| NESTABS ABC | Tier 3 | |
| NESTABS DHA | Tier 3 | |
| NESTABS ONE | Tier 3 | |
| NEXA PLUS | Tier 3 | |
| NICOMIDE | Tier 3 | |
| NUTRIVIT | Tier 3 | |
| OB COMPLETE GOLD | Tier 3 | |
| OB COMPLETE ONE | Tier 3 | |
| OB COMPLETE ORAL TABLET | Tier 3 | |
| OB COMPLETE PETITE | Tier 3 | |
| OB COMPLETE PREMIER | Tier 3 | |
| OB COMPLETE/DHA | Tier 3 | |
| O-CAL PRENATAL | Tier 3 | |
| OCUVEL ORAL CAPSULE 0.5 MG | Tier 3 | |
| <i>pnv ob+dha</i> | Tier 3 | |
| <i>pnv-dha</i> | Tier 3 | |
| <i>pnv-dha+docusate</i> | Tier 3 | |
| <i>pnv-omega</i> | Tier 3 | |
| <i>pnv-select</i> | Tier 3 | |
| <i>pnv-total</i> | Tier 3 | |
| POLY-VI-FLOR | Tier 3 | |
| POLY-VI-FLOR/IRON | Tier 3 | |
| <i>polyvitamin/fluoride oral solution 0.25 mg/ml</i> | Tier 1 | |
| <i>poly-vitamin/fluoride oral solution 0.5 mg/ml</i> | Tier 1 | |
| <i>polyvitamin/fluoride oral tablet chewable</i> | Tier 1 | |
| PR NATAL 400 | Tier 3 | |
| PREFERAOB ONE | Tier 3 | |
| <i>prenal pearl</i> | Tier 3 | |
| <i>prenaissance</i> | Tier 3 | |
| <i>prenaissance balance</i> | Tier 3 | |
| <i>prenaissance harmony dha</i> | Tier 3 | |
| <i>prenaissance next</i> | Tier 3 | |
| <i>prenaissance next-b</i> | Tier 3 | |
| <i>prenaissance plus</i> | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| PRENATA | Tier 3 | |
| PRENATABS RX | Tier 3 | |
| <i>prenatal 19</i> | Tier 3 | |
| <i>prenatal plus iron</i> | Tier 3 | |
| PRENATAL-U | Tier 3 | |
| PRENATE | Tier 3 | |
| PRENATE AM | Tier 3 | |
| PRENATE DHA ORAL CAPSULE 28-0.6-0.4-300 MG | Tier 3 | |
| PRENATE ELITE ORAL TABLET 26-0.6-0.4 MG | Tier 3 | |
| PRENATE ENHANCE | Tier 3 | |
| PRENATE MINI | Tier 3 | |
| PRENATE RESTORE | Tier 3 | |
| PRIMACARE ORAL CAPSULE | Tier 3 | |
| PROVIDA OB | Tier 3 | |
| <i>purefe ob plus</i> | Tier 3 | |
| QUFLORA FE PEDIATRIC | Tier 3 | |
| QUFLORA PEDIATRIC ORAL SOLUTION | Tier 3 | |
| QUFLORA PEDIATRIC ORAL TABLET CHEWABLE | Tier 1 | |
| <i>relnate dha</i> | Tier 3 | |
| RENAL ORAL CAPSULE | Tier 1 | |
| RENATABS | Tier 3 | |
| RENATABS WITH IRON | Tier 3 | |
| <i>rena-vite rx</i> | Tier 1 | |
| <i>reno caps</i> | Tier 1 | |
| R-NATAL OB | Tier 3 | |
| SELECT-OB ORAL TABLET CHEWABLE 29-1 MG | Tier 3 | |
| <i>se-natal 19</i> | Tier 3 | |
| STROVITE FORTE ORAL SYRUP | Tier 2 | |
| TARON-BC | Tier 3 | |
| TARON-C DHA | Tier 3 | |
| TARON-PREX | Tier 3 | |
| TL G-FOL OS | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|------------------------------|--------------------|---------------------|
| <i>tl-care dha</i> | Tier 3 | |
| <i>tl-fluorivite</i> | Tier 3 | |
| <i>tl-select</i> | Tier 3 | |
| TRICARE PRENATAL COMPLEAT | Tier 3 | |
| TRICARE PRENATAL DHA ONE | Tier 3 | |
| TRINATE | Tier 3 | |
| <i>triphrocaps</i> | Tier 1 | |
| TRISTART ONE | Tier 3 | |
| <i>tri-tabs dha</i> | Tier 3 | |
| TRIVEEN-DUO DHA | Tier 3 | |
| TRI-VI-FLOR | Tier 3 | |
| <i>tri-vi-floro</i> | Tier 3 | |
| <i>tri-vit/fluoride</i> | Tier 1 | |
| <i>tri-vit/fluoride/iron</i> | Tier 3 | |
| <i>tri-vitamin/fluoride</i> | Tier 1 | |
| UDAMIN SP | Tier 3 | |
| VEMAVITE-PRX 2 | Tier 3 | |
| <i>vena-bal dha</i> | Tier 3 | |
| VINATE DHA RF | Tier 3 | |
| VINATE II | Tier 3 | |
| VINATE M | Tier 3 | |
| <i>virt-caps</i> | Tier 1 | |
| <i>virt-pn</i> | Tier 3 | |
| <i>virt-pn dha</i> | Tier 3 | |
| <i>virt-pn plus</i> | Tier 3 | |
| <i>virt-select</i> | Tier 3 | |
| <i>virt-vite plus</i> | Tier 1 | |
| VITAFOL FE+ | Tier 3 | |
| VITAFOL GUMMIES | Tier 3 | |
| VITAFOL-NANO | Tier 3 | |
| VITAFOL-OB | Tier 3 | |
| VITAFOL-OB+DHA | Tier 3 | |
| VITAFOL-ONE | Tier 3 | |
| VITAL-D RX | Tier 3 | |
| VITAMEDMD ONE RX/QUATREFOLIC | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>vitamins acd-fluoride</i> | Tier 1 | |
| VITAPEARL | Tier 3 | |
| VITA-PREN | Tier 3 | |
| VIVA DHA | Tier 3 | |
| <i>vol-care rx</i> | Tier 1 | |
| <i>vol-nate</i> | Tier 3 | |
| <i>vol-tab rx</i> | Tier 3 | |
| <i>vp-ch-pnv</i> | Tier 3 | |
| <i>vp-ggr-b6 prenatal</i> | Tier 3 | |
| <i>vp-heme ob</i> | Tier 3 | |
| <i>vp-heme ob + dha</i> | Tier 3 | |
| <i>vp-heme one</i> | Tier 3 | |
| <i>vp-pnv-dha</i> | Tier 3 | |
| ZATEAN-PN DHA | Tier 3 | |
| ZATEAN-PN PLUS | Tier 3 | |
| *MUSCULOSKELETAL THERAPY AGENTS* | | |
| AMRIX | Tier 3 | ST; # |
| <i>baclofen oral</i> | Tier 1 | |
| <i>carisoprodol oral tablet 350 mg</i> | Tier 1 | |
| <i>carisoprodol-aspirin</i> | Tier 1 | |
| <i>carisoprodol-aspirin-codeine</i> | Tier 1 | |
| <i>chlorzoxazone oral</i> | Tier 1 | |
| <i>cyclobenzaprine hcl oral</i> | Tier 1 | |
| DANTRIUM ORAL CAPSULE 25 MG, 50 MG | Tier 3 | |
| <i>dantrolene sodium oral</i> | Tier 1 | |
| EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE | Tier 4 | PA; SP |
| FEXMID | Tier 3 | |
| GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| GELSYN-3 | Tier 4 | PA; ST |
| HYALGAN | Tier 4 | PA; ST; SP |
| HYMOVIS | Tier 4 | PA; ST; SP |
| LORZONE | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>metaxalone</i> | Tier 1 | |
| <i>methocarbamol oral</i> | Tier 1 | |
| MONOVISC | Tier 4 | PA; SP |
| <i>orphenadrine citrate er</i> | Tier 1 | |
| ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE | Tier 4 | PA; SP |
| PARAFON FORTE DSC | Tier 3 | |
| ROBAXIN ORAL | Tier 3 | |
| ROBAXIN-750 | Tier 3 | |
| SKELAXIN | Tier 3 | |
| SOMA | Tier 3 | |
| SUPARTZ INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE | Tier 4 | PA; ST; SP |
| <i>tizanidine hcl oral</i> | Tier 1 | |
| ZANAFLEX | Tier 3 | |
| *NASAL AGENTS - SYSTEMIC AND TOPICAL* | | |
| ADRENALIN NASAL | Tier 3 | |
| ASTEPRO NASAL SOLUTION 0.15 % | Tier 3 | |
| <i>azelastine hcl nasal solution 0.1 %, 0.15 %</i> | Tier 1 | |
| BACTROBAN NASAL | Tier 3 | |
| BECONASE AQ | Tier 3 | ST |
| DYMISTA | Tier 3 | |
| FLONASE | Tier 3 | |
| <i>flunisolide nasal solution 25 mcg/lact (0.025%)</i> | Tier 1 | |
| <i>fluticasone propionate nasal</i> | Tier 1 | |
| <i>ipratropium bromide nasal</i> | Tier 1 | |
| <i>mometasone furoate nasal</i> | Tier 1 | |
| NASONEX | Tier 3 | ST; # |
| <i>olopatadine hcl nasal</i> | Tier 1 | |
| OMNARIS | Tier 3 | ST; # |
| PATANASE | Tier 3 | |
| QNASL | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| QNASL CHILDRENS | Tier 3 | |
| XHANCE | Tier 3 | PA; ST; QL |
| ZETONNA | Tier 3 | ST |
| *NEPRILYSIN INHIB (ARNI)- ANGIOTENSIN II RECEPT ANTAG COMB*** | | |
| ENTRESTO | Tier 2 | PA; QL |
| *NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS*** | | |
| NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG | Tier 4 | PA; ST; SP; QL |
| *NEUROMUSCULAR AGENTS* | | |
| BOTOX | Tier 4 | PA; ST; SP |
| DYSPORT | Tier 4 | PA; SP |
| RILUTEK | Tier 3 | PA |
| <i>riluzole</i> | Tier 1 | PA |
| XEOMIN | Tier 4 | PA; SP |
| *OPHTHALMIC AGENTS* | | |
| ACULAR | Tier 3 | |
| ACULAR LS | Tier 3 | |
| ACUVAIL | Tier 3 | |
| ALCAINE | Tier 3 | |
| ALOCRIL | Tier 3 | |
| ALOMIDE | Tier 3 | |
| ALPHAGAN P | Tier 2 | |
| ALREX | Tier 2 | |
| ALTACAINE | Tier 1 | |
| ALTAFLUOR | Tier 1 | |
| ALTAFRIN OPHTHALMIC SOLUTION 10 %, 2.5 % | Tier 1 | |
| <i>apraclonidine hcl</i> | Tier 1 | |
| <i>atropine sulfate ophthalmic solution</i> | Tier 1 | |
| AZASITE | Tier 2 | |
| <i>azelastine hcl ophthalmic</i> | Tier 1 | |
| AZOPT | Tier 2 | |
| <i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>bacitra-neomycin-polymyxin-hc</i> | Tier 1 | |
| BEPREVE | Tier 3 | |
| BESIVANCE | Tier 3 | |
| BETADINE OPHTHALMIC PREP | Tier 3 | |
| BETAGAN | Tier 3 | |
| <i>betaxolol hcl ophthalmic</i> | Tier 1 | |
| BETIMOL | Tier 2 | |
| BETOPTIC-S | Tier 3 | |
| <i>bimatoprost ophthalmic</i> | Tier 1 | |
| BIO GLO | Tier 1 | |
| BLEPHAMIDE | Tier 3 | |
| BLEPHAMIDE S.O.P. | Tier 3 | |
| <i>brimonidine tartrate ophthalmic</i> | Tier 1 | |
| BROMSITE | Tier 3 | |
| <i>carteolol hcl</i> | Tier 1 | |
| CILOXAN | Tier 3 | |
| <i>ciprofloxacin hcl ophthalmic</i> | Tier 1 | |
| COMBIGAN | Tier 2 | |
| COSOPT | Tier 3 | |
| COSOPT PF | Tier 3 | # |
| <i>cromolyn sodium ophthalmic</i> | Tier 1 | |
| CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 % | Tier 3 | |
| CYCLOMYDRIL | Tier 3 | |
| <i>cyclopentolate hcl ophthalmic</i> | Tier 1 | |
| CYSTARAN | Tier 4 | PA; SP; QL |
| <i>dexamethasone sodium phosphate ophthalmic</i> | Tier 1 | |
| <i>diclofenac sodium ophthalmic</i> | Tier 1 | |
| <i>dorzolamide hcl ophthalmic</i> | Tier 1 | |
| <i>dorzolamide hcl-timolol mal</i> | Tier 1 | |
| DUREZOL | Tier 2 | # |
| ELESTAT | Tier 3 | |
| EMADINE | Tier 3 | |
| <i>epinastine hcl</i> | Tier 1 | |
| <i>erythromycin ophthalmic</i> | Tier 1 | |
| FLAREX | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>fluorescein-benoxinate</i> | Tier 1 | |
| FLUOR-I-STRIPS A.T. | Tier 1 | |
| <i>fluorometholone ophthalmic</i> | Tier 1 | |
| FLURA-SAFE | Tier 3 | |
| <i>flurbiprofen sodium</i> | Tier 1 | |
| FLUROX | Tier 1 | |
| FML | Tier 3 | |
| FML FORTE | Tier 3 | |
| FML LIQUIFILM | Tier 3 | |
| FUL-GLO OPHTHALMIC STRIP 0.6 MG | Tier 3 | |
| FUL-GLO OPHTHALMIC STRIP 1 MG | Tier 1 | |
| <i>gatifloxacin ophthalmic</i> | Tier 1 | |
| GELFILM OPHTHALMIC | Tier 3 | |
| GENTAK OPHTHALMIC OINTMENT | Tier 1 | |
| <i>gentamicin sulfate ophthalmic solution</i> | Tier 1 | |
| HOMATROPAIRE | Tier 1 | |
| <i>homatropine hbr ophthalmic</i> | Tier 1 | |
| ILEVRO | Tier 3 | |
| IOPIDINE | Tier 3 | |
| ISTALOL | Tier 3 | |
| JETREA INTRAVITREAL SOLUTION 0.375 MG/0.3ML | Tier 4 | PA; SP |
| <i>ketorolac tromethamine ophthalmic</i> | Tier 1 | |
| LACRISERT | Tier 3 | |
| LASTACAFT | Tier 3 | |
| <i>latanoprost ophthalmic</i> | Tier 1 | |
| <i>levobunolol hcl ophthalmic solution 0.5 %</i> | Tier 1 | |
| <i>levofloxacin ophthalmic</i> | Tier 1 | |
| LOTEMAX OPHTHALMIC GEL | Tier 2 | # |
| LOTEMAX OPHTHALMIC OINTMENT | Tier 2 | |
| LOTEMAX OPHTHALMIC SUSPENSION | Tier 2 | |
| LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE | Tier 4 | PA; SP |
| LUMIGAN OPHTHALMIC SOLUTION 0.01 % | Tier 2 | |
| MACUGEN | Tier 4 | PA; SP |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| MAXIDEX | Tier 3 | |
| MAXITROL | Tier 3 | |
| <i>metipranolol</i> | Tier 1 | |
| MOXEZA | Tier 3 | |
| MYDRIACYL | Tier 3 | |
| NATACYN | Tier 3 | |
| <i>neomycin-bacitracin zn-polymyx</i> | Tier 1 | |
| <i>neomycin-polymyxin-dexameth</i> | Tier 1 | |
| <i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i> | Tier 1 | |
| NEO-POLYCIN | Tier 1 | |
| NEO-POLYCIN HC | Tier 1 | |
| NEOSPORIN | Tier 3 | |
| NEVANAC | Tier 3 | |
| OCUFLOX | Tier 3 | |
| <i>ofloxacin ophthalmic</i> | Tier 1 | |
| <i>olopatadine hcl ophthalmic</i> | Tier 1 | |
| OMNIPRED | Tier 3 | |
| PAREMYD | Tier 3 | |
| PATADAY | Tier 3 | # |
| PATANOL | Tier 3 | # |
| PAZEO | Tier 3 | |
| <i>phenylephrine hcl ophthalmic solution 10 %, 2.5 %</i> | Tier 1 | |
| PHOSPHOLINE IODIDE | Tier 2 | |
| <i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i> | Tier 1 | |
| POLYCIN | Tier 1 | |
| <i>polymyxin b-trimethoprim</i> | Tier 1 | |
| POLYTRIM | Tier 3 | |
| PRED FORTE | Tier 3 | |
| PRED MILD | Tier 3 | |
| PRED-G | Tier 3 | |
| PRED-G S.O.P. | Tier 3 | |
| <i>prednisolone acetate ophthalmic</i> | Tier 1 | |
| PROLENSA | Tier 3 | # |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| <i>proparacaine hcl ophthalmic</i> | Tier 1 | |
| RESCULA | Tier 3 | ST |
| RESTASIS | Tier 2 | |
| SIMBRINZA | Tier 3 | |
| <i>sulfacetamide sodium ophthalmic solution</i> | Tier 1 | |
| <i>sulfacetamide-prednisolone ophthalmic solution</i> | Tier 1 | |
| TETCAINE | Tier 1 | |
| <i>tetracaine hcl ophthalmic</i> | Tier 1 | |
| TETRAVISC | Tier 1 | |
| TETRAVISC FORTE | Tier 1 | |
| <i>timolol maleate ophthalmic</i> | Tier 1 | |
| TIMOPTIC | Tier 3 | |
| TIMOPTIC OCUDOSE | Tier 3 | |
| TIMOPTIC-XE | Tier 3 | |
| TOBRADEX | Tier 3 | |
| TOBRADEX ST | Tier 3 | |
| <i>tobramycin ophthalmic</i> | Tier 1 | |
| <i>tobramycin-dexamethasone</i> | Tier 1 | |
| TOBREX | Tier 3 | |
| TRAVATAN Z | Tier 2 | # |
| <i>trifluridine ophthalmic</i> | Tier 1 | |
| <i>tropicamide ophthalmic</i> | Tier 1 | |
| TRUSOPT | Tier 3 | |
| VIGAMOX | Tier 3 | # |
| VIROPTIC | Tier 3 | |
| VISUDYNE | Tier 4 | PA; #; SP |
| XALATAN | Tier 3 | ST |
| ZIOPTAN | Tier 3 | |
| ZIRGAN | Tier 3 | # |
| ZYLET | Tier 3 | |
| ZYMAXID | Tier 3 | |
| *OREXIN RECEPTOR ANTAGONISTS*** | | |
| BELSOMRA | Tier 3 | ST; QL |
| *OTIC AGENTS* | | |
| ACETASOL HC | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>acetic acid otic</i> | Tier 1 | |
| <i>antibiotic ear</i> | Tier 1 | |
| CETRAXAL | Tier 3 | |
| CIPRO HC | Tier 3 | # |
| CIPRODEX | Tier 2 | |
| COLY-MYCIN S | Tier 3 | |
| DERMOTIC | Tier 3 | |
| FLOXIN OTIC | Tier 3 | |
| <i>fluocinolone acetonide otic</i> | Tier 1 | |
| <i>hydrocortisone-acetic acid</i> | Tier 1 | |
| <i>neomycin-polymyxin-hc otic</i> | Tier 1 | |
| <i>ofloxacin otic</i> | Tier 1 | |
| OTOVEL | Tier 3 | |
| *OXABOROLE-RELATED ANTIFUNGALS - TOPICAL*** | | |
| KERYDIN | Tier 3 | |
| *OXYTOCICS* | | |
| CERVIDIL | Tier 3 | |
| METHERGINE ORAL | Tier 1 | QL |
| PREPIDIL | Tier 3 | |
| PROSTIN E2 | Tier 3 | |
| *PASSIVE IMMUNIZING AGENTS - COMBINATIONS*** | | |
| HYQVIA | Tier 4 | PA; ST; SP |
| *PASSIVE IMMUNIZING AGENTS* | | |
| BIVIGAM | Tier 4 | PA; ST; SP |
| CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM, 6 GM | Tier 4 | PA; ST; SP |
| CUVITRU | Tier 4 | PA; ST |
| CYTOGAM | Tier 4 | SP |
| FLEBOGAMMA DIF | Tier 4 | PA; SP |
| GAMASTAN S/D INTRAMUSCULAR INJECTABLE | Tier 4 | SP |
| GAMMAGARD | Tier 4 | PA; ST; SP |
| GAMMAGARD S/D LESS IGA | Tier 4 | PA; ST; SP |
| GAMMAKED | Tier 4 | PA; ST; SP |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML | Tier 4 | PA; SP |
| GAMUNEX-C | Tier 4 | PA; SP |
| HEPAGAM B | Tier 4 | |
| HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML | Tier 4 | PA; ST; SP |
| HYPERHEP B S/D | Tier 4 | SP |
| HYPERRAB S/D INTRAMUSCULAR INJECTABLE 150 UNIT/ML | Tier 4 | SP |
| HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE | Tier 4 | SP |
| HYPERTET S/D | Tier 4 | SP |
| IMOGAM RABIES-HT | Tier 4 | SP |
| MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE | Tier 4 | SP |
| NABI-HB | Tier 4 | SP |
| OCTAGAM | Tier 4 | PA; SP |
| PRIVIGEN | Tier 4 | PA; ST; SP |
| RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE | Tier 4 | SP |
| RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE | Tier 4 | SP |
| SYNAGIS | Tier 4 | PA; SP |
| WINRHO SDF | Tier 4 | SP |
| *PCSK9 INHIBITORS*** | | |
| PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR | Tier 4 | PA; ST; QL |
| REPATHA | Tier 4 | PA; ST; QL |
| REPATHA PUSHTRONEX SYSTEM | Tier 4 | PA; ST; QL |
| REPATHA SURECLICK | Tier 4 | PA; ST; QL |
| *PEDIATRIC MULTIPLE VITAMINS W/FLUORIDE-IRON-ZINC*** | | |
| TEXAVITE LQ | CE | |
| *PENICILLINS* | | |
| <i>amoxicillin oral capsule</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|----------------|
| <i>amoxicillin oral suspension reconstituted</i> | Tier 1 | |
| <i>amoxicillin oral tablet</i> | Tier 1 | |
| <i>amoxicillin-pot clavulanate er</i> | Tier 1 | |
| <i>amoxicillin-pot clavulanate oral</i> | Tier 1 | |
| <i>ampicillin oral capsule 500 mg</i> | Tier 1 | |
| AUGMENTIN ES-600 | Tier 3 | |
| AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML | Tier 2 | |
| AUGMENTIN ORAL SUSPENSION RECONSTITUTED 250-62.5 MG/5ML | Tier 3 | |
| AUGMENTIN ORAL TABLET 500-125 MG, 875-125 MG | Tier 3 | |
| AUGMENTIN XR | Tier 3 | |
| <i>dicloxacillin sodium</i> | Tier 1 | |
| MOXATAG | Tier 3 | |
| <i>penicillin v potassium</i> | Tier 1 | |
| *PHARMACEUTICAL ADJUVANTS* | | |
| PCCA ACACIA SYRUP BASE | Tier 3 | |
| <i>polyethylene glycol 3350 powder</i> | Tier 1 | |
| *PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS*** | | |
| ZYDELIG | Tier 4 | PA; SP; QL |
| *PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL*** | | |
| EUCRISA | Tier 3 | PA; ST |
| *PHOSPHODIESTERASE 4 (PDE4) INHIBITORS*** | | |
| OTEZLA ORAL TABLET | Tier 4 | PA; ST; SP; QL |
| OTEZLA ORAL TABLET THERAPY PACK | Tier 4 | PA; ST; SP; QL |
| *POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS** | | |
| LYNPARZA ORAL CAPSULE | Tier 4 | PA; SP; QL |
| LYNPARZA ORAL TABLET | Tier 4 | PA; SP; QL |
| RUBRACA ORAL TABLET 200 MG, 300 MG | Tier 4 | PA; QL |
| RUBRACA ORAL TABLET 250 MG | Tier 4 | PA; SP; QL |
| ZEJULA | Tier 4 | PA; SP; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| *POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS*** | | |
| LYNPARZA ORAL CAPSULE | Tier 4 | PA; SP; QL |
| LYNPARZA ORAL TABLET | Tier 4 | PA; SP; QL |
| RUBRACA ORAL TABLET 200 MG, 300 MG | Tier 4 | PA; QL |
| RUBRACA ORAL TABLET 250 MG | Tier 4 | PA; SP; QL |
| ZEJULA | Tier 4 | PA; SP; QL |
| *POTASSIUM REMOVING AGENTS*** | | |
| KIONEX | Tier 1 | |
| <i>sodium polystyrene sulfonate oral</i> | Tier 1 | |
| <i>sodium polystyrene sulfonate rectal</i> | Tier 1 | |
| SPS | Tier 3 | |
| VELTASSA | Tier 4 | PA; QL |
| *PRENATAL MV & MINERALS W/FA WITHOUT IRON*** | | |
| PRENATE | Tier 3 | |
| *PROGESTINS* | | |
| AYGESTIN | Tier 3 | |
| MAKENA | Tier 4 | PA; SP; QL |
| <i>medroxyprogesterone acetate oral</i> | Tier 1 | |
| MEGACE ES | Tier 3 | |
| <i>megestrol acetate oral suspension 625 mg/5ml</i> | Tier 1 | |
| <i>norethindrone acetate oral</i> | Tier 1 | |
| <i>progesterone intramuscular</i> | Tier 1 | |
| <i>progesterone micronized oral</i> | Tier 1 | |
| PROMETRIUM | Tier 3 | |
| PROVERA | Tier 3 | |
| *PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS*** | | |
| ZONTIVITY | Tier 3 | PA; QL |
| *PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.* | | |
| <i>acamprosate calcium</i> | Tier 1 | |
| AMPYRA | Tier 4 | PA; SP; QL |
| ANTABUSE | Tier 3 | |
| ARICEPT | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| AUBAGIO | Tier 4 | PA; ST; SP; QL |
| AUSTEDO | Tier 4 | PA; ST; SP; QL |
| AVONEX | Tier 4 | PA; ST; SP |
| AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT | Tier 4 | PA; ST; SP |
| AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT | Tier 4 | PA; ST; SP |
| BETASERON SUBCUTANEOUS KIT | Tier 4 | PA; ST; SP |
| BRISDELLE | Tier 3 | PA; QL |
| <i>bupropion hcl er (smoking det)</i> | CE | QL |
| CHANTIX | CE | QL |
| CHANTIX CONTINUING MONTH PAK | CE | QL |
| CHANTIX STARTING MONTH PAK | CE | QL |
| COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML | Tier 4 | PA; ST; SP |
| COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML | Tier 4 | PA; #; SP |
| <i>disulfiram oral</i> | Tier 1 | |
| <i>donepezil hcl</i> | Tier 1 | |
| EXELON TRANSDERMAL | Tier 3 | # |
| EXTAVIA SUBCUTANEOUS KIT | Tier 4 | PA; ST; SP |
| <i>fluoxetine hcl (pmd)</i> | Tier 1 | |
| <i>galantamine hydrobromide</i> | Tier 1 | |
| <i>galantamine hydrobromide er</i> | Tier 1 | |
| GILENYA | Tier 4 | PA; SP; QL |
| GLATOPA | Tier 4 | PA |
| GRALISE ORAL TABLET 300 MG, 600 MG | Tier 3 | ST; QL |
| GRALISE STARTER | Tier 3 | ST; QL |
| HORIZANT ORAL TABLET EXTENDED RELEASE | Tier 3 | PA; ST |
| INGREZZA ORAL CAPSULE 40 MG, 80 MG | Tier 4 | PA; SP; QL |
| LEMTRADA | Tier 4 | PA; ST; SP; QL |
| <i>memantine hcl oral tablet</i> | Tier 1 | |
| NAMENDA ORAL TABLET | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|----------------|
| NAMENDA TITRATION PAK | Tier 3 | |
| NAMENDA XR | Tier 2 | # |
| NAMENDA XR TITRATION PACK | Tier 2 | # |
| NICODERM CQ | CE | QL |
| <i>nicotine</i> | CE | QL |
| <i>nicotine polacrilex mouth/throat</i> | CE | QL |
| NICOTROL | CE | QL |
| NICOTROL NS | CE | QL |
| NUEDEXTA | Tier 2 | QL |
| <i>olanzapine-fluoxetine hcl</i> | Tier 1 | QL |
| ORAP | Tier 3 | # |
| <i>paroxetine mesylate</i> | Tier 1 | PA; QL |
| <i>pimozide</i> | Tier 1 | |
| PLEGRIDY | Tier 4 | PA; ST; SP |
| PLEGRIDY STARTER PACK | Tier 4 | PA; ST; SP |
| RAZADYNE ER | Tier 3 | |
| RAZADYNE ORAL TABLET | Tier 3 | |
| REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR | Tier 4 | PA; SP |
| REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR | Tier 4 | PA; SP |
| REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; SP |
| REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | Tier 4 | PA; SP |
| <i>rivastigmine</i> | Tier 1 | |
| <i>rivastigmine tartrate</i> | Tier 1 | |
| SARAFEM ORAL TABLET 10 MG, 20 MG | Tier 1 | |
| SAVELLA | Tier 2 | QL |
| SAVELLA TITRATION PACK | Tier 2 | QL |
| SYMBYAX | Tier 3 | QL |
| TECFIDERA ORAL | Tier 4 | PA; ST; SP; QL |
| TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG | Tier 4 | PA; ST; SP; QL |
| <i>tetrabenazine oral tablet 12.5 mg, 25 mg</i> | Tier 4 | PA; QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| TYSABRI | Tier 4 | PA; ST; SP |
| XENAZINE ORAL TABLET 12.5 MG, 25 MG | Tier 4 | PA; SP; QL |
| XYREM | Tier 4 | PA; SP; QL |
| ZINBRYTA | Tier 4 | PA; ST; QL |
| ZYBAN | Tier 1 | QL |
| *PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS*** | | |
| OFEV | Tier 4 | PA; SP; QL |
| *PULMONARY FIBROSIS AGENTS*** | | |
| ESBRIET ORAL CAPSULE | Tier 4 | PA; SP; QL |
| ESBRIET ORAL TABLET 267 MG, 801 MG | Tier 4 | PA; SP; QL |
| *PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST*** | | |
| UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 400 MCG, 600 MCG, 800 MCG | Tier 4 | PA; SP; QL |
| UPTRAVI ORAL TABLET 200 MCG | Tier 4 | PA; SP |
| UPTRAVI ORAL TABLET THERAPY PACK | Tier 4 | PA; SP |
| *RESPIRATORY AGENTS - MISC.* | | |
| ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG | Tier 4 | PA; SP |
| GLASSIA | Tier 4 | PA; SP |
| KALYDECO | Tier 4 | PA; SP; QL |
| PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG | Tier 4 | PA; SP |
| PULMOZYME | Tier 4 | PA; SP |
| SCLEROSOL INTRAPLEURAL | Tier 3 | |
| STERILE TALC POWDER | Tier 3 | |
| ZEMAIRA | Tier 4 | PA; SP |
| *SEROTONIN MODULATORS*** | | |
| <i>nefazodone hcl oral tablet 250 mg</i> | Tier 3 | ST |
| <i>nefazodone hcl oral tablet 50 mg</i> | Tier 1 | ST |
| <i>trazodone hcl oral</i> | Tier 1 | |
| TRINTELLIX | Tier 3 | PA; ST; QL |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| VIIBRYD ORAL TABLET | Tier 3 | PA; ST; QL |
| VIIBRYD STARTER PACK | Tier 3 | PA; ST |
| *SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS*** | | |
| GLYXAMBI | Tier 2 | QL |
| *SINUS NODE INHIBITORS** | | |
| CORLANOR | Tier 3 | PA; ST; QL |
| *SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB*** | | |
| INVOKAMET | Tier 2 | QL |
| INVOKAMET XR | Tier 2 | QL |
| SYNJARDY | Tier 2 | QL |
| SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG | Tier 2 | QL |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 5-1000 MG, 5-500 MG | Tier 3 | QL |
| *TETRACYCLINES* | | |
| ACTICLATE | Tier 3 | AL |
| ADOXA ORAL CAPSULE | Tier 3 | |
| <i>avidoxy</i> | Tier 1 | |
| <i>demeclocycline hcl oral</i> | Tier 1 | |
| DORYX MPC | Tier 3 | |
| DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG | Tier 3 | |
| <i>doxycycline hyclate oral capsule</i> | Tier 1 | |
| <i>doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 75 mg</i> | Tier 1 | |
| <i>doxycycline hyclate oral tablet delayed release</i> | Tier 1 | |
| <i>doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg</i> | Tier 1 | |
| <i>doxycycline monohydrate oral capsule 75 mg</i> | Tier 1 | QL |
| <i>doxycycline monohydrate oral suspension reconstituted</i> | Tier 1 | |
| <i>doxycycline monohydrate oral tablet</i> | Tier 1 | |
| MINOCIN ORAL CAPSULE 100 MG, 50 MG | Tier 3 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|--------------|
| <i>minocycline hcl er</i> | Tier 1 | |
| <i>minocycline hcl oral</i> | Tier 1 | |
| MONDOXYNE NL ORAL CAPSULE 75 MG | Tier 1 | QL |
| MONODOX ORAL CAPSULE 100 MG | Tier 3 | |
| MONODOX ORAL CAPSULE 75 MG | Tier 3 | QL |
| MORGIDOX COMBINATION KIT 2 X 100 MG | Tier 3 | |
| <i>morgidox oral capsule 100 mg</i> | Tier 1 | |
| NUTRIDOX | Tier 3 | |
| SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG | Tier 3 | AL |
| TARGADOX | Tier 3 | |
| <i>tetracycline hcl oral</i> | Tier 1 | |
| VIBRAMYCIN | Tier 3 | |
| XIMINO | Tier 3 | ST |
| *THYROID AGENTS* | | |
| ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 300 MG | Tier 3 | |
| CYTOMEL | Tier 3 | |
| <i>levothyroxine sodium oral</i> | Tier 1 | |
| LEVOXYL | Tier 1 | |
| <i>liothyronine sodium oral</i> | Tier 1 | |
| <i>methimazole oral</i> | Tier 1 | |
| NATURE-THROID | Tier 3 | |
| <i>np thyroid oral tablet 30 mg, 60 mg, 90 mg</i> | Tier 1 | |
| <i>propylthiouracil oral</i> | Tier 1 | |
| SYNTHROID | Tier 3 | |
| TAPAZOLE | Tier 3 | |
| THYROLAR-1 | Tier 3 | |
| THYROLAR-1/2 | Tier 3 | |
| THYROLAR-1/4 | Tier 3 | |
| THYROLAR-2 | Tier 3 | |
| THYROLAR-3 | Tier 3 | |
| TIROSINT | Tier 3 | |
| UNITHROID | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|---------------|
| UNITHROID DIRECT | Tier 1 | |
| WESTHROID ORAL TABLET 130 MG, 195 MG, 32.5 MG, 65 MG, 97.5 MG | Tier 3 | |
| WP THYROID ORAL TABLET 113.75 MG, 130 MG, 16.25 MG, 32.5 MG, 48.75 MG, 65 MG, 97.5 MG | Tier 3 | |
| *TRYPTOPHAN HYDROXYLASE INHIBITORS*** | | |
| XERMELO | Tier 4 | PA; SP; QL |
| *ULCER DRUGS* | | |
| ACIPHEX | Tier 3 | PA; ST; QL |
| ACIPHEX SPRINKLE | Tier 3 | PA; ST; #; QL |
| <i>amoxicill-clarithro-lansopraz</i> | Tier 1 | |
| BENTYL ORAL CAPSULE | Tier 3 | |
| BENTYL ORAL TABLET | Tier 3 | |
| CARAFATE | Tier 3 | |
| <i>cimetidine hcl oral</i> | Tier 1 | |
| <i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i> | Tier 1 | |
| CUVPOSA | Tier 3 | |
| CYTOTEC | Tier 3 | |
| DEXILANT | Tier 2 | QL |
| <i>dicyclomine hcl oral capsule</i> | Tier 1 | |
| <i>dicyclomine hcl oral tablet</i> | Tier 1 | |
| <i>esomeprazole magnesium oral capsule delayed release 40 mg</i> | Tier 1 | QL |
| <i>esomeprazole strontium oral capsule delayed release 49.3 mg</i> | Tier 3 | PA; ST; QL |
| <i>famotidine oral suspension reconstituted</i> | Tier 1 | |
| <i>famotidine oral tablet 40 mg</i> | Tier 1 | |
| <i>glycopyrrolate oral tablet 1 mg, 2 mg</i> | Tier 1 | |
| <i>lansoprazole oral capsule delayed release 30 mg</i> | Tier 1 | QL |
| <i>methscopolamine bromide oral</i> | Tier 1 | |
| <i>misoprostol oral</i> | Tier 1 | |
| NEXIUM ORAL CAPSULE DELAYED RELEASE 40 MG | Tier 3 | QL |
| NEXIUM ORAL PACKET | Tier 3 | #; QL |
| <i>nizatidine</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|-------------|---------------|
| OMECLAMOX-PAK | Tier 2 | |
| <i>omeprazole oral capsule delayed release 10 mg, 40 mg</i> | Tier 1 | |
| <i>omeprazole-sodium bicarbonate oral capsule 40-1100 mg</i> | Tier 1 | QL |
| <i>omeprazole-sodium bicarbonate oral packet</i> | Tier 1 | PA; QL |
| PAMINE | Tier 3 | |
| PAMINE FORTE | Tier 3 | |
| <i>pantoprazole sodium oral</i> | Tier 1 | |
| PEPCID ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| PEPCID ORAL TABLET 40 MG | Tier 3 | |
| PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG | Tier 3 | PA; ST; QL |
| PREVACID SOLUTAB | Tier 3 | PA; ST; #; QL |
| PREVPAC | Tier 3 | |
| PRILOSEC ORAL CAPSULE DELAYED RELEASE 20 MG | Tier 3 | |
| PRILOSEC ORAL PACKET | Tier 3 | PA; ST; QL |
| PROTONIX ORAL | Tier 3 | |
| PYLERA | Tier 2 | |
| <i>rabeprazole sodium</i> | Tier 1 | QL |
| <i>ranitidine hcl oral capsule 300 mg</i> | Tier 1 | |
| <i>ranitidine hcl oral syrup</i> | Tier 1 | |
| <i>ranitidine hcl oral tablet 300 mg</i> | Tier 1 | |
| ROBINUL ORAL | Tier 3 | |
| ROBINUL-FORTE | Tier 3 | |
| <i>sucralfate oral tablet</i> | Tier 1 | |
| ZEGERID ORAL CAPSULE 40-1100 MG | Tier 3 | PA; ST; QL |
| ZEGERID ORAL PACKET | Tier 3 | PA; ST; #; QL |
| *URINARY ANTI-INFECTIVES* | | |
| FURADANTIN | Tier 3 | |
| HIPREX | Tier 3 | |
| MACROBID | Tier 3 | |
| MACRODANTIN | Tier 3 | # |
| <i>methenamine hippurate</i> | Tier 1 | |
| <i>methenamine mandelate oral tablet 1 gm</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
| MONUROL | Tier 3 | |
| <i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i> | Tier 1 | |
| <i>nitrofurantoin monohyd macro</i> | Tier 1 | |
| <i>nitrofurantoin oral suspension</i> | Tier 1 | |
| *URINARY ANTISPASMODICS* | | |
| <i>bethanechol chloride oral tablet 25 mg</i> | Tier 1 | |
| <i>darifenacin hydrobromide er</i> | Tier 1 | |
| DETROL | Tier 3 | ST |
| DETROL LA | Tier 3 | ST |
| DITROPAN XL | Tier 3 | ST |
| ENABLEX | Tier 3 | ST; # |
| GELNIQUE TRANSDERMAL GEL 10 % | Tier 3 | ST |
| MYRBETRIQ | Tier 2 | |
| <i>oxybutynin chloride er</i> | Tier 1 | |
| <i>oxybutynin chloride oral tablet</i> | Tier 1 | |
| <i>tolterodine tartrate</i> | Tier 1 | |
| TOVIAZ | Tier 3 | ST |
| <i>trospium chloride</i> | Tier 1 | |
| <i>trospium chloride er</i> | Tier 1 | |
| URECHOLINE | Tier 3 | |
| VESICARE | Tier 2 | # |
| *VAGINAL PRODUCTS* | | |
| AVC VAGINAL | Tier 3 | |
| CLEOCIN VAGINAL | Tier 3 | |
| <i>clindamycin phosphate vaginal</i> | Tier 1 | |
| CLINDESSE | Tier 3 | |
| CRINONE | Tier 2 | |
| ENCARE VAGINAL SUPPOSITORY | Tier 3 | |
| ENDOMETRIN | Tier 2 | |
| ESTRACE VAGINAL | Tier 3 | |
| ESTRING | Tier 3 | |
| FEM PH | Tier 3 | |
| FEMRING | Tier 3 | # |
| GYNAZOLE-1 | Tier 3 | |
| INTRAROSA | Tier 3 | QL |

| Drug Name | Drug Status | Drug Details |
|---|-------------|--------------|
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| NUVESSA | Tier 3 | |
| OPTIONS CONCEPTROL | Tier 3 | |
| OPTIONS GYNOL II CONTRACEPTIVE | Tier 3 | |
| PREMARIN VAGINAL | Tier 2 | |
| RELAGARD | Tier 3 | |
| SHUR-SEAL CONTRACEPTIVE | Tier 3 | |
| TERAZOL 7 | Tier 3 | |
| <i>terconazole</i> | Tier 1 | |
| TODAY SPONGE | CE | |
| VAGIFEM VAGINAL TABLET 10 MCG | Tier 3 | |
| VANDAZOLE | Tier 1 | |
| VCF VAGINAL CONTRACEPTIVE VAGINAL FILM | CE | |
| VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM | Tier 3 | |
| YUVAFEM | Tier 1 | |
| *VASOPRESSORS* | | |
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| ADYPHREN AMP II | Tier 3 | QL |
| ADYPHREN II | Tier 3 | QL |
| AUVI-Q INJECTION SOLUTION AUTO-INJECTOR | Tier 3 | PA; ST; QL |
| <i>epinephrine injection solution auto-injector</i> | Tier 1 | QL |
| EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR | Tier 2 | QL |
| EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR | Tier 2 | QL |
| EPISNAP | Tier 3 | QL |
| <i>midodrine hcl</i> | Tier 1 | |
| *VITAMINS* | | |
| <i>delta d3</i> | CE | |
| DRISDOL ORAL CAPSULE | Tier 3 | |
| D-VI-SOL | CE | |
| <i>ergocal</i> | Tier 3 | |
| <i>ergocalciferol oral capsule</i> | Tier 1 | |

| Drug Name | Drug Status | Drug Details |
|--|--------------------|---------------------|
| <i>gnp niacin</i> | Tier 4 | |
| <i>gnp niacin tr</i> | Tier 4 | |
| <i>hm niacin</i> | Tier 4 | |
| MEPHYTON | Tier 2 | QL |
| <i>niacin er oral tablet extended release 750 mg</i> | Tier 1 | |
| <i>vitamin d (ergocalciferol)</i> | Tier 1 | |
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