

Independent Health's Medicare Advantage

Individual Part D Formulary



2018 Formulary

(List of Covered Drugs)

This document includes:

- Independent Health's Encompass 65[®] Basic (HMO)
- Independent Health's Encompass 65[®] Core (HMO)
- Independent Health's Medicare Family Choice[®] (HMO-SNP)
- Independent Health's Medicare Passport[®] Advantage (PPO)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN**

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This formulary was updated on December 1, 2018. For more recent information or other questions, please contact Independent Health's Medicare Advantage Plan Member Services at (716) 250-4401 or 1-800-665-1502 or, for TTY users (716) 631-3108 or 1-800-432-1110, October 1st – February 14th: Monday through Sunday from 8 a.m. to 8 p.m., February 15th – September 30th: Monday through Friday from 8 a.m. to 8 p.m., or visit www.independenthealth.com/Medicare.

Independent Health is a Medicare Advantage organization with a Medicare contract offering HMO, HMO-SNP, HMO-POS and PPO plans. Enrollment in Independent Health depends on contract renewal.

The formulary may change at any time. You will receive notice when necessary.

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Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us”, or “our,” it means Independent Health. When it refers to “plan” or “our plan,” it means Independent Health’s Medicare Advantage Plan.

This document includes the list of the drugs (formulary) for our plan which is current as of December 1, 2018. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2018, and from time to time during the year.

What is the Independent Health’s Medicare Advantage Plan Individual Part D Formulary?

A formulary is a list of covered drugs selected by Independent Health in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Independent Health will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at an Independent Health network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Generally, if you are taking a drug on our 2018 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2018 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost-sharing for those members taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of December 1, 2018. To get updated information about the drugs covered by Independent Health, please contact us. Our contact information appears on the front and back cover pages. In the event that a non-maintenance change to the formulary occurs prior to the

monthly publication update, such change will be communicated via an ERRATA sheet, which will be available on our website at www.independenthealth.com/MedicareFormularies and in printed form.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 3. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page number 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 117. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Independent Health covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Independent Health requires you [or your physician] to get prior authorization for certain drugs. This means that you will need to get approval from Independent Health before you fill your prescriptions. If you don't get approval, Independent Health may not cover the drug.
- **Quantity Limits:** For certain drugs, Independent Health limits the amount of the drug that we will cover. For example, Independent Health provides 30 tablets per prescription for SILENOR 3MG. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Independent Health requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 3. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted on line documents that explain our prior authorization, quantity limit, and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask Independent Health to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to Independent Health’s Medicare Advantage Plan Individual Part D formulary?” on page III for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you learn that Independent Health does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by Independent Health. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by Independent Health.
- You can ask Independent Health to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Independent Health’s Medicare Advantage Plan Individual Part D Formulary?

You can ask Independent Health to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Independent Health limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, Independent Health will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary or utilization restriction exception. **When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 91-day and may be up to a 98-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

For enrollees admitted or discharged from a long-term care facility or have had any change in level of care, early refill edits will not be used to limit appropriate and necessary access to your Part D benefit and you are allowed to access a refill upon admission or discharge without restrictions. Long Term Care (LTC) pharmacies are permitted to use Emergency Boxes (E Box) when necessary. However, the E Box should be replenished from the patient's month prescription claim.

If you are a new or current Medicare Part D enrollee transitioning from one treatment setting to another or experience transitions due to level of care changes, Independent Health will provide a supply of medication pursuant to CMS requirements in compliance with transition and continuity of care provisions as follows:

- At a retail pharmacy a one-time 30-day transition supply (unless the prescription is written for less than 30 days) will be authorized with refills to total 30 days of medication.
- If you are a resident of a long-term care facility, a 91 – 98 day supply (unless the prescription is written for less) will be authorized with refills if needed.

After authorizing the temporary fills referred to above, we will send you a letter via the U.S. mail within three (3) business days, detailing the temporary nature of the transition supply you have received, instructions for working with the plan and your doctor to identify appropriate therapeutic alternatives that are in the Independent Health Medicare Advantage Plan Part D formularies, an explanation of your right to request a formulary exception and a description of the procedures for requesting a formulary exception. We will also send a copy of the letter to your doctor.

For more information

For more detailed information about your Independent Health prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Independent Health, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

Independent Health’s Formulary

The formulary that begins on page 3 provides coverage information about the drugs covered by Independent Health. If you have trouble finding your drug in the list, turn to the Index that begins on page 117.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., SYNTHROID) and generic drugs are listed in lower-case italics (e.g., *omeprazole*).

The information in the Requirements/Limits column tells you if Independent Health has any special requirements for coverage of your drug.

Drugs listed with an “**AL**” in the Requirements/Limits column have age limitations.

Drugs listed with a “**BD**” in the Requirements/Limits column may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination. If it is determined that coverage for this drug falls under Medicare Part B, your cost will not be the tier co-payment in this drug list. Please refer to your Evidence of Coverage for the cost of Part B drugs or contact Independent Health’s Medicare Member Services Department. Our contact information appears on the front and back cover pages.

Drugs listed with an “**EDS**” in the Requirements/Limits column may be prescribed and dispensed at a participating network retail or mail order pharmacy for an extended 90-day supply.

Drugs listed with a “**HI**” in the Requirements/Limits column may be covered under our medical benefit. For more information, call Independent Health’s Medicare Member Services Department at 1-800-665-1502, or for TTY users, 1-800-432-1110, October 1st – February 14th: Monday through Sunday from 8 a.m. to 8 p.m., February 15th – September 30th: Monday through Friday from 8 a.m. to 8 p.m.

Drugs listed with an “**OBT**” in the Requirements/Limits column may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing how the drug will be obtained. If it is determined that coverage for this drug falls under Medicare Part B, your cost will not be the tier co-payment in this drug list. Please refer to your Evidence of Coverage for the cost of Part B drugs or contact Independent Health’s Medicare Member Services Department. Our contact information appears on the front and back cover pages.

Drugs listed with a “**PA**” in the Requirements/Limits column require prior authorization (see “Are there any restrictions on my coverage” on page II).

Drugs listed with a “**QL**” in the Requirements/Limits column have quantity limitations (see “Are there any restrictions on my coverage” on page II).

Drugs listed with a “**ST**” in the Requirements/Limits column are restricted to step therapy requirements (see “Are there any restrictions on my coverage” on page II).

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Drug Name	Tier	Requirements/Limits
Analgesics		
Analgesics		
<i>acetaminophen-codeine #3 oral tablet</i>	2	
<i>acetaminophen-codeine oral solution</i>	2	
<i>acetaminophen-codeine oral tablet</i>	2	
<i>ascomp-codeine oral capsule</i>	2	PA; AL (Max 64 Years)
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caff-cod oral capsule</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caffeine oral capsule</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	2	PA; AL (Max 64 Years)
<i>butalbital-asa-caff-codeine oral capsule</i>	2	PA; AL (Max 64 Years)
<i>butalbital-aspirin-caffeine oral capsule</i>	2	PA; AL (Max 64 Years)
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>	2	
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	2	
<i>lorcet hd oral tablet</i>	2	
<i>lorcet oral tablet</i>	2	
<i>lorcet plus oral tablet 7.5-325 mg</i>	2	
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	2	
<i>pentazocine-naloxone hcl oral tablet</i>	2	
<i>phrenilin forte oral capsule 50-300-40 mg</i>	2	PA; AL (Max 64 Years)
TENCON ORAL TABLET 50-325 MG	4	PA; AL (Max 64 Years)
<i>tramadol-acetaminophen oral tablet</i>	2	
VANATOL LQ ORAL SOLUTION	3	PA; AL (Max 64 Years)
ZEBUTAL ORAL CAPSULE 50-325-40 MG	4	PA; AL (Max 64 Years)
Nonsteroidal Anti-Inflammatory Drugs		
CAMBIA ORAL PACKET	4	EDS
<i>celecoxib oral capsule</i>	2	EDS
<i>diclofenac potassium oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	2	EDS
<i>diclofenac sodium oral tablet delayed release</i>	2	EDS
<i>diclofenac sodium transdermal gel 3 %</i>	4	PA
<i>diflunisal oral tablet</i>	2	EDS
<i>etodolac oral capsule</i>	2	EDS
<i>etodolac oral tablet</i>	2	EDS
<i>fenoprofen calcium oral capsule 400 mg</i>	2	EDS
<i>fenoprofen calcium oral tablet</i>	2	EDS
FLECTOR TRANSDERMAL PATCH	4	PA
<i>flurbiprofen oral tablet</i>	2	EDS
<i>ibu oral tablet 600 mg, 800 mg</i>	2	EDS
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	EDS
INDOCIN ORAL SUSPENSION	4	PA; AL (Max 64 Years); EDS
<i>indomethacin er oral capsule extended release</i>	2	PA; AL (Max 64 Years); EDS
<i>indomethacin oral capsule</i>	2	PA; AL (Max 64 Years); EDS
<i>ketoprofen er oral capsule extended release 24 hour</i>	3	EDS
<i>ketorolac tromethamine injection solution 15 mg/ml, 30 mg/ml</i>	2	
<i>ketorolac tromethamine oral tablet</i>	2	PA; AL (Max 64 Years)
<i>meloxicam oral tablet</i>	2	EDS
<i>nabumetone oral tablet</i>	2	EDS
<i>naproxen oral tablet</i>	2	EDS
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	EDS
<i>oxycodone-ibuprofen oral tablet</i>	2	
<i>piroxicam oral capsule</i>	2	EDS
<i>profeno oral tablet</i>	2	EDS
<i>sulindac oral tablet</i>	2	EDS
Opioid Analgesics, Long-Acting		
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL	5	PA; QL (128 EA per 30 days)
<i>buprenorphine hcl injection solution 0.3 mg/ml</i>	2	
<i>buprenorphine hcl sublingual tablet sublingual</i>	2	
<i>buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 5 mcg/hr</i>	2	QL (4 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>buprenorphine transdermal patch weekly 20 mcg/hr</i>	2	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 5 MCG/HR, 7.5 MCG/HR	3	QL (4 EA per 28 days)
BUTRANS TRANSDERMAL PATCH WEEKLY 20 MCG/HR	3	
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG	4	ST; QL (30 EA per 30 days)
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR 300 MG	4	ST
<i>duramorph injection solution</i>	2	BD
EMBEDA ORAL CAPSULE EXTENDED RELEASE 100-4 MG, 50-2 MG, 60-2.4 MG, 80-3.2 MG	5	
EMBEDA ORAL CAPSULE EXTENDED RELEASE 20-0.8 MG, 30-1.2 MG	4	
<i>fentanyl citrate buccal lozenge on a handle</i>	5	PA; QL (120 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr</i>	2	QL (30 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 50 mcg/hr</i>	2	QL (15 EA per 30 days)
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (120 EA per 30 days)
<i>hydromorphone hcl er oral tablet er 24 hour abuse-deterrent</i>	2	QL (30 EA per 30 days)
<i>hydromorphone hcl injection solution 2 mg/ml</i>	2	
<i>hydromorphone hcl pf injection solution 10 mg/ml, 50 mg/5ml</i>	2	
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	3	QL (60 EA per 30 days)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	5	
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG	4	EDS
LAZANDA NASAL SOLUTION 300 MCG/ACT	5	PA; QL (120 EA per 30 days)
<i>methadone hcl injection solution</i>	2	BD
<i>methadone hcl oral solution</i>	2	
<i>methadone hcl oral tablet 10 mg</i>	2	
<i>methadone hcl oral tablet 5 mg</i>	2	QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	2	
<i>morphine sulfate er beads oral capsule extended release 24 hour</i>	2	
<i>morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	2	
<i>morphine sulfate er oral tablet extended release</i>	2	
<i>morphine sulfate injection solution 5 mg/ml</i>	2	
<i>morphine sulfate oral solution</i>	2	
<i>morphine sulfate oral tablet</i>	2	
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	3	QL (60 EA per 30 days)
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent</i>	2	
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	3	
<i>oxymorphone hcl er oral tablet extended release 12 hour</i>	2	
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg</i>	2	ST; QL (30 EA per 30 days)
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour 300 mg, 300 mg (matrix delivery)</i>	2	ST
<i>tramadol hcl er oral capsule extended release 24 hour 100 mg, 200 mg</i>	2	ST; QL (30 EA per 30 days)
<i>tramadol hcl er oral capsule extended release 24 hour 300 mg</i>	2	ST
<i>tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg</i>	2	QL (30 EA per 30 days)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	4	QL (60 EA per 30 days); EDS
Opioid Analgesics, Short-Acting		
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL	5	PA; QL (128 EA per 30 days)
<i>butorphanol tartrate injection solution</i>	2	
<i>butorphanol tartrate nasal solution</i>	2	
<i>codeine sulfate oral tablet</i>	2	
<i>fentanyl citrate buccal lozenge on a handle</i>	5	PA; QL (120 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr</i>	2	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 50 mcg/hr</i>	2	QL (15 EA per 30 days)
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (120 EA per 30 days)
<i>hydrocodone-acetaminophen oral tablet 2.5-325 mg</i>	2	
<i>hydromorphone hcl oral liquid</i>	2	
<i>hydromorphone hcl oral tablet</i>	2	QL (180 EA per 30 days)
LAZANDA NASAL SOLUTION	5	PA; QL (120 EA per 30 days)
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	2	
<i>morphine sulfate (pf) intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml</i>	2	
<i>morphine sulfate oral solution</i>	2	
<i>morphine sulfate oral tablet</i>	2	
<i>nalbuphine hcl injection solution 10 mg/ml</i>	2	QL (480 ML per 30 days)
<i>nalbuphine hcl injection solution 20 mg/ml</i>	2	QL (240 ML per 30 days)
NUCYNTA ORAL TABLET	3	QL (180 EA per 30 days)
<i>oxycodone hcl oral capsule</i>	2	
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	4	
<i>oxycodone hcl oral solution</i>	2	
<i>oxycodone hcl oral tablet</i>	2	
<i>oxymorphone hcl oral tablet 10 mg</i>	2	
<i>oxymorphone hcl oral tablet 5 mg</i>	2	QL (180 EA per 30 days)
SUBSYS SUBLINGUAL LIQUID 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (120 EA per 30 days)
<i>tramadol hcl oral tablet</i>	2	

Anesthetics

Local Anesthetics

<i>lidocaine external ointment</i>	2	
<i>lidocaine external patch 5 %</i>	2	PA
<i>lidocaine hcl (pf) injection solution 0.5 %, 1 %</i>	2	
<i>lidocaine hcl external gel 2 %</i>	2	
<i>lidocaine hcl external solution</i>	2	
<i>lidocaine hcl injection solution 2 %</i>	2	
<i>lidocaine viscous mouth/throat solution</i>	2	
<i>lidocaine-prilocaine external cream</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Anti-Addiction/ Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-Craving		
<i>acamprosate calcium oral tablet delayed release</i>	2	EDS
<i>disulfiram oral tablet</i>	2	EDS
<i>naltrexone hcl oral tablet</i>	2	
Opioid Dependence Treatments		
<i>buprenorphine hcl injection solution 0.3 mg/ml</i>	2	
<i>buprenorphine hcl sublingual tablet sublingual</i>	2	
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual</i>	2	
<i>buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 5 mcg/hr</i>	2	QL (4 EA per 28 days)
<i>buprenorphine transdermal patch weekly 20 mcg/hr</i>	2	
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 5 MCG/HR, 7.5 MCG/HR	3	QL (4 EA per 28 days)
BUTRANS TRANSDERMAL PATCH WEEKLY 20 MCG/HR	3	
LUCEMYRA ORAL TABLET	5	PA
<i>naltrexone hcl oral tablet</i>	2	
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	3	
Opioid Reversal Agents		
<i>naloxone hcl injection solution 0.4 mg/ml</i>	2	
<i>naloxone hcl injection solution cartridge</i>	2	
<i>naloxone hcl injection solution prefilled syringe</i>	2	
NARCAN NASAL LIQUID	3	QL (2 EA per 30 days)
Smoking Cessation Agents		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	2	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	3	
CHANTIX ORAL TABLET	3	
CHANTIX STARTING MONTH PAK ORAL TABLET	3	
NICOTROL INHALATION INHALER	3	
NICOTROL NS NASAL SOLUTION	3	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate injection solution 500 mg/2ml</i>	2	
BETHKIS INHALATION NEBULIZATION SOLUTION	5	BD
<i>gentak ophthalmic ointment</i>	2	
<i>gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%</i>	2	HI
<i>gentamicin sulfate external cream</i>	2	
<i>gentamicin sulfate external ointment</i>	2	
<i>gentamicin sulfate injection solution 40 mg/ml</i>	2	
<i>gentamicin sulfate ophthalmic solution</i>	2	
<i>neomycin sulfate oral tablet</i>	2	
<i>neomycin-polymyxin b gu irrigation solution</i>	2	
<i>paromomycin sulfate oral capsule</i>	2	
STREPTOMYCIN SULFATE INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
TOBI PODHALER INHALATION CAPSULE	5	PA New Starts
TOBRADEX OPHTHALMIC OINTMENT	3	
<i>tobramycin inhalation nebulization solution</i>	5	BD
<i>tobramycin ophthalmic solution</i>	2	
<i>tobramycin sulfate injection solution 10 mg/ml, 80 mg/2ml</i>	2	
TOBREX OPHTHALMIC OINTMENT	3	
ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts; OBT
Antibacterials		
<i>colistimethate sodium (cba) injection solution reconstituted</i>	4	
SYNERCID INTRAVENOUS SOLUTION RECONSTITUTED	4	
Antibacterials, Other		
<i>acetic acid otic solution</i>	2	
<i>bacitracin intramuscular solution reconstituted</i>	2	
<i>bacitracin ophthalmic ointment</i>	2	
BACTROBAN NASAL NASAL OINTMENT	4	
<i>chloramphenicol sod succinate intravenous solution reconstituted</i>	4	HI

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
CLEOCIN IN D5W INTRAVENOUS SOLUTION	4	
CLEOCIN PHOSPHATE INJECTION SOLUTION 900 MG/6ML	4	
CLEOCIN VAGINAL SUPPOSITORY	4	
<i>clindamycin hcl oral capsule</i>	2	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	2	
<i>clindamycin phosphate external gel</i>	2	
<i>clindamycin phosphate external lotion</i>	2	
<i>clindamycin phosphate external solution</i>	2	
<i>clindamycin phosphate external swab</i>	2	
<i>clindamycin phosphate in d5w intravenous solution</i>	2	HI
<i>clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml</i>	2	
<i>clindamycin phosphate injection solution 900 mg/6ml</i>	2	HI
<i>clindamycin phosphate vaginal cream</i>	2	
CUBICIN INTRAVENOUS SOLUTION RECONSTITUTED	5	HI
DAPTOMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	HI
GLOBAL ALCOHOL PREP EASE PAD	3	
LINCOCIN INJECTION SOLUTION	4	HI
<i>lincomycin hcl injection solution</i>	2	HI
<i>linezolid intravenous solution 600 mg/300ml</i>	2	PA
<i>linezolid oral suspension reconstituted</i>	2	PA
<i>linezolid oral tablet</i>	2	PA
<i>methenamine hippurate oral tablet</i>	2	
<i>metronidazole external cream</i>	2	
<i>metronidazole external gel</i>	2	
<i>metronidazole external lotion</i>	2	
<i>metronidazole in nacl intravenous solution 500-0.79 mg/100ml-%</i>	2	
<i>metronidazole oral capsule</i>	2	
<i>metronidazole oral tablet</i>	2	
<i>metronidazole vaginal gel</i>	2	
MONUROL ORAL PACKET	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>mupirocin calcium external cream</i>	2	
<i>mupirocin external ointment</i>	2	
<i>nitrofurantoin monohydrate macro oral capsule</i>	2	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
<i>polymyxin b sulfate injection solution reconstituted</i>	2	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
SIVEXTRO ORAL TABLET	5	PA
SULFAMYLON EXTERNAL CREAM	4	
SULFAMYLON EXTERNAL PACKET	4	EDS
<i>tigecycline intravenous solution reconstituted</i>	5	
<i>tinidazole oral tablet</i>	2	
<i>trimethoprim oral tablet</i>	2	
<i>vancomycin hcl intravenous solution reconstituted 10 gm, 1000 mg, 500 mg</i>	2	
<i>vancomycin hcl oral capsule</i>	2	
<i>vandazole vaginal gel</i>	2	
XIFAXAN ORAL TABLET 200 MG	4	QL (9 EA per 3 days)
XIFAXAN ORAL TABLET 550 MG	5	
ZYVOX INTRAVENOUS SOLUTION 600 MG/300ML	4	PA
Beta-Lactam, Cephalosporins		
<i>cefaclor er oral tablet extended release 12 hour</i>	4	
<i>cefaclor oral capsule</i>	2	
<i>cefaclor oral suspension reconstituted</i>	2	
<i>cefadroxil oral capsule</i>	2	
<i>cefadroxil oral suspension reconstituted</i>	2	
<i>cefadroxil oral tablet</i>	2	
<i>cefazolin sodium injection solution reconstituted 1 gm, 500 mg</i>	2	
<i>cefazolin sodium injection solution reconstituted 10 gm</i>	2	HI
<i>cefdinir oral capsule</i>	2	
<i>cefdinir oral suspension reconstituted</i>	2	
<i>cefepime hcl injection solution reconstituted</i>	2	
<i>cefixime oral suspension reconstituted</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>cefotaxime sodium injection solution reconstituted 1 gm, 2 gm, 500 mg</i>	2	
<i>cefotetan disodium injection solution reconstituted 1 gm, 2 gm</i>	4	
<i>cefoxitin sodium injection solution reconstituted</i>	2	HI
<i>cefoxitin sodium intravenous solution reconstituted 1 gm</i>	2	HI
<i>cefoxitin sodium intravenous solution reconstituted 2 gm</i>	2	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	2	
<i>cefpodoxime proxetil oral tablet</i>	2	
<i>cefprozil oral suspension reconstituted</i>	2	
<i>cefprozil oral tablet</i>	2	
<i>ceftazidime injection solution reconstituted 1 gm</i>	2	
<i>ceftazidime injection solution reconstituted 2 gm, 6 gm</i>	2	HI
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i>	2	
<i>ceftriaxone sodium intravenous solution reconstituted 10 gm</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cefuroxime sodium injection solution reconstituted 7.5 gm</i>	2	HI
<i>cefuroxime sodium injection solution reconstituted 750 mg</i>	2	
<i>cefuroxime sodium intravenous solution reconstituted 1.5 gm</i>	2	
<i>cephalexin oral capsule</i>	2	
<i>cephalexin oral suspension reconstituted</i>	2	
SUPRAX ORAL CAPSULE	3	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	3	
SUPRAX ORAL TABLET CHEWABLE	3	
<i>tazicef injection solution reconstituted</i>	2	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	4	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Beta-Lactam, Other		
AZACTAM INJECTION SOLUTION RECONSTITUTED	3	
<i>aztreonam injection solution reconstituted 1 gm</i>	2	
CAYSTON INHALATION SOLUTION RECONSTITUTED	5	
<i>doripenem intravenous solution reconstituted 500 mg</i>	4	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	2	
INVANZ INJECTION SOLUTION RECONSTITUTED	4	
<i>meropenem intravenous solution reconstituted</i>	2	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA; PA except Urology or Infectious Disease
Beta-Lactam, Penicillins		
<i>amoxicillin oral capsule</i>	2	
<i>amoxicillin oral suspension reconstituted</i>	2	
<i>amoxicillin oral tablet</i>	2	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	2	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	2	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	2	
<i>amoxicillin-pot clavulanate oral tablet</i>	2	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	2	
<i>ampicillin oral capsule 500 mg</i>	2	
<i>ampicillin sodium injection solution reconstituted 1 gm, 125 mg</i>	2	
<i>ampicillin sodium intravenous solution reconstituted 10 gm</i>	2	HI
<i>ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm</i>	2	
<i>ampicillin-sulbactam sodium injection solution reconstituted 15 (10-5) gm</i>	2	HI
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	4	
BACTOCILL IN DEXTROSE INTRAVENOUS SOLUTION	4	HI
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
BICILLIN C-R INTRAMUSCULAR SUSPENSION	4	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	4	
<i>dicloxacillin sodium oral capsule</i>	2	
<i>nafcillin sodium injection solution reconstituted 1 gm</i>	4	EDS
<i>nafcillin sodium intravenous solution reconstituted 10 gm</i>	5	
<i>oxacillin sodium injection solution reconstituted</i>	2	
<i>penicillin g pot in dextrose intravenous solution 40000 unit/ml, 60000 unit/ml</i>	2	
<i>penicillin g potassium injection solution reconstituted 20000000 unit</i>	2	
<i>penicillin g procaine intramuscular suspension</i>	2	
<i>penicillin g sodium injection solution reconstituted</i>	2	
<i>penicillin v potassium oral solution reconstituted</i>	2	
<i>penicillin v potassium oral tablet</i>	2	
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm</i>	2	
ZOSYN INTRAVENOUS SOLUTION 2-0.25 GM/50ML, 3-0.375 GM/50ML	3	
Macrolides		
AZASITE OPHTHALMIC SOLUTION	4	
<i>azithromycin intravenous solution reconstituted 500 mg</i>	2	
<i>azithromycin oral packet</i>	2	
<i>azithromycin oral suspension reconstituted</i>	2	
<i>azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 600 mg</i>	2	
<i>azithromycin oral tablet 500 mg (3 pack)</i>	2	EDS
<i>clarithromycin er oral tablet extended release 24 hour</i>	2	
<i>clarithromycin oral suspension reconstituted</i>	2	
<i>clarithromycin oral tablet</i>	2	
DIFICID ORAL TABLET	5	PA
<i>e.e.s. 400 oral tablet</i>	2	
ERY EXTERNAL PAD	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	4	
ERY-TAB ORAL TABLET DELAYED RELEASE	4	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	4	
<i>erythromycin base oral capsule delayed release particles</i>	2	
<i>erythromycin base oral tablet</i>	2	
<i>erythromycin ethylsuccinate oral suspension reconstituted</i>	2	
<i>erythromycin ethylsuccinate oral tablet</i>	2	
<i>erythromycin external gel</i>	2	
<i>erythromycin external solution</i>	2	
<i>erythromycin ophthalmic ointment</i>	2	
ZITHROMAX ORAL PACKET	4	
Quinolones		
CILOXAN OPHTHALMIC OINTMENT	4	
<i>ciprofloxacin hcl ophthalmic solution</i>	2	
<i>ciprofloxacin hcl oral tablet</i>	2	
<i>ciprofloxacin in d5w intravenous solution 200 mg/100ml</i>	2	
<i>ciprofloxacin oral suspension reconstituted</i>	2	
<i>ciprofloxacin-ciproflox hcl er oral tablet extended release 24 hour</i>	2	
<i>gatifloxacin ophthalmic solution</i>	2	
<i>levofloxacin in d5w intravenous solution 500 mg/100ml, 750 mg/150ml</i>	2	
<i>levofloxacin intravenous solution</i>	2	
<i>levofloxacin ophthalmic solution</i>	2	
<i>levofloxacin oral solution</i>	2	
<i>levofloxacin oral tablet</i>	2	
<i>moxifloxacin hcl in nacl intravenous solution</i>	2	
<i>moxifloxacin hcl oral tablet</i>	2	
<i>ofloxacin ophthalmic solution</i>	2	
<i>ofloxacin oral tablet 400 mg</i>	2	
<i>ofloxacin otic solution</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Sulfonamides		
AVC VAGINAL VAGINAL CREAM	4	
<i>silver sulfadiazine external cream</i>	2	
<i>ssd external cream</i>	2	
<i>sulfacetamide sodium (acne) external lotion</i>	2	
<i>sulfacetamide sodium ophthalmic ointment</i>	4	
<i>sulfacetamide sodium ophthalmic solution</i>	2	
<i>sulfadiazine oral tablet</i>	2	
<i>sulfamethoxazole-trimethoprim intravenous solution</i>	2	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	2	
Tetracyclines		
<i>demeclocycline hcl oral tablet</i>	4	
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	4	HI
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	EDS
<i>doxycycline monohydrate oral capsule</i>	2	
<i>doxycycline monohydrate oral suspension reconstituted</i>	2	
<i>doxycycline monohydrate oral tablet</i>	2	
<i>minocycline hcl er oral tablet extended release 24 hour 115 mg, 135 mg, 45 mg, 65 mg, 90 mg</i>	2	
<i>minocycline hcl oral capsule</i>	2	
<i>minocycline hcl oral tablet</i>	2	
ORACEA ORAL CAPSULE DELAYED RELEASE	4	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 55 MG, 80 MG	4	
<i>targadox oral tablet</i>	2	EDS
<i>tetracycline hcl oral capsule</i>	2	
VIBRAMYCIN ORAL SYRUP	4	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT INTRAVENOUS SOLUTION	5	PA New Starts
BRIVIACT ORAL SOLUTION	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
BRIVIACT ORAL TABLET	5	PA New Starts
DIASTAT ACUDIAL RECTAL GEL	4	
DIASTAT PEDIATRIC RECTAL GEL	4	
<i>diazepam intensol oral concentrate</i>	2	
<i>diazepam oral solution 5 mg/5ml</i>	2	
<i>diazepam oral tablet</i>	2	
<i>levetiracetam er oral tablet extended release 24 hour</i>	2	EDS
<i>levetiracetam intravenous solution</i>	2	
<i>levetiracetam oral solution</i>	2	EDS
<i>levetiracetam oral tablet</i>	2	EDS
<i>roweepra oral tablet</i>	2	EDS
<i>roweepra xr oral tablet extended release 24 hour</i>	2	EDS
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	4	EDS
Calcium Channel Modifying Agents		
CELONTIN ORAL CAPSULE	3	EDS
<i>ethosuximide oral capsule</i>	2	EDS
<i>ethosuximide oral solution</i>	2	EDS
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
LYRICA ORAL CAPSULE	3	EDS
LYRICA ORAL SOLUTION	3	EDS
<i>zonisamide oral capsule</i>	2	EDS
Gamma-Aminobutyric Acid (Gaba) Augmenting Agents		
<i>clonazepam oral tablet</i>	2	EDS
<i>clonazepam oral tablet dispersible</i>	2	EDS
<i>clorazepate dipotassium oral tablet</i>	2	
DIASTAT ACUDIAL RECTAL GEL	4	
DIASTAT PEDIATRIC RECTAL GEL	4	
<i>diazepam intensol oral concentrate</i>	2	
<i>diazepam oral solution 5 mg/5ml</i>	2	
<i>diazepam oral tablet</i>	2	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>divalproex sodium oral capsule delayed release sprinkle</i>	2	EDS
<i>divalproex sodium oral tablet delayed release</i>	2	EDS
<i>gabapentin oral capsule</i>	2	EDS
<i>gabapentin oral solution 250 mg/5ml</i>	2	EDS
<i>gabapentin oral tablet</i>	2	EDS
GRALISE ORAL TABLET	4	EDS
GRALISE STARTER ORAL	4	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG	4	EDS
<i>lamotrigine oral tablet dispersible</i>	2	EDS
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	2	
ONFI ORAL SUSPENSION	4	EDS
ONFI ORAL TABLET 10 MG, 20 MG	4	EDS
<i>phenobarbital oral elixir</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>phenobarbital oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>primidone oral tablet</i>	2	EDS
SABRIL ORAL TABLET	5	
<i>tiagabine hcl oral tablet</i>	2	EDS
<i>valproate sodium intravenous solution 100 mg/ml</i>	2	
<i>valproate sodium oral solution</i>	2	EDS
<i>valproic acid oral capsule</i>	2	EDS
<i>vigabatrin oral packet</i>	5	
Glutamate Reducing Agents		
<i>felbamate oral suspension</i>	2	EDS
<i>felbamate oral tablet</i>	2	EDS
FYCOMPA ORAL SUSPENSION	4	EDS
FYCOMPA ORAL TABLET	4	EDS
LAMICTAL XR ORAL KIT	4	
<i>lamotrigine er oral tablet extended release 24 hour</i>	2	EDS
<i>lamotrigine oral tablet</i>	2	EDS
<i>lamotrigine oral tablet chewable</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>lamotrigine starter kit-blue oral kit</i>	2	
<i>lamotrigine starter kit-green oral kit</i>	2	
<i>lamotrigine starter kit-orange oral kit</i>	2	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	4	EDS
<i>topiramate er oral capsule er 24 hour sprinkle</i>	2	EDS
<i>topiramate oral capsule sprinkle</i>	2	EDS
<i>topiramate oral tablet</i>	2	EDS
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS
Sodium Channel Agents		
APTIOM ORAL TABLET	5	
BANZEL ORAL SUSPENSION	4	EDS
BANZEL ORAL TABLET	4	EDS
<i>carbamazepine er oral tablet extended release 12 hour</i>	2	EDS
<i>carbamazepine oral suspension</i>	2	EDS
<i>carbamazepine oral tablet</i>	2	EDS
<i>carbamazepine oral tablet chewable</i>	2	EDS
DILANTIN ORAL CAPSULE 30 MG	3	EDS
<i>epitol oral tablet</i>	2	EDS
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	EDS
<i>oxcarbazepine oral suspension</i>	2	EDS
<i>oxcarbazepine oral tablet</i>	2	EDS
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
PEGANONE ORAL TABLET	3	EDS
<i>phenytoin oral suspension 125 mg/5ml</i>	2	EDS
<i>phenytoin oral tablet chewable</i>	2	EDS
<i>phenytoin sodium extended oral capsule</i>	2	EDS
<i>phenytoin sodium injection solution</i>	2	
VIMPAT INTRAVENOUS SOLUTION	3	
VIMPAT ORAL SOLUTION	3	EDS
VIMPAT ORAL TABLET	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Antidementia Agents		
Antidementia Agents, Other		
<i>ergoloid mesylates oral tablet</i>	2	EDS
Cholinesterase Inhibitors		
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	2	EDS
<i>donepezil hcl oral tablet dispersible</i>	2	EDS
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	2	EDS
<i>galantamine hydrobromide oral solution</i>	2	EDS
<i>galantamine hydrobromide oral tablet</i>	2	EDS
<i>rivastigmine tartrate oral capsule</i>	2	EDS
<i>rivastigmine transdermal patch 24 hour</i>	2	EDS
N-Methyl-D-Aspartate (Nmda) Receptor Antagonist		
<i>memantine hcl oral solution</i>	2	EDS
<i>memantine hcl oral tablet 10 mg, 5 mg</i>	2	EDS
<i>memantine hcl oral tablet 5 (28)-10 (21) mg</i>	2	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	PA; EDS
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA; EDS
Antidepressants		
Antidepressants		
<i>chlordiazepoxide-amitriptyline oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>olanzapine-fluoxetine hcl oral capsule</i>	2	EDS
<i>perphenazine-amitriptyline oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
Antidepressants, Other		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	5	BD
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	5	BD
<i>aripiprazole oral solution</i>	2	EDS
<i>aripiprazole oral tablet 10 mg, 15 mg, 20 mg, 30 mg</i>	2	EDS
<i>aripiprazole oral tablet 2 mg</i>	2	QL (60 EA per 30 days); EDS
<i>aripiprazole oral tablet 5 mg</i>	2	QL (30 EA per 30 days); EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>aripiprazole oral tablet dispersible 10 mg</i>	5	QL (60 EA per 30 days)
<i>aripiprazole oral tablet dispersible 15 mg</i>	5	
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	2	EDS
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>	2	EDS
<i>bupropion hcl oral tablet</i>	2	EDS
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
<i>maprotiline hcl oral tablet</i>	2	EDS
<i>mirtazapine oral tablet</i>	2	EDS
<i>mirtazapine oral tablet dispersible</i>	2	EDS
<i>nefazodone hcl oral tablet</i>	2	EDS
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	2	EDS
<i>quetiapine fumarate oral tablet</i>	2	EDS
<i>trazodone hcl oral tablet</i>	2	EDS
Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR	5	PA New Starts
MARPLAN ORAL TABLET	3	EDS
<i>phenelzine sulfate oral tablet</i>	2	EDS
<i>tranylcypromine sulfate oral tablet</i>	2	EDS
Ssris/ Snris		
<i>citalopram hydrobromide oral solution</i>	2	EDS
<i>citalopram hydrobromide oral tablet</i>	2	EDS
<i>desvenlafaxine er oral tablet extended release 24 hour</i>	2	EDS
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg</i>	2	EDS
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg</i>	2	QL (90 EA per 30 days); EDS
<i>duloxetine hcl oral capsule delayed release particles</i>	2	EDS
<i>escitalopram oxalate oral solution</i>	2	EDS
<i>escitalopram oxalate oral tablet</i>	1	EDS
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	
<i>fluoxetine hcl oral capsule</i>	2	EDS
<i>fluoxetine hcl oral capsule delayed release</i>	2	EDS
<i>fluoxetine hcl oral solution</i>	2	EDS
<i>fluvoxamine maleate er oral capsule extended release 24 hour 100 mg</i>	2	QL (60 EA per 30 days); EDS
<i>fluvoxamine maleate er oral capsule extended release 24 hour 150 mg</i>	2	EDS
<i>fluvoxamine maleate oral tablet</i>	2	EDS
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>paroxetine hcl oral tablet</i>	1	EDS
<i>paroxetine mesylate oral capsule</i>	2	EDS
PAXIL ORAL SUSPENSION	4	EDS
PEXEVA ORAL TABLET	4	EDS
<i>sertraline hcl oral concentrate</i>	2	EDS
<i>sertraline hcl oral tablet</i>	1	EDS
TRINTELLIX ORAL TABLET	4	EDS
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	2	EDS
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>venlafaxine hcl oral tablet</i>	2	EDS
VIIBRYD ORAL TABLET	4	EDS
VIIBRYD STARTER PACK ORAL KIT	4	
Tricyclics		
<i>amitriptyline hcl oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>amoxapine oral tablet</i>	2	EDS
<i>clomipramine hcl oral capsule</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>desipramine hcl oral tablet</i>	2	EDS
<i>doxepin hcl oral capsule</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>doxepin hcl oral concentrate</i>	2	PA New Starts; AL (Max 64 Years); EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>imipramine hcl oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
IMIPRAMINE PAMOATE ORAL CAPSULE	4	PA New Starts; AL (Max 64 Years); EDS
<i>nortriptyline hcl oral capsule</i>	2	EDS
<i>nortriptyline hcl oral solution</i>	2	EDS
<i>protriptyline hcl oral tablet</i>	2	EDS
PRUDOXIN EXTERNAL CREAM	4	
SILENOR ORAL TABLET 3 MG	3	QL (30 EA per 30 days); EDS
SILENOR ORAL TABLET 6 MG	3	EDS
<i>trimipramine maleate oral capsule</i>	2	PA New Starts; AL (Max 64 Years); EDS
Antiemetics		
Antiemetics, Other		
<i>chlorpromazine hcl injection solution 50 mg/2ml</i>	4	
<i>chlorpromazine hcl oral tablet</i>	2	EDS
<i>compro rectal suppository</i>	2	
<i>diphenhydramine hcl injection solution</i>	2	
<i>hydroxyzine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>hydroxyzine pamoate oral capsule</i>	2	PA; AL (Max 64 Years)
<i>meclizine hcl oral tablet</i>	2	
<i>metoclopramide hcl injection solution</i>	2	PA New Starts; AL (Max 64 Years)
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	2	
<i>metoclopramide hcl oral tablet</i>	2	
<i>metoclopramide hcl oral tablet dispersible</i>	2	
<i>perphenazine oral tablet</i>	2	EDS
<i>phenadoz rectal suppository 12.5 mg</i>	2	PA; AL (Max 64 Years)
<i>prochlorperazine edisylate injection solution</i>	2	
<i>prochlorperazine maleate oral tablet</i>	2	EDS
<i>prochlorperazine rectal suppository</i>	2	
<i>promethazine hcl injection solution</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral syrup</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl rectal suppository</i>	2	PA; AL (Max 64 Years)
<i>promethegan rectal suppository 25 mg, 50 mg</i>	2	PA; AL (Max 64 Years)
<i>scopolamine transdermal patch 72 hour</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	4	
<i>trimethobenzamide hcl oral capsule</i>	2	PA; AL (Max 64 Years)
Emetogenic Therapy Adjuncts		
ALOXI INTRAVENOUS SOLUTION 0.25 MG/5ML	4	
ANZEMET ORAL TABLET	4	BD
<i>aprepitant oral capsule</i>	2	BD
CESAMET ORAL CAPSULE	4	PA
CINVANTI INTRAVENOUS EMULSION	4	BD
<i>dronabinol oral capsule</i>	2	PA
EMEND ORAL SUSPENSION RECONSTITUTED	3	BD
<i>granisetron hcl intravenous solution 0.1 mg/ml, 1 mg/ml</i>	2	
<i>granisetron hcl oral tablet</i>	2	BD
<i>ondansetron hcl injection solution 4 mg/2ml, 4 mg/2ml (2ml syringe)</i>	2	
<i>ondansetron hcl oral solution</i>	2	BD
<i>ondansetron hcl oral tablet</i>	2	BD
<i>ondansetron oral tablet dispersible</i>	2	BD
<i>palonosetron hcl intravenous solution</i>	4	
SANCUSO TRANSDERMAL PATCH	5	
SYNDROS ORAL SOLUTION	4	BD
VARUBI ORAL TABLET	4	BD
ZUPLENZ ORAL FILM	4	BD
Antifungals		
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	5	PA; HI; OBT
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	4	PA; HI; OBT
<i>amphotericin b injection solution reconstituted</i>	2	PA; HI; OBT
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	3	HI
<i>casprofungin acetate intravenous solution reconstituted</i>	2	HI
<i>ciclopirox external gel</i>	2	
<i>ciclopirox external shampoo</i>	2	
<i>ciclopirox external solution</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>ciclopirox olamine external cream</i>	2	
<i>ciclopirox olamine external suspension</i>	2	
<i>clotrimazole external cream</i>	2	
<i>clotrimazole external solution</i>	2	
<i>clotrimazole mouth/throat lozenge</i>	2	
<i>econazole nitrate external cream</i>	2	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	4	
ERTACZO EXTERNAL CREAM	4	
EXELDERM EXTERNAL CREAM	4	
EXELDERM EXTERNAL SOLUTION	4	
<i>fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%</i>	2	HI
<i>fluconazole oral suspension reconstituted</i>	2	
<i>fluconazole oral tablet</i>	2	
<i>flucytosine oral capsule</i>	2	
<i>griseofulvin microsize oral suspension</i>	2	
<i>griseofulvin microsize oral tablet</i>	2	
<i>griseofulvin ultramicrosize oral tablet</i>	2	
GYNAZOLE-1 VAGINAL CREAM	4	
<i>itraconazole oral capsule</i>	2	PA
JUBLIA EXTERNAL SOLUTION	4	PA
<i>ketoconazole external cream</i>	2	
<i>ketoconazole external shampoo</i>	2	
<i>ketoconazole oral tablet</i>	2	PA
MENTAX EXTERNAL CREAM	4	
MICONAZOLE 3 VAGINAL SUPPOSITORY	4	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	3	
<i>naftifine hcl external cream</i>	2	
NAFTIN EXTERNAL GEL	3	
NATACYN OPHTHALMIC SUSPENSION	3	
NOXAFIL ORAL SUSPENSION	5	
NOXAFIL ORAL TABLET DELAYED RELEASE	5	
<i>nyamyc external powder</i>	2	
<i>nystatin external cream</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>nystatin external ointment</i>	2	
<i>nystatin external powder</i>	2	
<i>nystatin mouth/throat suspension</i>	2	
<i>nystatin oral tablet</i>	2	
<i>nystop external powder</i>	2	
ORAVIG BUCCAL TABLET	4	
OXISTAT EXTERNAL LOTION	4	
SPORANOX ORAL SOLUTION	4	PA
<i>terbinafine hcl oral tablet</i>	2	
<i>terconazole vaginal cream</i>	2	
<i>voriconazole intravenous solution reconstituted</i>	4	PA
<i>voriconazole oral suspension reconstituted</i>	4	PA
<i>voriconazole oral tablet</i>	4	PA
ZOLINZA ORAL CAPSULE	3	
Antigout Agents		
Antigout Agents		
<i>allopurinol oral tablet</i>	2	EDS
<i>allopurinol sodium intravenous solution reconstituted</i>	2	
<i>colchicine oral capsule</i>	2	
<i>colchicine oral tablet</i>	2	EDS
<i>colchicine-probenecid oral tablet</i>	2	EDS
<i>probenecid oral tablet</i>	2	EDS
ULORIC ORAL TABLET	3	EDS
Anti-Inflammatory Agents		
Glucocorticoids		
<i>betamethasone dipropionate aug external cream</i>	2	
<i>betamethasone dipropionate aug external gel</i>	2	
<i>betamethasone dipropionate aug external lotion</i>	2	
<i>betamethasone dipropionate aug external ointment</i>	2	
<i>betamethasone dipropionate external cream</i>	2	
<i>betamethasone dipropionate external lotion</i>	2	
<i>betamethasone dipropionate external ointment</i>	2	
<i>betamethasone valerate external cream</i>	2	
<i>betamethasone valerate external foam</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>betamethasone valerate external lotion</i>	2	
<i>betamethasone valerate external ointment</i>	2	
BLEPHAMIDE OPHTHALMIC SUSPENSION	3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	3	
<i>cortisone acetate oral tablet</i>	2	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	4	
<i>dexamethasone intensol oral concentrate</i>	3	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 120 mg/30ml</i>	2	
EMFLAZA ORAL SUSPENSION	5	PA
EMFLAZA ORAL TABLET	5	PA
<i>hydrocortisone oral tablet 20 mg, 5 mg</i>	2	
KENALOG INJECTION SUSPENSION	4	
MEDROL ORAL TABLET 2 MG	4	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	2	
<i>methylprednisolone oral tablet</i>	2	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg</i>	2	
MILLIPRED ORAL TABLET	4	
PRED MILD OPHTHALMIC SUSPENSION	3	
<i>prednisolone acetate ophthalmic suspension</i>	2	
<i>prednisolone oral solution</i>	2	
<i>prednisolone sodium phosphate ophthalmic solution</i>	2	
<i>prednisolone sodium phosphate oral solution 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	2	
<i>prednisone intensol oral concentrate</i>	2	
<i>prednisone oral solution</i>	2	
<i>prednisone oral tablet</i>	2	
<i>prednisone oral tablet therapy pack</i>	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 250 MG	4	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG, 2 GM	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>sulfacetamide-prednisolone ophthalmic solution</i>	2	
<i>triamcinolone acetonide external aerosol solution</i>	2	
VERIPRED 20 ORAL SOLUTION	4	
Nonsteroidal Anti-Inflammatory Drugs		
<i>celecoxib oral capsule</i>	2	EDS
<i>diclofenac potassium oral tablet</i>	2	EDS
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	2	EDS
<i>diclofenac sodium oral tablet delayed release</i>	2	EDS
<i>diflunisal oral tablet</i>	2	EDS
<i>etodolac oral capsule 200 mg</i>	2	EDS
<i>etodolac oral tablet</i>	2	EDS
<i>fenoprofen calcium oral capsule 400 mg</i>	2	EDS
<i>fenoprofen calcium oral tablet</i>	2	EDS
FLECTOR TRANSDERMAL PATCH	4	PA
<i>flurbiprofen oral tablet</i>	2	EDS
<i>ibu oral tablet 600 mg, 800 mg</i>	2	EDS
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	EDS
INDOCIN ORAL SUSPENSION	4	PA; AL (Max 64 Years); EDS
<i>indomethacin er oral capsule extended release</i>	2	PA; AL (Max 64 Years); EDS
<i>indomethacin oral capsule</i>	2	PA; AL (Max 64 Years); EDS
<i>ketoprofen er oral capsule extended release 24 hour</i>	3	EDS
<i>ketorolac tromethamine injection solution 15 mg/ml, 30 mg/ml</i>	2	
<i>ketorolac tromethamine oral tablet</i>	2	PA; AL (Max 64 Years)
<i>meloxicam oral tablet</i>	2	EDS
<i>nabumetone oral tablet</i>	2	EDS
<i>naproxen oral tablet</i>	2	EDS
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	EDS
<i>oxycodone-ibuprofen oral tablet</i>	2	
<i>piroxicam oral capsule</i>	2	EDS
<i>profeno oral tablet</i>	2	EDS
<i>sulindac oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Antimigraine Agents		
Ergot Alkaloids		
<i>dihydroergotamine mesylate injection solution</i>	2	
<i>dihydroergotamine mesylate nasal solution</i>	5	
<i>ergotamine-caffeine oral tablet</i>	2	
MIGERGOT RECTAL SUPPOSITORY	5	
Prophylactic		
AIMOVIG 140 DOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; EDS
BOTOX INJECTION SOLUTION RECONSTITUTED	4	PA; OBT
<i>divalproex sodium er oral tablet extended release 24 hour</i>	2	EDS
<i>divalproex sodium oral capsule delayed release sprinkle</i>	2	EDS
<i>divalproex sodium oral tablet delayed release</i>	2	EDS
<i>timolol maleate oral tablet</i>	2	EDS
<i>topiramate oral capsule sprinkle</i>	2	EDS
<i>topiramate oral tablet</i>	2	EDS
<i>valproate sodium oral solution</i>	2	EDS
<i>valproic acid oral capsule</i>	2	EDS
Serotonin (5-Ht) 1B/1D Receptor Agonists		
<i>almotriptan malate oral tablet</i>	2	
<i>eletriptan hydrobromide oral tablet</i>	2	
<i>frovatriptan succinate oral tablet</i>	2	
<i>naratriptan hcl oral tablet</i>	2	
<i>rizatriptan benzoate oral tablet</i>	2	
<i>rizatriptan benzoate oral tablet dispersible</i>	2	
<i>sumatriptan nasal solution</i>	2	
<i>sumatriptan succinate oral tablet</i>	2	
<i>sumatriptan succinate refill subcutaneous solution cartridge</i>	2	
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	2	
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>	2	
<i>zolmitriptan oral tablet</i>	2	
<i>zolmitriptan oral tablet dispersible</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
ZOMIG NASAL SOLUTION	3	
Antimyasthenic Agents		
Parasympathomimetics		
<i>guanidine hcl oral tablet</i>	2	
MESTINON ORAL SYRUP	3	
<i>pyridostigmine bromide er oral tablet extended release</i>	2	
<i>pyridostigmine bromide oral tablet</i>	2	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone oral tablet</i>	2	EDS
PRIFTIN ORAL TABLET	4	
<i>rifabutin oral capsule</i>	2	
Antituberculars		
CAPASTAT SULFATE INJECTION SOLUTION RECONSTITUTED	4	
<i>ethambutol hcl oral tablet</i>	2	
<i>isoniazid injection solution</i>	4	
<i>isoniazid oral syrup</i>	2	EDS
<i>isoniazid oral tablet</i>	2	EDS
PASER ORAL PACKET	4	
<i>pyrazinamide oral tablet</i>	2	
RIFAMATE ORAL CAPSULE	4	
<i>rifampin intravenous solution reconstituted</i>	2	
<i>rifampin oral capsule</i>	2	
RIFATER ORAL TABLET	3	
SIRTURO ORAL TABLET	4	PA
TRECTOR ORAL TABLET	4	
Antineoplastics		
Alkylating Agents		
<i>busulfan intravenous solution</i>	2	PA New Starts; OBT
<i>cyclophosphamide oral capsule</i>	2	BD
HEXALEN ORAL CAPSULE	3	
LEUKERAN ORAL TABLET	3	
MATULANE ORAL CAPSULE	5	
<i>melphalan hcl intravenous solution reconstituted</i>	2	PA New Starts; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
VALCHLOR EXTERNAL GEL	5	PA New Starts
Antiandrogens		
<i>bicalutamide oral tablet</i>	2	
ERLEADA ORAL TABLET	5	PA New Starts
<i>flutamide oral capsule</i>	2	
<i>nilutamide oral tablet</i>	4	
XTANDI ORAL CAPSULE	5	PA New Starts
ZYTIGA ORAL TABLET	5	PA New Starts
Antiangiogenic Agents		
POMALYST ORAL CAPSULE	5	PA New Starts
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 25 MG, 5 MG	5	PA New Starts
THALOMID ORAL CAPSULE	5	
Antiestrogens/Modifiers		
EMCYT ORAL CAPSULE	3	
FARESTON ORAL TABLET	5	
SOLTAMOX ORAL SOLUTION	3	EDS
<i>tamoxifen citrate oral tablet</i>	2	EDS
Antimetabolites		
DROXIA ORAL CAPSULE	4	EDS
<i>gemcitabine hcl intravenous solution reconstituted 1 gm</i>	2	PA; OBT
<i>hydroxyurea oral capsule</i>	2	
LONSURF ORAL TABLET	5	PA New Starts
PURIXAN ORAL SUSPENSION	3	
<i>tabloid oral tablet</i>	2	
Antineoplastics		
ADRUCIL INTRAVENOUS SOLUTION 500 MG/10ML	4	PA New Starts; OBT
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5	PA
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	5	PA; OBT
ARRANON INTRAVENOUS SOLUTION	4	PA New Starts; OBT
AVASTIN INTRAVENOUS SOLUTION	5	PA; OBT
<i>azacitidine injection suspension reconstituted</i>	5	PA New Starts; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
BICNU INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts; OBT
<i>bleomycin sulfate injection solution reconstituted 30 unit</i>	2	PA; OBT
<i>bortezomib intravenous solution reconstituted</i>	5	PA New Starts
<i>carboplatin intravenous solution 150 mg/15ml</i>	2	
<i>cisplatin intravenous solution 50 mg/50ml</i>	2	PA New Starts; OBT
<i>cladribine intravenous solution 10 mg/10ml</i>	2	PA New Starts; OBT
<i>clofarabine intravenous solution</i>	2	PA New Starts; OBT
COSMEGEN INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts
<i>cytarabine (pf) injection solution 100 mg/ml</i>	2	PA New Starts; OBT
<i>cytarabine injection solution</i>	2	PA New Starts; OBT
<i>dacarbazine intravenous solution reconstituted 200 mg</i>	2	PA; OBT
<i>dactinomycin intravenous solution reconstituted</i>	5	PA New Starts
<i>daunorubicin hcl intravenous injectable</i>	2	PA New Starts; OBT
<i>decitabine intravenous solution reconstituted</i>	2	PA New Starts; OBT
<i>dexrazoxane intravenous solution reconstituted 250 mg</i>	2	PA; OBT
<i>docetaxel intravenous concentrate 80 mg/4ml</i>	4	PA New Starts; OBT
<i>docetaxel intravenous solution 160 mg/16ml</i>	4	PA New Starts; OBT
<i>doxorubicin hcl intravenous solution</i>	2	PA; OBT
<i>doxorubicin hcl liposomal intravenous injectable</i>	2	PA; OBT
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; OBT
<i>epirubicin hcl intravenous solution 200 mg/100ml</i>	2	PA New Starts; OBT
ERBITUX INTRAVENOUS SOLUTION 100 MG/50ML	5	PA; OBT
ERWINAZE INJECTION SOLUTION RECONSTITUTED	5	PA New Starts; OBT
FASLODEX INTRAMUSCULAR SOLUTION 250 MG/5ML	5	PA New Starts; OBT
FOLOTYN INTRAVENOUS SOLUTION 40 MG/2ML	3	PA; OBT
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
HALAVEN INTRAVENOUS SOLUTION	5	PA New Starts; OBT
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	5	PA New Starts
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 440 MG	5	PA New Starts; OBT
<i>idarubicin hcl intravenous solution 10 mg/10ml</i>	2	PA; OBT
<i>ifosfamide intravenous solution reconstituted 1 gm</i>	2	PA; OBT
<i>irinotecan hcl intravenous solution 100 mg/5ml</i>	2	PA; OBT
ISTODAX (OVERFILL) INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts; OBT
JEVTANA INTRAVENOUS SOLUTION	5	PA New Starts; OBT
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts
<i>levoleucovorin calcium intravenous solution</i>	2	
<i>levoleucovorin calcium intravenous solution reconstituted 50 mg</i>	2	
LYNPARZA ORAL CAPSULE	5	PA New Starts
LYNPARZA ORAL TABLET	5	PA New Starts
<i>mesna intravenous solution</i>	2	PA; OBT
MESNEX ORAL TABLET	3	
<i>mitomycin intravenous solution reconstituted 20 mg</i>	2	PA New Starts; OBT; EDS
<i>mitomycin intravenous solution reconstituted 40 mg, 5 mg</i>	2	PA New Starts; OBT
MUSTARGEN INJECTION SOLUTION RECONSTITUTED	4	PA New Starts; OBT
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG	5	PA New Starts
NINLARO ORAL CAPSULE	5	PA New Starts
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts; OBT
<i>oxaliplatin intravenous solution 100 mg/20ml</i>	2	PA New Starts; OBT
<i>oxaliplatin intravenous solution reconstituted 100 mg</i>	2	PA New Starts
<i>paclitaxel intravenous concentrate 100 mg/16.7ml</i>	2	PA New Starts; OBT
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
RUBRACA ORAL TABLET	5	PA New Starts
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	PA New Starts; OBT
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED 25 MG	3	PA New Starts
TRISENOX INTRAVENOUS SOLUTION 12 MG/6ML	5	PA New Starts
VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML	4	PA New Starts; OBT
VELCADE INJECTION SOLUTION RECONSTITUTED	5	PA New Starts; OBT
VENCLEXTA ORAL TABLET 10 MG, 50 MG	4	PA New Starts; EDS
VENCLEXTA ORAL TABLET 100 MG	5	PA New Starts
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	5	PA New Starts
<i>vinblastine sulfate intravenous solution</i>	4	PA New Starts; OBT
<i>vincasar pfs intravenous solution</i>	2	PA; OBT
<i>vincristine sulfate intravenous solution</i>	2	PA; OBT
<i>vinorelbine tartrate intravenous solution 50 mg/5ml</i>	2	PA; OBT
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44-100 MG	5	PA New Starts
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
ZEJULA ORAL CAPSULE	5	PA New Starts
ZURAMPIC ORAL TABLET	4	PA; EDS
Antineoplastics, Other		
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	4	PA New Starts; OBT
<i>fludarabine phosphate intravenous solution reconstituted</i>	2	PA; OBT
<i>leucovorin calcium injection solution reconstituted 100 mg, 350 mg</i>	2	
<i>leucovorin calcium oral tablet</i>	2	
<i>levoleucovorin calcium intravenous solution reconstituted 50 mg</i>	2	
<i>mitoxantrone hcl intravenous concentrate 25 mg/12.5ml</i>	2	PA; OBT
REVLIMID ORAL CAPSULE 2.5 MG, 20 MG	5	PA New Starts
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
YERVOY INTRAVENOUS SOLUTION 50 MG/10ML	4	PA; OBT
Aromatase Inhibitors, 3Rd Generation		
<i>anastrozole oral tablet</i>	2	EDS
<i>exemestane oral tablet</i>	2	EDS
<i>letrozole oral tablet</i>	2	EDS
Enzyme Inhibitors		
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	4	
<i>etoposide intravenous solution 100 mg/5ml</i>	2	
FARYDAK ORAL CAPSULE	5	PA New Starts
IBRANCE ORAL CAPSULE	5	PA New Starts
IDHIFA ORAL TABLET	5	PA New Starts
KISQALI 200 DOSE ORAL TABLET	5	PA New Starts
KISQALI 400 DOSE ORAL TABLET	5	PA New Starts
KISQALI 600 DOSE ORAL TABLET	5	PA New Starts
KISQALI FEMARA 200 DOSE ORAL TABLET THERAPY PACK	5	PA New Starts
KISQALI FEMARA 400 DOSE ORAL TABLET THERAPY PACK	5	PA New Starts
KISQALI FEMARA 600 DOSE ORAL TABLET THERAPY PACK	5	PA New Starts
<i>toposar intravenous solution 1 gm/50ml</i>	2	
<i>topotecan hcl intravenous solution reconstituted</i>	2	
VERZENIO ORAL TABLET	5	PA New Starts
ZOLINZA ORAL CAPSULE	3	
ZYDELIG ORAL TABLET	5	PA New Starts
Molecular Target Inhibitors		
AFINITOR ORAL TABLET	5	PA New Starts
ALECENSA ORAL CAPSULE	5	PA New Starts
ALUNBRIG ORAL TABLET	5	PA New Starts
ALUNBRIG ORAL TABLET THERAPY PACK	5	PA New Starts
BOSULIF ORAL TABLET	5	PA New Starts
CABOMETYX ORAL TABLET	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
CALQUENCE ORAL CAPSULE	5	PA New Starts
CAPRELSA ORAL TABLET	5	PA New Starts
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	5	PA New Starts
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	5	PA New Starts
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	5	PA New Starts
COTELLIC ORAL TABLET	5	PA New Starts
ERIVEDGE ORAL CAPSULE	5	PA New Starts
GILOTRIF ORAL TABLET	5	PA New Starts
ICLUSIG ORAL TABLET	5	PA New Starts
<i>imatinib mesylate oral tablet</i>	4	PA New Starts; EDS
IMBRUVICA ORAL CAPSULE	5	PA New Starts
IMBRUVICA ORAL TABLET	5	PA New Starts
INLYTA ORAL TABLET	5	PA New Starts
IRESSA ORAL TABLET	5	PA New Starts
JAKAFI ORAL TABLET	5	PA New Starts
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED 30 MG, 60 MG	5	PA New Starts; OBT
LENVIMA 10 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 14 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 18 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 20 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 24 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 8 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
MEKINIST ORAL TABLET	5	PA New Starts
NERLYNX ORAL TABLET	5	PA New Starts
NEXAVAR ORAL TABLET	5	PA New Starts
ODOMZO ORAL CAPSULE	5	PA New Starts
OFEV ORAL CAPSULE	5	PA
RYDAPT ORAL CAPSULE	5	PA New Starts
SPRYCEL ORAL TABLET	5	PA New Starts
STIVARGA ORAL TABLET	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
SUTENT ORAL CAPSULE	5	PA New Starts
TAFINLAR ORAL CAPSULE	5	PA New Starts
TAGRISSE ORAL TABLET	5	PA New Starts
TARCEVA ORAL TABLET	5	
TASIGNA ORAL CAPSULE	5	
TYKERB ORAL TABLET	5	PA New Starts
VOTRIENT ORAL TABLET	5	PA New Starts
XALKORI ORAL CAPSULE	5	PA New Starts
ZELBORAF ORAL TABLET	5	PA New Starts
ZYKADIA ORAL CAPSULE	5	PA New Starts
Monoclonal Antibody/Antibody-Drug Conjugate		
BAVENCIO INTRAVENOUS SOLUTION	5	PA New Starts; OBT
CYRAMZA INTRAVENOUS SOLUTION	5	PA New Starts; OBT
DARZALEX INTRAVENOUS SOLUTION 100 MG/5ML	5	PA New Starts; OBT
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
IMFINZI INTRAVENOUS SOLUTION	5	PA New Starts; OBT
KEYTRUDA INTRAVENOUS SOLUTION	5	PA New Starts; OBT
LARTRUVO INTRAVENOUS SOLUTION	5	PA New Starts; OBT
OPDIVO INTRAVENOUS SOLUTION 100 MG/10ML, 40 MG/4ML	5	PA New Starts; OBT
RITUXAN INTRAVENOUS SOLUTION 100 MG/10ML	3	PA New Starts; EDS
RITUXAN INTRAVENOUS SOLUTION 500 MG/50ML	3	PA New Starts; OBT; EDS
SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	5	BD
TECENTRIQ INTRAVENOUS SOLUTION	5	PA New Starts; OBT
Retinoids		
<i>avita external cream</i>	2	
<i>avita external gel</i>	2	
<i>bexarotene oral capsule</i>	5	
PANRETIN EXTERNAL GEL	3	
TARGRETIN EXTERNAL GEL	5	
<i>tretinoin external cream</i>	2	
<i>tretinoin external gel 0.01 %, 0.025 %</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>tretinoin oral capsule</i>	5	
Antiparasitics		
Anthelmintics		
ALBENZA ORAL TABLET	4	
BILTRICIDE ORAL TABLET	4	
EMVERM ORAL TABLET CHEWABLE	4	
<i>ivermectin oral tablet</i>	2	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED	3	
ALINIA ORAL TABLET	3	
<i>atovaquone oral suspension</i>	5	
<i>atovaquone-proguanil hcl oral tablet</i>	2	
BENZNIDAZOLE ORAL TABLET	4	PA
<i>chloroquine phosphate oral tablet</i>	2	EDS
COARTEM ORAL TABLET	3	QL (24 EA per 30 days)
DARAPRIM ORAL TABLET	3	
<i>hydroxychloroquine sulfate oral tablet</i>	2	EDS
<i>mefloquine hcl oral tablet</i>	2	EDS
NEBUPENT INHALATION SOLUTION RECONSTITUTED	4	BD
PENTAM INJECTION SOLUTION RECONSTITUTED	4	
<i>primaquine phosphate oral tablet</i>	2	
<i>quinine sulfate oral capsule</i>	2	
Pediculicides/Scabicides		
EURAX EXTERNAL CREAM	3	
EURAX EXTERNAL LOTION	3	
<i>lindane external shampoo</i>	2	
<i>malathion external lotion</i>	2	
<i>permethrin external cream</i>	2	
SKLICE EXTERNAL LOTION	4	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate injection solution</i>	2	BD; AL (Max 64 Years)
<i>benztropine mesylate oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>diphenhydramine hcl injection solution</i>	2	
<i>trihexyphenidyl hcl oral elixir</i>	2	PA; AL (Max 64 Years); EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>trihexyphenidyl hcl oral tablet</i>	2	PA; AL (Max 64 Years); EDS
Antiparkinson Agents		
<i>carbidopa oral tablet</i>	2	EDS
<i>carbidopa-levodopa-entacapone oral tablet</i>	2	EDS
STALEVO 100 ORAL TABLET	4	EDS
STALEVO 125 ORAL TABLET	4	EDS
STALEVO 150 ORAL TABLET	4	EDS
STALEVO 200 ORAL TABLET	4	EDS
STALEVO 50 ORAL TABLET	4	EDS
STALEVO 75 ORAL TABLET	4	EDS
Antiparkinson Agents, Other		
<i>amantadine hcl oral capsule</i>	2	EDS
<i>amantadine hcl oral syrup</i>	2	EDS
<i>amantadine hcl oral tablet</i>	2	EDS
<i>entacapone oral tablet</i>	2	EDS
Dopamine Agonists		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA New Starts
<i>bromocriptine mesylate oral capsule</i>	2	EDS
<i>bromocriptine mesylate oral tablet</i>	2	EDS
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	PA
NEUPRO TRANSDERMAL PATCH 24 HOUR	4	EDS
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour</i>	2	EDS
<i>pramipexole dihydrochloride oral tablet</i>	2	EDS
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>ropinirole hcl oral tablet</i>	2	EDS
Dopamine Precursors/ L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	2	EDS
<i>carbidopa-levodopa oral tablet</i>	2	EDS
<i>carbidopa-levodopa oral tablet dispersible</i>	2	EDS
DUOPA ENTERAL SUSPENSION	4	PA New Starts; EDS
Monoamine Oxidase B (Mao-B) Inhibitors		
<i>rasagiline mesylate oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>selegiline hcl oral capsule</i>	2	EDS
<i>selegiline hcl oral tablet</i>	2	EDS
ZELAPAR ORAL TABLET DISPERSIBLE	3	EDS
Antipsychotics		
1St Generation/Typical		
<i>chlorpromazine hcl injection solution 50 mg/2ml</i>	4	
<i>chlorpromazine hcl oral tablet</i>	2	EDS
<i>fluphenazine decanoate injection solution</i>	2	BD
<i>fluphenazine hcl injection solution</i>	2	BD
<i>fluphenazine hcl oral concentrate</i>	2	EDS
<i>fluphenazine hcl oral elixir</i>	2	EDS
<i>fluphenazine hcl oral tablet</i>	2	EDS
<i>haloperidol decanoate intramuscular solution</i>	2	BD
<i>haloperidol lactate injection solution</i>	2	
<i>haloperidol lactate oral concentrate</i>	2	EDS
<i>haloperidol oral tablet</i>	2	EDS
<i>loxapine succinate oral capsule</i>	2	EDS
<i>perphenazine oral tablet</i>	2	EDS
<i>pimozide oral tablet</i>	2	EDS
<i>prochlorperazine edisylate injection solution</i>	2	
<i>prochlorperazine maleate oral tablet</i>	2	EDS
<i>thioridazine hcl oral tablet</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>thiothixene oral capsule</i>	2	EDS
<i>trifluoperazine hcl oral tablet</i>	2	EDS
2Nd Generation/Atypical		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	5	BD
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	5	BD
<i>aripiprazole oral solution</i>	2	EDS
<i>aripiprazole oral tablet 10 mg, 15 mg, 20 mg, 30 mg</i>	2	EDS
<i>aripiprazole oral tablet 2 mg</i>	2	QL (60 EA per 30 days); EDS
<i>aripiprazole oral tablet 5 mg</i>	2	QL (30 EA per 30 days); EDS
<i>aripiprazole oral tablet dispersible 10 mg</i>	5	QL (60 EA per 30 days)
<i>aripiprazole oral tablet dispersible 15 mg</i>	5	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	5	BD
FANAPT ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG	4	QL (90 EA per 30 days)
FANAPT ORAL TABLET 10 MG	4	QL (60 EA per 30 days)
FANAPT ORAL TABLET 12 MG, 8 MG	4	
FANAPT TITRATION PACK ORAL TABLET	4	QL (8 EA per 28 days)
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	4	BD
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	5	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION 39 MG/0.25ML	3	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION	5	PA New Starts; OBT
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG	5	QL (30 EA per 30 days)
LATUDA ORAL TABLET 60 MG	5	QL (60 EA per 30 days)
LATUDA ORAL TABLET 80 MG	5	
NUPLAZID ORAL TABLET 17 MG	5	PA New Starts
<i>olanzapine intramuscular solution reconstituted</i>	2	BD
<i>olanzapine oral tablet</i>	2	EDS
<i>olanzapine oral tablet dispersible</i>	2	EDS
<i>paliperidone er oral tablet extended release 24 hour</i>	2	EDS
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	2	EDS
<i>quetiapine fumarate oral tablet</i>	2	EDS
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG	5	QL (30 EA per 30 days)
REXULTI ORAL TABLET 4 MG	5	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	BD
<i>risperidone oral solution</i>	2	EDS
<i>risperidone oral tablet</i>	2	EDS
<i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	QL (120 EA per 30 days); EDS
<i>risperidone oral tablet dispersible 4 mg</i>	2	EDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	5	
VRAYLAR ORAL CAPSULE	5	PA New Starts
VRAYLAR ORAL CAPSULE THERAPY PACK	4	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>ziprasidone hcl oral capsule</i>	2	EDS
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	4	BD; EDS
Treatment-Resistant		
<i>clozapine oral tablet</i>	2	
<i>clozapine oral tablet dispersible</i>	2	
VERSACLOZ ORAL SUSPENSION	4	
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral tablet 10 mg, 20 mg</i>	2	EDS
<i>baclofen oral tablet 5 mg</i>	4	EDS
BOTOX INJECTION SOLUTION RECONSTITUTED	4	PA; OBT
<i>dantrolene sodium oral capsule</i>	2	
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	4	PA; OBT
<i>tizanidine hcl oral capsule</i>	2	EDS
<i>tizanidine hcl oral tablet</i>	2	EDS
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 50 UNIT	4	PA; OBT
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
<i>cidofovir intravenous solution</i>	2	HI
<i>ganciclovir sodium intravenous solution reconstituted</i>	2	PA; OBT
PREVYMIS ORAL TABLET	5	PA New Starts
<i>valganciclovir hcl oral solution reconstituted</i>	5	
<i>valganciclovir hcl oral tablet</i>	5	
ZIRGAN OPHTHALMIC GEL	3	
Anti-Hepatitis B (Hbv) Agents		
<i>adefovir dipivoxil oral tablet</i>	5	
BARACLUDGE ORAL SOLUTION	5	
<i>entecavir oral tablet</i>	2	EDS
EPIVIR HBV ORAL SOLUTION	3	EDS
INTRON A INJECTION SOLUTION 10000000 UNIT/ML	5	PA New Starts
INTRON A INJECTION SOLUTION 6000000 UNIT/ML	5	PA New Starts; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT	5	PA New Starts; OBT
<i>lamivudine oral solution</i>	2	EDS
<i>lamivudine oral tablet</i>	2	EDS
REBETOL ORAL SOLUTION	4	PA
RIBASPHERE ORAL CAPSULE	4	PA
RIBASPHERE ORAL TABLET	4	PA
RIBASPHERE RIBAPAK ORAL TABLET THERAPY PACK 200 & 400 MG	5	PA
<i>ribavirin oral capsule</i>	2	PA
<i>ribavirin oral tablet 200 mg</i>	2	PA
<i>tenofovir disoproxil fumarate oral tablet</i>	2	EDS
VEMLIDY ORAL TABLET	5	PA; PA except ID or GI
VIREAD ORAL POWDER	5	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	5	
Anti-Hepatitis C (Hcv) Agents, Direct Acting		
EPCLUSA ORAL TABLET	5	PA
HARVONI ORAL TABLET	5	PA
MAVYRET ORAL TABLET	5	PA
SOVALDI ORAL TABLET	5	PA
VOSEVI ORAL TABLET	5	PA
Anti-Hepatitis C (Hcv) Agents, Others		
EPCLUSA ORAL TABLET	5	PA
HARVONI ORAL TABLET	5	PA
INTRON A INJECTION SOLUTION 6000000 UNIT/ML	5	PA New Starts; OBT
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT	5	PA New Starts; OBT
INTRON A INJECTION SOLUTION RECONSTITUTED 18000000 UNIT, 50000000 UNIT	3	PA New Starts; OBT; EDS
MODERIBA 1200 DOSE PACK ORAL TABLET	4	PA
MODERIBA 800 DOSE PACK ORAL TABLET	4	PA
MODERIBA ORAL TABLET 200 MG	4	PA
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION	5	PA
PEGASYS SUBCUTANEOUS SOLUTION	5	PA
REBETOL ORAL SOLUTION	4	PA
RIBASPHERE ORAL CAPSULE	4	PA

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
RIBASPHERE ORAL TABLET	4	PA
RIBASPHERE RIBAPAK ORAL TABLET 400 MG, 600 MG	5	PA
RIBASPHERE RIBAPAK ORAL TABLET THERAPY PACK 400 & 600 MG	5	PA
<i>ribavirin oral capsule</i>	2	PA
<i>ribavirin oral tablet 200 mg</i>	2	PA
SOVALDI ORAL TABLET	5	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	5	PA New Starts
Antitherpetic Agents		
<i>acyclovir external ointment</i>	2	
<i>acyclovir oral capsule</i>	2	
<i>acyclovir oral suspension</i>	2	
<i>acyclovir oral tablet</i>	2	
<i>acyclovir sodium intravenous solution</i>	2	BD
<i>famciclovir oral tablet</i>	2	
<i>trifluridine ophthalmic solution</i>	2	
<i>valacyclovir hcl oral tablet</i>	2	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
BIKTARVY ORAL TABLET	5	
GENVOYA ORAL TABLET	5	
ISENTRESS HD ORAL TABLET	3	EDS
ISENTRESS ORAL PACKET	3	EDS
ISENTRESS ORAL TABLET	3	EDS
ISENTRESS ORAL TABLET CHEWABLE	3	EDS
STRIBILD ORAL TABLET	5	
TIVICAY ORAL TABLET 10 MG	3	EDS
TIVICAY ORAL TABLET 25 MG, 50 MG	5	
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
COMPLERA ORAL TABLET	5	
EDURANT ORAL TABLET	5	
<i>efavirenz oral capsule</i>	2	EDS
<i>efavirenz oral tablet</i>	2	EDS
INTELENCE ORAL TABLET 100 MG, 200 MG	5	
INTELENCE ORAL TABLET 25 MG	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>nevirapine er oral tablet extended release 24 hour</i>	2	EDS
<i>nevirapine oral tablet</i>	2	EDS
RESCRIPTOR ORAL TABLET	3	EDS
VIRAMUNE ORAL SUSPENSION	3	EDS
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir sulfate oral solution</i>	2	EDS
<i>abacavir sulfate oral tablet</i>	2	EDS
<i>abacavir sulfate-lamivudine oral tablet</i>	4	EDS
<i>abacavir-lamivudine-zidovudine oral tablet</i>	5	
ATRIPLA ORAL TABLET	5	
CIMDUO ORAL TABLET	5	
DESCOVY ORAL TABLET	5	
<i>didanosine oral capsule delayed release 200 mg, 250 mg, 400 mg</i>	2	EDS
EMTRIVA ORAL CAPSULE	3	EDS
EMTRIVA ORAL SOLUTION	3	EDS
JULUCA ORAL TABLET	3	EDS
<i>lamivudine oral solution</i>	2	EDS
<i>lamivudine oral tablet</i>	2	EDS
<i>lamivudine-zidovudine oral tablet</i>	2	EDS
ODEFSEY ORAL TABLET	5	
RETROVIR INTRAVENOUS SOLUTION	3	
<i>stavudine oral capsule</i>	2	EDS
SYMFI LO ORAL TABLET	5	
SYMFI ORAL TABLET	5	
<i>tenofovir disoproxil fumarate oral tablet</i>	2	EDS
TRUVADA ORAL TABLET	5	
VIDEX EC ORAL CAPSULE DELAYED RELEASE 125 MG	3	EDS
VIDEX ORAL SOLUTION RECONSTITUTED 4 GM	3	EDS
VIREAD ORAL POWDER	5	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	5	
ZERIT ORAL SOLUTION RECONSTITUTED	4	EDS
<i>zidovudine oral capsule</i>	2	EDS
<i>zidovudine oral syrup</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>zidovudine oral tablet</i>	2	EDS
Anti-Hiv Agents, Other		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	5	
SELZENTRY ORAL SOLUTION	5	
SELZENTRY ORAL TABLET 150 MG, 300 MG, 75 MG	5	
SELZENTRY ORAL TABLET 25 MG	3	EDS
TRIUMEQ ORAL TABLET	5	
TYBOST ORAL TABLET	3	EDS
Anti-Hiv Agents, Protease Inhibitors		
APTIVUS ORAL CAPSULE	3	EDS
APTIVUS ORAL SOLUTION	3	EDS
<i>atazanavir sulfate oral capsule</i>	4	EDS
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG	3	EDS
EVOTAZ ORAL TABLET	5	
<i>fosamprenavir calcium oral tablet</i>	2	EDS
INVIRASE ORAL CAPSULE	5	
INVIRASE ORAL TABLET	5	
KALETRA ORAL TABLET 100-25 MG	3	EDS
KALETRA ORAL TABLET 200-50 MG	5	
LEXIVA ORAL SUSPENSION	3	EDS
<i>lopinavir-ritonavir oral solution</i>	4	EDS
NORVIR ORAL CAPSULE	3	EDS
NORVIR ORAL PACKET	3	EDS
NORVIR ORAL SOLUTION	3	EDS
PREZCOBIX ORAL TABLET	5	
PREZISTA ORAL SUSPENSION	5	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	5	
REYATAZ ORAL PACKET	5	
<i>ritonavir oral tablet</i>	2	EDS
VIRACEPT ORAL TABLET	5	
Anti-Influenza Agents		
<i>amantadine hcl oral capsule</i>	2	EDS
<i>amantadine hcl oral syrup</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>amantadine hcl oral tablet</i>	2	EDS
<i>oseltamivir phosphate oral capsule</i>	2	
<i>oseltamivir phosphate oral suspension reconstituted</i>	2	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	
<i>rimantadine hcl oral tablet</i>	2	
Anxiolytics		
Anxiolytics, Other		
<i>bupirone hcl oral tablet</i>	2	
<i>doxepin hcl oral capsule</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>doxepin hcl oral concentrate</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>hydroxyzine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>hydroxyzine pamoate oral capsule</i>	2	PA; AL (Max 64 Years)
<i>meprobamate oral tablet</i>	2	PA; AL (Max 64 Years)
<i>oxazepam oral capsule</i>	2	
SILENOR ORAL TABLET 3 MG	3	QL (30 EA per 30 days); EDS
SILENOR ORAL TABLET 6 MG	3	EDS
<i>triazolam oral tablet</i>	2	QL (7 EA per 30 days)
Benzodiazepines		
<i>alprazolam er oral tablet extended release 24 hour</i>	2	
<i>alprazolam oral tablet</i>	2	
<i>alprazolam oral tablet dispersible</i>	2	
<i>clonazepam oral tablet</i>	2	EDS
<i>clonazepam oral tablet dispersible</i>	2	EDS
<i>clorazepate dipotassium oral tablet</i>	2	
DIASTAT ACUDIAL RECTAL GEL	4	
DIASTAT PEDIATRIC RECTAL GEL	4	
<i>diazepam intensol oral concentrate</i>	2	
<i>diazepam oral solution 5 mg/5ml</i>	2	
<i>diazepam oral tablet</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Ssris/ Snris		
<i>duloxetine hcl oral capsule delayed release particles</i>	2	EDS
<i>escitalopram oxalate oral solution</i>	2	EDS
<i>escitalopram oxalate oral tablet</i>	1	EDS
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>paroxetine hcl oral tablet</i>	1	EDS
PAXIL ORAL SUSPENSION	4	EDS
PEXEVA ORAL TABLET	4	EDS
<i>sertraline hcl oral concentrate</i>	2	EDS
<i>sertraline hcl oral tablet</i>	1	EDS
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	2	EDS
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>venlafaxine hcl oral tablet</i>	2	EDS
Bipolar Agents		
Bipolar Agents, Other		
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	4	BD
<i>olanzapine intramuscular solution reconstituted</i>	2	BD
<i>olanzapine oral tablet</i>	2	EDS
<i>olanzapine oral tablet dispersible</i>	2	EDS
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	2	EDS
<i>quetiapine fumarate oral tablet</i>	2	EDS
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	BD
<i>risperidone oral solution</i>	2	EDS
<i>risperidone oral tablet</i>	2	EDS
<i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	QL (120 EA per 30 days); EDS
<i>risperidone oral tablet dispersible 4 mg</i>	2	EDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	5	
VRAYLAR ORAL CAPSULE	5	PA New Starts
VRAYLAR ORAL CAPSULE THERAPY PACK	4	PA New Starts
<i>ziprasidone hcl oral capsule</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	4	BD; EDS
Mood Stabilizers		
<i>carbamazepine er oral capsule extended release 12 hour</i>	2	EDS
<i>carbamazepine er oral tablet extended release 12 hour 100 mg</i>	2	EDS
<i>carbamazepine oral suspension</i>	2	EDS
<i>carbamazepine oral tablet</i>	2	EDS
<i>carbamazepine oral tablet chewable</i>	2	EDS
<i>divalproex sodium er oral tablet extended release 24 hour</i>	2	EDS
<i>divalproex sodium oral capsule delayed release sprinkle</i>	2	EDS
<i>divalproex sodium oral tablet delayed release</i>	2	EDS
<i>epitol oral tablet</i>	2	EDS
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	EDS
LAMICTAL XR ORAL KIT	4	
<i>lamotrigine er oral tablet extended release 24 hour 50 mg</i>	2	EDS
<i>lamotrigine oral tablet</i>	2	EDS
<i>lamotrigine oral tablet chewable</i>	2	EDS
<i>lamotrigine oral tablet dispersible</i>	2	EDS
<i>lamotrigine starter kit-blue oral kit</i>	2	
<i>lamotrigine starter kit-green oral kit</i>	2	
<i>lamotrigine starter kit-orange oral kit</i>	2	
<i>lithium carbonate er oral tablet extended release</i>	2	EDS
<i>lithium carbonate oral capsule</i>	2	EDS
<i>lithium carbonate oral tablet</i>	2	EDS
<i>lithium oral solution</i>	2	EDS
<i>valproate sodium oral solution</i>	2	EDS
<i>valproic acid oral capsule</i>	2	EDS
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose oral tablet</i>	2	EDS
AVANDIA ORAL TABLET 2 MG, 4 MG	4	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	4	ST; EDS
BYDUREON SUBCUTANEOUS PEN-INJECTOR	4	ST; EDS
BYDUREON SUBCUTANEOUS SUSPENSION RECONSTITUTED ER	4	ST; EDS
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST; EDS
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST; EDS
<i>colesevelam hcl oral tablet</i>	4	EDS
CYCLOSET ORAL TABLET	4	EDS
<i>glimepiride oral tablet</i>	1	EDS
<i>glipizide er oral tablet extended release 24 hour</i>	1	EDS
<i>glipizide oral tablet</i>	1	EDS
GLYXAMBI ORAL TABLET	4	ST; EDS
INVOKAMET ORAL TABLET	3	EDS
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
INVOKANA ORAL TABLET	3	EDS
JANUVIA ORAL TABLET	3	EDS
JARDIANCE ORAL TABLET	3	EDS
JENTADUETO ORAL TABLET	3	EDS
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
LAZANDA NASAL SOLUTION 300 MCG/ACT	5	PA; QL (120 EA per 30 days)
<i>metformin hcl er oral tablet extended release 24 hour</i>	1	EDS
<i>metformin hcl oral tablet</i>	1	EDS
<i>miglitol oral tablet</i>	2	EDS
<i>nateglinide oral tablet</i>	2	EDS
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	ST; EDS
<i>pioglitazone hcl oral tablet</i>	2	EDS
<i>repaglinide oral tablet 0.5 mg, 1 mg</i>	2	QL (150 EA per 30 days); EDS
<i>repaglinide oral tablet 2 mg</i>	2	EDS
RIOMET ORAL SOLUTION	4	EDS
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; EDS
SYNJARDY ORAL TABLET	3	EDS
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
TANZEUM SUBCUTANEOUS PEN-INJECTOR	4	ST; EDS
<i>tolazamide oral tablet</i>	4	EDS
<i>tolbutamide oral tablet</i>	4	EDS
TRADJENTA ORAL TABLET	3	EDS
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	ST; EDS
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	ST; EDS
WELCHOL ORAL PACKET	4	EDS
WELCHOL ORAL TABLET	4	EDS
Blood Glucose Regulators		
<i>glipizide-metformin hcl oral tablet</i>	1	EDS
JANUMET ORAL TABLET	3	EDS
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
JENTADUETO ORAL TABLET	3	EDS
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
<i>repaglinide-metformin hcl oral tablet</i>	2	EDS
Glycemic Agents		
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	3	
<i>glucagon emergency injection kit</i>	2	
KORLYM ORAL TABLET	3	PA New Starts; EDS
PROGLYCEM ORAL SUSPENSION	5	
Insulins		
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	3	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	3	
<i>cvs gauze sterile pad 2"x2"</i>	2	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	3	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	3	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	3	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	3	
HUMALOG SUBCUTANEOUS SOLUTION	3	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	3	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	EDS
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	3	EDS
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	EDS
HUMULIN N SUBCUTANEOUS SUSPENSION	3	EDS
HUMULIN R INJECTION SOLUTION	3	EDS
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	3	EDS
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS
LANTUS SUBCUTANEOUS SOLUTION	3	EDS
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML	3	
RELI-ON INSULIN SYRINGE 29G 0.3 ML	3	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	EDS
Blood Products/ Modifiers/ Volume Expanders		
Anticoagulants		
BEVYXXA ORAL CAPSULE	4	PA; EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
COUMADIN ORAL TABLET	4	EDS
ELIQUIS ORAL TABLET	3	EDS
ELIQUIS STARTER PACK ORAL TABLET	3	EDS
<i>enoxaparin sodium injection solution</i>	2	
<i>enoxaparin sodium subcutaneous solution</i>	2	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	5	
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	2	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	3	
<i>heparin (porcine) in d5w intravenous solution</i>	2	
<i>heparin sod (porcine) in d5w intravenous solution 100 unit/ml</i>	2	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	2	
<i>jantoven oral tablet</i>	2	EDS
PRADAXA ORAL CAPSULE	3	EDS
SAVAYSA ORAL TABLET	4	EDS
<i>warfarin sodium oral tablet</i>	1	EDS
XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	3	EDS
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	3	
Blood Formation Modifiers		
<i>anagrelide hcl oral capsule</i>	2	EDS
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML	3	PA; OBT
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	3	PA; OBT
DOPTELET ORAL TABLET	5	PA
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	3	PA; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	OBT
LEUKINE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA; OBT
MOZOBIL SUBCUTANEOUS SOLUTION	4	PA; OBT
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; OBT
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	5	OBT
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	5	OBT
PROCRIT INJECTION SOLUTION	3	PA; OBT
PROMACTA ORAL TABLET	5	PA
TAVALISSE ORAL TABLET	5	PA
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	5	OBT
Hemostasis Agents		
<i>tranexamic acid oral tablet</i>	2	
Platelet Modifying Agents		
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	2	EDS
BRILINTA ORAL TABLET	3	EDS
<i>cilostazol oral tablet</i>	2	EDS
<i>clopidogrel bisulfate oral tablet 75 mg</i>	1	EDS
<i>dipyridamole oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>prasugrel hcl oral tablet</i>	2	EDS
ZONTIVITY ORAL TABLET	4	PA; EDS
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet</i>	2	EDS
<i>clonidine hcl transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr</i>	2	QL (4 EA per 28 days); EDS
<i>clonidine hcl transdermal patch weekly 0.3 mg/24hr</i>	2	EDS
<i>guanfacine hcl oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>methyl dopa oral tablet</i>	2	PA; AL (Max 64 Years); EDS
METHYLDOPATE HCL INTRAVENOUS SOLUTION	4	
<i>midodrine hcl oral tablet</i>	2	
NORTHERA ORAL CAPSULE	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Alpha-Adrenergic Blocking Agents		
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
<i>doxazosin mesylate oral tablet</i>	2	EDS
<i>prazosin hcl oral capsule</i>	2	EDS
<i>terazosin hcl oral capsule</i>	2	EDS
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil oral tablet</i>	2	EDS
EDARBI ORAL TABLET	4	EDS
ENTRESTO ORAL TABLET	3	EDS
<i>eprosartan mesylate oral tablet</i>	2	EDS
<i>irbesartan oral tablet</i>	1	EDS
<i>losartan potassium oral tablet</i>	1	EDS
<i>olmesartan medoxomil oral tablet</i>	1	EDS
<i>olmesartan medoxomil-hctz oral tablet</i>	2	EDS
<i>telmisartan oral tablet</i>	2	EDS
<i>valsartan oral tablet</i>	1	EDS
Angiotensin-Converting Enzyme (Ace) Inhibitors		
<i>benazepril hcl oral tablet</i>	1	EDS
<i>captopril oral tablet</i>	2	EDS
<i>enalapril maleate oral tablet</i>	1	EDS
<i>fosinopril sodium oral tablet</i>	1	EDS
<i>lisinopril oral tablet</i>	1	EDS
<i>moexipril hcl oral tablet</i>	2	EDS
<i>perindopril erbumine oral tablet</i>	2	EDS
<i>quinapril hcl oral tablet</i>	1	EDS
<i>ramipril oral capsule</i>	1	EDS
<i>trandolapril oral tablet</i>	2	EDS
Antiarrhythmics		
<i>amiodarone hcl intravenous solution 150 mg/3ml</i>	2	
<i>amiodarone hcl oral tablet</i>	2	EDS
<i>disopyramide phosphate oral capsule</i>	2	PA; AL (Max 64 Years); EDS
<i>dofetilide oral capsule</i>	2	EDS
<i>flecainide acetate oral tablet</i>	2	EDS
<i>mexiletine hcl oral capsule</i>	2	EDS
MULTAQ ORAL TABLET	4	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	PA; AL (Max 64 Years); EDS
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	2	EDS
<i>propafenone hcl er oral capsule extended release 12 hour</i>	2	EDS
<i>propafenone hcl oral tablet</i>	2	EDS
<i>quinidine gluconate er oral tablet extended release</i>	2	EDS
<i>quinidine sulfate oral tablet</i>	2	EDS
<i>sorine oral tablet</i>	2	EDS
<i>sotalol hcl (af) oral tablet 120 mg</i>	2	EDS
<i>sotalol hcl oral tablet 160 mg, 240 mg, 80 mg</i>	2	EDS
SOTYLIZE ORAL SOLUTION	4	EDS
TIKOSYN ORAL CAPSULE	4	EDS
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral capsule</i>	2	EDS
<i>atenolol oral tablet</i>	1	EDS
<i>betaxolol hcl oral tablet</i>	2	EDS
<i>bisoprolol fumarate oral tablet</i>	1	EDS
BYSTOLIC ORAL TABLET	4	EDS
<i>carvedilol oral tablet</i>	1	EDS
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	2	EDS
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS
<i>labetalol hcl oral tablet</i>	2	EDS
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	1	EDS
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	1	EDS
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	2	EDS
<i>pindolol oral tablet</i>	2	EDS
<i>propranolol hcl er oral capsule extended release 24 hour</i>	2	EDS
<i>propranolol hcl oral solution</i>	2	EDS
<i>propranolol hcl oral tablet</i>	1	EDS
<i>timolol maleate oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Calcium Channel Blocking Agents		
<i>afeditab cr oral tablet extended release 24 hour</i>	2	EDS
<i>amlodipine besylate oral tablet</i>	1	EDS
CARDENE IV INTRAVENOUS SOLUTION 20-0.86 MG/200ML-%, 40-0.83 MG/200ML-%	3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	4	EDS
<i>cartia xt oral capsule extended release 24 hour</i>	2	EDS
<i>diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg</i>	2	EDS
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	2	EDS
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	2	EDS
<i>diltiazem hcl oral tablet</i>	2	EDS
<i>dilt-xr oral capsule extended release 24 hour</i>	2	EDS
<i>felodipine er oral tablet extended release 24 hour</i>	2	EDS
<i>isradipine oral capsule</i>	2	EDS
<i>matzim la oral tablet extended release 24 hour</i>	2	EDS
NICARDIPINE HCL INTRAVENOUS SOLUTION	3	
<i>nicardipine hcl oral capsule</i>	2	EDS
<i>nifedipine er oral tablet extended release 24 hour</i>	2	EDS
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	2	EDS
<i>nifedipine oral capsule</i>	2	PA; AL (Max 64 Years); EDS
<i>nimodipine oral capsule</i>	4	EDS
<i>nisoldipine er oral tablet extended release 24 hour 17 mg, 25.5 mg, 34 mg, 8.5 mg</i>	2	EDS
<i>nisoldipine er oral tablet extended release 24 hour 20 mg, 30 mg, 40 mg</i>	4	EDS
NYMALIZE ORAL SOLUTION 30 MG/10ML	4	PA
<i>taztia xt oral capsule extended release 24 hour</i>	2	EDS
<i>verapamil hcl er oral capsule extended release 24 hour</i>	2	EDS
<i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i>	2	EDS
<i>verapamil hcl oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Cardiovascular Agents		
ALDACTAZIDE ORAL TABLET 50-50 MG	3	EDS
<i>amiloride-hydrochlorothiazide oral tablet</i>	1	EDS
<i>amlodipine besy-benazepril hcl oral capsule</i>	2	EDS
<i>amlodipine-olmesartan oral tablet</i>	2	EDS
<i>amlodipine-valsartan-hctz oral tablet</i>	2	EDS
<i>atenolol-chlorthalidone oral tablet</i>	1	EDS
<i>benazepril-hydrochlorothiazide oral tablet</i>	1	EDS
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	1	EDS
BYVALSON ORAL TABLET	4	EDS
<i>captopril-hydrochlorothiazide oral tablet</i>	2	EDS
DEMSEER ORAL CAPSULE	4	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
EDARBYCLOR ORAL TABLET	4	EDS
<i>enalapril-hydrochlorothiazide oral tablet</i>	1	EDS
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg</i>	2	EDS
<i>ezetimibe-simvastatin oral tablet 10-80 mg</i>	2	PA New Starts; EDS
<i>fosinopril sodium-hctz oral tablet</i>	1	EDS
<i>irbesartan-hydrochlorothiazide oral tablet</i>	1	EDS
<i>lisinopril-hydrochlorothiazide oral tablet</i>	1	EDS
<i>losartan potassium-hctz oral tablet</i>	1	EDS
<i>methyldopa-hydrochlorothiazide oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>metoprolol-hydrochlorothiazide oral tablet</i>	2	EDS
<i>moexipril-hydrochlorothiazide oral tablet</i>	2	EDS
<i>nadolol-bendroflumethiazide oral tablet</i>	2	EDS
<i>olmesartan medoxomil-hctz oral tablet</i>	2	EDS
<i>olmesartan-amlodipine-hctz oral tablet</i>	2	EDS
<i>propranolol-hctz oral tablet</i>	2	EDS
<i>quinapril-hydrochlorothiazide oral tablet</i>	1	EDS
<i>spironolactone-hctz oral tablet</i>	1	EDS
TEKTURNA HCT ORAL TABLET	4	ST; EDS
<i>telmisartan-hctz oral tablet</i>	2	EDS
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	1	EDS
<i>triamterene-hctz oral tablet</i>	1	EDS
<i>valsartan-hydrochlorothiazide oral tablet</i>	1	EDS
Cardiovascular Agents, Other		
CORLANOR ORAL TABLET	4	PA; EDS
<i>digitek oral tablet 125 mcg</i>	2	QL (30 EA per 30 days); EDS
<i>digitek oral tablet 250 mcg</i>	2	PA; EDS
<i>digox oral tablet 125 mcg</i>	2	QL (30 EA per 30 days); EDS
<i>digox oral tablet 250 mcg</i>	2	PA; EDS
<i>digoxin injection solution</i>	2	PA
<i>digoxin oral solution</i>	2	EDS
<i>digoxin oral tablet 125 mcg</i>	2	QL (30 EA per 30 days); EDS
<i>digoxin oral tablet 250 mcg</i>	2	PA; EDS
LANOXIN ORAL TABLET 62.5 MCG	4	QL (30 EA per 30 days); EDS
<i>pentoxifylline er oral tablet extended release</i>	2	EDS
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	EDS
TEKTRNA ORAL TABLET	4	ST; EDS
UPTRAVI ORAL TABLET	5	PA
UPTRAVI ORAL TABLET THERAPY PACK	5	PA
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide er oral capsule extended release 12 hour</i>	2	EDS
<i>acetazolamide oral tablet</i>	2	EDS
<i>acetazolamide sodium injection solution reconstituted</i>	2	
KEVEYIS ORAL TABLET	5	PA
<i>methazolamide oral tablet</i>	2	EDS
Diuretics, Loop		
<i>bumetanide injection solution</i>	2	
<i>bumetanide oral tablet</i>	2	EDS
<i>ethacrynic acid oral tablet</i>	5	
<i>furosemide injection solution</i>	2	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	2	EDS
<i>furosemide oral tablet</i>	1	EDS
<i>torseamide oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Diuretics, Potassium-Sparing		
<i>amiloride hcl oral tablet</i>	1	EDS
DYRENIUM ORAL CAPSULE	4	EDS
<i>eplerenone oral tablet</i>	2	EDS
<i>spironolactone oral tablet</i>	1	EDS
Diuretics, Thiazide		
<i>chlorothiazide oral tablet</i>	1	EDS
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	EDS
DIURIL ORAL SUSPENSION	3	EDS
<i>hydrochlorothiazide oral capsule</i>	1	EDS
<i>hydrochlorothiazide oral tablet</i>	1	EDS
<i>indapamide oral tablet</i>	1	EDS
<i>irbesartan-hydrochlorothiazide oral tablet</i>	1	EDS
<i>methyclothiazide oral tablet</i>	2	EDS
<i>metolazone oral tablet</i>	1	EDS
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate oral tablet</i>	2	EDS
<i>fenofibric acid oral capsule delayed release</i>	2	EDS
<i>fenofibric acid oral tablet</i>	2	EDS
<i>gemfibrozil oral tablet</i>	2	EDS
Dyslipidemics, Hmg Coa Reductase Inhibitors		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
<i>atorvastatin calcium oral tablet</i>	1	EDS
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	2	EDS
<i>fluvastatin sodium oral capsule</i>	2	EDS
LIVALO ORAL TABLET	4	EDS
<i>lovastatin oral tablet</i>	1	EDS
<i>pravastatin sodium oral tablet</i>	1	EDS
<i>rosuvastatin calcium oral tablet</i>	1	EDS
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	EDS
<i>simvastatin oral tablet 80 mg</i>	2	PA New Starts; EDS
Dyslipidemics, Other		
<i>cholestyramine light oral powder</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>cholestyramine oral packet</i>	2	EDS
<i>colesevelam hcl oral tablet</i>	4	EDS
<i>colestipol hcl oral packet</i>	2	EDS
<i>colestipol hcl oral tablet</i>	2	EDS
<i>ezetimibe oral tablet</i>	2	EDS
JUXTAPID ORAL CAPSULE	5	PA New Starts
KYNAMRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	2	EDS
<i>niacor oral tablet</i>	2	
<i>omega-3-acid ethyl esters oral capsule</i>	4	EDS
PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
<i>prevalite oral packet</i>	2	EDS
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
VASCEPA ORAL CAPSULE	3	EDS
WELCHOL ORAL PACKET	4	EDS
WELCHOL ORAL TABLET	4	EDS
Vasodilators, Direct-Acting Arterial		
BIDIL ORAL TABLET	4	EDS
<i>hydralazine hcl oral tablet</i>	2	EDS
<i>minoxidil oral tablet</i>	2	EDS
Vasodilators, Direct-Acting Arterial/ Venous		
ISORDIL TITRADOSE ORAL TABLET 40 MG	4	EDS
<i>isosorbide dinitrate er oral tablet extended release</i>	2	EDS
<i>isosorbide dinitrate oral tablet</i>	2	EDS
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	2	EDS
<i>isosorbide mononitrate oral tablet</i>	2	EDS
MINITRAN TRANSDERMAL PATCH 24 HOUR	4	EDS
NITRO-BID TRANSDERMAL OINTMENT	4	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	4	
<i>nitroglycerin sublingual tablet sublingual</i>	2	EDS
<i>nitroglycerin transdermal patch 24 hour</i>	2	EDS
<i>nitroglycerin translingual solution</i>	2	EDS
RECTIV RECTAL OINTMENT	4	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine-dextroamphetamine oral capsule extended release 24 hour</i>	2	EDS
<i>amphetamine-dextroamphetamine oral tablet</i>	2	EDS
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	2	EDS
<i>dextroamphetamine sulfate oral tablet</i>	2	EDS
<i>methamphetamine hcl oral tablet</i>	2	PA; AL (Max 64 Years); EDS
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE	4	EDS
VYVANSE ORAL CAPSULE	4	EDS
VYVANSE ORAL TABLET CHEWABLE	4	EDS
ZENZEDI ORAL TABLET	4	EDS
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS
<i>atomoxetine hcl oral capsule</i>	2	EDS
<i>clonidine hcl er oral tablet extended release 12 hour</i>	2	EDS
DAYTRANA TRANSDERMAL PATCH	4	EDS
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour</i>	2	EDS
<i>dexmethylphenidate hcl oral tablet</i>	2	EDS
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	2	PA; AL (Max 64 Years); EDS
<i>methylphenidate hcl er (cd) oral capsule extended release</i>	2	EDS
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 36 mg, 54 mg</i>	2	EDS
<i>methylphenidate hcl er oral tablet extended release 72 mg</i>	4	EDS
<i>methylphenidate hcl oral solution</i>	2	EDS
<i>methylphenidate hcl oral tablet</i>	2	EDS
<i>methylphenidate hcl oral tablet chewable</i>	2	EDS
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	4	EDS
Central Nervous System, Other		
AUSTEDO ORAL TABLET	5	PA New Starts
<i>estazolam oral tablet</i>	2	
HORIZANT ORAL TABLET EXTENDED RELEASE 600 MG	4	EDS
NUDEXTA ORAL CAPSULE	3	PA New Starts; EDS
RADICAVA INTRAVENOUS SOLUTION	5	PA New Starts
<i>riluzole oral tablet</i>	2	EDS
<i>tetrabenazine oral tablet</i>	5	PA New Starts
VECAMYL ORAL TABLET	4	PA; EDS
Fibromyalgia Agents		
<i>duloxetine hcl oral capsule delayed release particles</i>	2	EDS
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
LYRICA ORAL CAPSULE	3	EDS
LYRICA ORAL SOLUTION	3	EDS
SAVELLA ORAL TABLET	3	EDS
SAVELLA TITRATION PACK ORAL	3	
Multiple Sclerosis Agents		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	5	PA
AUBAGIO ORAL TABLET	5	
AVONEX INTRAMUSCULAR KIT	5	
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	5	
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	5	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	5	
GILENYA ORAL CAPSULE 0.5 MG	5	
<i>glatiramer acetate subcutaneous solution prefilled syringe</i>	5	
<i>glatopa subcutaneous solution prefilled syringe</i>	5	
<i>mitoxantrone hcl intravenous concentrate 25 mg/12.5ml</i>	2	PA; OBT
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
PLEGRIDY SUBCUTANEOUS SOLUTION PEN- INJECTOR	5	
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
TECFIDERA ORAL	5	
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG	5	QL (60 EA per 30 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE 240 MG	5	
TYSABRI INTRAVENOUS CONCENTRATE	5	PA; OBT
Dental And Oral Agents		
Dental And Oral Agents		
<i>cevimeline hcl oral capsule</i>	2	EDS
<i>chlorhexidine gluconate mouth/throat solution</i>	2	
CUVPOSA ORAL SOLUTION	4	EDS
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	EDS
<i>doxycycline monohydrate oral tablet 150 mg, 50 mg, 75 mg</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED	4	
<i>minocycline hcl er oral tablet extended release 24 hour 115 mg, 135 mg, 45 mg, 65 mg, 90 mg</i>	2	
<i>minocycline hcl oral capsule</i>	2	
<i>minocycline hcl oral tablet</i>	2	
ORACEA ORAL CAPSULE DELAYED RELEASE	4	
<i>periogard mouth/throat solution</i>	2	
<i>pilocarpine hcl oral tablet</i>	2	EDS
<i>triamcinolone acetonide mouth/throat paste</i>	2	
VIBRAMYCIN ORAL SYRUP	4	
Dermatological Agents		
Dermatological Agents		
ABSORICA ORAL CAPSULE	5	
ACITRETIN ORAL CAPSULE	4	PA New Starts
<i>adapalene external cream</i>	4	
<i>adapalene external gel 0.1 %</i>	2	
<i>adapalene external gel 0.3 %</i>	4	
<i>adapalene-benzoyl peroxide external gel</i>	2	
<i>ammonium lactate external cream</i>	2	
<i>ammonium lactate external lotion</i>	2	
<i>amnesteem oral capsule</i>	2	
APEXICON E EXTERNAL CREAM	4	
<i>avita external cream</i>	2	
<i>avita external gel</i>	2	
AZELEX EXTERNAL CREAM	3	
<i>betamethasone dipropionate external lotion</i>	2	
<i>calcipotriene external cream</i>	2	
<i>calcipotriene external ointment</i>	2	
<i>calcipotriene external solution</i>	2	
<i>calcipotriene-betameth diprop external ointment</i>	4	
<i>calcitriol external ointment</i>	2	
CARAC EXTERNAL CREAM	5	
<i>claravis oral capsule 10 mg</i>	2	
<i>clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>clobetasol propionate external liquid</i>	2	
<i>clotrimazole-betamethasone external cream</i>	2	
<i>clotrimazole-betamethasone external lotion</i>	2	
CONDYLOX EXTERNAL GEL	3	
CORTISPORIN EXTERNAL CREAM	4	
CORTISPORIN EXTERNAL OINTMENT	4	
COSENTYX 300 DOSE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
COSENTYX SENSOREADY 300 DOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
<i>dapsone external gel</i>	2	
<i>diclofenac sodium transdermal gel 1 %</i>	2	PA
<i>diclofenac sodium transdermal gel 3 %</i>	4	PA
<i>doxycycline hyclate oral capsule 50 mg</i>	2	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	2	
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg</i>	2	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; OBT
ELIDEL EXTERNAL CREAM	4	
EUCRISA EXTERNAL OINTMENT	4	PA; EDS
FABIOR EXTERNAL FOAM	3	PA New Starts
FINACEA EXTERNAL FOAM	4	
FINACEA EXTERNAL GEL	4	
<i>fluocinonide external cream 0.1 %</i>	2	
<i>fluorouracil external cream 0.5 %</i>	5	
<i>fluorouracil external cream 5 %</i>	2	
<i>fluorouracil external solution</i>	2	
<i>fluorouracil intravenous solution 5 gm/100ml</i>	2	PA New Starts; OBT
<i>fluticasone propionate external cream</i>	2	
<i>fluticasone propionate external ointment</i>	2	
<i>imiquimod external cream</i>	2	PA New Starts
<i>isotretinoin oral capsule</i>	2	
KERYDIN EXTERNAL SOLUTION	4	PA
LOCOID EXTERNAL LOTION	4	
<i>methoxsalen rapid oral capsule</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
MIRVASO EXTERNAL GEL	4	ST
<i>myorisan oral capsule</i>	2	
NEO-SYNALAR EXTERNAL CREAM	4	
<i>neuac external gel</i>	2	
<i>nystatin-triamcinolone external cream</i>	2	
<i>nystatin-triamcinolone external ointment</i>	2	
ONEXTON EXTERNAL GEL	4	
<i>oxiconazole nitrate external cream</i>	2	EDS
PICATO EXTERNAL GEL	4	
<i>podofilox external solution</i>	2	
<i>prednicarbate external cream</i>	2	
PRUDOXIN EXTERNAL CREAM	4	
REGRANEX EXTERNAL GEL	4	
SANTYL EXTERNAL OINTMENT	3	
<i>selenium sulfide external lotion</i>	2	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
SOOLANTRA EXTERNAL CREAM	4	
STELARA INTRAVENOUS SOLUTION	5	
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	5	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
TACLONEX EXTERNAL SUSPENSION	5	
<i>tacrolimus external ointment</i>	2	
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
<i>tazarotene external cream</i>	2	PA New Starts
TAZORAC EXTERNAL CREAM	3	PA New Starts
TAZORAC EXTERNAL GEL	3	PA New Starts
TOLAK EXTERNAL CREAM	4	
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
<i>tretinoin external cream</i>	2	
<i>tretinoin external gel</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>tretinoin microsphere external gel</i>	2	
<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	2	
TRIANEX EXTERNAL OINTMENT	4	
VALCHLOR EXTERNAL GEL	5	PA New Starts
VECTICAL EXTERNAL OINTMENT	3	
<i>zenatane oral capsule</i>	2	
ZONALON EXTERNAL CREAM	4	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/ Mineral Replacement		
CARBAGLU ORAL TABLET	5	PA New Starts
ISOLYTE-S INTRAVENOUS SOLUTION	4	HI
<i>klor-con 10 oral tablet extended release</i>	2	EDS
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	2	EDS
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	4	EDS
<i>klor-con m20 oral tablet extended release</i>	2	EDS
<i>klor-con oral tablet extended release</i>	2	EDS
<i>klor-con sprinkle oral capsule extended release</i>	2	EDS
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ, 8 MEQ	4	EDS
<i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>	2	
NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION	4	HI
OSMOPREP ORAL TABLET	4	
<i>physiolyte irrigation solution</i>	2	
<i>physiosol irrigation irrigation solution</i>	2	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	4	HI
PLASMA-LYTE A INTRAVENOUS SOLUTION	4	HI
<i>potassium chloride crys er oral tablet extended release</i>	2	EDS
<i>potassium chloride er oral capsule extended release</i>	2	EDS
<i>potassium chloride er oral tablet extended release</i>	2	EDS
<i>potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%</i>	2	HI

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>potassium chloride intravenous solution 10 meq/100ml, 20 meq/100ml, 40 meq/100ml</i>	2	HI
<i>potassium chloride intravenous solution 2 meq/ml</i>	2	
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	2	EDS
<i>sodium chloride injection solution 2.5 meq/ml</i>	2	
<i>sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %</i>	2	
<i>sodium chloride irrigation solution 0.9 %</i>	2	
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	2	EDS
SUPREP BOWEL PREP KIT ORAL SOLUTION	4	
Electrolyte/Mineral/Metal Modifiers		
AMINOSYN/ELECTROLYTES INTRAVENOUS SOLUTION 7 %	3	BD; HI
AMINOSYN-RF INTRAVENOUS SOLUTION	3	BD; HI
AURYXIA ORAL TABLET	4	EDS
CHEMET ORAL CAPSULE	3	
DEPEN TITRATABS ORAL TABLET	5	
EXJADE ORAL TABLET SOLUBLE	5	PA
FERRIPROX ORAL SOLUTION	5	PA New Starts
FERRIPROX ORAL TABLET	5	PA New Starts
FREAMINE HBC INTRAVENOUS SOLUTION	3	BD; HI
JADENU ORAL TABLET	5	PA
JADENU SPRINKLE ORAL PACKET	5	PA
<i>kionex oral suspension</i>	2	
<i>klor-con oral packet 20 meq</i>	2	EDS
PLENAMINE INTRAVENOUS SOLUTION	3	HI
SAMSCA ORAL TABLET	5	PA
<i>sodium polystyrene sulfonate oral powder</i>	2	
<i>sps oral suspension</i>	2	EDS
<i>trientine hcl oral capsule</i>	5	PA New Starts
VELPHORO ORAL TABLET CHEWABLE	5	
VELTASSA ORAL PACKET	3	
Electrolytes/Minerals/Metals/Vitamins		
AMINOSYN II INTRAVENOUS SOLUTION 10 %, 8.5 %	3	BD; HI

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
AMINOSYN II/ELECTROLYTES INTRAVENOUS SOLUTION	3	BD; HI
AMINOSYN/ELECTROLYTES INTRAVENOUS SOLUTION 8.5 %	3	BD; HI
AMINOSYN-HBC INTRAVENOUS SOLUTION	3	BD; HI
AMINOSYN-PF INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (2.75/10) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (4.25/25) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX E/DEXTROSE (5/25) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (4.25/20) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (4.25/25) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	3	BD; HI
CLINIMIX/DEXTROSE (5/25) INTRAVENOUS SOLUTION	3	BD; HI
CLINISOL SF INTRAVENOUS SOLUTION	3	BD; HI
<i>dextrose in lactated ringers intravenous solution</i>	2	HI

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>dextrose intravenous solution 10 %, 5 %</i>	2	HI
<i>dextrose-nacl intravenous solution 10-0.2 %, 10-0.45 %, 2.5-0.45 %, 5-0.2 %, 5-0.225 %, 5-0.33 %, 5-0.45 %, 5-0.9 %</i>	2	HI
<i>fomepizole intravenous solution 1.5 gm/1.5ml</i>	2	
HEPATAMINE INTRAVENOUS SOLUTION	3	BD; HI
<i>intralipid intravenous emulsion 20 %</i>	2	BD; HI
INTRALIPID INTRAVENOUS EMULSION 30 %	4	BD; HI
IONOSOL-MB IN D5W INTRAVENOUS SOLUTION	4	HI
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	4	HI
<i>kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.33 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%</i>	2	HI
<i>kcl-lactated ringers-d5w intravenous solution</i>	2	HI
<i>lactated ringers intravenous solution</i>	2	HI
<i>lactated ringers irrigation solution</i>	2	
<i>levocarnitine oral solution</i>	2	EDS
<i>levocarnitine oral tablet</i>	2	EDS
NEPHRAMINE INTRAVENOUS SOLUTION	3	BD; HI
<i>normosol-m in d5w intravenous solution</i>	2	HI
<i>normosol-r in d5w intravenous solution</i>	2	HI
<i>nutrilipid intravenous emulsion 20 %</i>	2	BD
PLENAMINE INTRAVENOUS SOLUTION	3	BD; HI
<i>potassium chloride in dextrose intravenous solution 20-5 meq/l-%, 40-5 meq/l-%</i>	2	HI
PREMASOL INTRAVENOUS SOLUTION	3	BD; HI
PRENATAL ORAL TABLET 27-1 MG	3	EDS
PROCALAMINE INTRAVENOUS SOLUTION	3	BD
PROSOL INTRAVENOUS SOLUTION	3	BD; HI
<i>ringers intravenous solution</i>	2	
<i>ringers irrigation irrigation solution</i>	2	
<i>sodium lactate intravenous solution 5 meq/ml</i>	2	
<i>sterile water for irrigation irrigation solution</i>	2	
<i>tpn electrolytes intravenous solution</i>	2	
TRAVASOL INTRAVENOUS SOLUTION	3	BD

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
TROPHAMINE INTRAVENOUS SOLUTION	3	BD
Vitamins		
<i>doxercalciferol intravenous solution</i>	2	
<i>doxercalciferol oral capsule</i>	2	ST; EDS
<i>klor-con 10 oral tablet extended release</i>	2	EDS
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	2	EDS
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	4	EDS
<i>klor-con m20 oral tablet extended release</i>	2	EDS
<i>klor-con oral tablet extended release</i>	2	EDS
<i>klor-con sprinkle oral capsule extended release</i>	2	EDS
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
<i>atropine sulfate injection solution prefilled syringe 0.25 mg/5ml</i>	2	
<i>dicyclomine hcl intramuscular solution</i>	2	EDS
<i>dicyclomine hcl oral capsule</i>	2	
<i>dicyclomine hcl oral solution</i>	2	
<i>dicyclomine hcl oral tablet</i>	2	
<i>glycopyrrolate injection solution 4 mg/20ml</i>	2	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<i>methscopolamine bromide oral tablet</i>	2	
<i>propantheline bromide oral tablet</i>	2	
<i>scopolamine transdermal patch 72 hour</i>	2	EDS
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	4	
Gastrointestinal Agents		
<i>amoxicill-clarithro-lansopraz oral</i>	4	
OMECLAMOX-PAK ORAL	4	
PYLERA ORAL CAPSULE	4	EDS
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	5	
UCERIS RECTAL FOAM	4	
Gastrointestinal Agents, Other		
CHENODAL ORAL TABLET	4	PA
CHOLBAM ORAL CAPSULE	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>diphenoxylate-atropine oral liquid</i>	2	
<i>diphenoxylate-atropine oral tablet</i>	2	
GATTEX SUBCUTANEOUS KIT	5	PA New Starts
<i>loperamide hcl oral capsule</i>	2	
<i>metoclopramide hcl injection solution</i>	2	PA New Starts; AL (Max 64 Years)
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	2	
<i>metoclopramide hcl oral tablet</i>	2	
<i>metoclopramide hcl oral tablet dispersible</i>	2	
MOVANTIK ORAL TABLET	4	
MYTESI ORAL TABLET DELAYED RELEASE	4	PA New Starts; EDS
OCALIVA ORAL TABLET	5	PA
<i>proctozone-hc rectal cream</i>	2	
RELISTOR ORAL TABLET	3	
RELISTOR SUBCUTANEOUS SOLUTION	5	
SYMPROIC ORAL TABLET	4	PA
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	5	
UCERIS RECTAL FOAM	4	
<i>ursodiol oral capsule</i>	2	EDS
<i>ursodiol oral tablet</i>	2	EDS
XERMELO ORAL TABLET	5	PA
XIFAXAN ORAL TABLET 200 MG	4	QL (9 EA per 3 days)
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; EDS
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl oral solution</i>	2	EDS
<i>cimetidine oral tablet 200 mg</i>	2	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	2	EDS
<i>famotidine intravenous solution 20 mg/2ml</i>	2	
<i>famotidine oral suspension reconstituted</i>	2	EDS
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	EDS
<i>famotidine premixed intravenous solution</i>	2	HI
<i>nizatidine oral capsule</i>	2	EDS
<i>nizatidine oral solution</i>	2	EDS
<i>ranitidine hcl oral capsule</i>	2	EDS
<i>ranitidine hcl oral syrup 75 mg/5ml</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	1	EDS
Irritable Bowel Syndrome Agents		
<i>alosetron hcl oral tablet</i>	2	EDS
AMITIZA ORAL CAPSULE	4	EDS
<i>budesonide er oral tablet extended release 24 hour</i>	5	
<i>budesonide oral capsule delayed release particles</i>	4	
DELZICOL ORAL CAPSULE DELAYED RELEASE	4	EDS
GIAZO ORAL TABLET	4	
LINZESS ORAL CAPSULE 145 MCG, 72 MCG	3	QL (30 EA per 30 days); EDS
LINZESS ORAL CAPSULE 290 MCG	3	EDS
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	5	
UCERIS RECTAL FOAM	4	
VIBERZI ORAL TABLET	4	PA; EDS
Laxatives		
CLENPIQ ORAL SOLUTION	4	
<i>constulose oral solution</i>	2	EDS
<i>enulose oral solution</i>	2	EDS
<i>gavilyte-c oral solution reconstituted</i>	2	
<i>gavilyte-g oral solution reconstituted</i>	2	
<i>gavilyte-n with flavor pack oral solution reconstituted</i>	2	
<i>generlac oral solution</i>	2	EDS
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	4	
KRISTALOSE ORAL PACKET	4	EDS
<i>lactulose oral solution 10 gm/15ml</i>	2	EDS
MOVIPREP ORAL SOLUTION RECONSTITUTED	4	
<i>peg 3350/electrolytes oral solution reconstituted</i>	2	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	2	
<i>peg-3350/electrolytes oral solution reconstituted</i>	2	
<i>polyethylene glycol 3350 oral powder</i>	2	
PREPOPIK ORAL PACKET	4	EDS
<i>trilyte oral solution reconstituted</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Protectants		
CARAFATE ORAL SUSPENSION	3	EDS
<i>misoprostol oral tablet</i>	2	EDS
<i>sucralfate oral tablet</i>	2	EDS
Proton Pump Inhibitors		
<i>esomeprazole magnesium oral capsule delayed release 40 mg</i>	2	EDS
<i>lansoprazole oral capsule delayed release</i>	2	EDS
NEXIUM ORAL PACKET	4	ST
<i>omeprazole oral capsule delayed release</i>	2	EDS
<i>pantoprazole sodium intravenous solution reconstituted</i>	2	
<i>pantoprazole sodium oral tablet delayed release</i>	2	EDS
<i>rabeprazole sodium oral tablet delayed release</i>	2	EDS
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
Genetic Or Enzyme Disorder: Replacement, Modifiers, Treatment		
ADAGEN INTRAMUSCULAR SOLUTION	5	PA New Starts; OBT
BUPHENYL ORAL TABLET	5	
CERDELGA ORAL CAPSULE	5	PA New Starts
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	5	PA New Starts; OBT
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	3	EDS
CYSTADANE ORAL POWDER	3	EDS
CYSTAGON ORAL CAPSULE	3	EDS
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
KANUMA INTRAVENOUS SOLUTION	5	PA; OBT
KUVAN ORAL PACKET	5	PA
KUVAN ORAL TABLET SOLUBLE	5	PA
<i>miglustat oral capsule</i>	2	PA New Starts; EDS
NAGLAZYME INTRAVENOUS SOLUTION	3	PA New Starts; OBT
ORFADIN ORAL CAPSULE	5	PA New Starts
ORFADIN ORAL SUSPENSION	5	PA New Starts
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES	4	EDS
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000 UNIT, 4000 UNIT, 8000 UNIT	4	EDS
PROCYSBI ORAL CAPSULE DELAYED RELEASE	5	PA New Starts
RAVICTI ORAL LIQUID	5	PA New Starts
<i>sodium phenylbutyrate oral tablet</i>	4	EDS
STRENSIQ SUBCUTANEOUS SOLUTION 40 MG/ML, 80 MG/0.8ML	5	PA New Starts
SUCRAID ORAL SOLUTION	5	PA New Starts
VIOKACE ORAL TABLET	4	EDS
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
XURIDEN ORAL PACKET	5	PA
ZAVESCA ORAL CAPSULE	3	PA New Starts; EDS
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-14000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	3	EDS
Genitourinary Agents		
Antispasmodics, Urinary		
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	2	EDS
<i>flavoxate hcl oral tablet</i>	2	EDS
GELNIQUE TRANSDERMAL GEL 10 %	4	EDS
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	EDS
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	2	EDS
<i>oxybutynin chloride oral syrup</i>	2	EDS
<i>oxybutynin chloride oral tablet</i>	2	EDS
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	2	EDS
<i>tolterodine tartrate oral tablet</i>	2	EDS
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
<i>trospium chloride er oral capsule extended release 24 hour</i>	2	EDS
<i>trospium chloride oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
VESICARE ORAL TABLET	4	EDS
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	2	EDS
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	EDS
<i>doxazosin mesylate oral tablet</i>	2	EDS
<i>dutasteride oral capsule</i>	2	EDS
<i>dutasteride-tamsulosin hcl oral capsule</i>	2	EDS
<i>finasteride oral tablet 5 mg</i>	2	EDS
<i>prazosin hcl oral capsule</i>	2	EDS
RAPAFLO ORAL CAPSULE	4	EDS
<i>tamsulosin hcl oral capsule</i>	2	EDS
<i>terazosin hcl oral capsule</i>	2	EDS
Genitourinary Agents, Other		
<i>bethanechol chloride oral tablet</i>	2	
CUPRIMINE ORAL CAPSULE 250 MG	5	PA
DEPEN TITRATABS ORAL TABLET	5	
ELMIRON ORAL CAPSULE	4	EDS
JYNARQUE ORAL TABLET THERAPY PACK	5	PA
<i>potassium citrate er oral tablet extended release</i>	2	
<i>sodium phenylbutyrate oral powder 3 gm/tsp</i>	2	EDS
Phosphate Binders		
AURYXIA ORAL TABLET	4	EDS
<i>calcium acetate (phos binder) oral capsule</i>	2	EDS
FOSRENOL ORAL PACKET	5	
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG	5	
<i>lanthanum carbonate oral tablet chewable</i>	2	
PHOSLYRA ORAL SOLUTION	4	EDS
RENAGEL ORAL TABLET 800 MG	3	EDS
<i>sevelamer carbonate oral packet</i>	4	EDS
<i>sevelamer carbonate oral tablet</i>	4	EDS
VELPHORO ORAL TABLET CHEWABLE	5	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
<i>ala-cort external cream</i>	2	
<i>alclometasone dipropionate external cream</i>	2	
<i>alclometasone dipropionate external ointment</i>	2	
<i>amcinonide external cream</i>	2	
<i>amcinonide external lotion</i>	4	
<i>amcinonide external ointment</i>	4	
<i>betamethasone dipropionate aug external cream</i>	2	
<i>betamethasone dipropionate aug external gel</i>	2	
<i>betamethasone dipropionate aug external lotion</i>	2	
<i>betamethasone dipropionate aug external ointment</i>	2	
<i>betamethasone dipropionate external cream</i>	2	
<i>betamethasone dipropionate external ointment</i>	2	
<i>betamethasone valerate external cream</i>	2	
<i>betamethasone valerate external foam</i>	2	
<i>betamethasone valerate external lotion</i>	2	
<i>betamethasone valerate external ointment</i>	2	
CAPEX EXTERNAL SHAMPOO	3	
<i>clobetasol propionate external cream</i>	2	
<i>clobetasol propionate external gel</i>	2	
<i>clobetasol propionate external lotion</i>	2	
<i>clobetasol propionate external ointment</i>	2	
<i>clobetasol propionate external shampoo</i>	2	
<i>clobetasol propionate external solution</i>	2	
<i>clodan external shampoo</i>	2	
CLODERM EXTERNAL CREAM	4	
CORDRAN EXTERNAL TAPE	3	
<i>cortisone acetate oral tablet</i>	2	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	4	
DESONATE EXTERNAL GEL	4	
<i>desonide external cream</i>	2	
<i>desonide external lotion</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>desonide external ointment</i>	2	
<i>desoximetasone external cream</i>	2	
<i>desoximetasone external gel</i>	2	
<i>desoximetasone external ointment</i>	2	
<i>dexamethasone intensol oral concentrate</i>	3	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 120 mg/30ml</i>	2	
DEXPAK 13 DAY ORAL TABLET THERAPY PACK	4	
<i>diflorasone diacetate external cream</i>	2	
<i>diflorasone diacetate external ointment</i>	2	
EMFLAZA ORAL SUSPENSION	5	PA
EMFLAZA ORAL TABLET	5	PA
<i>fludrocortisone acetate oral tablet</i>	2	EDS
<i>fluocinolone acetonide external cream</i>	2	
<i>fluocinolone acetonide external ointment</i>	2	
<i>fluocinolone acetonide external solution</i>	2	
<i>fluocinolone acetonide otic oil</i>	2	
<i>fluocinolone acetonide scalp external oil</i>	2	
<i>fluocinonide emulsified base external cream</i>	2	
<i>fluocinonide external cream 0.1 %</i>	2	
<i>fluocinonide external gel</i>	2	
<i>fluocinonide external ointment</i>	2	
<i>fluocinonide external solution</i>	2	
<i>fluticasone propionate external cream</i>	2	
<i>fluticasone propionate external ointment</i>	2	
<i>halobetasol propionate external cream</i>	2	
<i>halobetasol propionate external ointment</i>	2	
HALOG EXTERNAL CREAM	4	
HP ACTHAR INJECTION GEL	5	PA
<i>hydrocortisone butyrate external ointment</i>	2	
<i>hydrocortisone butyrate external solution</i>	2	
<i>hydrocortisone external cream 1 %, 2.5 %</i>	2	
<i>hydrocortisone external lotion 2.5 %</i>	2	
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>hydrocortisone oral tablet</i>	2	
<i>hydrocortisone valerate external cream</i>	2	
<i>hydrocortisone valerate external ointment</i>	2	
KENALOG INJECTION SUSPENSION	4	
MEDROL ORAL TABLET 2 MG	4	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	2	
<i>methylprednisolone oral tablet</i>	2	
<i>methylprednisolone oral tablet therapy pack</i>	2	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg</i>	2	
MILLIPRED ORAL TABLET	4	
<i>mometasone furoate external cream</i>	2	
<i>mometasone furoate external ointment</i>	2	
<i>mometasone furoate external solution</i>	2	
PANDEL EXTERNAL CREAM	4	
<i>prednicarbate external ointment</i>	2	
<i>prednisolone oral solution</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	2	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	2	
<i>prednisone intensol oral concentrate</i>	2	
<i>prednisone oral solution</i>	2	
<i>prednisone oral tablet</i>	2	
<i>prednisone oral tablet therapy pack</i>	2	
<i>procto-pak rectal cream</i>	2	
<i>proctozone-hc rectal cream</i>	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 250 MG	4	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG, 2 GM	4	
TOPICORT EXTERNAL CREAM 0.05 %	4	
TOPICORT EXTERNAL OINTMENT 0.05 %	4	
TOPICORT SPRAY EXTERNAL LIQUID	4	
<i>triamcinolone acetonide external aerosol solution</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>triamcinolone acetonide external cream</i>	2	
<i>triamcinolone acetonide external lotion</i>	2	
<i>triamcinolone acetonide external ointment</i>	2	
<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	2	
<i>triamcinolone acetonide nasal aerosol</i>	2	
<i>triderm external cream 0.1 %</i>	2	
ULTRAVATE EXTERNAL LOTION	4	
VERIPRED 20 ORAL SOLUTION	4	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
<i>chorionic gonadotropin intramuscular solution reconstituted</i>	2	PA New Starts
<i>desmopressin ace spray refrig nasal solution</i>	2	EDS
<i>desmopressin acetate injection solution</i>	2	
<i>desmopressin acetate oral tablet</i>	2	EDS
EGRIFTA SUBCUTANEOUS SOLUTION RECONSTITUTED 1 MG	5	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; EDS
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; EDS
HUMATROPE INJECTION SOLUTION RECONSTITUTED	3	PA; EDS
INCRELEX SUBCUTANEOUS SOLUTION	5	PA
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
NORDITROPIN FLEXPPO SUBCUTANEOUS SOLUTION	3	PA; EDS
<i>novarel intramuscular solution reconstituted 10000 unit</i>	2	PA New Starts
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	3	PA New Starts
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	3	PA; EDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	3	PA; EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	3	PA; EDS
OMNITROPE SUBCUTANEOUS SOLUTION	4	PA; EDS
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; EDS
<i>pregnyl intramuscular solution reconstituted</i>	2	PA New Starts
SAIZEN INJECTION SOLUTION RECONSTITUTED	4	PA; EDS
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	4	PA; EDS
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	4	PA New Starts; EDS
STIMATE NASAL SOLUTION	3	EDS
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; EDS
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; EDS
Hormonal Agents, Stimulant/ Replacement/ Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Prostaglandins)		
<i>misoprostol oral tablet 200 mcg</i>	2	EDS
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
Anabolic Steroids		
ANADROL-50 ORAL TABLET	4	PA New Starts
<i>oxandrolone oral tablet</i>	2	
Androgens		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	PA; EDS
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	3	PA; EDS
ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 40.5 MG/2.5GM (1.62%)	3	PA; EDS
<i>danazol oral capsule</i>	2	
FORTESTA TRANSDERMAL GEL	4	PA; EDS
METHITEST ORAL TABLET	3	PA; EDS
<i>methyltestosterone oral capsule</i>	2	PA; EDS
STRIANT BUCCAL	4	PA; EDS
TESTIM TRANSDERMAL GEL	4	PA; EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	2	PA; OBT
<i>testosterone enanthate intramuscular solution</i>	2	PA; OBT
TESTOSTERONE TRANSDERMAL GEL 10 MG/ACT (2%)	4	PA; EDS
<i>testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</i>	2	PA; EDS
<i>testosterone transdermal solution</i>	2	PA; EDS
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)	4	PA; EDS
Estrogens		
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	4	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	4	PA; OBT
DIVIGEL TRANSDERMAL GEL 1 MG/GM	4	PA; AL (Max 64 Years); EDS
DUAVEE ORAL TABLET	4	PA; AL (Max 64 Years); EDS
ELESTRIN TRANSDERMAL GEL	4	PA; AL (Max 64 Years); EDS
<i>estradiol oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>estradiol transdermal patch twice weekly</i>	2	PA; AL (Max 64 Years); EDS
<i>estradiol transdermal patch weekly</i>	2	PA; AL (Max 64 Years); EDS
<i>estradiol vaginal cream</i>	2	EDS
<i>estradiol vaginal tablet</i>	2	EDS
<i>estradiol valerate intramuscular oil 20 mg/ml</i>	2	
ESTRING VAGINAL RING	4	EDS
<i>estropipate oral tablet 0.75 mg</i>	2	PA; AL (Max 64 Years); EDS
EVAMIST TRANSDERMAL SOLUTION	4	PA; AL (Max 64 Years); EDS
FEMRING VAGINAL RING	4	EDS
<i>marlissa oral tablet</i>	2	EDS
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	4	PA; AL (Max 64 Years); EDS
MENOSTAR TRANSDERMAL PATCH WEEKLY	3	PA; AL (Max 64 Years); EDS
PREMARIN INJECTION SOLUTION RECONSTITUTED	3	
PREMARIN ORAL TABLET	3	PA; AL (Max 64 Years); EDS
PREMARIN VAGINAL CREAM	3	EDS
<i>yuvafem vaginal tablet</i>	2	EDS
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
<i>altavera oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>alyacen 1/35 oral tablet</i>	2	EDS
<i>amabelz oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>amethia lo oral tablet</i>	2	EDS
<i>amethia oral tablet</i>	2	EDS
ANGELIQ ORAL TABLET	4	PA; AL (Max 64 Years); EDS
<i>apri oral tablet</i>	2	EDS
<i>aranelle oral tablet</i>	2	EDS
<i>ashlyna oral tablet</i>	2	EDS
<i>aubra oral tablet</i>	2	EDS
<i>aviane oral tablet</i>	2	EDS
<i>balziva oral tablet</i>	2	EDS
<i>bekyree oral tablet</i>	2	EDS
<i>blisovi 24 fe oral tablet</i>	2	EDS
<i>blisovi fe 1.5/30 oral tablet</i>	2	EDS
<i>blisovi fe 1/20 oral tablet</i>	2	EDS
<i>briellyn oral tablet</i>	2	EDS
<i>budesonide er oral tablet extended release 24 hour</i>	5	
<i>budesonide oral capsule delayed release particles</i>	4	
<i>camrese lo oral tablet</i>	2	EDS
<i>caziant oral tablet</i>	2	EDS
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	4	PA; AL (Max 64 Years); EDS
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	3	PA; AL (Max 64 Years); EDS
<i>cryselle-28 oral tablet</i>	2	EDS
<i>cyclafem 1/35 oral tablet</i>	2	EDS
<i>cyclafem 7/7/7 oral tablet</i>	2	EDS
<i>deblitane oral tablet</i>	2	EDS
<i>delyla oral tablet</i>	2	EDS
<i>desogestrel-ethinyl estradiol oral tablet</i>	2	EDS
<i>drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg</i>	2	EDS
<i>drospirenone-ethinyl estradiol oral tablet</i>	2	EDS
<i>emoquette oral tablet</i>	2	EDS
<i>enpresse-28 oral tablet</i>	2	EDS
<i>enskyce oral tablet 0.15-30 mg-mcg</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>estarylla oral tablet</i>	2	EDS
<i>estradiol valerate intramuscular oil 40 mg/ml</i>	2	
<i>estradiol-norethindrone acet oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>ethynodiol diac-eth estradiol oral tablet</i>	2	EDS
<i>falmina oral tablet</i>	2	EDS
<i>fayosim oral tablet</i>	2	EDS
<i>femynor oral tablet</i>	2	EDS
<i>fyavolv oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>gianvi oral tablet</i>	2	EDS
<i>incassia oral tablet</i>	2	EDS
<i>introvale oral tablet</i>	2	EDS
<i>isibloom oral tablet</i>	2	EDS
JINTELI ORAL TABLET	4	PA; AL (Max 64 Years); EDS
<i>juleber oral tablet</i>	2	EDS
<i>junel 1.5/30 oral tablet</i>	2	EDS
<i>junel 1/20 oral tablet</i>	2	EDS
<i>junel fe 1.5/30 oral tablet</i>	2	EDS
<i>junel fe 1/20 oral tablet</i>	2	EDS
<i>junel fe 24 oral tablet</i>	2	EDS
<i>kaitlib fe oral tablet chewable</i>	2	EDS
<i>kariva oral tablet</i>	2	EDS
<i>kelnor 1/35 oral tablet</i>	2	EDS
<i>kelnor 1/50 oral tablet</i>	2	EDS
<i>kimidess oral tablet</i>	2	EDS
<i>kurvelo oral tablet</i>	2	EDS
<i>larin 1.5/30 oral tablet</i>	2	EDS
<i>larin 1/20 oral tablet</i>	2	EDS
<i>larin fe 1.5/30 oral tablet</i>	2	EDS
<i>larin fe 1/20 oral tablet</i>	2	EDS
<i>larissia oral tablet</i>	2	EDS
<i>layolis fe oral tablet chewable</i>	2	EDS
<i>leena oral tablet</i>	2	EDS
<i>lessina oral tablet</i>	2	EDS
<i>levonest oral tablet</i>	2	EDS
<i>levonorgest-eth est & eth est oral tablet</i>	2	EDS
<i>levonorgest-eth estrad 91-day oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>levonorgestrel-ethinyl estrad oral tablet</i>	2	EDS
<i>levonorg-eth estrad triphasic oral tablet</i>	2	EDS
<i>levora 0.15/30 (28) oral tablet</i>	2	EDS
LO LOESTRIN FE ORAL TABLET	4	EDS
<i>loryna oral tablet</i>	2	EDS
<i>low-ogestrel oral tablet</i>	2	EDS
<i>lutra oral tablet</i>	2	EDS
<i>marlissa oral tablet</i>	2	EDS
<i>melodetta 24 fe oral tablet chewable</i>	2	EDS
<i>mibelas 24 fe oral tablet chewable</i>	2	EDS
<i>microgestin 1.5/30 oral tablet</i>	2	EDS
<i>microgestin 1/20 oral tablet</i>	2	EDS
<i>microgestin fe 1.5/30 oral tablet</i>	2	EDS
<i>microgestin fe 1/20 oral tablet</i>	2	EDS
<i>mili oral tablet</i>	2	EDS
<i>mimvey lo oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>mimvey oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>mononessa oral tablet</i>	2	EDS
NATAZIA ORAL TABLET	4	EDS
<i>necon 0.5/35 (28) oral tablet</i>	2	EDS
<i>necon 7/7/7 oral tablet</i>	2	EDS
<i>nikki oral tablet</i>	2	EDS
<i>nora-be oral tablet</i>	2	EDS
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24)</i>	2	EDS
<i>norethindrone acet-ethinyl est oral tablet</i>	2	EDS
<i>norethindrone acet-ethinyl est oral tablet chewable</i>	2	EDS
<i>norethindrone-eth estradiol oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>norethin-eth estradiol-fe oral tablet chewable</i>	2	EDS
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	2	EDS
<i>norgestim-eth estrad triphasic oral tablet</i>	2	EDS
<i>norlyroc oral tablet</i>	2	EDS
<i>nortrel 0.5/35 (28) oral tablet</i>	2	EDS
<i>nortrel 1/35 (21) oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>nortrel 1/35 (28) oral tablet</i>	2	EDS
<i>nortrel 7/7/7 oral tablet</i>	2	EDS
NUVARING VAGINAL RING	3	EDS
<i>ocella oral tablet</i>	2	EDS
OGESTREL ORAL TABLET	3	EDS
<i>orsythia oral tablet</i>	2	EDS
<i>pimtrea oral tablet</i>	2	EDS
<i>pirmella 1/35 oral tablet</i>	2	EDS
<i>portia-28 oral tablet</i>	2	EDS
PREFEST ORAL TABLET	4	PA; AL (Max 64 Years); EDS
PREMPHASE ORAL TABLET	3	PA; AL (Max 64 Years); EDS
PREMPRO ORAL TABLET	3	PA; AL (Max 64 Years); EDS
<i>previfem oral tablet</i>	2	EDS
<i>quasense oral tablet</i>	2	EDS
<i>reclipsen oral tablet</i>	2	EDS
<i>rivelsa oral tablet</i>	2	EDS
<i>setlakin oral tablet</i>	2	EDS
<i>sharobel oral tablet</i>	2	EDS
<i>sprintec 28 oral tablet</i>	2	EDS
<i>sronyx oral tablet</i>	2	EDS
<i>syeda oral tablet</i>	2	EDS
<i>tarina fe 1/20 oral tablet</i>	2	EDS
<i>tri-legest fe oral tablet</i>	2	EDS
<i>tri-lo-estarylla oral tablet</i>	2	EDS
<i>tri-lo-sprintec oral tablet</i>	2	EDS
<i>tri-mili oral tablet</i>	2	EDS
<i>trinessa (28) oral tablet</i>	2	EDS
<i>tri-previfem oral tablet</i>	2	EDS
<i>tri-sprintec oral tablet</i>	2	EDS
<i>trivora (28) oral tablet</i>	2	EDS
<i>tri-vylibra oral tablet</i>	2	EDS
<i>tydemy oral tablet</i>	4	EDS
<i>velivet oral tablet</i>	2	EDS
<i>vienva oral tablet</i>	2	EDS
<i>vyfemla oral tablet</i>	2	EDS
<i>vylibra oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>wymzya fe oral tablet chewable</i>	2	EDS
<i>xulane transdermal patch weekly</i>	2	EDS
<i>zarah oral tablet</i>	2	EDS
<i>zenchent oral tablet</i>	2	EDS
<i>zovia 1/35e (28) oral tablet</i>	2	EDS
Progestins		
<i>camila oral tablet</i>	2	EDS
CRINONE VAGINAL GEL	4	PA
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	4	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	4	
<i>errin oral tablet</i>	2	EDS
<i>jolivette oral tablet</i>	2	EDS
<i>lyza oral tablet</i>	2	EDS
<i>marlissa oral tablet</i>	2	EDS
<i>medroxyprogesterone acetate intramuscular suspension</i>	2	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	2	
<i>medroxyprogesterone acetate oral tablet</i>	2	EDS
<i>megestrol acetate oral suspension 40 mg/ml</i>	2	PA New Starts
<i>megestrol acetate oral suspension 625 mg/5ml</i>	2	PA New Starts; EDS
<i>megestrol acetate oral tablet</i>	2	PA New Starts
<i>norethindrone acetate oral tablet</i>	2	EDS
<i>norethindrone oral tablet</i>	2	EDS
<i>progesterone micronized oral capsule</i>	2	EDS
Selective Estrogen Receptor Modifying Agents		
<i>raloxifene hcl oral tablet</i>	2	EDS
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)		
<i>levo-t oral tablet</i>	2	EDS
<i>levothyroxine sodium intravenous solution reconstituted 100 mcg</i>	4	
<i>levothyroxine sodium oral tablet</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>levoxyol oral tablet</i>	2	EDS
<i>liothyronine sodium intravenous solution</i>	2	
<i>liothyronine sodium oral tablet</i>	2	EDS
SYNTHROID ORAL TABLET	3	EDS
THYROLAR-1 ORAL TABLET 60 MG	4	EDS
THYROLAR-1/2 ORAL TABLET 30 MG	4	EDS
THYROLAR-1/4 ORAL TABLET 15 MG	4	EDS
THYROLAR-2 ORAL TABLET 120 MG	4	EDS
THYROLAR-3 ORAL TABLET 180 MG	4	EDS
TIROSINT ORAL CAPSULE	4	EDS
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	EDS
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN ORAL TABLET	3	
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>bromocriptine mesylate oral capsule</i>	2	EDS
<i>bromocriptine mesylate oral tablet</i>	2	EDS
<i>cabergoline oral tablet</i>	2	
ELIGARD SUBCUTANEOUS KIT	3	PA New Starts; OB
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA New Starts; OB
<i>leuprolide acetate injection kit</i>	2	PA New Starts
LUPANETA PACK COMBINATION KIT	4	BD
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	5	PA New Starts; OB
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	5	PA New Starts; OB
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	5	PA New Starts; OB
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	5	PA New Starts; OB
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG	5	PA New Starts; OB
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED)	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	2	EDS
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	5	PA New Starts; OBT
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 20 MG, 40 MG, 60 MG	5	PA; OBT
SIGNIFOR SUBCUTANEOUS SOLUTION	4	PA; EDS
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML	5	PA New Starts; OBT
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	5	PA; OBT
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
SYNAREL NASAL SOLUTION	3	PA New Starts
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	PA; OBT
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral tablet</i>	2	EDS
<i>propylthiouracil oral tablet</i>	2	EDS
Immunological Agents		
Angioedema Agents		
BERINERT INTRAVENOUS KIT	5	PA New Starts; OBT
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
FIRAZYR SUBCUTANEOUS SOLUTION	5	PA New Starts; OBT
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
Immune Suppressants		
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
AFINITOR DISPERZ ORAL TABLET SOLUBLE	5	PA New Starts
AFINITOR ORAL TABLET 2.5 MG	5	PA New Starts
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	BD; EDS
ATGAM INTRAVENOUS INJECTABLE	3	BD

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
AZASAN ORAL TABLET	3	BD; EDS
<i>azathioprine oral tablet</i>	2	BD; EDS
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT; AL (Min 18 Years)
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA New Starts; AL (Min 18 Years)
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA New Starts; AL (Min 18 Years)
CIMZIA PREFILLED SUBCUTANEOUS KIT	5	
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	5	
<i>cyclosporine intravenous solution</i>	2	BD
<i>cyclosporine modified oral capsule</i>	2	BD; EDS
<i>cyclosporine modified oral solution</i>	2	BD; EDS
<i>cyclosporine oral capsule</i>	2	BD; EDS
DEPEN TITRATABS ORAL TABLET	5	
ELIDEL EXTERNAL CREAM	4	
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	5	
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	BD; EDS
<i>gengraf oral capsule 100 mg, 25 mg</i>	2	BD; EDS
<i>gengraf oral solution</i>	2	BD; EDS
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	5	
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	5	
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	5	
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	5	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	5	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	5	
INGREZZA ORAL CAPSULE	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
<i>mercaptopurine oral tablet</i>	2	
<i>methotrexate oral tablet</i>	1	
<i>methotrexate sodium (pf) injection solution 250 mg/10ml, 50 mg/2ml</i>	2	BD
<i>methotrexate sodium injection solution 250 mg/10ml</i>	2	BD
<i>methotrexate sodium injection solution reconstituted</i>	2	
<i>mycophenolate mofetil hcl intravenous solution reconstituted</i>	2	BD
<i>mycophenolate mofetil oral capsule</i>	2	BD; EDS
<i>mycophenolate mofetil oral suspension reconstituted</i>	2	BD; EDS
<i>mycophenolate mofetil oral tablet</i>	2	BD; EDS
<i>mycophenolate sodium oral tablet delayed release</i>	2	BD; EDS
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED	4	PA New Starts; OBT
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	5	
OTEZLA ORAL TABLET	5	
OTEZLA ORAL TABLET THERAPY PACK	5	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 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	4	PA; EDS
PROGRAF INTRAVENOUS SOLUTION	3	BD
RAPAMUNE ORAL SOLUTION	3	BD; EDS
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	4	PA; EDS
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	5	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	5	
SANDIMMUNE ORAL SOLUTION	4	BD; EDS
SIMPONI ARIA INTRAVENOUS SOLUTION	5	
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	5	
<i>sirolimus oral tablet</i>	2	BD; EDS
<i>tacrolimus oral capsule</i>	2	BD; EDS
TREXALL ORAL TABLET	3	
XATMEP ORAL SOLUTION	4	PA New Starts
XELJANZ ORAL TABLET	5	
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	5	
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG	5	BD
Immunizing Agents, Passive		
BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML	5	PA; OBT
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 6 GM	5	PA; OBT
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 GM/50ML	5	PA; OBT
GAMASTAN S/D INTRAMUSCULAR INJECTABLE (10ML), (2ML)	3	PA; EDS
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML	5	PA; OBT
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA; OBT
GAMMAKED INJECTION SOLUTION 1 GM/10ML	5	PA; OBT
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 5 GM/50ML	5	PA; OBT
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML	5	PA; OBT
HYPERRAB S/D INJECTION SOLUTION	3	BD
IMOGAM RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	3	BD

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 2 GM/20ML	5	PA; OBT
PRIVIGEN INTRAVENOUS SOLUTION 20 GM/200ML	5	PA; OBT
SYNAGIS INTRAMUSCULAR SOLUTION	5	PA; OBT
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	4	BD
Immunological Agents		
<i>leflunomide oral tablet 10 mg</i>	2	QL (30 EA per 30 days); EDS
<i>leflunomide oral tablet 20 mg</i>	2	EDS
SYNAGIS INTRAMUSCULAR SOLUTION 50 MG/0.5ML	5	PA; OBT
Immunomodulators		
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	PA New Starts
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; OBT; AL (Min 12 Years); EDS
ILARIS SUBCUTANEOUS SOLUTION	5	PA; OBT
KEYTRUDA INTRAVENOUS SOLUTION	5	PA New Starts; OBT
<i>leflunomide oral tablet 10 mg</i>	2	QL (30 EA per 30 days); EDS
<i>leflunomide oral tablet 20 mg</i>	2	EDS
RIDAURA ORAL CAPSULE	3	EDS
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5	
SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	5	BD
TYSABRI INTRAVENOUS CONCENTRATE	5	PA; OBT
Vaccines		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
ADACEL INTRAMUSCULAR SUSPENSION	3	
BCG VACCINE INJECTION INJECTABLE	3	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 , 5-2.5-18.5 (0.5ML SYRINGE)	3	
DAPTACEL INTRAMUSCULAR SUSPENSION 15-23-5 LF-MCG/0.5	3	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
DIPHTHERIA-TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION	3	
ENGERIX-B INJECTION SUSPENSION 10 MCG/0.5ML	3	BD; EDS
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	3	BD
GARDASIL 9 INTRAMUSCULAR SUSPENSION	3	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
HAVRIX INTRAMUSCULAR SUSPENSION	3	
HIBERIX INJECTION SOLUTION RECONSTITUTED	3	
IMOVAX RABIES INTRAMUSCULAR INJECTABLE	3	
INFANRIX INTRAMUSCULAR SUSPENSION	3	
IPOL INJECTION INJECTABLE	3	
IXIARO INTRAMUSCULAR SUSPENSION	3	
KINRIX INTRAMUSCULAR SUSPENSION	3	
MENACTRA INTRAMUSCULAR INJECTABLE	3	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
M-M-R II SUBCUTANEOUS INJECTABLE	3	
PEDIARIX INTRAMUSCULAR SUSPENSION	3	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	3	
PROQUAD SUBCUTANEOUS INJECTABLE	3	
QUADRACEL INTRAMUSCULAR SUSPENSION	3	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
RECOMBIVAX HB INJECTION SUSPENSION	3	BD
ROTARIX ORAL SUSPENSION RECONSTITUTED	3	
ROTATEQ ORAL SOLUTION	3	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG	3	
TENIVAC INTRAMUSCULAR INJECTABLE	3	
TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION	3	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
TWINRIX INTRAMUSCULAR SUSPENSION	3	
TYPHIM VI INTRAMUSCULAR SOLUTION	3	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 25 UNIT/0.5ML 0.5 ML, 50 UNIT/ML, 50 UNIT/ML 1 ML	3	
VARIVAX SUBCUTANEOUS INJECTABLE	3	
VARIZIG INTRAMUSCULAR SOLUTION	3	
YF-VAX SUBCUTANEOUS INJECTABLE	3	
ZOSTAVAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS
ASACOL HD ORAL TABLET DELAYED RELEASE	4	
<i>balsalazide disodium oral capsule</i>	2	
CANASA RECTAL SUPPOSITORY	5	
DELZICOL ORAL CAPSULE DELAYED RELEASE	4	EDS
DIPENTUM ORAL CAPSULE	4	EDS
<i>mesalamine oral tablet delayed release</i>	2	
<i>mesalamine rectal enema</i>	2	
PENTASA ORAL CAPSULE EXTENDED RELEASE	4	EDS
ROWASA RECTAL KIT	4	
Glucocorticoids		
<i>budesonide er oral tablet extended release 24 hour</i>	5	
<i>budesonide oral capsule delayed release particles</i>	4	
<i>colocort rectal enema</i>	2	
<i>cortisone acetate oral tablet</i>	2	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	4	
<i>dexamethasone intensol oral concentrate</i>	3	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>hydrocortisone oral tablet</i>	2	
<i>hydrocortisone rectal enema</i>	2	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	2	
<i>methylprednisolone oral tablet</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>methylprednisolone oral tablet therapy pack</i>	2	
<i>methylprednisolone sodium succ injection solution reconstituted 1000 mg</i>	2	
MILLIPRED ORAL TABLET	4	
<i>prednisolone acetate ophthalmic suspension</i>	2	
<i>prednisolone oral solution</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml, 6.7 (5 base) mg/5ml</i>	2	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	2	
<i>prednisone intensol oral concentrate</i>	2	
<i>prednisone oral solution</i>	2	
<i>prednisone oral tablet</i>	2	
<i>procto-med hc rectal cream</i>	2	
<i>proctosol hc rectal cream</i>	2	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 250 MG	4	
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 2 GM	4	
VERIPRED 20 ORAL SOLUTION	4	
Sulfonamides		
<i>sulfasalazine oral tablet</i>	2	EDS
<i>sulfasalazine oral tablet delayed release</i>	2	EDS
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium oral solution</i>	2	EDS
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>	2	EDS
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	1	EDS
<i>alendronate sodium oral tablet 40 mg</i>	2	
BINOSTO ORAL TABLET EFFERVESCENT	4	EDS
<i>calcitonin (salmon) nasal solution</i>	2	EDS
<i>calcitriol intravenous solution 1 mcg/ml</i>	2	
<i>calcitriol oral capsule</i>	2	EDS
<i>calcitriol oral solution</i>	2	EDS
<i>doxercalciferol intravenous solution</i>	2	
<i>doxercalciferol oral capsule</i>	2	ST; EDS
<i>etidronate disodium oral tablet</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML	5	PA
<i>ibandronate sodium intravenous solution 3 mg/3ml</i>	2	PA; OBT
<i>ibandronate sodium oral tablet</i>	1	EDS
MIACALCIN INJECTION SOLUTION	4	
NATPARA SUBCUTANEOUS CARTRIDGE	5	PA New Starts
<i>pamidronate disodium intravenous solution</i>	2	PA; OBT
<i>paricalcitol oral capsule</i>	2	ST; EDS
PROLIA SUBCUTANEOUS SOLUTION	4	PA; OBT
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	4	ST; EDS
<i>risedronate sodium oral tablet</i>	2	EDS
<i>risedronate sodium oral tablet delayed release</i>	2	EDS
SENSIPAR ORAL TABLET	5	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
XGEVA SUBCUTANEOUS SOLUTION	5	PA New Starts; OBT
<i>zoledronic acid intravenous concentrate</i>	2	PA; OBT
<i>zoledronic acid intravenous solution 5 mg/100ml</i>	2	PA; OBT
ZOMETA INTRAVENOUS SOLUTION	4	PA; OBT
Non-Frf		
Non-Frf		
ABILIFY MYCITE ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	5	PA New Starts; QL (30 EA per 30 days)
ABILIFY MYCITE ORAL TABLET 2 MG	5	PA New Starts; QL (60 EA per 30 days)
ABILIFY MYCITE ORAL TABLET 30 MG	5	PA New Starts
<i>acetaminophen-codeine #2 oral tablet</i>	2	
<i>acetaminophen-codeine #4 oral tablet</i>	2	
<i>acetasol hc otic solution</i>	2	
ACZONE EXTERNAL GEL 7.5 %	4	
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL (1 ML per 30 days); EDS
AKYNZEO ORAL CAPSULE	4	PA
<i>albendazole oral tablet</i>	4	
<i>alcohol wipes pad 70 %</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>alprazolam xr oral tablet extended release 24 hour 0.5 mg</i>	2	
ALTABAX EXTERNAL OINTMENT	4	
AMINOSYN INTRAVENOUS SOLUTION 10 %	3	BD; HI
AMINOSYN M INTRAVENOUS SOLUTION	3	
<i>ampicillin-sulbactam sodium intravenous solution reconstituted 1.5 (1-0.5) gm, 15 (10-5) gm</i>	2	
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	5	PA New Starts; OBT
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	5	BD
ARZERRA INTRAVENOUS CONCENTRATE 100 MG/5ML	3	PA; OBT
<i>aspirin-caff-dihydrocodeine oral capsule</i>	2	
<i>atropine sulfate injection solution prefilled syringe 0.5 mg/5ml</i>	2	
AVELOX INTRAVENOUS SOLUTION	3	
AZACTAM IN DEXTROSE INTRAVENOUS SOLUTION 1 GM, 2 GM	3	
<i>azelaic acid external gel</i>	4	
<i>azurette oral tablet</i>	2	EDS
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	5	PA; OBT
BRAFTOVI ORAL CAPSULE	5	PA New Starts
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	2	
<i>budesonide nasal suspension</i>	2	QL (17.2 GM per 30 days)
<i>buprenorphine transdermal patch weekly 7.5 mcg/hr</i>	2	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg</i>	4	EDS
<i>camrese oral tablet</i>	2	EDS
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM	5	PA; OBT
CEDAX ORAL CAPSULE	4	
CEDAX ORAL SUSPENSION RECONSTITUTED 180 MG/5ML	4	
<i>cefditoren pivoxil oral tablet</i>	2	
<i>cefepime-dextrose intravenous solution reconstituted 1 gm/50ml, 2 gm/50ml</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>cefotetan disodium injection solution reconstituted 10 gm</i>	4	
CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-4 GM-%, 2-2.2 GM-%	4	
CEFTAZIDIME AND DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 2 GM/50ML	4	
CEFTIN ORAL SUSPENSION RECONSTITUTED	4	
<i>ceftriaxone sodium intravenous solution reconstituted 1 gm, 2 gm</i>	2	
<i>cefuroxime sodium injection solution reconstituted 1.5 gm</i>	2	
<i>cholestyramine light oral packet</i>	2	EDS
<i>cholestyramine oral powder</i>	2	EDS
CIMZIA STARTER KIT SUBCUTANEOUS KIT	5	
CINQAIR INTRAVENOUS SOLUTION	5	PA; OBT
<i>ciprofloxacin intravenous solution 400 mg/40ml</i>	2	
<i>cisplatin intravenous solution 100 mg/100ml</i>	2	PA New Starts; OBT
<i>claravis oral capsule 20 mg, 30 mg, 40 mg</i>	2	
<i>clindamycin phosphate intravenous solution 600 mg/4ml</i>	2	
<i>clobazam oral suspension</i>	4	EDS
<i>clobazam oral tablet</i>	4	EDS
<i>clobetasol propionate e external cream</i>	2	
CLODERM PUMP EXTERNAL CREAM	4	
<i>clopidogrel bisulfate oral tablet 300 mg</i>	2	
CLORPRES ORAL TABLET	4	EDS
<i>clotrimazole mouth/throat troche</i>	2	
<i>colestipol hcl oral granules</i>	2	EDS
<i>colistimethate sodium injection solution reconstituted</i>	4	
<i>cormax scalp application external solution</i>	2	
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	5	
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
CUVITRU SUBCUTANEOUS SOLUTION	5	PA; OBT

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>cyred oral tablet</i>	2	EDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	5	PA
DARZALEX INTRAVENOUS SOLUTION 400 MG/20ML	5	PA New Starts; OBT
<i>daunorubicin hcl intravenous solution</i>	2	PA New Starts; OBT
<i>daysee oral tablet</i>	2	EDS
DELSTRIGO ORAL TABLET	5	
<i>desmopressin ace rhinal tube nasal solution</i>	2	EDS
<i>desmopressin acetate spray nasal solution</i>	2	EDS
<i>dexamethasone oral solution</i>	2	
<i>diazepam oral solution 1 mg/ml</i>	2	
<i>diazepam rectal gel</i>	2	
DICLEGIS ORAL TABLET DELAYED RELEASE	3	
<i>didanosine oral capsule delayed release 125 mg</i>	2	EDS
<i>diltiazem hcl er beads oral capsule extended release 24 hour 180 mg</i>	2	EDS
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg</i>	2	EDS
<i>diphenhydramine hcl oral elixir</i>	2	PA; AL (Max 64 Years)
DIVIGEL TRANSDERMAL GEL 0.5 MG/0.5GM	4	PA; AL (Max 64 Years); EDS
<i>docetaxel intravenous solution 20 mg/2ml</i>	4	PA New Starts
<i>docetaxel intravenous solution 80 mg/8ml</i>	4	PA New Starts; OBT
DORIBAX INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	4	EDS
<i>doxycycline hyclate intravenous solution reconstituted</i>	2	
<i>doxycycline hyclate oral tablet 50 mg</i>	2	
<i>drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg</i>	4	EDS
<i>effe-r-k oral tablet effervescent 25 meq</i>	2	EDS
ELIXOPHYLLIN ORAL ELIXIR	4	
EPIDIOLEX ORAL SOLUTION	4	PA New Starts; EDS
<i>epirubicin hcl intravenous solution 50 mg/25ml</i>	2	PA; OBT
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	3	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>ertapenem sodium injection solution reconstituted</i>	2	
<i>estropipate oral tablet 1.5 mg, 3 mg</i>	2	PA; AL (Max 64 Years); EDS
<i>etoposide intravenous solution 1 gm/50ml, 500 mg/25ml</i>	2	
FACTIVE ORAL TABLET	4	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 0.5 GM/10ML, 10 GM/100ML, 10 GM/200ML, 2.5 GM/50ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML	5	PA; OBT
<i>fluconazole in dextrose intravenous solution 400 mg/200ml</i>	2	
<i>fluocinolone acetonide body external oil</i>	2	
<i>fluocinonide external cream 0.05 %</i>	2	
<i>fluorouracil intravenous solution 2.5 gm/50ml</i>	2	PA New Starts; OBT
<i>fomepizole intravenous solution 1 gm/ml</i>	2	
FREAMINE III INTRAVENOUS SOLUTION 10 %	3	BD; HI
GALAFOLD ORAL CAPSULE	5	PA New Starts
GAMASTAN S/D INTRAMUSCULAR INJECTABLE	3	PA; OBT
GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	5	PA; OBT
GAMMAKED INJECTION SOLUTION 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 5 GM/50ML	5	PA; OBT
GAMMAPLEX INTRAVENOUS SOLUTION 20 GM/400ML, 5 GM/100ML	5	PA; OBT
GAMUNEX-C INJECTION SOLUTION 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML	5	PA; OBT
GARDASIL INTRAMUSCULAR SUSPENSION	3	
<i>gauze pads pad 2"x2"</i>	2	
<i>gavilyte-h oral kit</i>	2	
<i>gengraf oral capsule 50 mg</i>	2	BD; EDS
<i>gentamicin sulfate intravenous solution</i>	2	
<i>gildagia oral tablet</i>	2	EDS
GLEOSTINE ORAL CAPSULE 5 MG	4	
GRANIX SUBCUTANEOUS SOLUTION	5	
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
HEMANGEOL ORAL SOLUTION	4	PA; EDS
<i>hydrocortisone butyrate external lotion</i>	2	
<i>hydromorphone hcl pf injection solution 500 mg/50ml</i>	2	
HYPERRAB INJECTION SOLUTION	3	BD
HYPERRAB S/D INTRAMUSCULAR INJECTABLE	3	BD
ILARIS (150MG DELIVERED) SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; OBT
IMOGAM RABIES-HT INTRAMUSCULAR INJECTABLE	3	BD
<i>insulin syringe 29g x 1" 0.3 ml</i>	2	
INVANZ INTRAVENOUS SOLUTION RECONSTITUTED	4	
INVELTYS OPHTHALMIC SUSPENSION	4	
<i>itraconazole oral solution</i>	4	PA
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED 45 MG	3	PA; OBT
<i>jolessa oral tablet</i>	2	EDS
<i>k-effervescent oral tablet effervescent</i>	2	EDS
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	EDS
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	
KEYTRUDA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
<i>kionex oral powder</i>	2	
<i>klor-con/ef oral tablet effervescent</i>	2	EDS
<i>k-prime oral tablet effervescent</i>	2	EDS
<i>k-vescent oral tablet effervescent</i>	2	EDS
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED 10 MG	5	PA New Starts
<i>lactulose oral packet</i>	4	EDS
LANOXIN ORAL TABLET 187.5 MCG	4	PA; EDS
LENVIMA 12 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LENVIMA 4 MG DAILY DOSE ORAL CAPSULE THERAPY PACK	5	PA New Starts
LEVOTHYROXINE SODIUM INTRAVENOUS SOLUTION RECONSTITUTED 200 MCG, 500 MCG	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>lidocaine hcl (pf) injection solution 2 %</i>	2	
<i>lidocaine hcl injection solution 1 %</i>	2	
LOMEDIA 24 FE ORAL TABLET	4	EDS
<i>lopreeza oral tablet</i>	2	PA; AL (Max 64 Years); EDS
<i>lorazepam injection solution</i>	2	
<i>lorazepam intensol oral concentrate</i>	2	
<i>mafenide acetate external packet</i>	4	
MEKTOVI ORAL TABLET	5	PA New Starts
<i>mesalamine-cleanser rectal kit</i>	2	
<i>metformin hcl oral solution</i>	4	EDS
<i>methotrexate sodium (pf) injection solution 1 gm/40ml, 100 mg/4ml</i>	2	BD
<i>methotrexate sodium injection solution 50 mg/2ml</i>	2	BD
<i>methoxsalen oral capsule</i>	2	
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	2	EDS
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	1	EDS
<i>metoprolol-hctz er oral tablet extended release 24 hour</i>	2	EDS
<i>mono-lynyah oral tablet</i>	2	EDS
MORPHABOND ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	4	
<i>morphine sulfate (pf) injection solution 10 mg/ml, 4 mg/ml, 5 mg/ml, 8 mg/ml</i>	2	
<i>moxifloxacin hcl intravenous solution</i>	2	
MULPLETA ORAL TABLET	5	PA
<i>nafcillin sodium injection solution reconstituted 10 gm</i>	5	
NATESTO NASAL GEL	4	PA; EDS
<i>necon 1/35 (28) oral tablet</i>	2	EDS
NECON 1/50 (28) ORAL TABLET	4	EDS
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA; OBT
<i>nevirapine oral suspension</i>	2	EDS
<i>nifedical xl oral tablet extended release 24 hour 60 mg</i>	2	EDS
NITYR ORAL TABLET	5	PA New Starts

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>norethin ace-eth estrad-fe oral tablet chewable</i>	2	EDS
NUPLAZID ORAL CAPSULE	5	PA New Starts
NUPLAZID ORAL TABLET 10 MG	5	PA New Starts; QL (30 EA per 30 days)
NUVESSA VAGINAL GEL	4	
<i>nyata external powder</i>	2	
NYMALIZE ORAL SOLUTION 60 MG/20ML	4	PA
OCTAGAM INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 2.5 GM/50ML, 20 GM/200ML, 25 GM/500ML, 5 GM/100ML, 5 GM/50ML	5	PA; OBT
OMEGAVEN INTRAVENOUS EMULSION	3	BD
ONCASPAR INJECTION SOLUTION	5	PA New Starts; OBT
<i>ondansetron hcl injection solution 40 mg/20ml</i>	2	
OPANA ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	4	
ORLISSA ORAL TABLET 150 MG	5	PA; QL (30 EA per 30 days)
ORLISSA ORAL TABLET 200 MG	5	PA
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG	4	PA; QL (30 EA per 30 days); EDS
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 193 MG, 258 MG	4	PA; EDS
<i>oxaliplatin intravenous solution reconstituted 50 mg</i>	2	PA New Starts
OXERVATE OPHTHALMIC SOLUTION	5	PA
<i>oxycodone-acetaminophen oral solution</i>	2	
<i>paclitaxel intravenous concentrate 300 mg/50ml</i>	2	PA New Starts; OBT
PCE ORAL TABLET DELAYED RELEASE	4	
PEGINTRON SUBCUTANEOUS KIT	5	PA
<i>penicillin g potassium injection solution reconstituted 5000000 unit</i>	2	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	5	BD
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 24000-86250 UNIT	4	EDS
PFIZERPEN-G INJECTION SOLUTION RECONSTITUTED	4	
PHENERGAN RECTAL SUPPOSITORY	4	PA; AL (Max 64 Years)
PIFELTRO ORAL TABLET	5	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>polyethylene glycol 3350 oral packet</i>	2	
<i>potassium bicarbonate oral tablet effervescent</i>	2	EDS
<i>potassium chloride oral packet</i>	2	EDS
POTELIGEO INTRAVENOUS SOLUTION	5	PA New Starts
<i>prednisolone oral syrup 15 mg/5ml</i>	2	
<i>prednisolone sodium phosphate oral solution 15 mg/5ml</i>	2	
<i>prevalite oral powder</i>	2	EDS
PRIMSOL ORAL SOLUTION	4	
PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 40 GM/400ML, 5 GM/50ML	5	PA; OBT
QVAR INHALATION AEROSOL SOLUTION 40 MCG/ACT	2	QL (8.7 GM per 30 days); EDS
QVAR INHALATION AEROSOL SOLUTION 80 MCG/ACT	2	EDS
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	4	PA; EDS
<i>rajani oral tablet</i>	2	EDS
<i>ranitidine hcl injection solution 150 mg/6ml</i>	2	
<i>ranitidine hcl oral syrup 15 mg/ml</i>	2	
RENACIDIN IRRIGATION SOLUTION	3	
RENAGEL ORAL TABLET 400 MG	3	EDS
RESCULA OPHTHALMIC SOLUTION	4	EDS
RETACRIT INJECTION SOLUTION	5	PA; OBT
<i>ribavirin inhalation solution reconstituted</i>	5	BD
<i>risperidone m-tab oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	QL (120 EA per 30 days); EDS
<i>risperidone m-tab oral tablet dispersible 4 mg</i>	2	EDS
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	5	PA New Starts
ROXYBOND ORAL TABLET ABUSE-DETERRENT	NF	
SAIZEN CLICK.EASY INJECTION SOLUTION RECONSTITUTED	4	PA; EDS
SECONAL ORAL CAPSULE	4	PA New Starts
SFROWASA RECTAL ENEMA	4	
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 30 MG	5	PA; OBT
<i>sodium polystyrene sulfonate oral suspension</i>	2	
<i>sodium polystyrene sulfonate rectal suspension</i>	2	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>solia oral tablet</i>	2	EDS
<i>sotalol hcl (af) oral tablet 160 mg, 80 mg</i>	2	EDS
SPECTRACEF ORAL TABLET 400 MG	4	
SPRIX NASAL SOLUTION	4	PA
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45ML, 28 MG/0.7ML	5	PA New Starts
SUBSYS SUBLINGUAL LIQUID 1200 (600 X 2) MCG, 1600 (800 X 2) MCG	5	PA
<i>sulfacetamide sodium external suspension</i>	2	
<i>sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml</i>	2	
SUMAVEL DOSEPRO SUBCUTANEOUS SOLUTION JET-INJECTOR	5	
SYMTUZA ORAL TABLET	5	
SYNALGOS-DC ORAL CAPSULE	4	
<i>tadalafil (pah) oral tablet</i>	5	PA New Starts
TAKHZYRO SUBCUTANEOUS SOLUTION	5	PA New Starts
TALWIN INJECTION SOLUTION	4	PA
<i>testosterone transdermal gel 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)</i>	2	PA; EDS
<i>theophylline er oral tablet extended release 12 hour 450 mg</i>	2	EDS
THYROLAR-1 ORAL TABLET 60 (12.5-50) MG (MCG)	4	EDS
THYROLAR-1/2 ORAL TABLET 30 (6.25-25) MG (MCG)	4	EDS
THYROLAR-1/4 ORAL TABLET 15 (3.1-12.5) MG (MCG)	4	EDS
THYROLAR-2 ORAL TABLET 120 (25-100) MG (MCG)	4	EDS
THYROLAR-3 ORAL TABLET 180 (37.5-150) MG (MCG)	4	EDS
TIBSOVO ORAL TABLET	5	PA New Starts
<i>tiglutik oral suspension</i>	4	EDS
<i>toposar intravenous solution 100 mg/5ml, 500 mg/25ml</i>	2	
<i>tramadol hcl er oral capsule extended release 24 hour 150 mg</i>	2	ST; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>tramadol hcl er oral tablet extended release 24 hour 300 mg</i>	2	
<i>triamterene-hctz oral capsule 50-25 mg</i>	2	EDS
TRISENOX INTRAVENOUS SOLUTION 10 MG/10ML	5	PA New Starts; OBT
UVADEX INJECTION SOLUTION	4	
<i>valproate sodium intravenous solution 500 mg/5ml</i>	2	
<i>vancomycin hcl in dextrose intravenous solution 750-5 mg/150ml-%</i>	2	
<i>vancomycin hcl intravenous solution reconstituted 250 mg, 5000 mg</i>	2	
VELTIN EXTERNAL GEL	4	
<i>vestura oral tablet</i>	2	EDS
V-GO 20 KIT	3	
V-GO 30 KIT	3	
V-GO 40 KIT	3	
VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED 750 MG	5	PA; OBT
VIDEX ORAL SOLUTION RECONSTITUTED 2 GM	3	EDS
<i>viorele oral tablet</i>	2	EDS
VISTOGARD ORAL PACKET	5	
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 100-44 MG	5	PA New Starts
XADAGO ORAL TABLET	4	PA
XARELTO ORAL TABLET 2.5 MG	3	EDS
XOFLUZA ORAL TABLET THERAPY PACK	3	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000 UNIT, 15000-51000 UNIT, 20000-68000 UNIT, 25000 UNIT, 3000-10000 UNIT, 40000-136000 UNIT, 5000 UNIT	3	EDS
ZINBRYTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; OBT
ZMAX ORAL SUSPENSION RECONSTITUTED	4	
<i>zoledronic acid intravenous solution 4 mg/100ml</i>	2	PA; OBT
ZORTRESS ORAL TABLET 1 MG	5	BD

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>zovia 1/50e (28) oral tablet</i>	2	EDS
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG	3	
Ophthalmic Agents		
Ophthalmic Agents		
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	2	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	2	
BLEPHAMIDE OPHTHALMIC SUSPENSION	3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	3	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	2	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	2	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	2	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	2	
NEOMYCIN-POLYMYXIN-HC OPHTHALMIC SUSPENSION 3.5-10000-1	4	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	2	
PRED-G OPHTHALMIC SUSPENSION	4	
PRED-G S.O.P. OPHTHALMIC OINTMENT	4	
<i>sulfacetamide sodium ophthalmic ointment</i>	4	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	2	
TOBRADEX ST OPHTHALMIC SUSPENSION	3	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	2	
ZYLET OPHTHALMIC SUSPENSION	4	
Ophthalmic Agents, Other		
<i>atropine sulfate ophthalmic solution</i>	2	EDS
CYSTARAN OPHTHALMIC SOLUTION	5	PA New Starts
LACRISERT OPHTHALMIC INSERT	3	
<i>proparacaine hcl ophthalmic solution</i>	2	
RESTASIS OPHTHALMIC EMULSION	3	EDS
<i>sulfacetamide sodium ophthalmic ointment</i>	4	

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Ophthalmic Anti-Allergy Agents		
ALOCRILOPHthalmic SOLUTION	4	
ALOMIDOPHthalmic SOLUTION	3	
<i>azelastine hcl ophthalmic solution</i>	2	
BEPREVEOPHthalmic SOLUTION	4	
<i>cromolyn sodium ophthalmic solution</i>	2	
EMADINOPHthalmic SOLUTION	4	
<i>epinastine hcl ophthalmic solution</i>	2	
LASTACAFTOPHthalmic SOLUTION	4	
<i>olopatadine hcl ophthalmic solution</i>	2	
Ophthalmic Antiglaucoma Agents		
<i>acetazolamide oral tablet</i>	2	EDS
ALPHAGAN P OPHthalmic SOLUTION 0.1 %	3	EDS
<i>apraclonidine hcl ophthalmic solution</i>	2	
AZOPT OPHthalmic SUSPENSION	3	EDS
<i>betaxolol hcl ophthalmic solution</i>	2	EDS
BETIMOL OPHthalmic SOLUTION	3	EDS
BETOPTIC-S OPHthalmic SUSPENSION	4	EDS
<i>bimatoprost ophthalmic solution</i>	2	EDS
<i>brimonidine tartrate ophthalmic solution</i>	2	EDS
<i>carteolol hcl ophthalmic solution</i>	2	EDS
COMBIGAN OPHthalmic SOLUTION	3	EDS
COSOPT PF OPHthalmic SOLUTION	4	EDS
<i>dorzolamide hcl ophthalmic solution</i>	2	EDS
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	2	EDS
IOPIDINE OPHthalmic SOLUTION 1 %	3	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	2	EDS
<i>methazolamide oral tablet</i>	2	EDS
<i>metipranolol ophthalmic solution</i>	2	EDS
PHOSPHOLINE IODIDE OPHthalmic SOLUTION RECONSTITUTED	3	EDS
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	2	EDS
SIMBRINZA OPHthalmic SUSPENSION	3	EDS
<i>timolol maleate ophthalmic gel forming solution</i>	2	EDS
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>	1	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
<i>timolol maleate ophthalmic solution 0.5 % (daily)</i>	2	EDS
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	4	EDS
Ophthalmic Anti-Inflammatories		
ACUVAIL OPHTHALMIC SOLUTION	3	
ALREX OPHTHALMIC SUSPENSION	3	
BROMSITE OPHTHALMIC SOLUTION	4	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	2	
<i>diclofenac sodium ophthalmic solution</i>	2	
DUREZOL OPHTHALMIC EMULSION	4	
FLAREX OPHTHALMIC SUSPENSION	3	
<i>fluorometholone ophthalmic suspension</i>	2	
<i>flurbiprofen sodium ophthalmic solution</i>	2	
FML FORTE OPHTHALMIC SUSPENSION	3	
FML OPHTHALMIC OINTMENT	3	
ILEVRO OPHTHALMIC SUSPENSION	3	
<i>ketorolac tromethamine ophthalmic solution</i>	2	
LOTEMAX OPHTHALMIC GEL	3	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	3	
MAXIDEX OPHTHALMIC SUSPENSION	3	
NEVANAC OPHTHALMIC SUSPENSION	3	
PRED MILD OPHTHALMIC SUSPENSION	3	
<i>prednisolone acetate ophthalmic suspension</i>	2	
<i>prednisolone sodium phosphate ophthalmic solution</i>	2	
PROLENSA OPHTHALMIC SOLUTION	4	
XIIDRA OPHTHALMIC SOLUTION	3	EDS
Ophthalmic Prostaglandin And Prostaglandin Analogs		
<i>bimatoprost ophthalmic solution</i>	2	EDS
<i>latanoprost ophthalmic solution</i>	1	EDS
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	3	EDS
RHOPRESSA OPHTHALMIC SOLUTION	4	EDS
TRAVATAN Z OPHTHALMIC SOLUTION	3	EDS
ZIOPTAN OPHTHALMIC SOLUTION	4	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Otic Agents		
Otic Agents		
CIPRO HC OTIC SUSPENSION	4	
CIPRODEX OTIC SUSPENSION	3	
COLY-MYCIN S OTIC SUSPENSION	4	
<i>hydrocortisone-acetic acid otic solution</i>	2	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	2	
<i>neomycin-polymyxin-hc otic suspension</i>	2	
OTOVEL OTIC SOLUTION	4	
Respiratory Tract/ Pulmonary Agents		
Antihistamines		
<i>azelastine hcl nasal solution 0.1 %, 0.15 %</i>	2	
<i>carbinoxamine maleate oral solution</i>	2	PA; AL (Max 64 Years)
<i>carbinoxamine maleate oral tablet 4 mg</i>	2	PA; AL (Max 64 Years)
CLARINEX ORAL SYRUP	4	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	4	
<i>clemastine fumarate oral tablet 2.68 mg</i>	2	PA; AL (Max 64 Years)
<i>cyproheptadine hcl oral syrup</i>	2	PA; AL (Max 64 Years)
<i>cyproheptadine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>desloratadine oral tablet</i>	2	
<i>desloratadine oral tablet dispersible 2.5 mg</i>	2	QL (30 EA per 30 days)
<i>desloratadine oral tablet dispersible 5 mg</i>	2	
<i>diphenhydramine hcl injection solution</i>	2	
<i>hydroxyzine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>hydroxyzine pamoate oral capsule</i>	2	PA; AL (Max 64 Years)
<i>levocetirizine dihydrochloride oral solution</i>	2	
<i>levocetirizine dihydrochloride oral tablet</i>	2	
<i>olopatadine hcl nasal solution</i>	2	
<i>promethazine hcl injection solution</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral syrup</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
SEMPREX-D ORAL CAPSULE	4	
Anti-Inflammatories, Inhaled Corticosteroids		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
ADVAIR HFA INHALATION AEROSOL	3	EDS
ARMONAIR RESPICLICK 113 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	EDS
ARMONAIR RESPICLICK 232 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	EDS
ARMONAIR RESPICLICK 55 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	EDS
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT	2	QL (30 EA per 30 days); EDS
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200 MCG/ACT, 50 MCG/ACT	2	EDS
ASMANEX 120 METERED DOSES INHALATION AEROSOL POWDER BREATH ACTIVATED	2	EDS
ASMANEX 30 METERED DOSES INHALATION AEROSOL POWDER BREATH ACTIVATED	2	EDS
ASMANEX 60 METERED DOSES INHALATION AEROSOL POWDER BREATH ACTIVATED	2	EDS
ASMANEX HFA INHALATION AEROSOL	2	EDS
BECONASE AQ NASAL SUSPENSION	4	
<i>budesonide inhalation suspension</i>	2	BD; EDS
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 50 MCG/BLIST	2	QL (60 EA per 30 days); EDS
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/BLIST	2	EDS
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT	2	QL (12 GM per 30 days); EDS
FLOVENT HFA INHALATION AEROSOL 220 MCG/ACT	2	EDS
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	2	QL (10.6 GM per 30 days); EDS
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	2	QL (50 ML per 25 days)
<i>fluticasone propionate nasal suspension</i>	2	
OMNARIS NASAL SUSPENSION	4	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	2	EDS
QNASL CHILDRENS NASAL AEROSOL SOLUTION	4	QL (4.9 GM per 30 days)
QNASL NASAL AEROSOL SOLUTION	4	

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Drug Name	Tier	Requirements/Limits
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT	2	QL (10.6 GM per 30 days); EDS
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 80 MCG/ACT	2	EDS
ZETONNA NASAL AEROSOL SOLUTION	4	
Antileukotrienes		
<i>montelukast sodium oral packet</i>	2	EDS
<i>montelukast sodium oral tablet</i>	2	EDS
<i>montelukast sodium oral tablet chewable</i>	2	EDS
<i>zafirlukast oral tablet</i>	2	EDS
<i>zileuton er oral tablet extended release 12 hour</i>	4	PA
ZYFLO ORAL TABLET	5	PA
Bronchodilators, Anticholinergic		
ATROVENT HFA INHALATION AEROSOL SOLUTION	3	EDS
<i>ipratropium bromide inhalation solution</i>	2	BD; EDS
<i>ipratropium bromide nasal solution</i>	2	QL (30 ML per 30 days); EDS
SEEBRI NEOHALER INHALATION CAPSULE	4	EDS
SPIRIVA HANDHALER INHALATION CAPSULE	3	EDS
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	3	EDS
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	4	EDS
TUDORZA PRESSAIR INHALATION AEROSOL POWDER, BREATH ACTIVATED	4	EDS
Bronchodilators, Sympathomimetic		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS
ADVAIR HFA INHALATION AEROSOL	3	EDS
<i>albuterol sulfate er oral tablet extended release 12 hour</i>	2	EDS
<i>albuterol sulfate inhalation nebulization solution</i>	2	BD; EDS
<i>albuterol sulfate oral syrup</i>	2	EDS
<i>albuterol sulfate oral tablet</i>	2	EDS
ARCAPTA NEOHALER INHALATION CAPSULE	3	EDS
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
BROVANA INHALATION NEBULIZATION SOLUTION	4	BD; EDS
DULERA INHALATION AEROSOL	4	EDS
<i>epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	2	
<i>fluticasone-salmeterol inhalation aerosol powder breath activated</i>	2	EDS
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	2	BD; EDS
<i>levalbuterol tartrate inhalation aerosol</i>	2	EDS
<i>metaproterenol sulfate oral syrup</i>	2	EDS
<i>metaproterenol sulfate oral tablet</i>	2	EDS
PERFOROMIST INHALATION NEBULIZATION SOLUTION	5	BD
PROAIR HFA INHALATION AEROSOL SOLUTION	3	EDS
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	3	EDS
<i>terbutaline sulfate injection solution</i>	2	
<i>terbutaline sulfate oral tablet</i>	2	EDS
VENTOLIN HFA INHALATION AEROSOL SOLUTION	3	EDS
Cystic Fibrosis Agents		
CAYSTON INHALATION SOLUTION RECONSTITUTED	5	
KALYDECO ORAL PACKET	5	PA New Starts
KALYDECO ORAL TABLET	5	PA New Starts
ORKAMBI ORAL TABLET	5	PA
PULMOZYME INHALATION SOLUTION	5	BD
SYMDEKO ORAL TABLET THERAPY PACK	5	PA
TOBI PODHALER INHALATION CAPSULE	5	PA New Starts
Mast Cell Stabilizers		
<i>cromolyn sodium inhalation nebulization solution</i>	2	BD; EDS
<i>cromolyn sodium oral concentrate</i>	2	EDS

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Drug Name	Tier	Requirements/Limits
Phosphodiesterase Inhibitors, Airways Disease		
<i>aminophylline intravenous solution</i>	2	
DALIRESP ORAL TABLET 250 MCG	4	QL (28 EA per 365 days)
DALIRESP ORAL TABLET 500 MCG	4	EDS
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	EDS
<i>theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg</i>	2	EDS
<i>theophylline er oral tablet extended release 24 hour</i>	2	EDS
<i>theophylline oral solution</i>	2	EDS
Pulmonary Antihypertensives		
ADCIRCA ORAL TABLET	5	PA New Starts
ADEMPAS ORAL TABLET	5	PA New Starts
LETAIRIS ORAL TABLET	5	PA New Starts
OPSUMIT ORAL TABLET	5	PA New Starts
ORENITRAM ORAL TABLET EXTENDED RELEASE	4	PA New Starts; EDS
REMODULIN INJECTION SOLUTION	4	PA New Starts; OBT
REVATIO ORAL SUSPENSION RECONSTITUTED	5	PA New Starts
<i>sildenafil citrate intravenous solution</i>	5	PA New Starts
<i>sildenafil citrate oral tablet 20 mg</i>	2	PA New Starts; PAH only; EDS
TRACLEER ORAL TABLET	5	PA New Starts
TRACLEER ORAL TABLET SOLUBLE	5	PA New Starts
VENTAVIS INHALATION SOLUTION	4	PA New Starts; EDS
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation solution</i>	2	BD
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5	PA New Starts; OBT
GLASSIA INTRAVENOUS SOLUTION	5	PA New Starts; OBT
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	4	PA; EDS
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5	PA New Starts; OBT
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	3	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
UTIBRON NEOHALER INHALATION CAPSULE	4	EDS
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML 1 ML	3	
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA New Starts; OBT
Respiratory Tract/ Pulmonary Agents		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	EDS
ADVAIR HFA INHALATION AEROSOL	3	EDS
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	3	EDS
DYMISTA NASAL SUSPENSION	4	
ESBRIET ORAL CAPSULE	5	PA
ESBRIET ORAL TABLET	5	PA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>ipratropium-albuterol inhalation solution</i>	2	BD; EDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; OBT
OFEV ORAL CAPSULE	5	PA
<i>promethazine vc plain oral solution</i>	2	
PULMOZYME INHALATION SOLUTION	5	BD
SYMBICORT INHALATION AEROSOL	3	EDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; OBT
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>carisoprodol oral tablet</i>	2	PA; AL (Max 64 Years)
<i>chlorzoxazone oral tablet 500 mg</i>	2	PA; AL (Max 64 Years)
<i>cyclobenzaprine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>metaxall oral tablet</i>	2	PA; AL (Max 64 Years)
<i>metaxalone oral tablet</i>	2	PA; AL (Max 64 Years)
<i>methocarbamol oral tablet</i>	2	PA; AL (Max 64 Years)
<i>orphenadrine citrate er oral tablet extended release 12 hour</i>	2	PA; AL (Max 64 Years)
<i>tizanidine hcl oral capsule</i>	2	EDS

You can find information on what the symbols and abbreviations on this table mean by going to page V.

Drug Name	Tier	Requirements/Limits
Sleep Disorder Agents		
Gaba Receptor Modulators		
<i>temazepam oral capsule</i>	2	QL (7 EA per 30 days)
<i>zolpidem tartrate oral tablet</i>	2	PA New Starts; AL (Max 64 Years)
Sleep Disorders, Other		
<i>armodafinil oral tablet</i>	2	PA; EDS
<i>doxepin hcl oral capsule 10 mg, 100 mg, 25 mg, 50 mg, 75 mg</i>	2	PA New Starts; AL (Max 64 Years); EDS
<i>doxepin hcl oral concentrate</i>	2	PA New Starts; AL (Max 64 Years); EDS
HETLIOZ ORAL CAPSULE	5	PA
<i>modafinil oral tablet</i>	2	PA; EDS
ROZEREM ORAL TABLET	3	EDS
XYREM ORAL SOLUTION	5	PA New Starts

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Language Assistance Services

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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

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