



**Regence BlueCross Blue Shield of Oregon
Oregon Standard Formulary**

Prescription drug benefits from Regence BlueCross BlueShield of Oregon

Regence BlueCross BlueShield of Oregon wants you to get the most from your benefits and to have the information you need to make smart decisions about prescription drugs. Our prescription drug benefit provides resources to help you and your doctor understand the latest and best information about effective, quality drugs that also provide value.

Regence BlueCross BlueShield of Oregon prescription drug program

Your prescription drug coverage provides benefits for drugs listed on Regence BlueCross BlueShield of Oregon's Oregon Standard Formulary. Medications not listed on this formulary (non-formulary medications) are not covered. The formulary is a list of Food and Drug Administration (FDA)-approved prescription generic, brand-name and specialty drugs. Regence consults with a team of physicians and pharmacists to develop the formulary, which offers drug treatment choices for covered medical conditions. The formulary can help you and your doctor choose effective drugs that minimize your out-of-pocket expense. You can buy formulary drugs at participating retail, mail-order and specialty pharmacies. The Regence formulary is available on regence.com.

Changes to the formulary

Our Pharmacy & Therapeutics Committee (made up of doctors and pharmacists who practice in the communities we serve) continues to review the latest evidence to identify opportunities for promoting safe, effective and affordable drug therapy. Generally, if you are currently taking a formulary drug, its formulary status will not change during the year unless:

- The same drug becomes available in generic form, or
- Safety or effectiveness concerns are raised, or
- The Pharmacy & Therapeutics Committee determines that changes to the formulary would "overall" be in the best interest of health plan members. In such cases, impacted individuals are always notified in writing if the formulary change results in a reduction of benefits or an increase in copay.

What is the Oregon Standard Formulary prescription drug benefit?

With an Oregon Standard Formulary benefit, prescription drugs fall into one of four categories or "tiers." Each tier has a different cost share.*

| | |
|----------------------------------|--|
| Tier 1— Generic | Lowest cost share. Generic drugs are as effective, safe and high-quality as their brand-name counterparts, yet less expensive. |
| Tier 2— Preferred brand-name | Because of their value and effectiveness, these are considered to be preferred when there is no generic. |
| Tier 3— Non-preferred brand-name | These drugs may be more expensive and are less preferred than their alternatives in Tier 1 or Tier 2. |
| Tier 4—Specialty medications | These are used to treat complex medical conditions and are available through our designated specialty pharmacy. They may require more involvement with your doctor and require special storage and handling. |

*"Cost share" means that your benefit may feature a deductible, fixed-dollar copay tiers, percentage/coinsurance tiers, or a combination of both.

What are your cost shares for Tier 1, 2, 3 or 4 drugs?

You can find your cost shares in your benefit booklet or when you log in to regence.com. Of course, you can always call Customer Service at the number listed on the back of your member card.

About prescription drugs

Preventive drugs

Preventive care benefits are an integral part of a comprehensive health care plan that includes preventive drug therapies. Under some plans, you may not be required to pay a copay or coinsurance, or meet your deductible for preventive medications.

Preventive drugs are prescribed to prevent the occurrence of a disease or condition for those individuals with risk factors, or to prevent the recurrence of a disease or condition for those who have recovered. They do not include drugs that treat an existing illness, injury or condition.

Refer to your plan benefit booklet or online benefit summary to determine if your plan covers preventive drugs. To view the covered PPACA Preventive Care Medication List, go to RegenceRx.com and click on *Learn About Medications > What's Covered*.

Advantages of generic drugs

Consumer Reports says, "*Generics are every bit as pure, potent, and safe as brands.*"¹ That's because the FDA regulates generic drugs just as it does brand-name drugs, ensuring that generics offer the same level of quality, strength, effectiveness and purity as their brand-name equivalents. All generics, by law, must have the same active ingredients as their brand-named equivalent.

- Generic equivalent: The same active ingredient, strength and dosage form as the brand-name
- Generic alternative: A different chemical that has a similar effect as the brand-name

Generic drugs generally cost less than brand-name drugs because they are created without the expenses incurred by brand-name drugs (such as research, development and marketing). Talk with your doctor to see whether a generic drug is right for you.

About specialty drugs

Many people with complex conditions, such as, but not limited to, multiple sclerosis, rheumatoid arthritis and cancer, require special medications. These drugs are available through our designated specialty pharmacy and may require special handling.

We have created the Specialty Pharmacy Program to focus solely on the delivery of specialty drugs and the specific needs of members who require them. The program includes:

- Educational materials, counseling and product information
- 24-hour access to clinical assistance from pharmacists and nurses
- Refill reminders
- Free delivery and supplies
- Convenient delivery in unmarked packaging to assure privacy

You are allowed to fill your first specialty prescription at a retail pharmacy if available. After this fill, you will get a letter advising you that future fills must be done at one of our contracted specialty pharmacies in order for your drug to be covered. For more information on the Specialty Pharmacy Program, refer to the *Benefit from Special Programs* section of RegenceRx.com.

Tips for getting your prescription filled

Filling your prescription at a retail pharmacy

We have contracted with RegenceRx for our participating pharmacy network. This network provides with you access to a nationwide network of over 55,000 pharmacies. To receive coverage under your plan's prescription drug benefit, you need to use a pharmacy in this network and present your member card before purchasing your prescription. This will not only ensure that you pay the correct cost share, it will also provide the pharmacist with your prescription history to help inform him or her of any drug sensitivities you may have.

If you go to a pharmacy not in the network, your medication will not be covered.

Most pharmacies in your area are part of the network. If you need a prescription filled while you're traveling, you'll find network pharmacies throughout the United States. Simply go to *Find a Provider* on regence.com.

Your prescription drug benefit usually provides you with a 30-day supply of medication at a retail pharmacy. Check your benefit booklet or benefit summary online to determine your pharmacy benefit limit.

If your prescription is filled for less than the typical 30-day supply, you will still have to pay the full copay amount.

Save time and money with prescriptions by mail

If you take a maintenance medication, you can receive your medicine by mail from Walgreens Mail Service Pharmacy™, an independent company that provides our members with mail-order pharmacy service. You save time with fewer trips to the local pharmacy, and you save money with discounted prices and lower cost shares.

This service lets you receive prescriptions up to the maximum supply allowed by your health plan—typically 90 days, but it may vary by plan—at a lower cost than what you would pay for the same amount at a retail pharmacy. Refer to your benefit booklet for details.

How to receive your prescription by mail from the Walgreens Mail Service Pharmacy

Getting started is easy!

1. Since it takes about two weeks to receive your prescription, ask your doctor to write two separate prescriptions (be sure that your doctor indicates if refills are allowed on your prescription):
 - a. One for a 30-day supply that you can fill right away at a local retail pharmacy
 - b. One for a 90-day supply, or supply maximum allowed by your plan, that you can mail or fax to Walgreens Mail Service within two weeks of your medicine running out
2. Complete a Mail Service Registration Form, which you can download from the *Get Prescriptions* section on RegenceRx.com.
3. Send your prescription(s), order form and payment for each prescription to the address or fax number located on the order form. You can pay with a personal check or credit card.

You will receive your prescriptions by mail in about two weeks, delivered in sealed, insulated (when necessary) and tamper-evident packaging.

Make it even easier

Ordering new prescriptions and refills is easier once you establish an account with the Walgreens Mail Service Pharmacy. Simply log in to Walgreens.com/MailService and follow the instructions for convenient online refilling of your prescription. Or order your refills by calling Walgreens Customer Care at 1 (888) 832-5462.

Quality drug therapy with the Prior Authorization Program

Using your medications correctly for maintaining good health is important. Our Prior Authorization Program supports you and your doctor as you make decisions about your care and the use of prescription medications. The program aims to improve the quality of your drug therapy by:

- Promoting the appropriate use of your medications
- Checking the appropriate length of your drug therapy

How the program works

When you go to the pharmacy to fill your prescription, your prescription drug therapy is checked to see if it meets recommended guidelines:

- If the drug meets these guidelines, your prescription is filled instantly without interruption.
- If the drug does not meet the guidelines, your prescription will not be filled until it has been reviewed.

Review process

The prior authorization process is simple. Your doctor or pharmacist can request prior authorization by going to [RegenceRx.com/pa](https://www.RegenceRx.com/pa), calling 1 (800) 643-5918, or faxing 1 (888) 437-1510.

Once we receive your doctor's information, our review process will take one to two business days. We'll send you a letter confirming the decision made about the drug therapy. We'll also fax the notification to your doctor. If your drug therapy is approved, then your prescription is covered by your prescription drug benefit, and it can be filled at your pharmacy the same day the decision is made.

Medications subject to the Prior Authorization Program

Drugs tagged with **PA** in the formulary must go through the prior authorization review process. For an updated list of medications that require prior authorization, refer to the *Get Prescriptions* section of [RegenceRx.com](https://www.RegenceRx.com).

Frequently asked questions

Q. What are my cost-share amounts?

A. Check your benefit booklet to see what your cost share is for each tier.

Q. What if I want to take a brand-name drug, even if there is a generic available?

A. The drug you take is your choice. In some cases, if you choose to stay on a brand-name drug when a generic is available, you may have to pay more or up to the full price for your medication.

Q. Are the drugs on the formulary just the ones that are the cheapest?

A. No. All the drugs on our formulary must be FDA-approved and determined by the Pharmacy & Therapeutics Committee to be safe and effective. When several drugs are similar in safety and effectiveness, one or more of the lower-cost choices are selected for our formulary.

Q. I've heard that some people can't take generic drugs. Why not?

A. A brand-name drug and its generic equivalent have the same active ingredients. However, different manufacturers sometimes use different inactive ingredients to hold the active ingredients together in a pill or capsule. In rare instances, people may have an allergic reaction to the inactive ingredients. This type of allergic reaction can happen just as often with a brand-name drug as with a generic drug.

Q. What if there is no generic drug available to substitute for my brand-name drug?

A. Even if your brand-name drug does not have a generic equivalent yet, there may be another generic available within the same class of drugs that will work just as well for you. Consult with your doctor to evaluate your options.

Q. What if my doctor says I have to take a drug not included on the formulary?

A. Non-formulary medications are not covered under your prescription drug benefit. If you choose to use a non-formulary medication, you will be responsible for the full price.

Although not typically covered, if a medication not on the formulary is determined to be medically necessary, it may be substituted for coverage. You or your doctor will need to request prior authorization so that we can determine that a medication not on the formulary is medically necessary. Review your benefit booklet or employer's contract for more information on this substitution process.

Q. Are there any excluded categories of drugs?

A. Yes. Common exclusions include drugs for obesity, infertility and sexual dysfunction on Regence BlueCross BlueShield of Oregon's Oregon Standard Formulary. Certain drugs that have an available generic or an over-the-counter alternative are not covered. Review your benefit booklet or employer's contract for your plan's exclusions.

Q. What does it mean when my drug is covered under the medical benefit?

A. Drugs covered under the medical benefit are often injected or infused and typically require administration by a health care professional. These drugs and their related services are covered under your medical benefit and are excluded from coverage under the prescription drug benefit. Please refer to your benefit contract, log in to see your benefits on regence.com or contact Customer Service for coverage details specific to your plan.

Q. Can I use any pharmacy I want?

A. No. To receive benefit coverage under this program, you need to use a participating network pharmacy. If you go to a pharmacy not in the network, you will receive no benefits at all.

When it comes to specialty drugs, they are covered only when purchased through our specialty pharmacy. Refer to your benefit booklet for details about the Specialty Pharmacy Program and coverage at a non-network pharmacy.

Q. How do I find a network pharmacy near my home or when I am away?

A. Most pharmacies in your area are likely to be part of the network. There are also network pharmacies throughout the United States. Use *Find a Provider* on regence.com to find a network pharmacy near you.

Q. How do I enroll in the Specialty Pharmacy Program?

A. You are allowed to fill your first specialty prescription at the retail pharmacy. After a fill, we will send a letter advising you that future fills must be done at one of our contracted specialty pharmacies for your drug to be covered by your health plan. Call Customer Service using the number on the back of your member card for more information about our contracted specialty pharmacies.

Q. Is there more drug information available to members?

A. Members may log in to regence.com for more information on their medications and benefits.

Standard OR

| Drug | Tier | Notes |
|---|--------|-------|
| *Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant* | | |
| *Amphetamines**-*Amphetamine Mixtures*** | | |
| Adderall XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Amphetamine-Dextroamphet ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Amphetamine-Dextroamphetamine ORAL TABLET | Tier 1 | |
| *Amphetamines**-*Amphetamines*** | | |
| Dextroamphetamine Sulfate ORAL TABLET | Tier 1 | |
| Dextroamphetamine Sulfate ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Methamphetamine HCl ORAL TABLET | Tier 1 | |
| Vyvanse ORAL CAPSULE 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG | Tier 2 | |
| Zenzedi ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG | Tier 1 | |
| *Analeptics**-*Analeptics*** | | |
| Caffeine Citrate ORAL SOLUTION 20 MG/ML | Tier 1 | |
| *Anorexiant Non-Amphetamine**-*Anorexiant Non-Amphetamine*** | | |
| Diethylpropion HCl ORAL TABLET | Tier 1 | |
| Diethylpropion HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Phendimetrazine Tartrate ORAL TABLET | Tier 1 | |
| Phendimetrazine Tartrate ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|----------------------------|
| *Attention-Deficit/Hyperactivity Disorder (Adhd) Agents**-*Adhd Agent - Selective Alpha Adrenergic Agonists*** | | |
| CloNIDine HCl ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| GuanFACINE HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| *Attention-Deficit/Hyperactivity Disorder (Adhd) Agents**-*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor*** | | |
| Strattera ORAL CAPSULE | Tier 3 | |
| *Stimulants - Misc.**-*Stimulants - Misc.*** | | |
| Daytrana TRANSDERMAL PATCH | Tier 3 | |
| Dexmethylphenidate HCl ORAL TABLET | Tier 1 | |
| Dexmethylphenidate HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Focalin XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 25 MG, 35 MG, 5 MG | Tier 3 | |
| Metadate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Methylphenidate HCl ORAL SOLUTION | Tier 1 | |
| Methylphenidate HCl ORAL TABLET | Tier 1 | |
| Methylphenidate HCl ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Methylphenidate HCl ER (CD) ORAL CAPSULE EXTENDED RELEASE* | Tier 1 | |
| Methylphenidate HCl ER (LA) ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Modafinil ORAL TABLET | Tier 1 | PA; QL (30 EA per 30 Days) |
| Nuvigil ORAL TABLET | Tier 3 | PA; QL (30 EA per 30 Days) |
| Quillivant XR ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| *Amebicides* | | |
| *Amebicides**-*Amebicides*** | | |
| Yodoxin ORAL TABLET | Tier 3 | |
| *Aminoglycosides* | | |
| *Aminoglycosides**-*Aminoglycosides*** | | |
| Neomycin Sulfate ORAL TABLET | Tier 1 | |
| Paromomycin Sulfate ORAL CAPSULE | Tier 1 | |
| Tobramycin INHALATION NEBULIZATION SOLUTION | Tier 4 | SP |

| Drug | Tier | Notes |
|--|--------|--------------------------------|
| *Analgesics - Anti-Inflammatory* | | |
| *Antirheumatic - Enzyme Inhibitors**-*Antirheumatic - Janus Kinase (Jak) Inhibitors*** | | |
| Xeljanz ORAL TABLET | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| *Antirheumatic Antimetabolites**-*Antirheumatic Antimetabolites*** | | |
| Rheumatrex ORAL TABLET | Tier 3 | |
| *Anti-Tnf-Alpha - Monoclonal Antibodies**-*Anti-Tnf-Alpha - Monoclonal Antibodies*** | | |
| Humira SUBCUTANEOUS* 10 MG/0.2ML | Tier 4 | PA; SP |
| Humira SUBCUTANEOUS* KIT | Tier 4 | PA; SP |
| Humira Pen-Crohns Starter SUBCUTANEOUS* KIT | Tier 4 | PA; SP |
| Simponi SUBCUTANEOUS* | Tier 4 | PA; SP |
| *Gold Compounds**-*Gold Compounds*** | | |
| Ridaura ORAL CAPSULE | Tier 2 | |
| *Interleukin-1 Blockers**-*Interleukin-1 Blockers*** | | |
| Arcalyst SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP; QL (4 EA per 30 Days) |
| *Interleukin-1 Receptor Antagonist (Il-1Ra)**-*Interleukin-1 Receptor Antagonist (Il-1Ra)*** | | |
| Kineret SUBCUTANEOUS* | Tier 4 | PA; SP |
| *Interleukin-6 Receptor Inhibitors**-*Interleukin-6 Receptor Inhibitors*** | | |
| Actemra SUBCUTANEOUS* | Tier 4 | PA; SP |
| *Nonsteroidal Anti-Inflammatory Agents (Nsaids)**-*Cyclooxygenase 2 (Cox-2) Inhibitors*** | | |
| CeleBREX ORAL CAPSULE 100 MG, 200 MG, 50 MG | Tier 3 | PA; QL (60 EA per 30 Days) |
| CeleBREX ORAL CAPSULE 400 MG | Tier 3 | PA; QL (30 EA per 30 Days) |
| *Nonsteroidal Anti-Inflammatory Agents (Nsaids)**-*Nonsteroidal Anti-Inflammatory Agent Combinations*** | | |
| Diclofenac-Misoprostol ORAL TABLET DELAYED RELEASE | Tier 1 | |

| Drug | Tier | Notes |
|--|-------------|---------------------------|
| Vimovo ORAL TABLET DELAYED RELEASE | Tier 3 | PA |
| *Nonsteroidal Anti-Inflammatory Agents (Nsaids)**-Nonsteroidal Anti-Inflammatory Agents (Nsaids)*** | | |
| Diclofenac Potassium ORAL TABLET | Tier 1 | |
| Diclofenac Sodium ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Diclofenac Sodium ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Etodolac ORAL CAPSULE | Tier 1 | |
| Etodolac ORAL TABLET | Tier 1 | |
| Etodolac ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Fenoprofen Calcium ORAL TABLET | Tier 1 | |
| Flurbiprofen ORAL TABLET | Tier 1 | |
| Ibuprofen ORAL TABLET 400 MG, 600 MG, 800 MG | Tier 1 | |
| Indomethacin ORAL CAPSULE | Tier 1 | |
| Indomethacin ER ORAL CAPSULE EXTENDED RELEASE* | Tier 1 | |
| Ketoprofen ORAL CAPSULE | Tier 1 | |
| Ketoprofen ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Ketorolac Tromethamine ORAL TABLET | Tier 1 | |
| Meclofenamate Sodium ORAL CAPSULE | Tier 1 | |
| Mefenamic Acid ORAL CAPSULE | Tier 1 | |
| Meloxicam ORAL TABLET | Tier 1 | |
| Nabumetone ORAL TABLET | Tier 1 | |
| Nalfon ORAL CAPSULE 400 MG | Tier 3 | |
| Naprelan ORAL TABLET EXTENDED RELEASE 24 HR* 750 MG | Tier 3 | |
| Naproxen ORAL SUSPENSION | Tier 1 | |
| Naproxen ORAL TABLET | Tier 1 | |
| Naproxen DR ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Naproxen Sodium ORAL TABLET 275 MG, 550 MG | Tier 1 | |
| Oxaprozin ORAL TABLET | Tier 1 | |
| Piroxicam ORAL CAPSULE | Tier 1 | |
| Sprix NASAL SOLUTION | Tier 3 | PA; QL (5 EA per 30 Days) |

| Drug | Tier | Notes |
|---|--------|----------------------------------|
| Sulindac ORAL TABLET | Tier 1 | |
| Tolmetin Sodium ORAL CAPSULE | Tier 1 | |
| Tolmetin Sodium ORAL TABLET | Tier 1 | |
| *Pyrimidine Synthesis Inhibitors**-*Pyrimidine Synthesis Inhibitors*** | | |
| Leflunomide ORAL TABLET | Tier 1 | |
| *Selective Costimulation Modulators**-*Selective Costimulation Modulators*** | | |
| Orencia SUBCUTANEOUS* | Tier 4 | PA; SP |
| *Soluble Tumor Necrosis Factor Receptor Agents**-*Soluble Tumor Necrosis Factor Receptor Agents*** | | |
| Enbrel SUBCUTANEOUS* 25 MG/0.5ML, 50 MG/ML | Tier 4 | PA; SP |
| Enbrel SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (8 EA per 30 Days) |
| Enbrel SureClick SUBCUTANEOUS* | Tier 4 | PA; SP |
| *Analgesics - Nonnarcotic* | | |
| *Analgesic Combinations**-*Analgesic Combinations*** | | |
| Duraxin ORAL CAPSULE | Tier 1 | |
| Ed-Flex ORAL CAPSULE | Tier 1 | |
| *Analgesic Combinations**-*Analgesics-Sedatives*** | | |
| Butalbital-Acetaminophen ORAL TABLET | Tier 1 | |
| Butalbital-APAP-Caffeine ORAL CAPSULE | Tier 1 | |
| Butalbital-APAP-Caffeine ORAL TABLET 50-325-40 MG | Tier 1 | |
| Butalbital-ASA-Caffeine ORAL CAPSULE | Tier 1 | |
| Capacet ORAL CAPSULE | Tier 1 | |
| Margesic ORAL CAPSULE | Tier 1 | |
| Marten-Tab ORAL TABLET | Tier 1 | |
| *Salicylates**-*Salicylate Combinations*** | | |
| Choline & Mag Trisalicylate ORAL TABLET 1000 MG | Tier 1 | |
| Choline-Mag Trisalicylate ORAL LIQUID† | Tier 1 | |
| *Salicylates**-*Salicylates*** | | |
| Aspirin Low Dose ORAL TABLET | Tier 1 | 1 (Preventative Medication); OTC |
| Diflunisal ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|----------------------------|
| Salsalate ORAL TABLET | Tier 1 | |
| *Analgesics - Opioid* | | |
| *Opioid Agonists**-*Opioid Agonists*** | | |
| AVINza ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| Codeine Sulfate ORAL SOLUTION 30 MG/5ML | Tier 1 | |
| Codeine Sulfate ORAL TABLET | Tier 1 | |
| ConZip ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| Exalgo ORAL 32 MG | Tier 3 | |
| FentaNYL TRANSDERMAL PATCH 72 HR | Tier 1 | |
| FentaNYL Citrate BUCCAL LOLLIPOPOP | Tier 1 | PA; QL (90 EA per 30 Days) |
| HYDROmorphone HCl ORAL TABLET | Tier 1 | |
| HYDROmorphone HCl SUPPOSITORY | Tier 1 | |
| HYDROmorphone HCl ER ORAL 12 MG, 16 MG, 8 MG | Tier 1 | |
| Kadian ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG, 40 MG | Tier 3 | |
| Lazanda NASAL SOLUTION 100 MCG/ACT | Tier 3 | PA; QL (90 EA per 30 Days) |
| Levorphanol Tartrate ORAL TABLET | Tier 1 | |
| Meperidine HCl ORAL SOLUTION | Tier 1 | |
| Meperidine HCl ORAL TABLET | Tier 1 | |
| Methadone HCl ORAL CONCENTRATE | Tier 1 | |
| Methadone HCl ORAL SOLUTION | Tier 1 | |
| Methadone HCl ORAL TABLET | Tier 1 | |
| Methadone HCl ORAL TABLET SOLUBLE | Tier 1 | |
| Methadose ORAL CONCENTRATE | Tier 1 | |
| Methadose ORAL TABLET SOLUBLE | Tier 1 | |
| Morphine Sulfate ORAL SOLUTION | Tier 1 | |
| Morphine Sulfate ORAL TABLET | Tier 1 | |
| Morphine Sulfate SUPPOSITORY | Tier 1 | |
| Morphine Sulfate (Concentrate) ORAL SOLUTION 20 MG/ML | Tier 1 | |
| Morphine Sulfate ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Morphine Sulfate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Morphine Sulfate ER Beads ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |

| Drug | Tier | Notes |
|--|-------------|----------------------------|
| Nucynta ORAL TABLET | Tier 3 | |
| Nucynta ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 3 | |
| Opana ER ORAL 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 5 MG, 7.5 MG | Tier 3 | QL (60 EA per 30 Days) |
| OxyCODONE HCl ORAL CAPSULE | Tier 1 | |
| OxyCODONE HCl ORAL CONCENTRATE | Tier 1 | |
| OxyCODONE HCl ORAL SOLUTION | Tier 1 | |
| OxyCODONE HCl ORAL TABLET | Tier 1 | |
| OxyCONTIN ORAL | Tier 3 | PA |
| Oxymorphone HCl ORAL TABLET | Tier 1 | |
| Oxymorphone HCl ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | QL (60 EA per 30 Days) |
| Subsys SUBLINGUAL LIQUID† 100 MCG | Tier 3 | PA; QL (90 EA per 30 Days) |
| TraMADol HCl ORAL TABLET | Tier 1 | |
| TraMADol HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| TraMADol HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| TraMADol HCl ER (Biphasic) ORAL TABLET EXTENDED RELEASE 24 HR* 100 MG | Tier 1 | |
| *Opioid Combinations**-*Codeine Combinations*** | | |
| Acetaminophen-Codeine ORAL SOLUTION | Tier 1 | |
| Acetaminophen-Codeine #2 ORAL TABLET | Tier 1 | |
| Acetaminophen-Codeine #3 ORAL TABLET | Tier 1 | |
| Acetaminophen-Codeine #4 ORAL TABLET | Tier 1 | |
| Ascomp-Codeine ORAL CAPSULE | Tier 1 | |
| Butalbital-APAP-Caff-Cod ORAL CAPSULE | Tier 1 | |
| Butalbital-ASA-Caff-Codeine ORAL CAPSULE | Tier 1 | |
| *Opioid Combinations**-*Hydrocodone Combinations*** | | |
| Hydrocodone-Acetaminophen ORAL SOLUTION 7.5-325 MG/15ML | Tier 1 | |
| Hydrocodone-Acetaminophen ORAL TABLET 10-300 MG, 10-325 MG, 2.5-325 MG, 5-300 MG, 5-325 MG, 7.5-300 MG, 7.5-325 MG | Tier 1 | |
| Hydrocodone-Ibuprofen ORAL TABLET | Tier 1 | |
| Ibudone ORAL TABLET 5-200 MG | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-----------------------------|
| Reprexain ORAL TABLET 10-200 MG | Tier 1 | |
| Vicodin ORAL TABLET 5-300 MG | Tier 1 | |
| Vicodin ES ORAL TABLET 7.5-300 MG | Tier 1 | |
| Vicodin HP ORAL TABLET 10-300 MG | Tier 1 | |
| Xylon ORAL TABLET | Tier 1 | |
| *Opioid Combinations**-*Opioid Combinations*** | | |
| Endocet ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | Tier 1 | |
| Endodan ORAL TABLET | Tier 1 | |
| Oxycodone-Acetaminophen ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG | Tier 1 | |
| Oxycodone-Aspirin ORAL TABLET 4.8355-325 MG | Tier 1 | |
| Oxycodone-Ibuprofen ORAL TABLET | Tier 1 | |
| Roxicet ORAL TABLET 5-325 MG | Tier 1 | |
| *Opioid Combinations**-*Tramadol Combinations*** | | |
| Tramadol-Acetaminophen ORAL TABLET | Tier 1 | |
| *Opioid Partial Agonists**-*Opioid Partial Agonists*** | | |
| Buprenorphine HCl SUBLINGUAL TABLET SUBLINGUAL | Tier 1 | |
| Buprenorphine HCl-Naloxone HCl SUBLINGUAL TABLET SUBLINGUAL | Tier 1 | |
| Butorphanol Tartrate NASAL SOLUTION | Tier 1 | |
| Butrans TRANSDERMAL PATCH WEEKLY | Tier 3 | |
| Pentazocine-Naloxone HCl ORAL TABLET | Tier 1 | |
| Suboxone SUBLINGUAL FILM | Tier 2 | |
| *Androgens-Anabolic* | | |
| *Anabolic Steroids**-*Anabolic Steroids*** | | |
| Anadrol-50 ORAL TABLET | Tier 3 | |
| Oxandrolone ORAL TABLET | Tier 1 | |
| *Androgens**-*Androgens*** | | |
| Androderm TRANSDERMAL PATCH 24 HR 2 MG/24HR, 4 MG/24HR | Tier 3 | PA; QL (60 EA per 30 Days) |
| AndroGel TRANSDERMAL 20.25 MG/1.25GM (1.62%), 40.5 MG/2.5GM (1.62%) | Tier 2 | PA; QL (150 GM per 30 Days) |

| Drug | Tier | Notes |
|---|--------|-----------------------------|
| AndroGel TRANSDERMAL 25 MG/2.5GM, 50 MG/5GM | Tier 2 | PA; QL (300 GM per 30 Days) |
| AndroGel Pump TRANSDERMAL 12.5 MG/ACT (1%) | Tier 2 | PA; QL (300 GM per 30 Days) |
| AndroGel Pump TRANSDERMAL 20.25 MG/ACT (1.62%) | Tier 2 | PA; QL (150 GM per 30 Days) |
| Axiron TRANSDERMAL SOLUTION | Tier 3 | PA; QL (180 ML per 30 Days) |
| Danazol ORAL CAPSULE | Tier 1 | |
| Depo-Testosterone INTRAMUSCULAR* SOLUTION | Tier 3 | |
| Fortesta TRANSDERMAL | Tier 3 | PA; QL (120 GM per 30 Days) |
| Methitest ORAL TABLET | Tier 2 | |
| Testosterone Cypionate INTRAMUSCULAR* SOLUTION | Tier 1 | SI |
| Testosterone Enanthate INTRAMUSCULAR* SOLUTION | Tier 1 | SI |
| *Anorectal Agents* | | |
| *Intrarectal Steroids**-*Intrarectal Steroids*** | | |
| Colocort ENEMA | Tier 1 | |
| Cortifoam FOAM | Tier 3 | |
| Hydrocortisone ENEMA | Tier 1 | |
| *Rectal Combinations**-*Rectal Anesthetic/Steroids*** | | |
| Analpram-HC LOTION | Tier 1 | |
| Hydrocortisone Ace-Pramoxine CREAM | Tier 1 | |
| Hydrocortisone Ace-Pramoxine KIT | Tier 1 | |
| Lidocaine-Hydrocortisone Ace 2.8-0.55 % | Tier 1 | |
| Lidocaine-Hydrocortisone Ace CREAM | Tier 1 | |
| Lidocaine-Hydrocortisone Ace KIT 2-2 %, 3-1 %, 3-2.5 % | Tier 1 | |
| Proctofoam HC FOAM | Tier 3 | |
| *Rectal Steroids**-*Rectal Steroids*** | | |
| Anucort-HC SUPPOSITORY | Tier 1 | |
| Hydrocortisone Acetate SUPPOSITORY | Tier 1 | |
| Proctosol HC CREAM | Tier 1 | |
| Proctozone-HC CREAM | Tier 1 | |
| *Vasodilating Agents**-*Nitrate Vasodilating Agents*** | | |
| Rectiv OINTMENT | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Anthelmintics* | | |
| *Anthelmintics**-*Anthelmintics*** | | |
| Albenza ORAL TABLET | Tier 2 | |
| Biltricide ORAL TABLET | Tier 2 | |
| Ivermectin ORAL TABLET | Tier 1 | |
| *Antianginal Agents* | | |
| *Antianginals-Other**-*Antianginals-Other*** | | |
| Ranexa ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 3 | |
| *Nitrates**-*Nitrates*** | | |
| Dilatrate-SR ORAL CAPSULE EXTENDED RELEASE* | Tier 3 | |
| IsoDitrate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Isosorbide Dinitrate ORAL TABLET | Tier 1 | |
| Isosorbide Dinitrate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Isosorbide Mononitrate ORAL TABLET | Tier 1 | |
| Isosorbide Mononitrate ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Minitran TRANSDERMAL PATCH 24 HR | Tier 1 | |
| Nitro-Bid TRANSDERMAL OINTMENT | Tier 3 | |
| Nitro-Dur TRANSDERMAL PATCH 24 HR 0.3 MG/HR, 0.8 MG/HR | Tier 3 | |
| Nitroglycerin TRANSDERMAL PATCH 24 HR | Tier 1 | |
| Nitroglycerin TRANSLINGUAL SOLUTION | Tier 1 | |
| Nitroglycerin ER ORAL CAPSULE EXTENDED RELEASE* | Tier 1 | |
| Nitrostat SUBLINGUAL TABLET SUBLINGUAL | Tier 3 | |
| *Antianxiety Agents* | | |
| *Antianxiety Agents - Misc.**-*Antianxiety Agents - Misc.*** | | |
| BusPIRone HCl ORAL TABLET | Tier 1 | |
| HydroXYzine HCl ORAL SYRUP | Tier 1 | |
| HydroXYzine HCl ORAL TABLET | Tier 1 | |
| HydroXYzine Pamoate ORAL CAPSULE | Tier 1 | |
| Meprobamate ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Benzodiazepines**-*Benzodiazepines*** | | |
| ALPRAZolam ORAL TABLET | Tier 1 | |
| ALPRAZolam ORAL TABLET DISPERSIBLE | Tier 1 | |
| ALPRAZolam ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| ChlordiazePOXIDE HCl ORAL CAPSULE | Tier 1 | |
| Clorazepate Dipotassium ORAL TABLET | Tier 1 | |
| Diazepam ORAL SOLUTION 1 MG/ML | Tier 1 | |
| Diazepam ORAL TABLET | Tier 1 | |
| LORazepam ORAL CONCENTRATE | Tier 1 | |
| LORazepam ORAL TABLET | Tier 1 | |
| Oxazepam ORAL CAPSULE | Tier 1 | |
| *Antiarrhythmics* | | |
| *Antiarrhythmics Type I-A**-*Antiarrhythmics Type I-A*** | | |
| Disopyramide Phosphate ORAL CAPSULE | Tier 1 | |
| Norpace CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG | Tier 3 | |
| QuiNIDine Gluconate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| QuiNIDine Sulfate ORAL TABLET | Tier 1 | |
| QuiNIDine Sulfate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| *Antiarrhythmics Type I-B**-*Antiarrhythmics Type I-B*** | | |
| Mexiletine HCl ORAL CAPSULE | Tier 1 | |
| *Antiarrhythmics Type I-C**-*Antiarrhythmics Type I-C*** | | |
| Flecainide Acetate ORAL TABLET | Tier 1 | |
| Propafenone HCl ORAL TABLET | Tier 1 | |
| Propafenone HCl ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 1 | |
| *Antiarrhythmics Type Iii**-*Antiarrhythmics Type Iii*** | | |
| Amiodarone HCl ORAL TABLET | Tier 1 | |
| Multaq ORAL TABLET | Tier 3 | |
| Pacerone ORAL TABLET | Tier 1 | |
| Tikosyn ORAL CAPSULE | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antiasthmatic And Bronchodilator Agents* | | |
| *Anti-Inflammatory Agents**-*Anti-Inflammatory Agents*** | | |
| Cromolyn Sodium INHALATION NEBULIZATION SOLUTION | Tier 1 | |
| *Asthma And Bronchodilator Agent Combinations**-*Xanthine-Expectorants** | | |
| * | | |
| Difil-G Forte ORAL LIQUID† | Tier 1 | |
| *Bronchodilators - Anticholinergics**-*Bronchodilators - Anticholinergics*** | | |
| Atrovent HFA INHALATION AEROSOL, SOLUTION | Tier 2 | |
| Ipratropium Bromide INHALATION SOLUTION | Tier 1 | |
| Spiriva HandiHaler INHALATION CAPSULE | Tier 2 | |
| Spiriva Respimat INHALATION AEROSOL, SOLUTION | Tier 2 | |
| Tudorza Pressair INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 3 | |
| *Leukotriene Modulators**-*5-Lipoxygenase Inhibitors*** | | |
| Zyflo ORAL TABLET | Tier 3 | |
| Zyflo CR ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 3 | |
| *Leukotriene Modulators**-*Leukotriene Receptor Antagonists*** | | |
| Montelukast Sodium ORAL PACKET | Tier 1 | |
| Montelukast Sodium ORAL TABLET | Tier 1 | |
| Montelukast Sodium ORAL TABLET CHEWABLE | Tier 1 | |
| Zafirlukast ORAL TABLET | Tier 1 | |
| *Selective Phosphodiesterase 4 (Pde4) Inhibitors**-*Selective Phosphodiesterase 4 (Pde4) Inhibitors*** | | |
| Daliresp ORAL TABLET | Tier 3 | |
| *Steroid Inhalants**-*Steroid Inhalants*** | | |
| Alvesco INHALATION AEROSOL, SOLUTION | Tier 2 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Asmanex 120 Metered Doses INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Asmanex 14 Metered Doses INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Asmanex 30 Metered Doses INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Asmanex 60 Metered Doses INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Asmanex 7 Metered Doses INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Budesonide INHALATION SUSPENSION | Tier 1 | |
| Flovent Diskus INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Flovent HFA INHALATION AEROSOL† | Tier 2 | |
| Pulmicort INHALATION SUSPENSION 1 MG/2ML | Tier 2 | |
| Pulmicort Flexhaler INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Qvar INHALATION AEROSOL, SOLUTION | Tier 2 | |
| *Sympathomimetics**-*Adrenergic Combinations*** | | |
| Advair Diskus INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Advair HFA INHALATION AEROSOL† | Tier 2 | |
| Combivent Respimat INHALATION AEROSOL, SOLUTION | Tier 2 | |
| Dulera INHALATION AEROSOL† | Tier 2 | |
| Ipratropium-Albuterol INHALATION SOLUTION | Tier 1 | |
| Symbicort INHALATION AEROSOL† | Tier 3 | |
| *Sympathomimetics**-*Beta Adrenergics*** | | |
| Albuterol Sulfate INHALATION NEBULIZATION SOLUTION | Tier 1 | |
| Albuterol Sulfate ORAL SYRUP | Tier 1 | |
| Albuterol Sulfate ORAL TABLET | Tier 1 | |
| Albuterol Sulfate ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Arcapta Neohaler INHALATION CAPSULE | Tier 3 | |
| Brovana INHALATION NEBULIZATION SOLUTION | Tier 3 | |
| Foradil Aerolizer INHALATION CAPSULE | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|------------------------|
| Levalbuterol HCl INHALATION NEBULIZATION SOLUTION | Tier 1 | |
| Metaproterenol Sulfate ORAL SYRUP | Tier 1 | |
| Metaproterenol Sulfate ORAL TABLET | Tier 1 | |
| Perforomist INHALATION NEBULIZATION SOLUTION | Tier 3 | |
| ProAir HFA INHALATION AEROSOL, SOLUTION | Tier 2 | |
| Proventil HFA INHALATION AEROSOL, SOLUTION | Tier 3 | |
| Serevent Diskus INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 2 | |
| Terbutaline Sulfate ORAL TABLET | Tier 1 | |
| Ventolin HFA INHALATION AEROSOL, SOLUTION | Tier 2 | |
| Xopenex HFA INHALATION AEROSOL† | Tier 3 | |
| *Xanthines**-*Xanthines*** | | |
| Elixophyllin ORAL ELIXIR | Tier 1 | |
| Lufyllin ORAL TABLET 200 MG | Tier 3 | |
| Theo-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG | Tier 3 | |
| Theochron ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Theophylline ORAL SOLUTION | Tier 1 | |
| Theophylline ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Theophylline ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| *Anticoagulants* | | |
| *Coumarin Anticoagulants**-*Coumarin Anticoagulants*** | | |
| Coumadin ORAL TABLET | Tier 2 | |
| Jantoven ORAL TABLET | Tier 1 | |
| Warfarin Sodium ORAL TABLET | Tier 1 | |
| *Direct Factor Xa Inhibitors**-*Direct Factor Xa Inhibitors*** | | |
| Eliquis ORAL TABLET | Tier 2 | QL (60 EA per 30 Days) |
| Xarelto ORAL TABLET | Tier 2 | |
| Xarelto Starter Pack ORAL | Tier 2 | |

| Drug | Tier | Notes |
|---|--------|----------------------------|
| *Heparins And Heparinoid-Like Agents**-*Heparins And Heparinoid-Like Agents*** | | |
| Heparin (Porcine) Lock Flush INTRAVENOUS* SOLUTION | Tier 1 | |
| Heparin Lock Flush INTRAVENOUS* SOLUTION | Tier 1 | |
| Monoject Flush Syr/Hep Lock INTRAVENOUS* SOLUTION 100 UNIT/ML | Tier 1 | |
| *Heparins And Heparinoid-Like Agents**-*Low Molecular Weight Heparins*** | | |
| Enoxaparin Sodium INJECTION SOLUTION | Tier 1 | |
| Enoxaparin Sodium SUBCUTANEOUS* SOLUTION | Tier 1 | |
| 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 | Tier 3 | |
| *Heparins And Heparinoid-Like Agents**-*Synthetic Heparinoid-Like Agents*** | | |
| Fondaparinux Sodium SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| *Thrombin Inhibitors**-*Thrombin Inhibitors - Selective Direct & Reversible*** | | |
| Pradaxa ORAL CAPSULE | Tier 2 | PA; QL (60 EA per 30 Days) |
| *Anticonvulsants* | | |
| *Anticonvulsants - Benzodiazepines**-*Anticonvulsants - Benzodiazepines*** | | |
| Clonazepam ORAL TABLET | Tier 1 | |
| Clonazepam ORAL TABLET DISPERSIBLE | Tier 1 | |
| Diastat Pediatric | Tier 2 | |
| Diazepam 10 MG, 2.5 MG, 20 MG | Tier 1 | |
| *Anticonvulsants - Misc.**-*Anticonvulsants - Misc.*** | | |
| Banzel ORAL SUSPENSION | Tier 3 | |
| Banzel ORAL TABLET | Tier 3 | |
| Carbamazepine ORAL SUSPENSION | Tier 1 | |
| Carbamazepine ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-----------------------------|
| CarBAMazepine ORAL TABLET CHEWABLE | Tier 1 | |
| CarBAMazepine ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 1 | |
| CarBAMazepine ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Epitol ORAL TABLET | Tier 1 | |
| Gabapentin ORAL CAPSULE | Tier 1 | |
| Gabapentin ORAL SOLUTION | Tier 1 | |
| Gabapentin ORAL TABLET | Tier 1 | |
| LaMICtal ODT ORAL TABLET DISPERSIBLE | Tier 3 | |
| LamoTRlgine ORAL TABLET | Tier 1 | |
| LamoTRlgine ORAL TABLET CHEWABLE | Tier 1 | |
| LamoTRlgine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| LevETIRAcetam ORAL SOLUTION | Tier 1 | |
| LevETIRAcetam ORAL TABLET | Tier 1 | |
| LevETIRAcetam ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Lyrica ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 50 MG, 75 MG | Tier 3 | PA; QL (90 EA per 30 Days) |
| Lyrica ORAL CAPSULE 300 MG | Tier 3 | PA; QL (60 EA per 30 Days) |
| Lyrica ORAL SOLUTION | Tier 3 | PA; QL (900 ML per 30 Days) |
| OXcarbazepine ORAL SUSPENSION | Tier 1 | |
| OXcarbazepine ORAL TABLET | Tier 1 | |
| Potiga ORAL TABLET | Tier 3 | |
| Primidone ORAL TABLET | Tier 1 | |
| TEGretol-XR ORAL TABLET EXTENDED RELEASE 12 HR* 100 MG | Tier 3 | |
| Topiragen ORAL TABLET | Tier 1 | |
| Topiramate ORAL CAPSULE SPRINKLE | Tier 1 | |
| Topiramate ORAL TABLET | Tier 1 | |
| Vimpat ORAL SOLUTION | Tier 3 | |
| Vimpat ORAL TABLET | Tier 3 | |
| Zonisamide ORAL CAPSULE | Tier 1 | |
| *Carbamates**-*Carbamates*** | | |
| Felbamate ORAL SUSPENSION | Tier 1 | |
| Felbamate ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Gaba Modulators**-*Gaba Modulators*** | | |
| Sabril ORAL PACKET | Tier 4 | SP |
| Sabril ORAL TABLET | Tier 4 | SP |
| TiaGABine HCl ORAL TABLET | Tier 1 | |
| *Hydantoins**-*Hydantoins*** | | |
| Dilantin ORAL CAPSULE 30 MG | Tier 2 | |
| Peganone ORAL TABLET | Tier 3 | |
| Phenytoin ORAL SUSPENSION 125 MG/5ML | Tier 1 | |
| Phenytoin ORAL TABLET CHEWABLE | Tier 1 | |
| Phenytoin Infatabs ORAL TABLET CHEWABLE | Tier 1 | |
| Phenytoin Sodium Extended ORAL CAPSULE | Tier 1 | |
| *Succinimides**-*Succinimides*** | | |
| Celontin ORAL CAPSULE | Tier 2 | |
| Ethosuximide ORAL CAPSULE | Tier 1 | |
| Ethosuximide ORAL SOLUTION | Tier 1 | |
| *Valproic Acid**-*Valproic Acid*** | | |
| Divalproex Sodium ORAL CAPSULE SPRINKLE | Tier 1 | |
| Divalproex Sodium ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Divalproex Sodium ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Stavzor ORAL CAPSULE DELAYED RELEASE 125 MG | Tier 3 | |
| Valproic Acid ORAL CAPSULE | Tier 1 | |
| Valproic Acid ORAL SOLUTION | Tier 1 | |
| Valproic Acid ORAL SYRUP | Tier 1 | |
| *Antidepressants* | | |
| *Alpha-2 Receptor Antagonists (Tetracyclics)**-*Alpha-2 Receptor Antagonists (Tetracyclics)*** | | |
| Mirtazapine ORAL TABLET | Tier 1 | |
| Mirtazapine ORAL TABLET DISPERSIBLE | Tier 1 | |
| *Antidepressants - Misc.**-*Antidepressants - Misc.*** | | |
| Aplenzin ORAL TABLET EXTENDED RELEASE 24 HR* 174 MG | Tier 3 | |
| BuPROPion HCl ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| BuPROPion HCl ER (SR) ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| BuPROPion HCl ER (XL) ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Forfivo XL ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| Maprotiline HCl ORAL TABLET | Tier 1 | |
| *Monoamine Oxidase Inhibitors (Maois)**-*Monoamine Oxidase Inhibitors (Maois)*** | | |
| Emsam TRANSDERMAL PATCH 24 HR | Tier 3 | |
| Marplan ORAL TABLET | Tier 3 | |
| Phenelzine Sulfate ORAL TABLET | Tier 1 | |
| Tranylcypromine Sulfate ORAL TABLET | Tier 1 | |
| *Selective Serotonin Reuptake Inhibitors (Ssris)**-*Selective Serotonin Reuptake Inhibitors (Ssris)*** | | |
| Citalopram Hydrobromide ORAL SOLUTION | Tier 1 | |
| Citalopram Hydrobromide ORAL TABLET | Tier 1 | |
| Escitalopram Oxalate ORAL SOLUTION | Tier 1 | |
| Escitalopram Oxalate ORAL TABLET | Tier 1 | |
| FLUoxetine HCl ORAL CAPSULE | Tier 1 | |
| FLUoxetine HCl ORAL CAPSULE DELAYED RELEASE | Tier 1 | |
| FLUoxetine HCl ORAL SOLUTION | Tier 1 | |
| FLUoxetine HCl ORAL TABLET | Tier 1 | |
| Fluvoxamine Maleate ORAL TABLET | Tier 1 | |
| PARoxetine HCl ORAL TABLET | Tier 1 | |
| PARoxetine HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Paxil ORAL SUSPENSION | Tier 3 | |
| Sertraline HCl ORAL CONCENTRATE | Tier 1 | |
| Sertraline HCl ORAL TABLET | Tier 1 | |
| *Serotonin Modulators**-*Serotonin Modulators*** | | |
| Nefazodone HCl ORAL TABLET | Tier 1 | |
| TraZODone HCl ORAL TABLET | Tier 1 | |
| Viibryd ORAL TABLET | Tier 3 | PA |

| Drug | Tier | Notes |
|---|--------|----------------------------|
| *Serotonin-Norepinephrine Reuptake Inhibitors (Snris)**-*Serotonin-Norepinephrine Reuptake Inhibitors (Snris)*** | | |
| Desvenlafaxine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | PA |
| DULoxetine HCl ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 1 | PA |
| Pristiq ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | PA |
| Venlafaxine HCl ORAL TABLET | Tier 1 | |
| Venlafaxine HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Venlafaxine HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| *Tricyclic Agents**-*Tricyclic Agents*** | | |
| Amitriptyline HCl ORAL TABLET | Tier 1 | |
| Amoxapine ORAL TABLET | Tier 1 | |
| ClomipRAMINE HCl ORAL CAPSULE | Tier 1 | |
| Desipramine HCl ORAL TABLET | Tier 1 | |
| Doxepin HCl ORAL CAPSULE | Tier 1 | |
| Doxepin HCl ORAL CONCENTRATE | Tier 1 | |
| Imipramine HCl ORAL TABLET | Tier 1 | |
| Imipramine Pamoate ORAL CAPSULE | Tier 1 | |
| Nortriptyline HCl ORAL CAPSULE | Tier 1 | |
| Protriptyline HCl ORAL TABLET | Tier 1 | |
| *Antidiabetics* | | |
| *Alpha-Glucosidase Inhibitors**-*Alpha-Glucosidase Inhibitors*** | | |
| Acarbose ORAL TABLET | Tier 1 | |
| Glyset ORAL TABLET 25 MG | Tier 3 | |
| *Antidiabetic - Amylin Analogs**-*Antidiabetic - Amylin Analogs*** | | |
| SymLinPen 120 SUBCUTANEOUS* | Tier 3 | |
| SymLinPen 60 SUBCUTANEOUS* | Tier 3 | |
| *Antidiabetic Combinations**-*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations*** | | |
| Janumet ORAL TABLET | Tier 2 | PA; QL (30 EA per 30 Days) |

| Drug | Tier | Notes |
|---|-------------|----------------------------|
| Janumet XR ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 2 | PA; QL (30 EA per 30 Days) |
| Jentaduetto ORAL TABLET | Tier 3 | PA; QL (60 EA per 30 Days) |
| Kombiglyze XR ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | PA; QL (30 EA per 30 Days) |
| *Antidiabetic Combinations**-*Meglitinide-Biguanide Combinations*** | | |
| PrandiMet ORAL TABLET | Tier 3 | |
| *Antidiabetic Combinations**-*Sulfonylurea-Biguanide Combinations*** | | |
| GlipiZIDE-MetFORMIN HCl ORAL TABLET | Tier 1 | |
| GlyBURIDE-MetFORMIN ORAL TABLET | Tier 1 | |
| *Antidiabetic Combinations**-*Sulfonylurea-Thiazolidinedione Combinations*** | | |
| Pioglitazone HCl-Glimepiride ORAL TABLET | Tier 1 | |
| *Antidiabetic Combinations**-*Thiazolidinedione-Biguanide Combinations*** | | |
| Actoplus met XR ORAL TABLET EXTENDED RELEASE 24 HR* 15-1000 MG | Tier 3 | |
| Pioglitazone HCl-Metformin HCl ORAL TABLET | Tier 1 | |
| *Biguanides**-*Biguanides*** | | |
| Glumetza ORAL TABLET EXTENDED RELEASE 24 HR* 500 MG | Tier 3 | |
| MetFORMIN HCl ORAL TABLET | Tier 1 | |
| MetFORMIN HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| MetFORMIN HCl ER (OSM) ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Riomet ORAL SOLUTION | Tier 3 | |
| *Diabetic Other**-*Diabetic Other*** | | |
| GlucaGen HypoKit INJECTION SOLUTION RECONSTITUTED | Tier 2 | |
| Glucagon Emergency INJECTION KIT | Tier 2 | |
| Proglycem ORAL SUSPENSION | Tier 3 | |
| *Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors**-*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors*** | | |
| Januvia ORAL TABLET | Tier 2 | PA; QL (30 EA per 30 Days) |

| Drug | Tier | Notes |
|---|-------------|----------------------------|
| Onglyza ORAL TABLET | Tier 3 | PA; QL (30 EA per 30 Days) |
| Tradjenta ORAL TABLET | Tier 3 | PA; QL (30 EA per 30 Days) |
| *Dopamine Receptor Agonists - Antidiabetic**-*Dopamine Receptor Agonists - Ergot Derivatives*** | | |
| Cycloset ORAL TABLET | Tier 3 | |
| *Incretin Mimetic Agents (Glp-1 Receptor Agonists)**-*Incretin Mimetic Agents (Glp-1 Receptor Agonists)*** | | |
| Bydureon SUBCUTANEOUS* 2 MG | Tier 2 | PA; QL (4 EA per 30 days) |
| Bydureon SUBCUTANEOUS* SUSPENSION RECONSTITUTED | Tier 2 | PA; QL (4 EA per 30 Days) |
| Byetta 10 MCG Pen SUBCUTANEOUS* | Tier 2 | PA |
| Byetta 5 MCG Pen SUBCUTANEOUS* | Tier 2 | PA |
| Victoza SUBCUTANEOUS* | Tier 3 | PA |
| *Insulin Sensitizing Agents**-*Thiazolidinediones*** | | |
| Avandia ORAL TABLET 2 MG | Tier 3 | |
| Pioglitazone HCl ORAL TABLET | Tier 1 | |
| *Insulin**-*Human Insulin*** | | |
| Apidra INJECTION SOLUTION | Tier 3 | |
| Apidra SoloStar SUBCUTANEOUS* | Tier 3 | |
| HumaLOG SUBCUTANEOUS* 100 UNIT/ML | Tier 2 | |
| HumaLOG SUBCUTANEOUS* SOLUTION | Tier 2 | |
| HumaLOG KwikPen SUBCUTANEOUS* | Tier 2 | |
| HumaLOG Mix 50/50 SUBCUTANEOUS* SUSPENSION | Tier 2 | |
| HumaLOG Mix 50/50 KwikPen SUBCUTANEOUS* | Tier 2 | |
| HumaLOG Mix 75/25 SUBCUTANEOUS* SUSPENSION | Tier 2 | |
| HumaLOG Mix 75/25 KwikPen SUBCUTANEOUS* | Tier 2 | |
| HumuLIN 70/30 SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| HumuLIN 70/30 KwikPen SUBCUTANEOUS* | Tier 2 | |
| HumuLIN N SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| HumuLIN N KwikPen SUBCUTANEOUS* | Tier 2 | |
| HumuLIN R INJECTION SOLUTION | Tier 2 | OTC |

| Drug | Tier | Notes |
|---|-------------|--------------|
| HumuLIN R U-500 (CONCENTRATED) SUBCUTANEOUS* SOLUTION | Tier 2 | |
| Lantus SUBCUTANEOUS* SOLUTION | Tier 2 | |
| Lantus SoloStar SUBCUTANEOUS* | Tier 2 | |
| Levemir SUBCUTANEOUS* SOLUTION | Tier 2 | |
| Levemir FlexPen SUBCUTANEOUS* | Tier 2 | |
| NovoLIN 70/30 SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| NovoLIN 70/30 ReliOn SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| NovoLIN N SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| NovoLIN N ReliOn SUBCUTANEOUS* SUSPENSION | Tier 2 | OTC |
| NovoLIN R ReliOn INJECTION SOLUTION | Tier 2 | OTC |
| NovoLOG SUBCUTANEOUS* SOLUTION | Tier 2 | |
| NovoLOG FlexPen SUBCUTANEOUS* | Tier 2 | |
| NovoLOG Mix 70/30 SUBCUTANEOUS* SUSPENSION | Tier 2 | |
| NovoLOG Mix 70/30 FlexPen SUBCUTANEOUS* | Tier 2 | |
| NovoLOG PenFill SUBCUTANEOUS* | Tier 2 | |
| *Meglitinide Analogues**-*Meglitinide Analogues*** | | |
| Nateglinide ORAL TABLET | Tier 1 | |
| Repaglinide ORAL TABLET | Tier 1 | |
| *Sulfonylureas**-*Sulfonylureas*** | | |
| ChlorproPAMIDE ORAL TABLET | Tier 1 | |
| Glimepiride ORAL TABLET | Tier 1 | |
| GlipiZIDE ORAL TABLET | Tier 1 | |
| GlipiZIDE ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| GlipiZIDE XL ORAL TABLET EXTENDED RELEASE 24 HR* 2.5 MG | Tier 1 | |
| GlyBURIDE ORAL TABLET | Tier 1 | |
| GlyBURIDE Micronized ORAL TABLET | Tier 1 | |
| TOLAZamide ORAL TABLET | Tier 1 | |
| TOLBUTamide ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antidiarrheals* | | |
| *Antiperistaltic Agents**-*Antiperistaltic Agents*** | | |
| Diphenoxylate-Atropine ORAL LIQUID† | Tier 1 | |
| Diphenoxylate-Atropine ORAL TABLET | Tier 1 | |
| Lomotil ORAL TABLET | Tier 1 | |
| Loperamide HCl ORAL CAPSULE | Tier 1 | |
| Motofen ORAL TABLET | Tier 3 | |
| Opium ORAL TINCTURE | Tier 3 | |
| *Antidotes* | | |
| *Antidotes - Chelating Agents**-*Antidotes - Chelating Agents*** | | |
| Chemet ORAL CAPSULE | Tier 2 | |
| Exjade ORAL TABLET SOLUBLE | Tier 4 | SP |
| Ferriprox ORAL TABLET | Tier 4 | SP |
| Pentetate Calcium Trisodium COMBINATION SOLUTION | Tier 1 | |
| Pentetate Zinc Trisodium COMBINATION SOLUTION | Tier 1 | |
| *Opioid Antagonists**-*Opioid Antagonists*** | | |
| Naltrexone HCl ORAL TABLET | Tier 1 | |
| *Antiemetics* | | |
| *5-Ht3 Receptor Antagonists**-*5-Ht3 Receptor Antagonists*** | | |
| Anzemet ORAL TABLET | Tier 3 | |
| Granisetron HCl ORAL TABLET | Tier 1 | |
| Ondansetron ORAL TABLET DISPERSIBLE | Tier 1 | |
| Ondansetron HCl ORAL SOLUTION | Tier 1 | |
| Ondansetron HCl ORAL TABLET | Tier 1 | |
| Sancuso TRANSDERMAL PATCH | Tier 3 | |
| Zuplenz ORAL FILM | Tier 3 | |
| *Antiemetics - Anticholinergic**-*Antiemetics - Anticholinergic*** | | |
| Dimenhydrinate INJECTION SOLUTION | Tier 1 | |
| Meclizine HCl ORAL TABLET | Tier 1 | OTC |
| Transderm-Scop TRANSDERMAL PATCH 72 HR | Tier 3 | |
| Trimethobenzamide HCl ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antiemetics - Miscellaneous**-*Antiemetics - Miscellaneous*** | | |
| Cesamet ORAL CAPSULE | Tier 3 | |
| Dronabinol ORAL CAPSULE | Tier 1 | |
| *Substance P/Neurokinin 1 (Nk1) Receptor Antagonists**-*Substance P/Neurokinin 1 (Nk1) Receptor Antagonists*** | | |
| Emend ORAL CAPSULE 125 MG, 40 MG, 80 MG | Tier 2 | |
| *Antifungals* | | |
| *Antifungals**-*Antifungals*** | | |
| Flucytosine ORAL CAPSULE | Tier 1 | |
| Griseofulvin Microsize ORAL SUSPENSION | Tier 1 | |
| Griseofulvin Microsize ORAL TABLET | Tier 1 | |
| Griseofulvin Ultramicrosize ORAL TABLET | Tier 1 | |
| LamISIL ORAL PACKET | Tier 3 | |
| Nystatin ORAL TABLET | Tier 1 | |
| Terbinafine HCl ORAL TABLET | Tier 1 | |
| Terbinex COMBINATION KIT | Tier 3 | |
| *Imidazole-Related Antifungals**-*Imidazoles*** | | |
| Ketoconazole ORAL TABLET | Tier 1 | |
| *Imidazole-Related Antifungals**-*Triazoles*** | | |
| Fluconazole ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Fluconazole ORAL TABLET | Tier 1 | |
| Itraconazole ORAL CAPSULE | Tier 1 | |
| Noxafil ORAL SUSPENSION | Tier 3 | |
| Sporanox ORAL SOLUTION | Tier 3 | |
| Voriconazole ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Voriconazole ORAL TABLET | Tier 1 | |
| *Antihistamines* | | |
| *Antihistamines - Alkylamines**-*Antihistamines - Alkylamines*** | | |
| Dexchlorpheniramine Maleate ORAL SYRUP | Tier 1 | |
| Respa-BR ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antihistamines - Ethanolamines**-*Antihistamines - Ethanolamines*** | | |
| Arbinoxa ORAL TABLET | Tier 1 | |
| Carbinoxamine Maleate ORAL TABLET | Tier 1 | |
| Clemastine Fumarate ORAL SYRUP | Tier 1 | |
| Clemastine Fumarate ORAL TABLET 2.68 MG | Tier 1 | |
| DiphenhydrAMINE HCl ORAL CAPSULE 50 MG | Tier 1 | OTC |
| DiphenhydrAMINE HCl ORAL ELIXIR | Tier 1 | OTC |
| *Antihistamines - Non-Sedating**-*Antihistamines - Non-Sedating*** | | |
| Cetirizine HCl ORAL SYRUP | Tier 1 | OTC |
| Clarinet ORAL SYRUP | Tier 3 | |
| Desloratadine ORAL TABLET | Tier 1 | |
| Desloratadine ORAL TABLET DISPERSIBLE | Tier 1 | |
| Fexofenadine HCl ORAL TABLET 60 MG | Tier 1 | OTC |
| Levocetirizine Dihydrochloride ORAL SOLUTION | Tier 1 | |
| Levocetirizine Dihydrochloride ORAL TABLET | Tier 1 | |
| *Antihistamines - Phenothiazines**-*Antihistamines - Phenothiazines*** | | |
| Phenadoz SUPPOSITORY 12.5 MG | Tier 1 | |
| Promethazine HCl INJECTION SOLUTION | Tier 1 | |
| Promethazine HCl ORAL SYRUP | Tier 1 | |
| Promethazine HCl ORAL TABLET | Tier 1 | |
| Promethazine HCl SUPPOSITORY 12.5 MG, 25 MG | Tier 1 | |
| Promethegan SUPPOSITORY | Tier 1 | |
| *Antihistamines - Piperidines**-*Antihistamines - Piperidines*** | | |
| Cyproheptadine HCl ORAL SYRUP | Tier 1 | |
| Cyproheptadine HCl ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antihyperlipidemics* | | |
| *Antihyperlipidemics - Combinations**-*Intest Cholest Absorp Inhib-Hmg Coa Reductase Inhib Comb*** | | |
| Vytorin ORAL TABLET | Tier 3 | PA |
| *Antihyperlipidemics - Misc.**-*Antihyperlipidemics - Misc.*** | | |
| Lovaza ORAL CAPSULE | Tier 3 | |
| Omega-3-acid Ethyl Esters ORAL CAPSULE | Tier 1 | |
| Vascepa ORAL CAPSULE | Tier 3 | |
| *Bile Acid Sequestrants**-*Bile Acid Sequestrants*** | | |
| Cholestyramine ORAL PACKET | Tier 1 | |
| Cholestyramine ORAL POWDER | Tier 1 | |
| Cholestyramine Light ORAL PACKET | Tier 1 | |
| Cholestyramine Light ORAL POWDER | Tier 1 | |
| Colestipol HCl ORAL PACKET | Tier 1 | |
| Colestipol HCl ORAL TABLET | Tier 1 | |
| Prevalite ORAL POWDER | Tier 1 | |
| Welchol ORAL PACKET | Tier 3 | |
| Welchol ORAL TABLET | Tier 3 | |
| *Fibric Acid Derivatives**-*Fibric Acid Derivatives*** | | |
| Fenofibrate ORAL TABLET | Tier 1 | |
| Fenofibrate Micronized ORAL CAPSULE | Tier 1 | |
| Fenofibric Acid ORAL CAPSULE DELAYED RELEASE | Tier 1 | |
| Fenofibric Acid ORAL TABLET | Tier 1 | |
| Fenoglide ORAL TABLET | Tier 3 | |
| Gemfibrozil ORAL TABLET | Tier 1 | |
| Lipofen ORAL CAPSULE | Tier 3 | |
| *Hmg Coa Reductase Inhibitors**-*Hmg Coa Reductase Inhibitor Combinations*** | | |
| Simcor ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| *Hmg Coa Reductase Inhibitors**-*Hmg Coa Reductase Inhibitors*** | | |
| Atorvastatin Calcium ORAL TABLET | Tier 1 | |
| Crestor ORAL TABLET | Tier 2 | |
| Fluvastatin Sodium ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-----------------------------------|
| Livalo ORAL TABLET | Tier 3 | PA |
| Lovastatin ORAL TABLET | Tier 1 | |
| Pravastatin Sodium ORAL TABLET | Tier 1 | |
| Simvastatin ORAL TABLET | Tier 1 | |
| *Intestinal Cholesterol Absorption Inhibitors**-*Intestinal Cholesterol Absorption Inhibitors*** | | |
| Zetia ORAL TABLET | Tier 3 | |
| *Microsomal Triglyceride Transfer Protein (Mtp) Inhibitors**-*Microsomal Triglyceride Transfer Protein Inhibitors*** | | |
| Juxtapid ORAL CAPSULE | Tier 4 | PA; SP; 1 (Limited to 60mg a day) |
| *Nicotinic Acid Derivatives**-*Nicotinic Acid Derivatives*** | | |
| Niacin ER (Antihyperlipidemic) ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Niacor ORAL TABLET | Tier 1 | |
| *Antihypertensives* | | |
| *Ace Inhibitors**-*Ace Inhibitors*** | | |
| Benazepril HCl ORAL TABLET | Tier 1 | |
| Captopril ORAL TABLET | Tier 1 | |
| Enalapril Maleate ORAL TABLET | Tier 1 | |
| Fosinopril Sodium ORAL TABLET | Tier 1 | |
| Lisinopril ORAL TABLET | Tier 1 | |
| Moexipril HCl ORAL TABLET | Tier 1 | |
| Perindopril Erbumine ORAL TABLET | Tier 1 | |
| Quinapril HCl ORAL TABLET | Tier 1 | |
| Ramipril ORAL CAPSULE | Tier 1 | |
| Trandolapril ORAL TABLET | Tier 1 | |
| *Agents For Pheochromocytoma**-*Agents For Pheochromocytoma*** | | |
| Demser ORAL CAPSULE | Tier 3 | |
| Dibenzylamine ORAL CAPSULE | Tier 3 | |
| *Angiotensin II Receptor Antagonists**-*Angiotensin II Receptor Antagonists*** | | |
| Benicar ORAL TABLET | Tier 2 | PA |
| Candesartan Cilexetil ORAL TABLET | Tier 1 | |
| Diovan ORAL TABLET | Tier 3 | PA |

| Drug | Tier | Notes |
|--|-------------|--------------|
| Edarbi ORAL TABLET | Tier 3 | PA |
| Eprosartan Mesylate ORAL TABLET | Tier 1 | PA |
| Irbesartan ORAL TABLET | Tier 1 | |
| Losartan Potassium ORAL TABLET | Tier 1 | |
| Telmisartan ORAL TABLET | Tier 1 | PA |
| Valsartan ORAL TABLET | Tier 1 | PA |
| *Antiadrenergic Antihypertensives**-*Antiadrenergics - Centrally Acting*** | | |
| CloNIDine HCl ORAL TABLET | Tier 1 | |
| CloNIDine HCl TRANSDERMAL PATCH WEEKLY | Tier 1 | |
| GuanFACINE HCl ORAL TABLET | Tier 1 | |
| Methyldopa ORAL TABLET | Tier 1 | |
| *Antiadrenergic Antihypertensives**-*Antiadrenergics - Peripherally Acting*** | | |
| Doxazosin Mesylate ORAL TABLET | Tier 1 | |
| Prazosin HCl ORAL CAPSULE | Tier 1 | |
| Terazosin HCl ORAL CAPSULE | Tier 1 | |
| *Antiadrenergic Antihypertensives**-*Reserpine*** | | |
| Reserpine ORAL TABLET | Tier 1 | |
| *Antihypertensive Combinations**-*Ace Inhibitor & Calcium Channel Blocker Combinations*** | | |
| Amlodipine Besy-Benazepril HCl ORAL CAPSULE | Tier 1 | |
| Tarka ORAL TABLET EXTENDEDRELEASE* | Tier 3 | |
| *Antihypertensive Combinations**-*Ace Inhibitors & Thiazide/Thiazide-Like*** | | |
| Benazepril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Captopril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Enalapril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Fosinopril Sodium-HCTZ ORAL TABLET | Tier 1 | |
| Lisinopril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Moexipril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Quinapril-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| *Antihypertensive Combinations**-*Adrenolytics-Central & Thiazide/Thiazide-Like Comb*** | | |
| Methyldopa-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| *Antihypertensive Combinations**-*Angiotensin II Receptor Antag & Ca Channel Blocker Comb*** | | |
| Azor ORAL TABLET | Tier 3 | PA |
| Exforge ORAL TABLET | Tier 3 | PA |
| Telmisartan-Amlodipine ORAL TABLET | Tier 1 | PA |
| *Antihypertensive Combinations**-*Angiotensin II Receptor Antag & Thiazide/Thiazide-Like*** | | |
| Benicar HCT ORAL TABLET | Tier 2 | PA |
| Candesartan Cilexetil-HCTZ ORAL TABLET | Tier 1 | |
| Irbesartan-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Losartan Potassium-HCTZ ORAL TABLET | Tier 1 | |
| Telmisartan-HCTZ ORAL TABLET | Tier 1 | PA |
| Valsartan-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| *Antihypertensive Combinations**-*Angiotensin II Receptor Ant-Ca Channel Blocker-Thiazides*** | | |
| Exforge HCT ORAL TABLET | Tier 3 | PA |
| Tribenzor ORAL TABLET | Tier 3 | PA |
| *Antihypertensive Combinations**-*Beta Blocker & Diuretic Combinations*** | | |
| Atenolol-Chlorthalidone ORAL TABLET | Tier 1 | |
| Bisoprolol-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Metoprolol-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Nadolol-Bendroflumethiazide ORAL TABLET | Tier 1 | |
| Propranolol-HCTZ ORAL TABLET | Tier 1 | |
| *Antihypertensive Combinations**-*Direct Renin Inhibitors & Calcium Channel Blocker Comb*** | | |
| Tekamlo ORAL TABLET | Tier 3 | PA |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antihypertensive Combinations**-*Direct Renin Inhibitors & Thiazide/Thiazide-Like Comb*** | | |
| Tekturna HCT ORAL TABLET | Tier 3 | PA |
| *Antihypertensive Combinations**-*Direct Renin Inhibitors-Ca Channel Blocker-Thiazide Comb*** | | |
| Amturnide ORAL TABLET | Tier 3 | PA |
| *Direct Renin Inhibitors**-*Direct Renin Inhibitors*** | | |
| Tekturna ORAL TABLET | Tier 3 | PA |
| *Selective Aldosterone Receptor Antagonists (Saras)**-*Selective Aldosterone Receptor Antagonists (Saras)*** | | |
| Eplerenone ORAL TABLET | Tier 1 | |
| *Vasodilators**-*Vasodilators*** | | |
| HydrALAZINE HCl ORAL TABLET | Tier 1 | |
| Minoxidil ORAL TABLET | Tier 1 | |
| *Anti-Infective Agents - Misc.* | | |
| *Anti-Infective Agents - Misc.**-*Anti-Infective Agents - Misc.*** | | |
| Cayston INHALATION SOLUTION RECONSTITUTED | Tier 4 | SP |
| Flagyl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| MetroNIDAZOLE ORAL TABLET | Tier 1 | |
| Nebupent INHALATION SOLUTION RECONSTITUTED | Tier 3 | |
| Primsol ORAL SOLUTION | Tier 3 | |
| Tinidazole ORAL TABLET | Tier 1 | |
| Trimethoprim ORAL TABLET | Tier 1 | |
| Vancomycin HCl ORAL CAPSULE | Tier 1 | |
| Xifaxan ORAL TABLET | Tier 3 | |
| *Anti-Infective Misc. - Combinations**-*Anti-Infective Misc. - Combinations*** | | |
| Sulfamethoxazole-TMP DS ORAL TABLET | Tier 1 | |
| Sulfamethoxazole-Trimethoprim ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Antiprotozoal Agents**-*Antiprotozoal Agents*** | | |
| Alinia ORAL SUSPENSION RECONSTITUTED | Tier 2 | |
| Alinia ORAL TABLET | Tier 2 | |
| Atovaquone ORAL SUSPENSION | Tier 1 | |
| Mepron ORAL SUSPENSION | Tier 2 | |
| *Ketolides**-*Ketolides*** | | |
| Ketek ORAL TABLET | Tier 3 | |
| *Leprostatics**-*Leprostatics*** | | |
| Dapsone ORAL TABLET | Tier 1 | |
| *Lincosamides**-*Lincosamides*** | | |
| Clindamycin HCl ORAL CAPSULE | Tier 1 | |
| Clindamycin Palmitate HCl ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| *Oxazolidinones**-*Oxazolidinones*** | | |
| Zyvox ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| Zyvox ORAL TABLET | Tier 3 | |
| *Antimalarials* | | |
| *Antimalarial Combinations**-*Antimalarial Combinations*** | | |
| Atovaquone-Proguanil HCl ORAL TABLET | Tier 1 | |
| Coartem ORAL TABLET | Tier 2 | |
| *Antimalarials**-*Antimalarials*** | | |
| Chloroquine Phosphate ORAL TABLET | Tier 1 | |
| Daraprim ORAL TABLET | Tier 2 | |
| Hydroxychloroquine Sulfate ORAL TABLET | Tier 1 | |
| Mefloquine HCl ORAL TABLET | Tier 1 | |
| Primaquine Phosphate ORAL TABLET | Tier 2 | |
| Quinine Sulfate ORAL CAPSULE | Tier 1 | PA |
| *Antimyasthenic/Cholinergic Agents* | | |
| *Antimyasthenic/Cholinergic Agents**-*Antimyasthenic/Cholinergic Agents*** | | |
| Guanidine HCl ORAL TABLET | Tier 1 | |
| Mestinon ORAL SYRUP | Tier 3 | |
| Mestinon ORAL TABLET EXTENDEDRELEASE* | Tier 3 | |

| Drug | Tier | Notes |
|---|-------------|---|
| Pyridostigmine Bromide ORAL TABLET | Tier 1 | |
| *Antimycobacterial Agents* | | |
| *Anti Tb Combinations**-*Anti Tb Combinations*** | | |
| Rifamate ORAL CAPSULE | Tier 3 | |
| Rifater ORAL TABLET | Tier 3 | |
| *Antimycobacterial Agents**-*Antimycobacterial Agents*** | | |
| CycloSERINE ORAL CAPSULE | Tier 1 | |
| Ethambutol HCl ORAL TABLET | Tier 1 | |
| Isoniazid ORAL SYRUP | Tier 1 | |
| Isoniazid ORAL TABLET | Tier 1 | |
| Paser ORAL PACKET | Tier 3 | |
| Priftin ORAL TABLET | Tier 3 | |
| Pyrazinamide ORAL TABLET | Tier 1 | |
| Rifabutin ORAL CAPSULE | Tier 1 | |
| Rifampin ORAL CAPSULE | Tier 1 | |
| Trecator ORAL TABLET | Tier 3 | |
| *Antineoplastics And Adjunctive Therapies* | | |
| *Alkylating Agents**-*Alkylating Agents*** | | |
| Hexalen ORAL CAPSULE | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Myleran ORAL TABLET | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Alkylating Agents**-*Imidazotetrazines*** | | |
| Temozolomide ORAL CAPSULE | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Alkylating Agents**-*Nitrogen Mustards*** | | |
| Alkeran ORAL TABLET | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Cyclophosphamide ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Leukeran ORAL TABLET | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Alkylating Agents**-*Nitrosoureas*** | | |
| Lomustine ORAL CAPSULE | Tier 4 | SP |

| Drug | Tier | Notes |
|---|--------|--|
| *Antimetabolites**-*Antimetabolites*** | | |
| Capecitabine ORAL TABLET | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| Mercaptopurine ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Methotrexate ORAL TABLET | Tier 1 | |
| Methotrexate Sodium INJECTION SOLUTION | Tier 1 | |
| Methotrexate Sodium (PF) INJECTION SOLUTION 25 MG/ML, 50 MG/2ML | Tier 1 | |
| Tabloid ORAL TABLET | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Trexall ORAL TABLET | Tier 3 | |
| Xeloda ORAL TABLET | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic - Hedgehog Pathway Inhibitors**-*Antineoplastic - Hedgehog Pathway Inhibitors*** | | |
| Erivedge ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| *Antineoplastic - Hormonal And Related Agents**-*Androgen Biosynthesis Inhibitors*** | | |
| Zytiga ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| *Antineoplastic - Hormonal And Related Agents**-*Antiadrenals*** | | |
| Lysodren ORAL TABLET | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic - Hormonal And Related Agents**-*Antiandrogens*** | | |
| Bicalutamide ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Flutamide ORAL CAPSULE | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Nilandron ORAL TABLET | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |

| Drug | Tier | Notes |
|--|-------------|--|
| Xtandi ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| *Antineoplastic - Hormonal And Related Agents**-*Antiestrogens*** | | |
| Fareston ORAL TABLET | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Soltamox ORAL SOLUTION | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Tamoxifen Citrate ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic - Hormonal And Related Agents**-*Aromatase Inhibitors*** | | |
| Anastrozole ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Exemestane ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Letrozole ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic - Hormonal And Related Agents**-*Estrogens-Antineoplastic*** | | |
| Emcyt ORAL CAPSULE | Tier 2 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic - Hormonal And Related Agents**-*Progestins-Antineoplastic*** | | |
| Megestrol Acetate ORAL SUSPENSION 40 MG/ML | Tier 1 | |
| Megestrol Acetate ORAL TABLET | Tier 1 | |
| *Antineoplastic - Immunomodulators**-*Antineoplastic - Immunomodulators*** | | |
| Pomalyst ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (21 EA per 30 Days) |
| *Antineoplastic Enzyme Inhibitors**-*Antineoplastic - Braf Kinase Inhibitors*** | | |
| Zelboraf ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (240 EA per 30 Days) |

| Drug | Tier | Notes |
|--|--------|--|
| *Antineoplastic Enzyme Inhibitors**-*Antineoplastic - Histone Deacetylase Inhibitors*** | | |
| Zolinza ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| *Antineoplastic Enzyme Inhibitors**-*Antineoplastic - Mtor Kinase Inhibitors*** | | |
| Afinitor ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| Afinitor Disperz ORAL TABLET SOLUBLE | Tier 4 | PA; SP |
| *Antineoplastic Enzyme Inhibitors**-*Antineoplastic - Multikinase Inhibitors*** | | |
| NexAVAR ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| Stivarga ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (84 EA per 28 Days) |
| Sutent ORAL CAPSULE 12.5 MG, 25 MG, 50 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| Sutent ORAL CAPSULE 37.5 MG | Tier 4 | PA; SP; QL (30 False per 30 Falses) |
| *Antineoplastic Enzyme Inhibitors**-*Antineoplastic - Tyrosine Kinase Inhibitors*** | | |
| Bosulif ORAL TABLET 100 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (180 EA per 30 Days) |
| Bosulif ORAL TABLET 500 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (36 EA per 30 Days) |

| Drug | Tier | Notes |
|---------------------------------------|-------------|--|
| Caprelsa ORAL TABLET 100 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (90 EA per 30 Days) |
| Caprelsa ORAL TABLET 300 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| Cometriq (100 mg Daily Dose) ORAL KIT | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| Cometriq (140 mg Daily Dose) ORAL KIT | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| Cometriq (60 mg Daily Dose) ORAL KIT | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| Gleevec ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (60 EA per 30 Days) |
| Iclusig ORAL TABLET 15 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (90 EA per 30 Days) |
| Iclusig ORAL TABLET 45 MG | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| Inlyta ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| Sprycel ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (60 EA per 30 Days) |
| Tarceva ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| Tasigna ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |

| Drug | Tier | Notes |
|---|-------------|--|
| Tykerb ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (180 EA per 30 Days) |
| Votrient ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (120 EA per 30 Days) |
| Xalkori ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (60 EA per 30 Days) |
| *Antineoplastic Enzyme Inhibitors**-*Janus Associated Kinase (Jak) Inhibitors*** | | |
| Jakafi ORAL TABLET | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (60 EA per 30 Days) |
| *Antineoplastics Misc.**-*Antineoplastics Misc.*** | | |
| Hydroxyurea ORAL CAPSULE | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Matulane ORAL CAPSULE | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| Sylatron SUBCUTANEOUS* KIT 296 MCG, 444 MCG, 888 MCG | Tier 4 | PA; SP |
| *Antineoplastics Misc.**-*Retinoids*** | | |
| Tretinoin ORAL CAPSULE | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastics Misc.**-*Selective Retinoid X Receptor Agonists*** | | |
| Targetin ORAL CAPSULE | Tier 4 | SP |
| *Chemotherapy Rescue/Antidote Agents**-*Folic Acid Antagonists Rescue Agents*** | | |
| Leucovorin Calcium ORAL TABLET | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Chemotherapy Rescue/Antidote Agents**-*Urinary Tract Protective Agents*** | | |
| Mesnex ORAL TABLET | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |

| Drug | Tier | Notes |
|--|--------|---|
| *Mitotic Inhibitors**-*Mitotic Inhibitors*** | | |
| Etoposide ORAL CAPSULE | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Topoisomerase I Inhibitors**-*Topoisomerase I Inhibitors*** | | |
| Hycamtin ORAL CAPSULE | Tier 4 | SP; 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antiparkinson Agents* | | |
| *Antiparkinson Adjuvants**-*Decarboxylase Inhibitors*** | | |
| Carbidopa ORAL TABLET | Tier 1 | |
| *Antiparkinson Anticholinergics**-*Antiparkinson Anticholinergics*** | | |
| Benzotropine Mesylate ORAL TABLET | Tier 1 | |
| Trihexyphenidyl HCl ORAL ELIXIR | Tier 1 | |
| Trihexyphenidyl HCl ORAL TABLET | Tier 1 | |
| *Antiparkinson Comt Inhibitors**-*Central/Peripheral Comt Inhibitors*** | | |
| Tasmar ORAL TABLET | Tier 3 | |
| *Antiparkinson Comt Inhibitors**-*Peripheral Comt Inhibitors*** | | |
| Entacapone ORAL TABLET | Tier 1 | |
| *Antiparkinson Dopaminergics**-*Antiparkinson Dopaminergics*** | | |
| Amantadine HCl ORAL CAPSULE | Tier 1 | |
| Amantadine HCl ORAL SYRUP | Tier 1 | |
| Amantadine HCl ORAL TABLET | Tier 1 | |
| Bromocriptine Mesylate ORAL CAPSULE | Tier 1 | |
| Bromocriptine Mesylate ORAL TABLET | Tier 1 | |
| *Antiparkinson Dopaminergics**-*Levodopa Combinations*** | | |
| Carbidopa-Levodopa ORAL TABLET | Tier 1 | |
| Carbidopa-Levodopa ORAL TABLET DISPERSIBLE | Tier 1 | |
| Carbidopa-Levodopa ER ORAL TABLET EXTENDEDRELEASE* 50-200 MG | Tier 1 | |
| Stalevo 100 ORAL TABLET | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Stalevo 125 ORAL TABLET | Tier 3 | |
| Stalevo 150 ORAL TABLET | Tier 3 | |
| Stalevo 200 ORAL TABLET | Tier 3 | |
| Stalevo 50 ORAL TABLET | Tier 3 | |
| Stalevo 75 ORAL TABLET | Tier 3 | |
| *Antiparkinson Dopaminergics**-*Nonergoline Dopamine Receptor Agonists*** | | |
| Apokyn SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Mirapex ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| Neupro TRANSDERMAL PATCH 24 HR | Tier 3 | |
| Pramipexole Dihydrochloride ORAL TABLET | Tier 1 | |
| ROPINIRole HCl ORAL TABLET | Tier 1 | |
| ROPINIRole HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| *Antiparkinson Monoamine Oxidase Inhibitors**-*Antiparkinson Monoamine Oxidase Inhibitors*** | | |
| Azilect ORAL TABLET | Tier 2 | |
| Selegiline HCl ORAL CAPSULE | Tier 1 | |
| Selegiline HCl ORAL TABLET | Tier 1 | |
| *Antipsychotics/Antimanic Agents* | | |
| *Antimanic Agents**-*Antimanic Agents*** | | |
| Lithium ORAL SOLUTION | Tier 1 | |
| Lithium Carbonate ORAL CAPSULE | Tier 1 | |
| Lithium Carbonate ORAL TABLET | Tier 1 | |
| Lithium Carbonate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| *Antipsychotics - Misc.**-*Antipsychotics - Misc.*** | | |
| Latuda ORAL TABLET | Tier 3 | PA |
| Ziprasidone HCl ORAL CAPSULE | Tier 1 | PA |
| *Benzisoxazoles**-*Benzisoxazoles*** | | |
| Fanapt ORAL TABLET | Tier 3 | PA |
| Invega ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | PA |
| RisperiDONE ORAL TABLET | Tier 1 | |
| RisperiDONE ORAL TABLET DISPERSIBLE | Tier 1 | |
| RisperiDONE M-TAB ORAL TABLET DISPERSIBLE 2 MG, 4 MG | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|----------------------------|
| *Butyrophenones**-*Butyrophenones*** | | |
| Haloperidol ORAL TABLET | Tier 1 | |
| Haloperidol Lactate ORAL CONCENTRATE | Tier 1 | |
| *Dibenzapines**-*Dibenzodiazepines*** | | |
| CloZAPine ORAL TABLET | Tier 1 | |
| CloZAPine ORAL TABLET DISPERSIBLE | Tier 1 | |
| FazaClo ORAL TABLET DISPERSIBLE 150 MG | Tier 3 | |
| *Dibenzapines**-*Dibenzo-Oxepino Pyrroles*** | | |
| Saphris SUBLINGUAL TABLET SUBLINGUAL | Tier 3 | PA |
| *Dibenzapines**-*Dibenzothiazepines*** | | |
| QUETiapine Fumarate ORAL TABLET | Tier 1 | |
| SEROquel XR ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 2 | |
| *Dibenzapines**-*Dibenzoxazepines*** | | |
| Loxapine Succinate ORAL CAPSULE | Tier 1 | |
| *Dibenzapines**-*Thienbenzodiazepines** | | |
| * | | |
| OLANZapine ORAL TABLET | Tier 1 | |
| OLANZapine ORAL TABLET DISPERSIBLE | Tier 1 | |
| *Phenothiazines**-*Phenothiazines*** | | |
| ChlorproMAZINE HCl ORAL TABLET | Tier 1 | |
| Compro SUPPOSITORY | Tier 1 | |
| FluPHENAZine HCl ORAL CONCENTRATE | Tier 1 | |
| FluPHENAZine HCl ORAL ELIXIR | Tier 1 | |
| FluPHENAZine HCl ORAL TABLET | Tier 1 | |
| Perphenazine ORAL TABLET | Tier 1 | |
| Prochlorperazine SUPPOSITORY | Tier 1 | |
| Prochlorperazine Maleate ORAL TABLET | Tier 1 | |
| Thioridazine HCl ORAL TABLET | Tier 1 | |
| Trifluoperazine HCl ORAL TABLET | Tier 1 | |
| *Quinolinone Derivatives**-*Quinolinone Derivatives*** | | |
| Abilify ORAL SOLUTION | Tier 2 | PA |
| Abilify ORAL TABLET | Tier 2 | PA; QL (30 EA per 30 Days) |
| Abilify Discmelt ORAL TABLET DISPERSIBLE | Tier 2 | PA; QL (30 EA per 30 Days) |

| Drug | Tier | Notes |
|--|--------|-------|
| *Thioxanthenes**-*Thioxanthenes*** | | |
| Thiothixene ORAL CAPSULE | Tier 1 | |
| *Antiseptics & Disinfectants* | | |
| *Antiseptics & Disinfectants**-*Antiseptics & Disinfectants*** | | |
| Forma-Ray EXTERNAL SOLUTION | Tier 1 | |
| Formadon EXTERNAL SOLUTION | Tier 1 | |
| Formaldehyde EXTERNAL SOLUTION 10 % | Tier 1 | |
| *Iodine Antiseptics**-*Iodine Antiseptics*** | | |
| Iodine Tincture EXTERNAL TINCTURE | Tier 1 | OTC |
| Lugols EXTERNAL SOLUTION | Tier 1 | |
| *Antivirals* | | |
| *Antiretrovirals**-*Antiretroviral Combinations*** | | |
| Abacavir-Lamivudine-Zidovudine ORAL TABLET | Tier 1 | |
| Atripla ORAL TABLET | Tier 2 | |
| Complera ORAL TABLET | Tier 2 | |
| Epzicom ORAL TABLET | Tier 2 | |
| Kaletra ORAL SOLUTION | Tier 2 | |
| Kaletra ORAL TABLET | Tier 2 | |
| Lamivudine-Zidovudine ORAL TABLET | Tier 1 | |
| Stribild ORAL TABLET | Tier 2 | |
| Truvada ORAL TABLET | Tier 2 | |
| *Antiretrovirals**-*Antiretrovirals - Ccr5 Antagonists (Entry Inhibitor)*** | | |
| Selzentry ORAL TABLET | Tier 2 | |
| *Antiretrovirals**-*Antiretrovirals - Integrase Inhibitors*** | | |
| Isentress ORAL PACKET | Tier 2 | |
| Isentress ORAL TABLET | Tier 2 | |
| Isentress ORAL TABLET CHEWABLE | Tier 2 | |
| *Antiretrovirals**-*Antiretrovirals - Protease Inhibitors*** | | |
| Aptivus ORAL CAPSULE | Tier 3 | |
| Aptivus ORAL SOLUTION | Tier 3 | |
| Crixivan ORAL CAPSULE 200 MG, 400 MG | Tier 2 | |
| Invirase ORAL CAPSULE | Tier 2 | |

| Drug | Tier | Notes |
|--|-------------|--------------|
| Invirase ORAL TABLET | Tier 2 | |
| Lexiva ORAL SUSPENSION | Tier 2 | |
| Lexiva ORAL TABLET | Tier 2 | |
| Norvir ORAL CAPSULE | Tier 2 | |
| Norvir ORAL TABLET | Tier 2 | |
| Prezista ORAL SUSPENSION | Tier 2 | |
| Prezista ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG | Tier 2 | |
| Reyataz ORAL CAPSULE 150 MG, 200 MG, 300 MG | Tier 2 | |
| Viracept ORAL TABLET | Tier 2 | |
| *Antiretrovirals**-*Antiretrovirals - Rti-Non-Nucleoside Analogues*** | | |
| Edurant ORAL TABLET | Tier 2 | |
| Intelence ORAL TABLET | Tier 2 | |
| Nevirapine ORAL TABLET | Tier 1 | |
| Nevirapine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Rescriptor ORAL TABLET | Tier 2 | |
| Sustiva ORAL CAPSULE | Tier 2 | |
| Sustiva ORAL TABLET | Tier 2 | |
| Viramune ORAL SUSPENSION | Tier 2 | |
| Viramune XR ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| *Antiretrovirals**-*Antiretrovirals - Rti-Nucleoside Analogues-Purines*** | | |
| Abacavir Sulfate ORAL TABLET | Tier 1 | |
| Didanosine ORAL CAPSULE DELAYED RELEASE | Tier 1 | |
| Videx ORAL SOLUTION RECONSTITUTED 2 GM | Tier 3 | |
| Ziagen ORAL SOLUTION | Tier 2 | |
| *Antiretrovirals**-*Antiretrovirals - Rti-Nucleoside Analogues-Pyrimidines*** | | |
| Emtriva ORAL CAPSULE | Tier 2 | |
| Emtriva ORAL SOLUTION | Tier 2 | |
| Epivir HBV ORAL SOLUTION | Tier 2 | |
| LamiVUDine ORAL TABLET | Tier 1 | |
| *Antiretrovirals**-*Antiretrovirals - Rti-Nucleoside Analogues-Thymidines*** | | |
| Stavudine ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|---------------------------------|
| Stavudine ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| Zidovudine ORAL CAPSULE | Tier 1 | |
| Zidovudine ORAL SYRUP | Tier 1 | |
| Zidovudine ORAL TABLET | Tier 1 | |
| *Antiretrovirals**-*Antiretrovirals - Rti-Nucleotide Analogues*** | | |
| Viread ORAL POWDER | Tier 2 | |
| Viread ORAL TABLET | Tier 2 | |
| *Cmv Agents**-*Cmv Agents*** | | |
| Valcyte ORAL SOLUTION RECONSTITUTED | Tier 4 | SP |
| Valcyte ORAL TABLET | Tier 4 | SP |
| ValGANciclovir HCl ORAL TABLET | Tier 4 | SP |
| *Hepatitis Agents**-*Hepatitis B Agents*** | | |
| Adefovir Dipivoxil ORAL TABLET | Tier 4 | SP |
| Baraclude ORAL TABLET | Tier 4 | SP |
| Entecavir ORAL TABLET | Tier 4 | SP |
| Tyzeka ORAL TABLET | Tier 4 | SP |
| *Hepatitis Agents**-*Hepatitis C Agent - Combinations*** | | |
| Harvoni ORAL TABLET | Tier 4 | PA; SP |
| *Hepatitis Agents**-*Hepatitis C Agents*** | | |
| Incivek ORAL TABLET | Tier 4 | PA; SP; QL (180 EA per 30 Days) |
| Moderiba ORAL 200 & 400 MG, 400 & 600 MG | Tier 4 | SP |
| Moderiba ORAL TABLET | Tier 4 | SP |
| Moderiba 1200 Dose Pack ORAL TABLET | Tier 4 | SP |
| Moderiba 800 Dose Pack ORAL TABLET | Tier 4 | SP |
| Olysio ORAL CAPSULE | Tier 4 | PA; SP |
| Peg-Intron SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (2 EA per 30 Days) |
| Peg-Intron Redipen SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (2 EA per 30 Days) |
| Pegasys SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (2 EA per 30 Days) |
| Pegasys SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP; QL (4 ML per 30 Days) |
| Pegasys ProClick SUBCUTANEOUS* SOLUTION 135 MCG/0.5ML | Tier 4 | PA; SP; QL (2 ML per 30 Days) |
| Rebetol ORAL SOLUTION | Tier 4 | SP |
| Ribasphere ORAL CAPSULE | Tier 4 | SP |
| Ribasphere ORAL TABLET | Tier 4 | SP |

| Drug | Tier | Notes |
|--|-------------|---------------------------------|
| RibaTab ORAL 400 & 600 MG | Tier 4 | SP |
| RibaTab ORAL TABLET | Tier 4 | SP |
| Ribavirin ORAL CAPSULE | Tier 4 | SP |
| Ribavirin ORAL TABLET | Tier 4 | SP |
| Sovaldi ORAL TABLET | Tier 4 | PA; SP |
| Victrelis ORAL CAPSULE | Tier 4 | PA; SP; QL (360 EA per 30 Days) |
| *Herpes Agents**-*Herpes Agents - Purine Analogues*** | | |
| Acyclovir ORAL CAPSULE | Tier 1 | |
| Acyclovir ORAL SUSPENSION | Tier 1 | |
| Acyclovir ORAL TABLET | Tier 1 | |
| ValACYclovir HCl ORAL TABLET | Tier 1 | |
| *Herpes Agents**-*Herpes Agents - Thymidine Analogues*** | | |
| Famciclovir ORAL TABLET | Tier 1 | |
| *Influenza Agents**-*Influenza Agents*** | | |
| Rimantadine HCl ORAL TABLET | Tier 1 | |
| *Influenza Agents**-*Neuraminidase Inhibitors*** | | |
| Relenza Diskhaler INHALATION AEROSOL POWDER, BREATH ACTIVATED | Tier 3 | QL (120 EA per 365 Days) |
| Tamiflu ORAL CAPSULE 30 MG | Tier 2 | QL (168 EA per 365 Days) |
| Tamiflu ORAL CAPSULE 45 MG, 75 MG | Tier 2 | QL (84 EA per 365 Days) |
| Tamiflu ORAL SUSPENSION RECONSTITUTED 6 MG/ML | Tier 2 | QL (1080 ML per 365 Days) |
| *Respiratory Syncytial Virus (Rsv) Agents**-*Rsv Agents - Nucleoside Analogues*** | | |
| Virazole INHALATION SOLUTION RECONSTITUTED | Tier 4 | SP |
| *Assorted Classes* | | |
| *Chelating Agents**-*Chelating Agents*** | | |
| Cuprimine ORAL CAPSULE | Tier 3 | |
| Depen Titratabs ORAL TABLET | Tier 3 | |
| Syprine ORAL CAPSULE | Tier 2 | |
| *Immunomodulators**-*Antileptotics*** | | |
| Thalomid ORAL CAPSULE | Tier 4 | SP |

| Drug | Tier | Notes |
|---|--------|---|
| *Immunomodulators**-*Immunomodulators For Myelodysplastic Syndromes*** | | |
| Revlimid ORAL CAPSULE | Tier 4 | PA; SP; 1 (Coverage may vary. Please consult your benefit booklet.); QL (30 EA per 30 Days) |
| *Immunosuppressive Agents**-*Cyclosporine Analogs*** | | |
| CycloSPORINE ORAL CAPSULE | Tier 1 | |
| CycloSPORINE Modified ORAL CAPSULE | Tier 1 | |
| CycloSPORINE Modified ORAL SOLUTION | Tier 1 | |
| Gengraf ORAL CAPSULE | Tier 1 | |
| Gengraf ORAL SOLUTION | Tier 1 | |
| SandIMMUNE ORAL SOLUTION | Tier 3 | |
| *Immunosuppressive Agents**-*Inosine Monophosphate Dehydrogenase Inhibitors*** | | |
| CellCept ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| Mycophenolate Mofetil ORAL CAPSULE | Tier 1 | |
| Mycophenolate Mofetil ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Mycophenolate Mofetil ORAL TABLET | Tier 1 | |
| Mycophenolic Acid ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Myfortic ORAL TABLET DELAYED RELEASE | Tier 2 | |
| *Immunosuppressive Agents**-*Macrolide Immunosuppressants*** | | |
| Hecoria ORAL CAPSULE | Tier 1 | |
| Rapamune ORAL SOLUTION | Tier 2 | |
| Rapamune ORAL TABLET | Tier 2 | |
| Sirolimus ORAL TABLET | Tier 1 | |
| Tacrolimus ORAL CAPSULE | Tier 1 | |
| Zortress ORAL TABLET | Tier 4 | SP |
| *Immunosuppressive Agents**-*Purine Analogs*** | | |
| Azasan ORAL TABLET | Tier 3 | |
| AzaTHIOprine ORAL TABLET | Tier 1 | |
| *Irrigation Solutions**-*Irrigation Solutions*** | | |
| Physiolyte IRRIGATION SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Physiosol Irrigation IRRIGATION SOLUTION | Tier 1 | |
| Sterile Water for Irrigation IRRIGATION SOLUTION | Tier 1 | |
| *Potassium Removing Resins**-*Potassium Removing Resins*** | | |
| Kionex ORAL SUSPENSION | Tier 1 | |
| Sodium Polystyrene Sulfonate ORAL SUSPENSION | Tier 1 | |
| *Beta Blockers* | | |
| *Alpha-Beta Blockers**-*Alpha-Beta Blockers*** | | |
| Carvedilol ORAL TABLET | Tier 1 | |
| Coreg CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| Labetalol HCl ORAL TABLET | Tier 1 | |
| *Beta Blockers Cardio-Selective**-*Beta Blockers Cardio-Selective*** | | |
| Acebutolol HCl ORAL CAPSULE | Tier 1 | |
| Atenolol ORAL TABLET | Tier 1 | |
| Betaxolol HCl ORAL TABLET | Tier 1 | |
| Bisoprolol Fumarate ORAL TABLET | Tier 1 | |
| Bystolic ORAL TABLET | Tier 3 | |
| Metoprolol Succinate ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Metoprolol Tartrate ORAL TABLET | Tier 1 | |
| *Beta Blockers Non-Selective**-*Beta Blockers Non-Selective*** | | |
| Inderal XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| InnoPran XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| Levatol ORAL TABLET | Tier 3 | |
| Nadolol ORAL TABLET | Tier 1 | |
| Pindolol ORAL TABLET | Tier 1 | |
| Propranolol HCl ORAL SOLUTION | Tier 1 | |
| Propranolol HCl ORAL TABLET | Tier 1 | |
| Propranolol HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Sorine ORAL TABLET | Tier 1 | |
| Sotalol HCl ORAL TABLET | Tier 1 | |
| Timolol Maleate ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Calcium Channel Blockers* | | |
| *Calcium Channel Blockers**-*Calcium Channel Blockers*** | | |
| Afeditab CR ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| AmLODIPine Besylate ORAL TABLET | Tier 1 | |
| Cardizem LA ORAL TABLET EXTENDED RELEASE 24 HR* 120 MG | Tier 3 | |
| Cartia XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Dilt-XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG | Tier 1 | |
| Diltiazem HCl ORAL TABLET | Tier 1 | |
| Diltiazem HCl CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Diltiazem HCl ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 1 | |
| Diltiazem HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG | Tier 1 | |
| Diltiazem HCl ER Beads ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG | Tier 1 | |
| Diltiazem HCl ER Coated Beads ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG | Tier 1 | |
| Felodipine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Isradipine ORAL CAPSULE | Tier 1 | |
| Matzim LA ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| NiCARdipine HCl ORAL CAPSULE | Tier 1 | |
| Nifediac CC ORAL TABLET EXTENDED RELEASE 24 HR* 30 MG, 60 MG | Tier 1 | |
| Nifedical XL ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| NIFEdipine ORAL CAPSULE | Tier 1 | |
| NIFEdipine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| NIFEdipine ER Osmotic ORAL TABLET EXTENDED RELEASE 24 HR* 30 MG, 90 MG | Tier 1 | |
| NiMODipine ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|---|
| Nisoldipine ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Taztia XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Verapamil HCl ORAL TABLET | Tier 1 | |
| Verapamil HCl ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Verapamil HCl ER ORAL TABLET EXTENDED RELEASE* | Tier 1 | |
| *Cardiotonics* | | |
| *Cardiac Glycosides**-*Cardiac Glycosides*** | | |
| Digitex ORAL TABLET | Tier 1 | |
| Digoxin ORAL SOLUTION | Tier 1 | |
| Digoxin ORAL TABLET | Tier 1 | |
| *Cardiovascular Agents - Misc.* | | |
| *Cardiovascular Agents Misc. - Combinations**-*Calcium Channel Blocker & Hmg Coa Reductase Inhibit Comb*** | | |
| Amlodipine-Atorvastatin ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG | Tier 1 | |
| Caduet ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG | Tier 3 | |
| *Cardiovascular Agents Misc. - Combinations**-*Nitrate & Vasodilator Combinations*** | | |
| BiDil ORAL TABLET | Tier 3 | |
| *Impotence Agents**-*Prostaglandin - Impotence Agents*** | | |
| Caverject INTRACAVERNOSAL * SOLUTION RECONSTITUTED | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Caverject Impulse INTRACAVERNOSAL * KIT | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Edex INTRACAVERNOSAL * KIT 10 MCG, 20 MCG | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet) |
| Muse URETHRAL PELLETT | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet) |

| Drug | Tier | Notes |
|---|--------|---------------------------------|
| *Impotence Agents**-*Selective Cgmp Phosphodiesterase Type 5 Inhibitors*** | | |
| Cialis ORAL TABLET 2.5 MG, 5 MG | Tier 3 | PA; QL (30 EA per 30 Days) |
| *Peripheral Vasodilators**-*Peripheral Vasodilators*** | | |
| Isoxsuprine HCl ORAL TABLET 10 MG | Tier 1 | |
| *Prostaglandin Vasodilators**-*Prostaglandin Vasodilators*** | | |
| Tyvaso INHALATION SOLUTION | Tier 4 | PA; SP |
| Ventavis INHALATION SOLUTION | Tier 4 | PA; SP; QL (540 ML per 30 Days) |
| *Pulmonary Hypertension - Endothelin Receptor Antagonists**-*Pulmonary Hypertension - Endothelin Receptor Antagonists*** | | |
| Letairis ORAL TABLET | Tier 4 | PA; SP; QL (30 EA per 30 Days) |
| Tracleer ORAL TABLET | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| *Pulmonary Hypertension - Phosphodiesterase Inhibitors**-*Pulmonary Hypertension - Phosphodiesterase Inhibitors*** | | |
| Adcirca ORAL TABLET | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| Sildenafil Citrate ORAL TABLET | Tier 1 | PA; QL (90 EA per 30 Days) |
| *Cephalosporins* | | |
| *Cephalosporins - 1St Generation**-*Cephalosporins - 1St Generation*** | | |
| Cefadroxil ORAL CAPSULE | Tier 1 | |
| Cefadroxil ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefadroxil ORAL TABLET | Tier 1 | |
| Cephalexin ORAL CAPSULE | Tier 1 | |
| Cephalexin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cephalexin ORAL TABLET | Tier 1 | |
| *Cephalosporins - 2Nd Generation**-*Cephalosporins - 2Nd Generation*** | | |
| Cefaclor ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|-----------------------------|
| Cefaclor ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefaclor ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Cefprozil ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefprozil ORAL TABLET | Tier 1 | |
| Ceftin ORAL SUSPENSION RECONSTITUTED 250 MG/5ML | Tier 3 | |
| Cefuroxime Axetil ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefuroxime Axetil ORAL TABLET | Tier 1 | |
| *Cephalosporins - 3Rd Generation**-*Cephalosporins - 3Rd Generation*** | | |
| Cedax ORAL CAPSULE | Tier 3 | |
| Cedax ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| Cefdinir ORAL CAPSULE | Tier 1 | |
| Cefdinir ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefditoren Pivoxil ORAL TABLET | Tier 1 | |
| Cefpodoxime Proxetil ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Cefpodoxime Proxetil ORAL TABLET | Tier 1 | |
| Suprax ORAL CAPSULE | Tier 3 | |
| Suprax ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| Suprax ORAL TABLET CHEWABLE | Tier 3 | |
| *Contraceptives* | | |
| *Combination Contraceptives - Oral**-*Biphasic Contraceptives - Oral*** | | |
| Azurette ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Kariva ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Lo Loestrin Fe ORAL TABLET | Tier 3 | |
| Necon 10/11 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Viorele ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Oral**-*Combination Contraceptives - Oral*** | | |
| Altavera ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Alyacen 1/35 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |

| Drug | Tier | Notes |
|--|-------------|-----------------------------|
| Apri ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Aubra ORAL TABLET | Tier 1 | |
| Aviane ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Balziva ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Beyaz ORAL TABLET | Tier 3 | |
| Briellyn ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Chateal ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Cryselle-28 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Cyclafem 1/35 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Dasetta 1/35 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Delyla ORAL TABLET | Tier 1 | |
| Drospirenone-Ethinyl Estradiol ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Elinest ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Emoquette ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Enskyce ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Estarylla ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Falmina ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Generess FE ORAL TABLET CHEWABLE | Tier 1 | 1 (Preventative Medication) |
| Gianvi ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Gildagia ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Gildess 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Gildess 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Gildess FE 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Gildess FE 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Junel 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Junel 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Junel FE 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Junel FE 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Kelnor 1/35 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Kurvelo ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Larin 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Larin Fe 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Larin Fe 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Lessina ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Levonorgestrel-Ethinyl Estrad ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Levora 0.15/30 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Lomedia 24 FE ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|--|-------------|-----------------------------|
| Loryna ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Low-Ogestrel ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Lutera ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Marlissa ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Microgestin 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Microgestin 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Microgestin FE 1.5/30 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Microgestin FE 1/20 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Mono-Linyah ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| MonoNessa ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Necon 0.5/35 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Necon 1/35 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Necon 1/50 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Norethin Ace-Eth Estrad-FE ORAL TABLET | Tier 1 | |
| Norethindrone Acet-Ethinyl Est ORAL TABLET | Tier 1 | |
| Norgestimate-Eth Estradiol ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Nortrel 0.5/35 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Nortrel 1/35 (21) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Nortrel 1/35 (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Ocella ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Ogestrel ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Orsythia ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Philith ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Pirmella 1/35 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Portia-28 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Previfem ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Reclipsen ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Safyral ORAL TABLET | Tier 3 | |
| Solia ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Sprintec 28 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Sronyx ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Syeda ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tarina FE 1/20 ORAL TABLET | Tier 1 | |
| Vestura ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Vyfemla ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Wera ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Wymzya Fe ORAL TABLET CHEWABLE | Tier 1 | 1 (Preventative Medication) |

| Drug | Tier | Notes |
|--|-------------|------------------------------|
| Zarah ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Zenchant ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Zenchant FE ORAL TABLET CHEWABLE | Tier 1 | 1 (Preventative Medication) |
| Zovia 1/35E (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Zovia 1/50E (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Oral**-*Continuous Contraceptives - Oral*** | | |
| Amethyst ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Oral**-*Extended-Cycle Contraceptives - Oral*** | | |
| Amethia ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Amethia Lo ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Camrese ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Camrese Lo ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Daysee ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Introvale ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Jolessa ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Levonorgest-Eth Estrad 91-Day ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Quasense ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Oral**-*Four Phase Contraceptives - Oral*** | | |
| Natazia ORAL TABLET | Tier 3 | |
| *Combination Contraceptives - Oral**-*Triphasic Contraceptives - Oral*** | | |
| Alyacen 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Aranelle ORAL TABLET | Tier 1 | 1 (Preventative medication.) |
| Caziant ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Cesia ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Cyclafem 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Dasetta 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Enpresse-28 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Leena ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Levonest ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Myzilra ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Necon 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |

| Drug | Tier | Notes |
|---|-------------|----------------------------------|
| Norgestim-Eth Estrad Triphasic ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Nortrel 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Pirmella 7/7/7 ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tilia Fe ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tri-Estarylla ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tri-Legest Fe ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tri-Linyah ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tri-Previfem ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Tri-Sprintec ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| TriNessa (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Trivora (28) ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Velivet ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Transdermal**-*Combination Contraceptives - Transdermal*** | | |
| Ortho Evra TRANSDERMAL PATCH WEEKLY | Tier 3 | 1 (Preventative Medication) |
| Xulane TRANSDERMAL PATCH WEEKLY | Tier 1 | 1 (Preventative Medication) |
| *Combination Contraceptives - Vaginal**-*Combination Contraceptives - Vaginal*** | | |
| NuvaRing VAGINAL RING | Tier 2 | 1 (Preventative Medication) |
| *Emergency Contraceptives**-*Emergency Contraceptives*** | | |
| Ella ORAL TABLET | Tier 3 | 1 (Preventative Medication) |
| Levonorgestrel ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| My Way ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Next Choice One Dose ORAL TABLET | Tier 1 | 1 (Preventative Medication); OTC |
| *Progestin Contraceptives - Injectable**-*Progestin Contraceptives - Injectable*** | | |
| Depo-SubQ Provera 104 SUBCUTANEOUS* SUSPENSION | Tier 3 | |
| MedroxyPROGESTERone Acetate INTRAMUSCULAR* SUSPENSION | Tier 1 | 1 (Preventative Medication) |
| *Progestin Contraceptives - Oral**-*Progestin Contraceptives - Oral*** | | |
| Camila ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Deblitane ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|-----------------------------|
| Errin ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Heather ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Jencycla ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Jolivette ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Lyza ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Nora-BE ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Norethindrone ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Norlyroc ORAL TABLET | Tier 1 | |
| Sharobel ORAL TABLET | Tier 1 | |
| *Corticosteroids* | | |
| *Glucocorticosteroids**-*Glucocorticosteroids*** | | |
| Baycadron ORAL ELIXIR | Tier 1 | |
| Budesonide ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Cortisone Acetate ORAL TABLET | Tier 1 | |
| Dexamethasone ORAL ELIXIR | Tier 1 | |
| Dexamethasone ORAL SOLUTION | Tier 1 | |
| Dexamethasone ORAL TABLET | Tier 1 | |
| Dexamethasone Intensol ORAL CONCENTRATE | Tier 1 | |
| DexPak 10 Day ORAL TABLET | Tier 3 | |
| DexPak 13 Day ORAL TABLET | Tier 3 | |
| DexPak 6 Day ORAL TABLET | Tier 3 | |
| Hydrocortisone ORAL TABLET | Tier 1 | |
| MethylPREDNISolone ORAL TABLET | Tier 1 | |
| MethylPREDNISolone (Pak) ORAL TABLET | Tier 1 | |
| Millipred ORAL TABLET | Tier 3 | |
| Millipred DP ORAL TABLET | Tier 3 | |
| Orapred ODT ORAL TABLET DISPERSIBLE 10 MG | Tier 3 | |
| PrednisolONE ORAL SOLUTION | Tier 1 | |
| PrednisolONE Sodium Phosphate ORAL SOLUTION | Tier 1 | |
| PredniSONE ORAL SOLUTION | Tier 1 | |
| PredniSONE ORAL TABLET | Tier 1 | |
| PredniSONE (Pak) ORAL TABLET | Tier 1 | |
| PredniSONE Intensol ORAL CONCENTRATE | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------|
| Rayos ORAL TABLET DELAYED RELEASE 1 MG | Tier 3 | |
| *Mineralocorticoids**-*Mineralocorticoids** | | |
| Fludrocortisone Acetate ORAL TABLET | Tier 1 | |
| *Cough/Cold/Allergy* | | |
| *Antitussives**-*Antitussive - Nonnarcotic*** | | |
| Benzonatate ORAL CAPSULE | Tier 1 | |
| *Antitussives**-*Antitussive - Opioid*** | | |
| Hydrocodone-Homatropine ORAL SYRUP | Tier 1 | |
| Hydrocodone-Homatropine ORAL TABLET | Tier 1 | |
| Hydromet ORAL SYRUP | Tier 1 | |
| Tussigon ORAL TABLET | Tier 1 | |
| *Cough/Cold/Allergy Combinations**-*Antitussive-Expectorant s-Decongestant*** | | |
| TGQ 30PSE/150GFN/15DM ORAL SYRUP | Tier 1 | |
| *Cough/Cold/Allergy Combinations**-*Decongestant & Antihistamine*** | | |
| Clarinet-D 12 Hour ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 3 | |
| Entre-B ORAL SUSPENSION | Tier 1 | OTC |
| Rescon-Jr ORAL TABLET EXTENDED RELEASE 12 HR* 4-20 MG | Tier 1 | |
| *Cough/Cold/Allergy Combinations**-*Decongestant W/ Expectorant*** | | |
| Phenylephrine-Guaifenesin ORAL LIQUID† | Tier 1 | |
| *Cough/Cold/Allergy Combinations**-*Non-Narc Antitussive-Antihistamine*** | | |
| Promethazine-DM ORAL SYRUP | Tier 1 | |
| *Cough/Cold/Allergy Combinations**-*Non-Narc Antitussive-Decongestant-Antihistamine** | | |
| Bromfed DM ORAL SYRUP | Tier 1 | |
| Phenylephrine-Chlorphen-DM ORAL LIQUID† 1.75-0.75-2.75 MG/ML | Tier 1 | |
| TGQ 15DM/5PEH/2CPM ORAL SYRUP | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Cough/Cold/Allergy Combinations**-*Opioid Antitussive-Antihistamine*** | | |
| Hydrocod Polst-CPM Polst ER ORAL LIQUID EXTENDEDRELEASE* | Tier 1 | |
| Promethazine-Codeine ORAL SYRUP | Tier 1 | |
| TussiCaps ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 3 | |
| *Cough/Cold/Allergy Combinations**-*Opioid Antitussive-Decongestant*** | | |
| Rezira ORAL SOLUTION | Tier 3 | |
| *Cough/Cold/Allergy Combinations**-*Opioid Antitussive-Decongestant-Antihistamine** | | |
| * | | |
| Promethazine VC/Codeine ORAL SYRUP | Tier 1 | |
| Zutripro ORAL SOLUTION | Tier 3 | |
| *Misc. Respiratory Inhalants**-*Misc. Respiratory Inhalants*** | | |
| Sodium Chloride INHALATION NEBULIZATION SOLUTION 0.9 % | Tier 1 | OTC |
| Sodium Chloride INHALATION NEBULIZATION SOLUTION 10 %, 3 %, 7 % | Tier 1 | |
| *Mucolytics**-*Mucolytics*** | | |
| Acetylcysteine INHALATION SOLUTION | Tier 1 | |
| *Dermatologicals* | | |
| *Acne Products**-*Acne Antibiotics*** | | |
| Clindacin-P EXTERNAL SWAB | Tier 1 | |
| ClindaMax EXTERNAL 1 % | Tier 1 | |
| ClindaMax EXTERNAL LOTION | Tier 1 | |
| Clindamycin Phosphate EXTERNAL 1 % | Tier 1 | |
| Clindamycin Phosphate EXTERNAL FOAM | Tier 1 | |
| Clindamycin Phosphate EXTERNAL LOTION | Tier 1 | |
| Clindamycin Phosphate EXTERNAL SOLUTION | Tier 1 | |
| Clindamycin Phosphate EXTERNAL SWAB | Tier 1 | |
| Ery EXTERNAL PAD | Tier 1 | |
| Erythromycin EXTERNAL 2 % | Tier 1 | |
| Erythromycin EXTERNAL PAD | Tier 1 | |
| Erythromycin EXTERNAL SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Sulfacetamide Sodium EXTERNAL SUSPENSION | Tier 1 | |
| *Acne Products**-*Acne Combinations*** | | |
| Acanya EXTERNAL | Tier 3 | |
| Avar Cleanser EXTERNAL EMULSION | Tier 1 | |
| Avar-e Emollient EXTERNAL CREAM | Tier 1 | |
| Avar-e Green EXTERNAL CREAM | Tier 1 | |
| BenzaClin EXTERNAL | Tier 3 | |
| Benzoyl Peroxide-Erythromycin EXTERNAL | Tier 1 | |
| BP 10-1 EXTERNAL EMULSION | Tier 1 | |
| BP Cleansing Wash EXTERNAL EMULSION | Tier 1 | |
| Cerisa Wash EXTERNAL EMULSION | Tier 1 | |
| Claris Clarifying Wash EXTERNAL EMULSION | Tier 1 | |
| Clindamycin Phos-Benzoyl Perox EXTERNAL | Tier 1 | |
| Epiduo EXTERNAL | Tier 3 | |
| Prascion EXTERNAL EMULSION | Tier 1 | |
| Prascion FC EXTERNAL PAD | Tier 1 | |
| Prascion RA EXTERNAL CREAM | Tier 1 | |
| Rosanil Cleanser EXTERNAL EMULSION | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL CREAM 10-2 %, 10-5 % | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL FOAM | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL LIQUID† 9-4 %, 9-4.5 % | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL LOTION 10-5 % | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL PAD | Tier 1 | |
| Sulfacetamide Sodium-Sulfur EXTERNAL SUSPENSION | Tier 1 | |
| Sulfacetamide-Sulfur in Urea EXTERNAL 10-5 % | Tier 1 | |
| Sulfacetamide-Sulfur in Urea EXTERNAL EMULSION | Tier 1 | |
| Veltin EXTERNAL | Tier 3 | |
| Zencia EXTERNAL LIQUID† | Tier 1 | |
| Ziana EXTERNAL | Tier 3 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Acne Products**-*Acne Products*** | | |
| Absorica ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG | Tier 3 | |
| Adapalene EXTERNAL 0.1 %, 0.3 % | Tier 1 | |
| Adapalene EXTERNAL CREAM | Tier 1 | |
| Amnesteem ORAL CAPSULE | Tier 1 | |
| Atralin EXTERNAL | Tier 3 | PA |
| Avita EXTERNAL 0.025 % | Tier 1 | |
| Avita EXTERNAL CREAM | Tier 1 | |
| Azelex EXTERNAL CREAM | Tier 3 | |
| BenzePrO EXTERNAL FOAM | Tier 1 | |
| BenzePrO Short Contact EXTERNAL FOAM | Tier 1 | |
| Benziq Wash EXTERNAL LIQUID† | Tier 1 | |
| Benzoyl Peroxide EXTERNAL 10 %, 5 % | Tier 1 | OTC |
| Benzoyl Peroxide EXTERNAL FOAM 5.3 % | Tier 1 | |
| Benzoyl Peroxide Cleanser EXTERNAL LOTION 6 % | Tier 1 | OTC |
| Benzoyl Peroxide Wash EXTERNAL KIT 8 & 5 % | Tier 1 | |
| BP Wash EXTERNAL LIQUID† 7 % | Tier 1 | |
| Claravis ORAL CAPSULE | Tier 1 | |
| Clearplex X EXTERNAL | Tier 1 | |
| Differin EXTERNAL 0.3 % | Tier 3 | |
| Differin EXTERNAL LOTION | Tier 3 | |
| Lavoclen-4 Creamy Wash EXTERNAL LIQUID† | Tier 1 | |
| Lavoclen-8 Creamy Wash EXTERNAL LIQUID† | Tier 1 | |
| Myorisan ORAL CAPSULE | Tier 1 | |
| Oscion Cleanser EXTERNAL LOTION 6 % | Tier 1 | |
| Tretin-X EXTERNAL CREAM 0.0375 % | Tier 3 | PA |
| Tretinoin EXTERNAL 0.01 %, 0.025 % | Tier 1 | |
| Tretinoin EXTERNAL CREAM | Tier 1 | |
| Tretinoin Microsphere EXTERNAL 0.04 % | Tier 1 | |
| Tretinoin Microsphere EXTERNAL 0.1 % | Tier 1 | PA |
| Tretinoin Microsphere Pump EXTERNAL | Tier 1 | PA |
| Zaclir Cleansing EXTERNAL LOTION 8 % | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|---|
| *Agents For External Genital And Perianal Warts**-*Agents For External Genital And Perianal Warts*** | | |
| Veregen EXTERNAL OINTMENT | Tier 3 | |
| *Agents For Facial Wrinkles**-*Agents For Facial Wrinkles - Retinoids*** | | |
| Avage EXTERNAL CREAM | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Refissa EXTERNAL CREAM | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Renova EXTERNAL CREAM | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Renova Pump EXTERNAL CREAM | Tier 3 | 1 (May not be a covered benefit. Consult your benefit booklet.) |
| *Antibiotics - Topical**-*Antibiotic Steroid Combinations - Topical*** | | |
| Cortisporin EXTERNAL CREAM | Tier 3 | |
| Cortisporin EXTERNAL OINTMENT | Tier 3 | |
| *Antibiotics - Topical**-*Antibiotics - Topical*** | | |
| Altabax EXTERNAL OINTMENT | Tier 3 | |
| Centany EXTERNAL OINTMENT | Tier 1 | |
| Gentamicin Sulfate EXTERNAL CREAM | Tier 1 | |
| Gentamicin Sulfate EXTERNAL OINTMENT | Tier 1 | |
| Mupirocin EXTERNAL OINTMENT | Tier 1 | |
| Mupirocin Calcium EXTERNAL CREAM | Tier 1 | |
| *Antifungals - Topical**-*Antifungals - Topical Combinations*** | | |
| Clotrimazole-Betamethasone EXTERNAL CREAM | Tier 1 | |
| Clotrimazole-Betamethasone EXTERNAL LOTION | Tier 1 | |
| Dermazene EXTERNAL CREAM | Tier 1 | |
| Exoderm EXTERNAL LOTION | Tier 1 | |
| Hydrocortisone-Iodoquinol EXTERNAL CREAM | Tier 1 | |
| Nystatin-Triamcinolone EXTERNAL CREAM | Tier 1 | |
| Nystatin-Triamcinolone EXTERNAL OINTMENT | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Versiclear EXTERNAL LOTION | Tier 1 | |
| *Antifungals - Topical**-*Antifungals - Topical*** | | |
| Ciclodan EXTERNAL CREAM | Tier 1 | |
| Ciclodan EXTERNAL SOLUTION | Tier 1 | |
| Ciclopirox EXTERNAL 0.77 % | Tier 1 | |
| Ciclopirox EXTERNAL SHAMPOO | Tier 1 | |
| Ciclopirox EXTERNAL SOLUTION | Tier 1 | |
| Ciclopirox Olamine EXTERNAL CREAM | Tier 1 | |
| Ciclopirox Olamine EXTERNAL SUSPENSION | Tier 1 | |
| CNL8 Nail EXTERNAL KIT | Tier 3 | |
| Mentax EXTERNAL CREAM | Tier 3 | |
| Naftin EXTERNAL CREAM 2 % | Tier 3 | |
| Nyamyc EXTERNAL POWDER | Tier 1 | |
| Nystatin EXTERNAL CREAM | Tier 1 | |
| Nystatin EXTERNAL OINTMENT | Tier 1 | |
| Nystatin EXTERNAL POWDER 100000 UNIT/GM | Tier 1 | |
| Nystop EXTERNAL POWDER | Tier 1 | |
| Penlac EXTERNAL SOLUTION | Tier 3 | |
| *Antifungals - Topical**-*Imidazole-Related Antifungals - Topical*** | | |
| Clotrimazole EXTERNAL CREAM | Tier 1 | OTC |
| Clotrimazole EXTERNAL SOLUTION | Tier 1 | OTC |
| Clotrimazole Anti-Fungal EXTERNAL CREAM | Tier 1 | OTC |
| Econazole Nitrate EXTERNAL CREAM | Tier 1 | |
| Ertaczo EXTERNAL CREAM | Tier 3 | |
| Exelderm EXTERNAL CREAM | Tier 3 | |
| Exelderm EXTERNAL SOLUTION | Tier 3 | |
| Ketoconazole EXTERNAL CREAM | Tier 1 | |
| Ketoconazole EXTERNAL SHAMPOO | Tier 1 | |
| Ketodan EXTERNAL FOAM | Tier 1 | |
| Ketodan EXTERNAL KIT | Tier 1 | |
| Oxistat EXTERNAL CREAM | Tier 3 | |
| Xolegel EXTERNAL | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|---|
| *Anti-Inflammatory Agents - Topical**-*Anti-Inflammatory Agents - Topical*** | | |
| Flector TRANSDERMAL PATCH | Tier 3 | PA; QL (60 EA per 30 Days) |
| Voltaren TRANSDERMAL | Tier 2 | |
| *Antineoplastic Or Premalignant Lesion Agents - Topical**-*Antineoplastic Antimetabolites - Topical*** | | |
| Carac EXTERNAL CREAM | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Fluoroplex EXTERNAL CREAM | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Fluorouracil EXTERNAL CREAM 5 % | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| Fluorouracil EXTERNAL SOLUTION | Tier 1 | |
| *Antineoplastic Or Premalignant Lesion Agents - Topical**-*Antineoplastic Or Premalignant Lesions - Topical Misc.*** | | |
| Picato EXTERNAL | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic Or Premalignant Lesion Agents - Topical**-*Antineoplastic Or Premalignant Lesions - Topical Nsaid's*** | | |
| Diclofenac Sodium TRANSDERMAL 3 % | Tier 1 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic Or Premalignant Lesion Agents - Topical**-*Antineoplastic Retinoids - Topical*** | | |
| Panretin EXTERNAL | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antineoplastic Or Premalignant Lesion Agents - Topical**-*Topical Selective Retinoid X Receptor Agonists*** | | |
| Targretin EXTERNAL | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Antipruritics - Topical**-*Antipruritics - Topical*** | | |
| Prudoxin EXTERNAL CREAM | Tier 3 | |
| Zonalon EXTERNAL CREAM | Tier 3 | |
| *Antipsoriatics**-*Antipsoriatics - Systemic*** | | |
| 8-Mop ORAL CAPSULE | Tier 3 | |
| Acitretin ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|--------|
| Methoxsalen Rapid ORAL CAPSULE | Tier 1 | |
| Stelara SUBCUTANEOUS* 45 MG/0.5ML, 90 MG/ML | Tier 4 | PA; SP |
| *Antipsoriatics**-*Antipsoriatics*** | | |
| Calcipotriene EXTERNAL CREAM | Tier 1 | |
| Calcipotriene EXTERNAL OINTMENT | Tier 1 | |
| Calcipotriene EXTERNAL SOLUTION | Tier 1 | |
| Dritho-Creme HP EXTERNAL CREAM | Tier 1 | |
| Tazorac EXTERNAL 0.05 %, 0.1 % | Tier 2 | |
| Tazorac EXTERNAL CREAM | Tier 2 | |
| Vectical EXTERNAL OINTMENT | Tier 3 | |
| *Antiseborrheic Products**-*Antiseborrheic Combinations*** | | |
| Selenium Sulf-Pyrithione-Urea EXTERNAL SHAMPOO | Tier 1 | |
| *Antiseborrheic Products**-*Antiseborrheic Products*** | | |
| Glycolic Acid SOLUTION | Tier 1 | OTC |
| Ovace Plus EXTERNAL CREAM | Tier 3 | |
| Ovace Plus EXTERNAL SHAMPOO | Tier 3 | |
| Selenium Sulfide EXTERNAL LOTION | Tier 1 | |
| Sulfacetamide Sodium EXTERNAL LIQUID† | Tier 1 | |
| *Antivirals - Topical**-*Antivirals - Topical*** | | |
| Acyclovir EXTERNAL OINTMENT | Tier 1 | |
| Denavir EXTERNAL CREAM | Tier 3 | |
| Zovirax EXTERNAL CREAM | Tier 3 | |
| *Burn Products**-*Burn Products*** | | |
| Mafenide Acetate EXTERNAL PACKET | Tier 1 | |
| Silver Sulfadiazine EXTERNAL CREAM | Tier 1 | |
| SSD EXTERNAL CREAM | Tier 1 | |
| Sulfamylon EXTERNAL CREAM | Tier 3 | |
| Thermazene EXTERNAL CREAM | Tier 1 | |
| *Cauterizing Agents**-*Cauterizing Agent Combinations*** | | |
| Arzol Silver Nit Applicators EXTERNAL | Tier 1 | |
| *Cauterizing Agents**-*Cauterizing Agents*** | | |
| Silver Nitrate EXTERNAL OINTMENT | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Silver Nitrate EXTERNAL SOLUTION | Tier 1 | |
| *Corticosteroids - Topical**-*Corticosteroids - Topical*** | | |
| Ala Cort EXTERNAL CREAM | Tier 1 | |
| Alclometasone Dipropionate EXTERNAL CREAM | Tier 1 | |
| Alclometasone Dipropionate EXTERNAL OINTMENT | Tier 1 | |
| AlphaTrex EXTERNAL | Tier 1 | |
| Amcinonide EXTERNAL CREAM | Tier 1 | |
| Amcinonide EXTERNAL LOTION | Tier 1 | |
| Amcinonide EXTERNAL OINTMENT | Tier 1 | |
| ApexiCon EXTERNAL OINTMENT | Tier 1 | |
| ApexiCon E EXTERNAL CREAM | Tier 1 | |
| Betamethasone Dipropionate EXTERNAL CREAM | Tier 1 | |
| Betamethasone Dipropionate EXTERNAL LOTION | Tier 1 | |
| Betamethasone Dipropionate EXTERNAL OINTMENT | Tier 1 | |
| Betamethasone Dipropionate Aug EXTERNAL 0.05 % | Tier 1 | |
| Betamethasone Dipropionate Aug EXTERNAL CREAM | Tier 1 | |
| Betamethasone Dipropionate Aug EXTERNAL LOTION | Tier 1 | |
| Betamethasone Dipropionate Aug EXTERNAL OINTMENT | Tier 1 | |
| Betamethasone Valerate EXTERNAL CREAM | Tier 1 | |
| Betamethasone Valerate EXTERNAL FOAM | Tier 1 | |
| Betamethasone Valerate EXTERNAL LOTION | Tier 1 | |
| Betamethasone Valerate EXTERNAL OINTMENT | Tier 1 | |
| Capex EXTERNAL SHAMPOO | Tier 3 | |
| Clobetasol Propionate EXTERNAL 0.05 % | Tier 1 | |
| Clobetasol Propionate EXTERNAL CREAM | Tier 1 | |
| Clobetasol Propionate EXTERNAL FOAM | Tier 1 | |
| Clobetasol Propionate EXTERNAL LOTION | Tier 1 | |
| Clobetasol Propionate EXTERNAL OINTMENT | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Clobetasol Propionate EXTERNAL SHAMPOO | Tier 1 | |
| Clobetasol Propionate EXTERNAL SOLUTION | Tier 1 | |
| Clobex Spray EXTERNAL LIQUID† | Tier 3 | |
| Cloderm EXTERNAL CREAM | Tier 3 | |
| Cloderm Pump EXTERNAL CREAM | Tier 3 | |
| Cordran EXTERNAL LOTION | Tier 3 | |
| Cordran EXTERNAL TAPE | Tier 3 | |
| Desonate EXTERNAL | Tier 3 | |
| Desonide EXTERNAL CREAM | Tier 1 | |
| Desonide EXTERNAL LOTION | Tier 1 | |
| Desonide EXTERNAL OINTMENT | Tier 1 | |
| DesOwen EXTERNAL CREAM | Tier 3 | |
| DesOwen EXTERNAL LOTION | Tier 3 | |
| Desoximetasone EXTERNAL 0.05 % | Tier 1 | |
| Desoximetasone EXTERNAL CREAM | Tier 1 | |
| Desoximetasone EXTERNAL OINTMENT | Tier 1 | |
| Diflorasone Diacetate EXTERNAL CREAM | Tier 1 | |
| Diflorasone Diacetate EXTERNAL OINTMENT | Tier 1 | |
| Fluocinolone Acetonide EXTERNAL CREAM | Tier 1 | |
| Fluocinolone Acetonide EXTERNAL OINTMENT | Tier 1 | |
| Fluocinolone Acetonide EXTERNAL SOLUTION | Tier 1 | |
| Fluocinolone Acetonide Scalp EXTERNAL OIL | Tier 1 | |
| Fluocinonide EXTERNAL 0.05 % | Tier 1 | |
| Fluocinonide EXTERNAL CREAM | Tier 1 | |
| Fluocinonide EXTERNAL OINTMENT | Tier 1 | |
| Fluocinonide EXTERNAL SOLUTION | Tier 1 | |
| Fluticasone Propionate EXTERNAL CREAM | Tier 1 | |
| Fluticasone Propionate EXTERNAL LOTION | Tier 1 | |
| Fluticasone Propionate EXTERNAL OINTMENT | Tier 1 | |
| Halobetasol Propionate EXTERNAL CREAM | Tier 1 | |
| Halobetasol Propionate EXTERNAL OINTMENT | Tier 1 | |
| Halog EXTERNAL CREAM | Tier 3 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Halog EXTERNAL OINTMENT | Tier 3 | |
| Hydrocortisone EXTERNAL CREAM 1 % | Tier 1 | OTC |
| Hydrocortisone EXTERNAL CREAM 2.5 % | Tier 1 | |
| Hydrocortisone EXTERNAL LOTION 1 % | Tier 1 | OTC |
| Hydrocortisone EXTERNAL LOTION 2.5 % | Tier 1 | |
| Hydrocortisone EXTERNAL OINTMENT 1 % | Tier 1 | OTC |
| Hydrocortisone EXTERNAL OINTMENT 2.5 % | Tier 1 | |
| Hydrocortisone Butyr Lipo Base EXTERNAL CREAM | Tier 1 | |
| Hydrocortisone Butyrate EXTERNAL CREAM | Tier 1 | |
| Hydrocortisone Butyrate EXTERNAL OINTMENT | Tier 1 | |
| Hydrocortisone Butyrate EXTERNAL SOLUTION | Tier 1 | |
| Hydrocortisone Valerate EXTERNAL CREAM | Tier 1 | |
| Hydrocortisone Valerate EXTERNAL OINTMENT | Tier 1 | |
| Kenalog EXTERNAL AEROSOL, SOLUTION | Tier 3 | |
| Locoid EXTERNAL LOTION | Tier 3 | |
| LoKara EXTERNAL LOTION | Tier 1 | |
| Mometasone Furoate EXTERNAL CREAM | Tier 1 | |
| Mometasone Furoate EXTERNAL OINTMENT | Tier 1 | |
| Mometasone Furoate EXTERNAL SOLUTION | Tier 1 | |
| Pediaderm HC EXTERNAL KIT | Tier 3 | |
| Pediaderm TA EXTERNAL KIT | Tier 3 | |
| Prednicarbate EXTERNAL CREAM | Tier 1 | |
| Prednicarbate EXTERNAL OINTMENT | Tier 1 | |
| Scalacort EXTERNAL LOTION | Tier 1 | |
| Synalar EXTERNAL CREAM | Tier 1 | |
| Synalar EXTERNAL OINTMENT | Tier 1 | |
| Texacort EXTERNAL SOLUTION | Tier 3 | |
| Triamcinolone Acetonide EXTERNAL CREAM | Tier 1 | |
| Triamcinolone Acetonide EXTERNAL LOTION | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Triamcinolone Acetonide EXTERNAL OINTMENT | Tier 1 | |
| Trianex EXTERNAL OINTMENT | Tier 1 | |
| Triderm EXTERNAL CREAM | Tier 1 | |
| Vanos EXTERNAL CREAM | Tier 3 | |
| Verdeso EXTERNAL FOAM | Tier 3 | |
| *Corticosteroids - Topical**-*Steroid-Local Anesthetic Combinations*** | | |
| Hydrocortisone Ace-Pramoxine EXTERNAL CREAM | Tier 1 | |
| Pramosone EXTERNAL LOTION | Tier 3 | |
| Pramosone EXTERNAL OINTMENT | Tier 3 | |
| Pramosone E EXTERNAL CREAM | Tier 3 | |
| *Corticosteroids - Topical**-*Topical Steroid Combinations*** | | |
| Calcipotriene-Betameth Diprop EXTERNAL OINTMENT | Tier 1 | |
| CortAlo EXTERNAL | Tier 1 | |
| Halac EXTERNAL KIT | Tier 1 | |
| Halonate Pac EXTERNAL KIT | Tier 1 | |
| Taclonex EXTERNAL OINTMENT | Tier 3 | |
| Taclonex EXTERNAL SUSPENSION | Tier 3 | |
| *Emollient/Keratolytic Agents**-*Emollient/Keratolytic Agents*** | | |
| CEM-Urea EXTERNAL SOLUTION | Tier 1 | |
| Cerovel EXTERNAL 40 % | Tier 1 | |
| Cerovel EXTERNAL LOTION | Tier 1 | |
| Remeven EXTERNAL CREAM | Tier 1 | |
| U-Kera E EXTERNAL CREAM | Tier 1 | |
| Umecta Mousse EXTERNAL FOAM | Tier 1 | |
| Urea EXTERNAL 40 % | Tier 1 | |
| Urea EXTERNAL CREAM 39 %, 40 %, 45 %, 50 % | Tier 1 | |
| Urea EXTERNAL LOTION 40 %, 45 % | Tier 1 | |
| Urea Nail EXTERNAL 45 % | Tier 1 | |
| Urea Nail Film EXTERNAL SUSPENSION | Tier 1 | |
| X-Viate EXTERNAL 40 % | Tier 1 | |
| X-Viate EXTERNAL CREAM | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Emollient/Keratolytic Agents**-*Emollient/Keratolytic Combinations*** | | |
| Latrix EXTERNAL SUSPENSION | Tier 1 | |
| Uramaxin EXTERNAL FOAM | Tier 1 | |
| Urea EXTERNAL EMULSION | Tier 1 | |
| Urea Nail EXTERNAL KIT | Tier 1 | |
| *Emollients**-*Emollient Combinations*** | | |
| Lactic Acid E EXTERNAL CREAM | Tier 1 | OTC |
| *Emollients**-*Emollients*** | | |
| Ammonium Lactate EXTERNAL CREAM | Tier 1 | OTC |
| Ammonium Lactate EXTERNAL LOTION | Tier 1 | OTC |
| HyGel EXTERNAL | Tier 1 | |
| LAClotion EXTERNAL LOTION | Tier 1 | |
| Lactic Acid EXTERNAL LOTION | Tier 1 | |
| *Enzymes - Topical**-*Enzymes - Topical*** | | |
| Revina EXTERNAL OINTMENT | Tier 1 | |
| Santyl EXTERNAL OINTMENT | Tier 3 | |
| Vasolex EXTERNAL OINTMENT | Tier 1 | |
| *Immunomodulating Agents - Topical**-*Immunomodulators Imidazoquinolinamines - Topical*** | | |
| Imiquimod EXTERNAL CREAM | Tier 1 | |
| Zyclara EXTERNAL CREAM | Tier 3 | |
| *Immunosuppressive Agents - Topical**-*Macrolide Immunosuppressants - Topical*** | | |
| Elidel EXTERNAL CREAM | Tier 3 | |
| Tacrolimus EXTERNAL OINTMENT | Tier 1 | |
| *Keratolytic/Antimitotic Agents**-*Keratolytic And/Or Antimitotic Combinations*** | | |
| Pyrogalllic Acid EXTERNAL OINTMENT | Tier 1 | |
| *Keratolytic/Antimitotic Agents**-*Keratolytic/Antimitotic Agents*** | | |
| Condylox EXTERNAL 0.5 % | Tier 3 | |
| Podocon EXTERNAL SOLUTION | Tier 1 | |
| Podofilox EXTERNAL SOLUTION | Tier 1 | |
| Salacyn EXTERNAL CREAM | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Salacyn EXTERNAL LOTION | Tier 1 | |
| Salicylic Acid EXTERNAL 6 % | Tier 1 | |
| Salicylic Acid EXTERNAL CREAM | Tier 1 | |
| Salicylic Acid EXTERNAL FOAM | Tier 1 | |
| Salicylic Acid EXTERNAL LIQUID† 26 % | Tier 1 | |
| Salicylic Acid EXTERNAL LOTION | Tier 1 | |
| Salicylic Acid EXTERNAL SHAMPOO | Tier 1 | |
| Salicylic Acid Wart Remover EXTERNAL LIQUID† | Tier 1 | |
| Salvax EXTERNAL FOAM | Tier 1 | |
| *Local Anesthetics - Topical**-*Local Anesthetics - Topical*** | | |
| Lidocaine EXTERNAL OINTMENT | Tier 1 | |
| Lidocaine EXTERNAL PATCH | Tier 1 | |
| Lidocaine HCl EXTERNAL 2 % | Tier 1 | |
| Lidocaine HCl EXTERNAL CREAM | Tier 1 | |
| Lidocaine HCl EXTERNAL LOTION | Tier 1 | |
| Pramox EXTERNAL | Tier 1 | |
| *Local Anesthetics - Topical**-*Topical Anesthetic Combinations*** | | |
| Lidocaine-Prilocaine EXTERNAL CREAM | Tier 1 | |
| Synera EXTERNAL PATCH | Tier 3 | |
| *Local Anesthetics - Topical**-*Topical Anesthetic Gasses*** | | |
| Ethyl Chloride EXTERNAL AEROSOL† | Tier 1 | |
| *Misc. Topical**-*Misc. Topical*** | | |
| Hypercare EXTERNAL SOLUTION | Tier 1 | |
| *Misc. Topical**-*Skin Protectants*** | | |
| Benzoin Compound EXTERNAL TINCTURE | Tier 1 | OTC |
| *Pigmenting-Depigmenting Agents**-*Pigmenting Agents*** | | |
| Oxsoalene EXTERNAL LOTION | Tier 2 | |
| *Rosacea Agents**-*Rosacea Agents*** | | |
| Finacea EXTERNAL | Tier 3 | |
| MetroNIDAZOLE EXTERNAL 0.75 %, 1 % | Tier 1 | |
| MetroNIDAZOLE EXTERNAL CREAM | Tier 1 | |
| MetroNIDAZOLE EXTERNAL LOTION | Tier 1 | |
| Oracea ORAL CAPSULE DELAYED RELEASE | Tier 3 | |
| Rosadan EXTERNAL 0.75 % | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Rosadan EXTERNAL CREAM | Tier 1 | |
| *Scabicides & Pediculicides**-*Scabicides & Pediculicides*** | | |
| Acticin EXTERNAL CREAM | Tier 1 | |
| Eurax EXTERNAL CREAM | Tier 2 | |
| Eurax EXTERNAL LOTION | Tier 2 | |
| Lindane EXTERNAL LOTION | Tier 1 | |
| Lindane EXTERNAL SHAMPOO | Tier 1 | |
| Malathion EXTERNAL LOTION | Tier 1 | |
| Natroba EXTERNAL SUSPENSION | Tier 3 | |
| Permethrin EXTERNAL CREAM | Tier 1 | |
| Sklice EXTERNAL LOTION | Tier 3 | |
| Spinosad EXTERNAL SUSPENSION | Tier 1 | |
| Ulesfia EXTERNAL LOTION | Tier 3 | |
| *Tar Products**-*Tar Products*** | | |
| Coal Tar EXTERNAL SOLUTION | Tier 1 | |
| *Wound Care Products**-*Wound Care - Growth Factor Agents*** | | |
| Regranex EXTERNAL | Tier 3 | |
| *Diagnostic Products* | | |
| *Diagnostic Tests**-*Diagnostic Tests*** | | |
| Bayer Breeze 2 Test IN VITRO DISK | Tier 2 | PA; OTC |
| Bayer Contour Next Test IN VITRO STRIP | Tier 2 | PA; OTC |
| Bayer Contour Test IN VITRO STRIP | Tier 2 | PA; OTC |
| OneTouch Ultra Blue IN VITRO STRIP | Tier 2 | OTC |
| OneTouch Verio IN VITRO STRIP | Tier 2 | OTC |
| *Digestive Aids* | | |
| *Digestive Enzymes**-*Digestive Enzymes*** | | |
| Creon ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 2 | |
| Pancreaze ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 2 | |
| Pertzye ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 3 | |
| Ultresa ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 3 | |
| Viokace ORAL TABLET | Tier 3 | |

| Drug | Tier | Notes |
|--|--------|-------|
| Zenpep ORAL CAPSULE DELAYED RELEASE PARTICLES 10000 UNIT, 15000 UNIT, 20000 UNIT, 25000 UNIT, 3000-10000 UNIT, 5000 UNIT | Tier 2 | |
| *Diuretics* | | |
| *Carbonic Anhydrase Inhibitors**-*Carbonic Anhydrase Inhibitors*** | | |
| AcetaZOLAMIDE ORAL TABLET | Tier 1 | |
| AcetaZOLAMIDE ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 1 | |
| AcetaZOLAMIDE Sodium INJECTION SOLUTION RECONSTITUTED | Tier 1 | |
| Methazolamide ORAL TABLET | Tier 1 | |
| *Diuretic Combinations**-*Diuretic Combinations*** | | |
| Amiloride-Hydrochlorothiazide ORAL TABLET | Tier 1 | |
| Spironolactone-HCTZ ORAL TABLET | Tier 1 | |
| Triamterene-HCTZ ORAL CAPSULE 37.5-25 MG | Tier 1 | |
| Triamterene-HCTZ ORAL TABLET | Tier 1 | |
| *Loop Diuretics**-*Loop Diuretics*** | | |
| Bumetanide ORAL TABLET | Tier 1 | |
| Edecrin ORAL TABLET | Tier 3 | |
| Furosemide ORAL SOLUTION 10 MG/ML, 8 MG/ML | Tier 1 | |
| Furosemide ORAL TABLET | Tier 1 | |
| Torsemide ORAL TABLET | Tier 1 | |
| *Potassium Sparing Diuretics**-*Potassium Sparing Diuretics*** | | |
| AMILoride HCl ORAL TABLET | Tier 1 | |
| Dyrenium ORAL CAPSULE 100 MG | Tier 3 | |
| Spironolactone ORAL TABLET | Tier 1 | |
| *Thiazides And Thiazide-Like Diuretics**-*Thiazides And Thiazide-Like Diuretics*** | | |
| Chlorothiazide ORAL TABLET | Tier 1 | |
| Chlorthalidone ORAL TABLET | Tier 1 | |
| Hydrochlorothiazide ORAL CAPSULE | Tier 1 | |
| Hydrochlorothiazide ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|---|
| Indapamide ORAL TABLET | Tier 1 | |
| Methyclothiazide ORAL TABLET | Tier 1 | |
| Metolazone ORAL TABLET | Tier 1 | |
| *Endocrine And Metabolic Agents - Misc.* | | |
| *Bone Density Regulators**-*Bisphosphonates*** | | |
| Actonel ORAL TABLET | Tier 2 | PA |
| Alendronate Sodium ORAL TABLET | Tier 1 | |
| Atelvia ORAL TABLET DELAYED RELEASE | Tier 2 | PA |
| Binosto ORAL TABLET EFFERVESCENT | Tier 3 | |
| Etidronate Disodium ORAL TABLET | Tier 1 | |
| Fosamax Plus D ORAL TABLET | Tier 3 | |
| Ibandronate Sodium ORAL TABLET | Tier 1 | |
| Risedronate Sodium ORAL TABLET | Tier 1 | PA |
| *Bone Density Regulators**-*Calcitonins*** | | |
| Calcitonin (Salmon) NASAL SOLUTION | Tier 1 | |
| Miacalcin INJECTION SOLUTION | Tier 3 | |
| *Bone Density Regulators**-*Parathyroid Hormone And Derivatives*** | | |
| Forteo SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| *Fertility Regulators**-*Ovulation Stimulants-Gonadotropins*** | | |
| Bravelle INJECTION SOLUTION RECONSTITUTED | Tier 4 | SP |
| Follistim AQ INJECTION SOLUTION | Tier 4 | SP |
| Follistim AQ SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Gonal-f INJECTION SOLUTION RECONSTITUTED | Tier 4 | SP |
| Gonal-f RFF SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | SP |
| Gonal-f RFF Pen SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Gonal-f RFF Rediject SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Novarel INTRAMUSCULAR* SOLUTION RECONSTITUTED | Tier 4 | SP; 1 (May not be a covered benefit. Consult your benefit booklet.) |
| Pregnyl INTRAMUSCULAR* SOLUTION RECONSTITUTED | Tier 4 | SP; 1 (May not be a covered benefit. Consult your benefit booklet.) |

| Drug | Tier | Notes |
|---|--------|---|
| *Fertility Regulators**-*Ovulation Stimulants-Synthetic*** | | |
| ClomiPHENE Citrate ORAL TABLET | Tier 1 | 1 (May not be a covered benefit. Check your benefit booklet for coverage of fertility drugs.) |
| *Gnrh/Lhrh Antagonists**-*Gnrh/Lhrh Antagonists*** | | |
| Cetrotide SUBCUTANEOUS* KIT 0.25 MG | Tier 4 | SP |
| *Growth Hormone Releasing Hormones (Ghrh)**-*Growth Hormone Releasing Hormones (Ghrh)*** | | |
| Egrifta SUBCUTANEOUS* SOLUTION RECONSTITUTED 2 MG | Tier 4 | PA; SP; QL (30 EA per 30 Days) |
| *Growth Hormones**-*Growth Hormones*** | | |
| Genotropin SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Genotropin MiniQuick SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Humatrope INJECTION SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Norditropin FlexPro SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Norditropin NordiFlex Pen SUBCUTANEOUS* SOLUTION 30 MG/3ML | Tier 4 | PA; SP |
| Nutropin AQ NuSpin 10 SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Nutropin AQ NuSpin 20 SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Nutropin AQ NuSpin 5 SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Nutropin AQ Pen SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Omnitrope SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Omnitrope SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Saizen INJECTION SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Saizen Click.Easy INJECTION SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| Tev-Tropin SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP |

| Drug | Tier | Notes |
|---|--------|------------------------------|
| Zorbtive SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | PA; SP |
| *Hormone Receptor Modulators**-*Selective Estrogen Receptor Modulators (Serms)*** | | |
| Raloxifene HCl ORAL TABLET | Tier 1 | |
| *Metabolic Modifiers**-*Calcimimetic Agents*** | | |
| Sensipar ORAL TABLET | Tier 2 | |
| *Metabolic Modifiers**-*Carnitine Replenisher - Agents*** | | |
| LevOCARNitine ORAL TABLET | Tier 1 | |
| *Metabolic Modifiers**-*Hereditary Tyrosinemia Type 1 (Ht-1) Treatment - Agents*** | | |
| Orfadin ORAL CAPSULE | Tier 4 | SP |
| *Metabolic Modifiers**-*Hyperammonemia Treatment - Agents*** | | |
| Carbaglu ORAL TABLET | Tier 4 | SP |
| *Metabolic Modifiers**-*Hyperparathyroid Treatment - Vitamin D Analogs*** | | |
| Calcitriol ORAL CAPSULE | Tier 1 | |
| Calcitriol ORAL SOLUTION | Tier 1 | |
| Doxercalciferol ORAL CAPSULE | Tier 1 | |
| Hectorol ORAL CAPSULE | Tier 3 | |
| Paricalcitol ORAL CAPSULE | Tier 1 | |
| *Metabolic Modifiers**-*Phenylketonuria Treatment - Agents*** | | |
| Kuvan ORAL TABLET SOLUBLE | Tier 4 | PA; SP |
| *Metabolic Modifiers**-*Urea Cycle Disorder - Agents*** | | |
| Buphenyl ORAL TABLET | Tier 2 | PA; QL (1200 EA per 30 Days) |
| *Posterior Pituitary Hormones**-*Vasopressin*** | | |
| Desmopressin Ace Rhinal Tube NASAL SOLUTION | Tier 1 | |
| Desmopressin Ace Spray Refrig NASAL SOLUTION | Tier 1 | |
| Desmopressin Acetate ORAL TABLET | Tier 1 | |
| *Prolactin Inhibitors**-*Dopamine Receptor Agonists*** | | |
| Cabergoline ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|---|
| *Somatostatic Agents**-*Somatostatic Agents*** | | |
| Octreotide Acetate INJECTION SOLUTION | Tier 4 | SP |
| Signifor SUBCUTANEOUS* SOLUTION | Tier 3 | PA |
| *Vasopressin Receptor Antagonists**-*Selective Vasopressin V2-Receptor Antagonists*** | | |
| Samsca ORAL TABLET | Tier 4 | SP |
| *Estrogens* | | |
| *Estrogen Combinations**-*Estrogen & Androgen*** | | |
| Covaryx ORAL TABLET | Tier 1 | |
| Covaryx HS ORAL TABLET | Tier 1 | |
| Est Estrogens-Methyltest ORAL TABLET | Tier 1 | |
| Methyltest-Est Estrogens ORAL TABLET | Tier 1 | |
| *Estrogen Combinations**-*Estrogen & Progestin*** | | |
| CombiPatch TRANSDERMAL PATCH BIWEEKLY | Tier 3 | |
| Estradiol-Norethindrone Acet ORAL TABLET | Tier 1 | |
| Jinteli ORAL TABLET | Tier 1 | |
| Lopreeza ORAL TABLET | Tier 1 | |
| Mimvey ORAL TABLET | Tier 1 | |
| Premphase ORAL TABLET | Tier 2 | |
| Prempro ORAL TABLET | Tier 2 | |
| *Estrogens**-*Estrogens*** | | |
| Alora TRANSDERMAL PATCH BIWEEKLY 0.075 MG/24HR | Tier 3 | |
| Divigel TRANSDERMAL | Tier 2 | |
| Enjuvia ORAL TABLET | Tier 3 | |
| Estradiol ORAL TABLET | Tier 1 | |
| Estradiol TRANSDERMAL PATCH WEEKLY | Tier 1 | |
| Estradiol Valerate INTRAMUSCULAR* OIL 20 MG/ML, 40 MG/ML | Tier 1 | 1 (Self Injectable); 2 (Limited to a 30 day supply) |
| Estrojel TRANSDERMAL | Tier 3 | |
| Estropipate ORAL TABLET | Tier 1 | |
| Evamist TRANSDERMAL SOLUTION | Tier 3 | |
| Menest ORAL TABLET | Tier 3 | |
| Minivelle TRANSDERMAL PATCH BIWEEKLY 0.1 MG/24HR | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Premarin ORAL TABLET | Tier 2 | |
| Vivelle-Dot TRANSDERMAL PATCH BIWEEKLY | Tier 2 | |
| *Fluoroquinolones* | | |
| *Fluoroquinolones**-*Fluoroquinolones*** | | |
| Ciprofloxacin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Ciprofloxacin HCl ORAL TABLET | Tier 1 | |
| Ciprofloxacin-Ciproflox HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Factive ORAL TABLET | Tier 3 | |
| Levofloxacin ORAL SOLUTION | Tier 1 | |
| Levofloxacin ORAL TABLET | Tier 1 | |
| Moxifloxacin HCl ORAL TABLET | Tier 1 | |
| Ofloxacin ORAL TABLET 400 MG | Tier 1 | |
| *Gastrointestinal Agents - Misc.* | | |
| *Gallstone Solubilizing Agents**-*Gallstone Solubilizing Agents*** | | |
| Ursodiol ORAL CAPSULE | Tier 1 | |
| Ursodiol ORAL TABLET | Tier 1 | |
| *Gastrointestinal Antiallergy Agents**-*Gastrointestinal Antiallergy Agents*** | | |
| Cromolyn Sodium ORAL CONCENTRATE | Tier 1 | |
| *Gastrointestinal Chloride Channel Activators**-*Gastrointestinal Chloride Channel Activators*** | | |
| Amitiza ORAL CAPSULE | Tier 3 | |
| *Gastrointestinal Stimulants**-*Gastrointestinal Stimulants*** | | |
| Metoclopramide HCl ORAL SOLUTION 10 MG/10ML, 5 MG/5ML | Tier 1 | |
| Metoclopramide HCl ORAL TABLET | Tier 1 | |
| *Inflammatory Bowel Agents**-*Inflammatory Bowel Agents*** | | |
| Apriso ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 2 | |
| Asacol HD ORAL TABLET DELAYED RELEASE | Tier 2 | |
| Balsalazide Disodium ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------------------------------|
| Canasa SUPPOSITORY | Tier 2 | |
| Dipentum ORAL CAPSULE | Tier 3 | |
| Giazo ORAL TABLET | Tier 3 | |
| Mesalamine ENEMA | Tier 1 | |
| Pentasa ORAL CAPSULE EXTENDED RELEASE* | Tier 2 | |
| SulfaSALazine ORAL TABLET | Tier 1 | |
| SulfaSALazine ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Sulfazine ORAL TABLET | Tier 1 | |
| Sulfazine EC ORAL TABLET DELAYED RELEASE | Tier 1 | |
| *Inflammatory Bowel Agents**-*Tumor Necrosis Factor Alpha Blockers*** | | |
| Cimzia SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (1 EA per 30 Days) |
| Cimzia Prefilled SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (1 EA per 30 Days) |
| Cimzia Starter Kit SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (1 EA per 30 Days) |
| *Intestinal Acidifiers**-*Intestinal Acidifiers*** | | |
| Enulose ORAL SOLUTION | Tier 1 | |
| Generlac ORAL SOLUTION | Tier 1 | |
| *Irritable Bowel Syndrome (Ibs) Agents**-*Ibs Agent - Guanylate Cyclase-C (Gc-C) Agonists*** | | |
| Linzess ORAL CAPSULE | Tier 3 | |
| *Irritable Bowel Syndrome (Ibs) Agents**-*Ibs Agent - Selective 5-Ht3 Receptor Antagonists*** | | |
| Lotronex ORAL TABLET | Tier 3 | |
| *Peripheral Opioid Receptor Antagonists**-*Peripheral Opioid Receptor Antagonists*** | | |
| Relistor SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| *Phosphate Binder Agents**-*Phosphate Binder Agents*** | | |
| Calcium Acetate ORAL CAPSULE | Tier 1 | |
| Calcium Acetate (Phos Binder) ORAL TABLET | Tier 1 | |
| Fosrenol ORAL TABLET CHEWABLE | Tier 3 | |
| Phoslyra ORAL SOLUTION | Tier 3 | |
| Renagel ORAL TABLET | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|--------|
| Renvela ORAL PACKET | Tier 2 | |
| Renvela ORAL TABLET | Tier 2 | |
| *Short Bowel Syndrome (Sbs) Agents**-*Glucagon-Like Peptide-2 (Glp-2) Analogs*** | | |
| Gattex SUBCUTANEOUS* KIT | Tier 4 | PA; SP |
| *Genitourinary Agents - Miscellaneous* | | |
| *Alkalinizers**-*Citrates*** | | |
| Citric Acid-Sodium Citrate ORAL SOLUTION | Tier 1 | |
| Cytra K Crystals ORAL PACKET | Tier 1 | |
| Cytra-2 ORAL SOLUTION | Tier 1 | |
| Cytra-3 ORAL SYRUP | Tier 1 | |
| Cytra-K ORAL SOLUTION | Tier 1 | |
| Oracit ORAL SOLUTION | Tier 3 | |
| Potassium Citrate ER ORAL TABLET EXTENDEDRELEASE* 10 MEQ (1080 MG), 5 MEQ (540 MG) | Tier 1 | |
| Tricitrates ORAL SOLUTION | Tier 1 | |
| Urocit-K 15 ORAL TABLET EXTENDEDRELEASE* | Tier 3 | |
| *Cystinosis Agents**-*Cystinosis Agents*** | | |
| Cystagon ORAL CAPSULE | Tier 4 | SP |
| *Genitourinary Irrigants**-*Anti-Infective Genitourinary Irrigants*** | | |
| Neomycin-Polymyxin B GU IRRIGATION SOLUTION | Tier 1 | |
| *Genitourinary Irrigants**-*Genitourinary Irrigants*** | | |
| Acetic Acid IRRIGATION SOLUTION | Tier 1 | |
| Sodium Chloride IRRIGATION SOLUTION | Tier 1 | |
| Sorbitol IRRIGATION SOLUTION | Tier 1 | |
| *Interstitial Cystitis Agents**-*Interstitial Cystitis Agents*** | | |
| Elmiron ORAL CAPSULE | Tier 2 | |
| *Prostatic Hypertrophy Agents**-*5-Alpha Reductase Inhibitors*** | | |
| Avodart ORAL CAPSULE | Tier 2 | |
| Finasteride ORAL TABLET 5 MG | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------------------------------|
| *Prostatic Hypertrophy Agents**-*Alpha 1-Adrenoceptor Antagonists*** | | |
| Alfuzosin HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Cardura XL ORAL TABLET EXTENDED RELEASE 24 HR* 4 MG | Tier 3 | |
| Rapaflo ORAL CAPSULE | Tier 3 | |
| Tamsulosin HCl ORAL CAPSULE | Tier 1 | |
| *Prostatic Hypertrophy Agents**-*Prostatic Hypertrophy Agent Combinations*** | | |
| Jalyn ORAL CAPSULE | Tier 2 | |
| *Urinary Analgesics**-*Urinary Analgesics*** | | |
| Phenazo ORAL TABLET 200 MG | Tier 1 | |
| Phenazopyridine HCl ORAL TABLET 100 MG, 200 MG | Tier 1 | |
| *Gout Agents* | | |
| *Gout Agent Combinations**-*Gout Agent Combinations*** | | |
| Colchicine-Probenecid ORAL TABLET | Tier 1 | |
| *Gout Agents**-*Gout Agents*** | | |
| Allopurinol ORAL TABLET | Tier 1 | |
| Colcrys ORAL TABLET | Tier 2 | |
| Uloric ORAL TABLET 40 MG, 80 MG | Tier 2 | |
| *Uricosurics**-*Uricosurics*** | | |
| Probenecid ORAL TABLET | Tier 1 | |
| *Hematological Agents - Misc.* | | |
| *Bradykinin B2 Receptor Antagonists**-*Bradykinin B2 Receptor Antagonists*** | | |
| Firazyr SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP; QL (9 ML per 30 Days) |
| *Hematorheologic Agents**-*Hematorheologic Agents*** | | |
| Pentoxifylline ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| *Platelet Aggregation Inhibitors**-*Cyclopentyltriazolopyrimidine (Cptp) Derivatives*** | | |
| Brilinta ORAL TABLET | Tier 3 | QL (60 EA per 30 Days) |

| Drug | Tier | Notes |
|---|--------|---|
| *Platelet Aggregation Inhibitors**-*Phosphodiesterase Iii Inhibitors*** | | |
| Cilostazol ORAL TABLET | Tier 1 | |
| *Platelet Aggregation Inhibitors**-*Platelet Aggregation Inhibitor Combinations*** | | |
| Aggrenox ORAL CAPSULE EXTENDED RELEASE 12 HOUR | Tier 3 | |
| *Platelet Aggregation Inhibitors**-*Platelet Aggregation Inhibitors*** | | |
| Dipyridamole ORAL TABLET | Tier 1 | |
| *Platelet Aggregation Inhibitors**-*Quinazoline Agents*** | | |
| Anagrelide HCl ORAL CAPSULE | Tier 1 | |
| *Platelet Aggregation Inhibitors**-*Thienopyridine Derivatives*** | | |
| Clopidogrel Bisulfate ORAL TABLET 75 MG | Tier 1 | |
| Effient ORAL TABLET | Tier 3 | |
| Ticlopidine HCl ORAL TABLET | Tier 1 | |
| *Hematopoietic Agents* | | |
| *Agents For Gaucher Disease**-*Agents For Gaucher Disease*** | | |
| Zavesca ORAL CAPSULE | Tier 4 | PA; SP |
| *Agents For Sickle Cell Anemia**-*Cytotoxic Agents*** | | |
| Droxia ORAL CAPSULE | Tier 3 | 1 (Coverage may vary. Please consult your benefit booklet.) |
| *Cobalamins**-*Cobalamins*** | | |
| Cyanocobalamin INJECTION SOLUTION | Tier 1 | |
| *Folic Acid/Folates**-*Folic Acid/Folates*** | | |
| FA-8 ORAL CAPSULE | Tier 1 | 1 (Preventative Medication); OTC |
| FA-8 ORAL TABLET | Tier 1 | 1 (Preventative Medication); OTC |
| Folic Acid ORAL TABLET 1 MG | Tier 1 | OTC |
| Folic Acid ORAL TABLET 400 MCG, 800 MCG | Tier 1 | 1 (Preventative Medication); OTC |
| KP Folic Acid ORAL TABLET | Tier 1 | 1 (Preventative Medication); OTC |

| Drug | Tier | Notes |
|--|--------|--------------------------------|
| *Hematopoietic Growth Factors**-*Erythropoiesis-Stimulating Agents (Esas)*** | | |
| Aranesp (Albumin Free) INJECTION SOLUTION 100 MCG/0.5ML, 100 MCG/ML, 150 MCG/0.3ML, 150 MCG/0.75ML, 200 MCG/0.4ML, 200 MCG/ML, 25 MCG/0.42ML, 25 MCG/ML, 300 MCG/0.6ML, 300 MCG/ML, 40 MCG/0.4ML, 40 MCG/ML, 500 MCG/ML, 60 MCG/0.3ML, 60 MCG/ML | Tier 4 | SP |
| Epogen INJECTION SOLUTION | Tier 4 | SP |
| Procrit INJECTION SOLUTION | Tier 4 | SP |
| *Hematopoietic Growth Factors**-*Granulocyte Colony-Stimulating Factors (G-Csf)*** | | |
| Neulasta SUBCUTANEOUS* SOLUTION | Tier 4 | PA; SP |
| Neupogen INJECTION SOLUTION 300 MCG/0.5ML, 300 MCG/ML, 480 MCG/0.8ML | Tier 4 | SP |
| *Hematopoietic Growth Factors**-*Interleukins*** | | |
| Neumega SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 4 | SP |
| *Hematopoietic Growth Factors**-*Thrombopoietin (Tpo) Receptor Agonists*** | | |
| Promacta ORAL TABLET | Tier 4 | PA; SP; QL (30 EA per 30 Days) |
| *Hematopoietic Mixtures**-*Cobalamin Combinations*** | | |
| Foltrate ORAL TABLET | Tier 3 | |
| *Hematopoietic Mixtures**-*Folic Acid/Folate Combinations*** | | |
| NuFol ORAL TABLET | Tier 1 | |
| TL Gard Rx ORAL TABLET | Tier 1 | |
| *Hematopoietic Mixtures**-*Iron Combinations*** | | |
| Ferotrinsic ORAL CAPSULE | Tier 1 | |
| FerroGels Forte ORAL CAPSULE | Tier 1 | |
| Hematogen FA ORAL CAPSULE | Tier 1 | |
| Hematogen Forte ORAL CAPSULE | Tier 1 | |
| iFerex 150 Forte ORAL CAPSULE | Tier 1 | |
| Poly-Iron 150 Forte ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Hematopoietic Mixtures**-*Iron W/ Folic Acid*** | | |
| Hemocyt-F ORAL TABLET | Tier 1 | |
| Tandem F ORAL CAPSULE | Tier 1 | |
| *Hematopoietic Mixtures**-*Iron-B12-Folate*** | | |
| FerraPlus 90 ORAL TABLET | Tier 1 | |
| *Iron**-*Iron*** | | |
| EZFE 200 ORAL CAPSULE | Tier 1 | OTC |
| Fer-Iron ORAL SOLUTION | Tier 1 | OTC |
| Ferretts ORAL TABLET | Tier 1 | OTC |
| Ferrex 150 ORAL CAPSULE | Tier 1 | OTC |
| Ferrimin 150 ORAL TABLET | Tier 1 | OTC |
| Ferrocite ORAL TABLET | Tier 1 | OTC |
| Ferrous Fumarate ORAL TABLET 324 MG, 90 MG | Tier 1 | OTC |
| Ferrous Gluconate ORAL TABLET 240 (27 Fe) MG, 324 (38 Fe) MG, 325 (36 Fe) MG | Tier 1 | OTC |
| Ferrous Sulfate ORAL ELIXIR | Tier 1 | OTC |
| Ferrous Sulfate ORAL LIQUID† | Tier 1 | OTC |
| Ferrous Sulfate ORAL SOLUTION | Tier 1 | OTC |
| Ferrous Sulfate ORAL SYRUP | Tier 1 | OTC |
| Ferrous Sulfate ORAL TABLET 325 (65 Fe) MG | Tier 1 | OTC |
| Ferrous Sulfate ORAL TABLET DELAYED RELEASE 325 (65 Fe) MG | Tier 1 | OTC |
| Ferrous Sulfate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | OTC |
| iFerex 150 ORAL CAPSULE | Tier 1 | OTC |
| KP Ferrous Gluconate ORAL TABLET | Tier 1 | OTC |
| KP Ferrous Sulfate ORAL TABLET | Tier 1 | OTC |
| Myferon 150 ORAL CAPSULE | Tier 1 | OTC |
| MyKidz Iron 10 ORAL SUSPENSION | Tier 1 | OTC |
| NovaFerrum Pediatric Drops ORAL LIQUID† | Tier 1 | OTC |
| Nu-Iron ORAL CAPSULE | Tier 1 | OTC |
| ProFe ORAL CAPSULE | Tier 1 | OTC |
| Proferrin ES ORAL TABLET | Tier 1 | OTC |
| Slow Release Iron ORAL TABLET EXTENDEDRELEASE* 50 MG | Tier 1 | OTC |

| Drug | Tier | Notes |
|---|--------|------------------------|
| *Hemostatics* | | |
| *Hemostatics - Systemic**-*Hemostatics - Systemic*** | | |
| Aminocaproic Acid ORAL SYRUP | Tier 1 | |
| Aminocaproic Acid ORAL TABLET | Tier 1 | |
| Tranexamic Acid ORAL TABLET | Tier 1 | |
| *Hypnotics* | | |
| *Barbiturate Hypnotics**-*Barbiturate Hypnotics*** | | |
| PHENobarbital ORAL ELIXIR | Tier 1 | |
| PHENobarbital ORAL SOLUTION | Tier 1 | |
| PHENobarbital ORAL TABLET | Tier 1 | |
| *Hypnotics - Tricyclic Agents**-*Hypnotics - Tricyclic Agents*** | | |
| Silenor ORAL TABLET | Tier 3 | |
| *Non-Barbiturate Hypnotics**-*Benzodiazepine Hypnotics*** | | |
| Estazolam ORAL TABLET | Tier 1 | |
| Flurazepam HCl ORAL CAPSULE | Tier 1 | |
| Midazolam HCl ORAL SYRUP | Tier 1 | |
| Temazepam ORAL CAPSULE | Tier 1 | |
| Triazolam ORAL TABLET | Tier 1 | |
| *Non-Barbiturate Hypnotics**-*Non-Benzodiazepine - Gaba-Receptor Modulators*** | | |
| Eszopiclone ORAL TABLET | Tier 1 | QL (14 EA per 30 days) |
| Intermezzo SUBLINGUAL TABLET SUBLINGUAL 3.5 MG | Tier 3 | QL (14 EA per 30 Days) |
| Zaleplon ORAL CAPSULE | Tier 1 | |
| Zolpidem Tartrate ORAL TABLET | Tier 1 | |
| Zolpidem Tartrate ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | QL (14 EA per 30 Days) |
| *Selective Melatonin Receptor Agonists**-*Selective Melatonin Receptor Agonists*** | | |
| Rozerem ORAL TABLET | Tier 3 | QL (14 EA per 30 Days) |

| Drug | Tier | Notes |
|---|--------|-------|
| *Laxatives* | | |
| *Laxative Combinations**-*Bowel Evacuant Combinations*** | | |
| Colyte with Flavor Packs ORAL SOLUTION RECONSTITUTED 227.1 GM | Tier 3 | |
| GaviLyte-C ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| GaviLyte-G ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| GaviLyte-N with Flavor Pack ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| Golytely ORAL SOLUTION RECONSTITUTED 227.1 GM | Tier 3 | |
| MoviPrep ORAL SOLUTION RECONSTITUTED | Tier 3 | |
| PEG 3350-KCl-Na Bicarb-NaCl ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| PEG 3350/Electrolytes ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| PEG-3350/Electrolytes ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| Prepopik ORAL PACKET | Tier 3 | |
| Suprep Bowel Prep ORAL SOLUTION | Tier 3 | |
| TriLyte ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| *Laxatives - Miscellaneous**-*Laxatives - Miscellaneous*** | | |
| Constulose ORAL SOLUTION | Tier 1 | |
| Kristalose ORAL PACKET | Tier 3 | |
| Lactulose ORAL SOLUTION | Tier 1 | |
| Polyethylene Glycol 3350 ORAL PACKET | Tier 1 | OTC |
| Polyethylene Glycol 3350 ORAL POWDER | Tier 1 | OTC |
| *Saline Laxatives**-*Saline Laxative Mixtures*** | | |
| OsmoPrep ORAL TABLET | Tier 3 | |
| *Macrolides* | | |
| *Azithromycin**-*Azithromycin*** | | |
| Azithromycin ORAL PACKET | Tier 1 | |
| Azithromycin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Azithromycin ORAL TABLET | Tier 1 | |
| Zithromax ORAL PACKET | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Clarithromycin**-*Clarithromycin*** | | |
| Clarithromycin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Clarithromycin ORAL TABLET | Tier 1 | |
| Clarithromycin ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| *Erythromycins**-*Erythromycins*** | | |
| E.E.S. 400 ORAL TABLET | Tier 1 | |
| Ery-Tab ORAL TABLET DELAYED RELEASE 333 MG | Tier 3 | |
| Erythrocin Stearate ORAL TABLET | Tier 1 | |
| Erythromycin Base ORAL CAPSULE DELAYED RELEASE PARTICLES | Tier 1 | |
| Erythromycin Base ORAL TABLET | Tier 1 | |
| Erythromycin Ethylsuccinate ORAL TABLET | Tier 1 | |
| PCE ORAL TABLET DELAYED RELEASE | Tier 3 | |
| *Fidaxomicin**-*Fidaxomicin*** | | |
| Difucid ORAL TABLET | Tier 3 | |
| *Medical Devices* | | |
| *Diabetic Supplies**-*Glucose Monitoring Test Supplies*** | | |
| Lancet Device | Tier 2 | OTC |
| Sure Comfort Lancing Pen | Tier 2 | OTC |
| *Misc. Devices**-*Misc. Devices*** | | |
| Pill Splitter | Tier 2 | OTC |
| *Parenteral Therapy Supplies**-*Needles & Syringes*** | | |
| Insulin Syringe 28G X 1/2" 1 ML, 30G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML | Tier 2 | OTC |
| Pen Needles 3/16" | Tier 2 | OTC |
| *Respiratory Therapy Supplies**-*Peak Flow Meters*** | | |
| Peak Air Peak Flow Meter DEVICE | Tier 2 | OTC |
| Peak Flow Meter DEVICE | Tier 2 | OTC |
| *Respiratory Therapy Supplies**-*Spacer/Aerosol-Holding Chambers & Supplies*** | | |
| Microchamber | Tier 2 | |

| Drug | Tier | Notes |
|--|--------|----------------------------|
| *Migraine Products* | | |
| *Migraine Combinations**-*Ergot Combinations*** | | |
| Cafergot ORAL TABLET | Tier 2 | |
| *Migraine Combinations**-*Selective Serotonin Agonist-Nsaid Combinations*** | | |
| Treximet ORAL TABLET | Tier 3 | PA; QL (12 EA per 30 Days) |
| *Migraine Products**-*Migraine Products*** | | |
| Dihydroergotamine Mesylate INJECTION SOLUTION | Tier 1 | |
| Dihydroergotamine Mesylate NASAL SOLUTION | Tier 1 | |
| Ergomar SUBLINGUAL TABLET SUBLINGUAL | Tier 3 | |
| *Serotonin Agonists**-*Selective Serotonin Agonists 5-Ht(1)*** | | |
| Alsuma SUBCUTANEOUS* | Tier 3 | PA |
| Axert ORAL TABLET | Tier 3 | PA; QL (12 EA per 30 Days) |
| Frova ORAL TABLET | Tier 3 | PA; QL (12 EA per 30 Days) |
| Naratriptan HCl ORAL TABLET | Tier 1 | QL (12 EA per 30 Days) |
| Relpax ORAL TABLET | Tier 2 | PA; QL (12 EA per 30 Days) |
| Rizatriptan Benzoate ORAL TABLET | Tier 1 | QL (12 EA per 30 Days) |
| Rizatriptan Benzoate ORAL TABLET DISPERSIBLE | Tier 1 | QL (12 EA per 30 Days) |
| SUMatriptan NASAL SOLUTION | Tier 1 | QL (6 EA per 30 Days) |
| SUMatriptan Succinate ORAL TABLET | Tier 1 | QL (12 EA per 30 Days) |
| SUMatriptan Succinate SUBCUTANEOUS* 6 MG/0.5ML | Tier 1 | QL (3 ML per 30 days) |
| SUMatriptan Succinate SUBCUTANEOUS* SOLUTION | Tier 1 | QL (3 ML per 30 Days) |
| Sumavel DosePro SUBCUTANEOUS* 4 MG/0.5ML, 6 MG/0.5ML | Tier 3 | PA |
| ZOLmitriptan ORAL TABLET | Tier 1 | QL (12 EA per 30 Days) |
| ZOLmitriptan ORAL TABLET DISPERSIBLE 2.5 MG | Tier 2 | QL (12 EA per 30 Days) |
| ZOLmitriptan ORAL TABLET DISPERSIBLE 5 MG | Tier 1 | QL (12 EA per 30 Days) |
| Zomig NASAL SOLUTION 5 MG | Tier 3 | QL (6 EA per 30 Days) |

| Drug | Tier | Notes |
|---|--------|-----------------------------|
| *Minerals & Electrolytes* | | |
| *Fluoride**-*Fluoride*** | | |
| Sodium Fluoride ORAL SOLUTION | Tier 1 | 1 (Preventative Medication) |
| Sodium Fluoride ORAL TABLET | Tier 1 | 1 (Preventative Medication) |
| Sodium Fluoride ORAL TABLET CHEWABLE | Tier 1 | 1 (Preventative Medication) |
| *Magnesium**-*Magnesium Combinations*** | | |
| MagneBind 400 ORAL TABLET | Tier 3 | |
| *Phosphate**-*Phosphate*** | | |
| Phospha 250 Neutral ORAL TABLET | Tier 1 | |
| *Potassium**-*Potassium Combinations*** | | |
| Effer-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ | Tier 3 | |
| Pot Bicarb-Pot Chloride ORAL TABLET EFFERVESCENT | Tier 1 | |
| *Potassium**-*Potassium*** | | |
| Effer-K ORAL TABLET EFFERVESCENT 25 MEQ | Tier 1 | |
| K-Effervescent ORAL TABLET EFFERVESCENT | Tier 1 | |
| K-Tab ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| K-Tabs ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| K-Vescent ORAL TABLET EFFERVESCENT | Tier 1 | |
| Klor-Con ORAL PACKET 20 MEQ | Tier 1 | |
| Klor-Con ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Klor-Con 10 ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Klor-Con M15 ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Klor-Con M20 ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Klor-Con/EF ORAL TABLET EFFERVESCENT | Tier 1 | |
| Potassium Bicarbonate ORAL TABLET EFFERVESCENT | Tier 1 | |
| Potassium Chloride ORAL LIQUID† 40 MEQ/15ML (20%) | Tier 1 | |
| Potassium Chloride ORAL SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Potassium Chloride Crys ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Potassium Chloride ER ORAL CAPSULE EXTENDED RELEASE* | Tier 1 | |
| Potassium Chloride ER ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| *Sodium**-*Sodium*** | | |
| Monoject Flush Syringe INJECTION SOLUTION | Tier 1 | |
| Normal Saline Flush INTRAVENOUS* SOLUTION | Tier 1 | |
| *Zinc**-*Zinc*** | | |
| Galzin ORAL CAPSULE | Tier 3 | |
| Zinc Sulfate ORAL CAPSULE | Tier 1 | OTC |
| *Mouth/Throat/Dental Agents* | | |
| *Anesthetics Topical Oral**-*Anesthetics Topical Oral*** | | |
| Lidocaine HCl MOUTH/THROAT SOLUTION | Tier 1 | |
| Lidocaine Viscous MOUTH/THROAT SOLUTION | Tier 1 | |
| LTA 360 Kit MOUTH/THROAT SOLUTION | Tier 3 | |
| *Anti-Infectives - Throat**-*Anti-Infectives - Throat*** | | |
| Clotrimazole MOUTH/THROAT TROCHE | Tier 1 | |
| Nystatin MOUTH/THROAT SUSPENSION | Tier 1 | |
| Oravig BUCCAL TABLET | Tier 3 | |
| *Antiseptics - Mouth/Throat**-*Antiseptics - Mouth/Throat*** | | |
| Chlorhexidine Gluconate MOUTH/THROAT SOLUTION | Tier 1 | |
| Periogard MOUTH/THROAT SOLUTION | Tier 1 | |
| *Dental Products**-*Dental Products - Combinations*** | | |
| Fluoridex Sensitivity Relief DENTAL PASTE | Tier 1 | |
| *Dental Products**-*Fluoride Dental Products*** | | |
| CaviRinse MOUTH/THROAT SOLUTION | Tier 1 | |
| Clinpro 5000 DENTAL PASTE | Tier 1 | |
| ControlRx DENTAL PASTE | Tier 1 | |
| Denta 5000 Plus DENTAL CREAM | Tier 1 | |
| DentaGel DENTAL | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Karigel-N DENTAL | Tier 1 | |
| Perio Med MOUTH/THROAT CONCENTRATE | Tier 1 | OTC |
| Phos-Flur DENTAL | Tier 1 | |
| SF DENTAL | Tier 1 | |
| Stannous Fluoride MOUTH/THROAT CONCENTRATE | Tier 1 | |
| *Steroids - Mouth/Throat**-*Steroids - Mouth/Throat*** | | |
| Oralene MOUTH/THROAT PASTE | Tier 1 | |
| Triamcinolone Acetonide MOUTH/THROAT PASTE | Tier 1 | |
| *Throat Products - Misc.**-*Saliva Stimulants*** | | |
| Cevimeline HCl ORAL CAPSULE | Tier 1 | |
| Pilocarpine HCl ORAL TABLET | Tier 1 | |
| *Multivitamins* | | |
| *Multiple Vitamins W/ Minerals**-*Multiple Vitamins W/ Minerals*** | | |
| Nicazel ORAL TABLET | Tier 3 | |
| *Ped Mv W/ Fluoride**-*Ped Mv W/ Fluoride*** | | |
| Multi-Vitamin/Fluoride ORAL SOLUTION | Tier 1 | |
| Multi-Vitamin/Fluoride ORAL TABLET CHEWABLE 0.5 MG | Tier 1 | |
| *Ped Mv W/ Fluoride**-*Ped Vitamins Acd W/ Fluoride*** | | |
| Tri-Vitamin/Fluoride ORAL SOLUTION | Tier 1 | |
| *Prenatal Vitamins**-*Prenatal Mv & Min W/Fe-Fa*** | | |
| Right Step Prenatal ORAL TABLET | Tier 1 | OTC |
| Se-Natal 19 ORAL TABLET | Tier 1 | |
| *Prenatal Vitamins**-*Prenatal Mv & Min W/Fe-Fa-Dha*** | | |
| Taron-Prex ORAL CAPSULE | Tier 1 | |
| *Prenatal Vitamins**-*Prenatal Vitamins*** | | |
| BP FoliNatal Plus B ORAL TABLET | Tier 1 | |
| *Musculoskeletal Therapy Agents* | | |
| *Central Muscle Relaxants**-*Central Muscle Relaxants*** | | |
| Baclofen ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Carisoprodol ORAL TABLET | Tier 1 | |
| Chlorzoxazone ORAL TABLET | Tier 1 | |
| Cyclobenzaprine HCl ORAL TABLET | Tier 1 | |
| EnovaRX-Cyclobenzaprine HCl TRANSDERMAL CREAM | Tier 1 | |
| Lorzone ORAL TABLET 375 MG | Tier 3 | |
| Metaxalone ORAL TABLET | Tier 1 | |
| Methocarbamol ORAL TABLET | Tier 1 | |
| Orphenadrine Citrate ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| TiZANidine HCl ORAL CAPSULE | Tier 1 | |
| TiZANidine HCl ORAL TABLET | Tier 1 | |
| *Direct Muscle Relaxants**-*Direct Muscle Relaxants*** | | |
| Dantrolene Sodium ORAL CAPSULE | Tier 1 | |
| *Muscle Relaxant Combinations**-*Muscle Relaxant Combinations*** | | |
| Carisoprodol-Aspirin ORAL TABLET | Tier 1 | |
| Carisoprodol-Aspirin-Codeine ORAL TABLET | Tier 1 | |
| Orphenadrine-Aspirin-Caffeine ORAL TABLET 25-385-30 MG | Tier 1 | |
| *Nasal Agents - Systemic And Topical* | | |
| *Nasal Antiallergy**-*Nasal Antihistamines*** | | |
| Azelastine HCl NASAL SOLUTION | Tier 1 | |
| Olopatadine HCl NASAL SOLUTION | Tier 1 | |
| *Nasal Anticholinergics**-*Nasal Anticholinergics*** | | |
| Ipratropium Bromide NASAL SOLUTION | Tier 1 | |
| *Nasal Anti-Infectives**-*Nasal Antibiotics*** | | |
| Bactroban Nasal NASAL OINTMENT | Tier 3 | |
| *Nasal Steroids**-*Nasal Steroids*** | | |
| Beconase AQ NASAL SUSPENSION | Tier 3 | PA |
| Budesonide NASAL SUSPENSION | Tier 1 | |
| Flunisolide NASAL SOLUTION 25 MCG/ACT (0.025%) | Tier 1 | |
| Fluticasone Propionate NASAL SUSPENSION | Tier 1 | |
| Nasonex NASAL SUSPENSION | Tier 3 | PA |

| Drug | Tier | Notes |
|--|-------------|--------------|
| Qnasl NASAL AEROSOL, SOLUTION | Tier 3 | PA |
| Triamcinolone Acetonide NASAL AEROSOL† | Tier 1 | |
| Veramyst NASAL SUSPENSION | Tier 3 | PA |
| Zetonna NASAL AEROSOL, SOLUTION | Tier 3 | PA |
| *Sympathomimetic Decongestants**-*Topical Decongestants*** | | |
| Adrenalin NASAL SOLUTION | Tier 3 | |
| Tyzine NASAL SOLUTION | Tier 3 | |
| *Neuromuscular Agents* | | |
| *Als Agents**-*Benzothiazoles*** | | |
| Riluzole ORAL TABLET | Tier 1 | |
| *Nutrients* | | |
| *Proteins**-*Amino Acids-Single*** | | |
| N-Acetyl-L-Cysteine ORAL CAPSULE | Tier 1 | |
| *Ophthalmic Agents* | | |
| *Beta-Blockers - Ophthalmic**-*Beta-Blockers - Ophthalmic Combinations*** | | |
| Combigan OPHTHALMIC SOLUTION | Tier 3 | |
| Dorzolamide HCl-Timolol Mal OPHTHALMIC SOLUTION | Tier 1 | |
| *Beta-Blockers - Ophthalmic**-*Beta-Blockers - Ophthalmic*** | | |
| Betaxolol HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Betimol OPHTHALMIC SOLUTION 0.5 % | Tier 3 | |
| Betoptic-S OPHTHALMIC SUSPENSION | Tier 3 | |
| Carteolol HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Istalol OPHTHALMIC SOLUTION | Tier 1 | |
| Levobunolol HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Metipranolol OPHTHALMIC SOLUTION | Tier 1 | |
| Timolol Maleate OPHTHALMIC GEL FORMING SOLUTION | Tier 1 | |
| Timolol Maleate OPHTHALMIC SOLUTION | Tier 1 | |
| *Cycloplegic Mydriatics**-*Cycloplegic Mydriatics*** | | |
| Atropine Sulfate OPHTHALMIC OINTMENT | Tier 1 | |
| Atropine Sulfate OPHTHALMIC SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| Cyclopentolate HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Homatropine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Homatropine HBr OPHTHALMIC SOLUTION | Tier 1 | |
| Isopto Hyoscine OPHTHALMIC SOLUTION | Tier 3 | |
| Mydral OPHTHALMIC SOLUTION | Tier 1 | |
| Tropicamide OPHTHALMIC SOLUTION | Tier 1 | |
| *Miotics**-*Miotics - Cholinesterase Inhibitors*** | | |
| Phospholine Iodide OPHTHALMIC SOLUTION RECONSTITUTED | Tier 2 | |
| *Miotics**-*Miotics - Direct Acting*** | | |
| Isopto Carbachol OPHTHALMIC SOLUTION | Tier 2 | |
| Pilocarpine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| *Ophthalmic Adrenergic Agents**-*Ophthalmic Selective Alpha Adrenergic Agonists*** | | |
| Alphagan P OPHTHALMIC SOLUTION | Tier 2 | |
| Apraclonidine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Brimonidine Tartrate OPHTHALMIC SOLUTION 0.15 % | Tier 3 | |
| Brimonidine Tartrate OPHTHALMIC SOLUTION 0.2 % | Tier 1 | |
| Lopidine OPHTHALMIC SOLUTION 1 % | Tier 3 | |
| *Ophthalmic Anti-Infectives**-*Ophthalmic Antibiotics*** | | |
| AzaSite OPHTHALMIC SOLUTION | Tier 3 | |
| Bacitracin OPHTHALMIC OINTMENT | Tier 1 | |
| Besivance OPHTHALMIC SUSPENSION | Tier 3 | |
| Ciloxan OPHTHALMIC OINTMENT | Tier 3 | |
| Ciprofloxacin HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Erythromycin OPHTHALMIC OINTMENT | Tier 1 | |
| Gatifloxacin OPHTHALMIC SOLUTION | Tier 1 | |
| Gentak OPHTHALMIC OINTMENT | Tier 1 | |
| Gentamicin Sulfate OPHTHALMIC OINTMENT | Tier 1 | |
| Gentamicin Sulfate OPHTHALMIC SOLUTION | Tier 1 | |
| Ilotycin OPHTHALMIC OINTMENT | Tier 1 | |
| Levofloxacin OPHTHALMIC SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|--------------|
| Moxeza OPHTHALMIC SOLUTION | Tier 3 | |
| Ofloxacin OPHTHALMIC SOLUTION | Tier 1 | |
| Romycin OPHTHALMIC OINTMENT | Tier 1 | |
| Tobramycin OPHTHALMIC SOLUTION | Tier 1 | |
| Tobrex OPHTHALMIC OINTMENT | Tier 3 | |
| Vigamox OPHTHALMIC SOLUTION | Tier 2 | |
| *Ophthalmic Anti-Infectives**-*Ophthalmic Antifungal*** | | |
| Natacyn OPHTHALMIC SUSPENSION | Tier 3 | |
| *Ophthalmic Anti-Infectives**-*Ophthalmic Anti-Infective Combinations*** | | |
| AK-Poly-Bac OPHTHALMIC OINTMENT | Tier 1 | |
| Bacitracin-Polymyxin B OPHTHALMIC OINTMENT | Tier 1 | |
| Neo-Polycin OPHTHALMIC OINTMENT | Tier 1 | |
| Neomycin-Bacitracin Zn-Polymyx OPHTHALMIC OINTMENT | Tier 1 | |
| Neomycin-Polymyxin-Gramicidin OPHTHALMIC SOLUTION | Tier 1 | |
| Polycin B OPHTHALMIC OINTMENT | Tier 1 | |
| Polymyxin B-Trimethoprim OPHTHALMIC SOLUTION | Tier 1 | |
| *Ophthalmic Anti-Infectives**-*Ophthalmic Antivirals*** | | |
| Trifluridine OPHTHALMIC SOLUTION | Tier 1 | |
| Zirgan OPHTHALMIC | Tier 3 | |
| *Ophthalmic Anti-Infectives**-*Ophthalmic Sulfonamides*** | | |
| Sulfacetamide Sodium OPHTHALMIC OINTMENT | Tier 1 | |
| Sulfacetamide Sodium OPHTHALMIC SOLUTION | Tier 1 | |
| *Ophthalmic Decongestants**-*Ophthalmic Decongestants*** | | |
| Phenylephrine HCl OPHTHALMIC SOLUTION 10 %, 2.5 % | Tier 1 | |
| *Ophthalmic Immunomodulators**-*Ophthalmic Immunomodulators*** | | |
| Restasis OPHTHALMIC EMULSION | Tier 3 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Ophthalmic Local Anesthetics**-*Ophthalmic Local Anesthetics*** | | |
| Altacaine OPHTHALMIC SOLUTION | Tier 1 | |
| Parcaine OPHTHALMIC SOLUTION | Tier 1 | |
| Proparacaine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Tetracaine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| TetraVisc OPHTHALMIC SOLUTION | Tier 1 | |
| TetraVisc Forte OPHTHALMIC SOLUTION | Tier 1 | |
| *Ophthalmic Steroids**-*Ophthalmic Steroid Combinations*** | | |
| Bacitra-Neomycin-Polymyxin-HC OPHTHALMIC OINTMENT | Tier 1 | |
| Blephamide S.O.P. OPHTHALMIC OINTMENT | Tier 3 | |
| Neo-Polycin HC OPHTHALMIC OINTMENT | Tier 1 | |
| Neomycin-Polymyxin-Dexameth OPHTHALMIC OINTMENT | Tier 1 | |
| Neomycin-Polymyxin-Dexameth OPHTHALMIC SUSPENSION 3.5-10000-0.1 | Tier 1 | |
| Neomycin-Polymyxin-HC OPHTHALMIC SUSPENSION | Tier 1 | |
| Poly-Dex OPHTHALMIC OINTMENT | Tier 1 | |
| Pred-G OPHTHALMIC SUSPENSION | Tier 3 | |
| Pred-G S.O.P. OPHTHALMIC OINTMENT | Tier 3 | |
| Sulfacetamide-Prednisolone OPHTHALMIC SOLUTION | Tier 1 | |
| TobraDex OPHTHALMIC OINTMENT | Tier 2 | |
| TobraDex ST OPHTHALMIC SUSPENSION | Tier 2 | |
| Tobramycin-Dexamethasone OPHTHALMIC SUSPENSION | Tier 1 | |
| Zylet OPHTHALMIC SUSPENSION | Tier 3 | |
| *Ophthalmic Steroids**-*Ophthalmic Steroids*** | | |
| Alrex OPHTHALMIC SUSPENSION | Tier 2 | |
| Dexamethasone Sodium Phosphate OPHTHALMIC SOLUTION | Tier 1 | |
| Durezol OPHTHALMIC EMULSION | Tier 3 | |
| Flarex OPHTHALMIC SUSPENSION | Tier 3 | |
| Fluorometholone OPHTHALMIC SUSPENSION | Tier 1 | |

| Drug | Tier | Notes |
|--|-------------|--------------|
| FML OPHTHALMIC OINTMENT | Tier 2 | |
| Lotemax OPHTHALMIC OINTMENT | Tier 2 | |
| Lotemax OPHTHALMIC SUSPENSION | Tier 2 | |
| Pred Mild OPHTHALMIC SUSPENSION | Tier 3 | |
| PrednisoLONE Acetate OPHTHALMIC SUSPENSION | Tier 1 | |
| PrednisoLONE Sodium Phosphate OPHTHALMIC SOLUTION | Tier 1 | |
| Vexol OPHTHALMIC SUSPENSION | Tier 3 | |
| *Ophthalmics - Misc.**-*Ophthalmic Antiallergic*** | | |
| Alocril OPHTHALMIC SOLUTION | Tier 3 | |
| Alomide OPHTHALMIC SOLUTION | Tier 3 | |
| Azelastine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Bepreve OPHTHALMIC SOLUTION | Tier 3 | |
| Cromolyn Sodium OPHTHALMIC SOLUTION | Tier 1 | |
| Emadine OPHTHALMIC SOLUTION | Tier 3 | |
| Epinastine HCl OPHTHALMIC SOLUTION | Tier 1 | |
| Lastacaft OPHTHALMIC SOLUTION | Tier 3 | |
| Pataday OPHTHALMIC SOLUTION | Tier 2 | |
| Patanol OPHTHALMIC SOLUTION | Tier 2 | |
| *Ophthalmics - Misc.**-*Ophthalmic Carbonic Anhydrase Inhibitors*** | | |
| Azopt OPHTHALMIC SUSPENSION | Tier 3 | |
| Dorzolamide HCl OPHTHALMIC SOLUTION | Tier 1 | |
| *Ophthalmics - Misc.**-*Ophthalmic Nonsteroidal Anti-Inflammatory Agents*** | | |
| Acuvail OPHTHALMIC SOLUTION | Tier 3 | |
| Bromfenac Sodium OPHTHALMIC SOLUTION | Tier 1 | |
| Diclofenac Sodium OPHTHALMIC SOLUTION | Tier 1 | |
| Flurbiprofen Sodium OPHTHALMIC SOLUTION | Tier 1 | |
| Nevanac OPHTHALMIC SUSPENSION | Tier 2 | |
| *Ophthalmics - Misc.**-*Ophthalmics - Cystinosis Agents** | | |
| Cystaran OPHTHALMIC SOLUTION | Tier 3 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Prostaglandins - Ophthalmic**-*Prostaglandins - Ophthalmic*** | | |
| Latanoprost OPHTHALMIC SOLUTION | Tier 1 | |
| Lumigan OPHTHALMIC SOLUTION 0.01 % | Tier 3 | PA |
| Travatan Z OPHTHALMIC SOLUTION | Tier 2 | |
| Travoprost OPHTHALMIC SOLUTION | Tier 1 | |
| Zioptan OPHTHALMIC SOLUTION | Tier 3 | PA |
| *Otic Agents* | | |
| *Otic Agents - Miscellaneous**-*Otic Agents - Miscellaneous*** | | |
| Acetic Acid OTIC SOLUTION | Tier 1 | |
| *Otic Anti-Infectives**-*Otic Anti-Infectives*** | | |
| Ofloxacin OTIC SOLUTION | Tier 1 | |
| *Otic Combinations**-*Otic Analgesic Combinations*** | | |
| Antipyrine-Benzocaine OTIC SOLUTION 5.4-1.4 %, 54-14 MG/ML | Tier 1 | |
| Cortic-ND OTIC SOLUTION | Tier 1 | |
| Exotic-HC OTIC SOLUTION | Tier 1 | |
| MyOxin OTIC SUSPENSION | Tier 1 | |
| Oticin OTIC LIQUID† | Tier 1 | |
| Otomax-HC OTIC SOLUTION | Tier 1 | |
| Otozin OTIC LIQUID† | Tier 1 | |
| Pramoxine-HC-Chloroxylonol Aq OTIC SOLUTION | Tier 1 | |
| *Otic Combinations**-*Otic Steroid-Anti-Infective Combinations*** | | |
| Cipro HC OTIC SUSPENSION | Tier 3 | |
| Ciprodex OTIC SUSPENSION | Tier 2 | |
| Coly-Mycin S OTIC SUSPENSION | Tier 3 | |
| Cortisporin-TC OTIC SUSPENSION | Tier 3 | |
| Neomycin-Polymyxin-HC OTIC SOLUTION 3.5-10000-1 | Tier 1 | |
| Neomycin-Polymyxin-HC OTIC SUSPENSION | Tier 1 | |
| *Otic Steroids**-*Otic Steroids*** | | |
| Acetasol HC OTIC SOLUTION | Tier 1 | |
| Fluocinolone Acetonide OTIC OIL | Tier 1 | |
| Hydrocortisone-Acetic Acid OTIC SOLUTION | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *Oxytocics* | | |
| *Oxytocics**-*Oxytocics*** | | |
| Methylergonovine Maleate ORAL TABLET | Tier 1 | |
| *Penicillins* | | |
| *Aminopenicillins**-*Aminopenicillins*** | | |
| Amoxicillin ORAL CAPSULE | Tier 1 | |
| Amoxicillin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Amoxicillin ORAL TABLET | Tier 1 | |
| Amoxicillin ORAL TABLET CHEWABLE | Tier 1 | |
| Ampicillin ORAL CAPSULE | Tier 1 | |
| Ampicillin ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Moxatag ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| *Natural Penicillins**-*Natural Penicillins*** | | |
| Penicillin V Potassium ORAL SOLUTION RECONSTITUTED | Tier 1 | |
| Penicillin V Potassium ORAL TABLET | Tier 1 | |
| *Penicillin Combinations**-*Penicillin Combinations*** | | |
| Amoxicillin-Pot Clavulanate ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Amoxicillin-Pot Clavulanate ORAL TABLET | Tier 1 | |
| Amoxicillin-Pot Clavulanate ORAL TABLET CHEWABLE | Tier 1 | |
| Amoxicillin-Pot Clavulanate ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Augmentin ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML | Tier 3 | |
| *Penicillinase-Resistant Penicillins**-*Penicillinase-Resistant Penicillins*** | | |
| Dicloxacillin Sodium ORAL CAPSULE | Tier 1 | |
| *Progestins* | | |
| *Progestins**-*Progestins*** | | |
| MedroxyPROGESTERone Acetate ORAL TABLET | Tier 1 | |
| Norethindrone Acetate ORAL TABLET | Tier 1 | |
| Progesterone Micronized ORAL CAPSULE | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|---------------------------------|
| *Psychotherapeutic And Neurological Agents - Misc.* | | |
| *Agents For Chemical Dependency**-*Alcohol Deterrents*** | | |
| Acamprosate Calcium ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Disulfiram ORAL TABLET | Tier 1 | |
| *Anti-Cataplectic Agents**-*Anti-Cataplectic Agents*** | | |
| Xyrem ORAL SOLUTION | Tier 4 | PA; SP; QL (540 ML per 30 Days) |
| *Antidementia Agents**-*Cholinomimetics - Ache Inhibitors*** | | |
| Donepezil HCl ORAL TABLET | Tier 1 | |
| Donepezil HCl ORAL TABLET DISPERSIBLE | Tier 1 | |
| Exelon TRANSDERMAL PATCH 24 HR | Tier 3 | |
| Galantamine Hydrobromide ORAL SOLUTION | Tier 1 | |
| Galantamine Hydrobromide ORAL TABLET | Tier 1 | |
| Galantamine Hydrobromide ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| Rivastigmine Tartrate ORAL CAPSULE | Tier 1 | |
| *Antidementia Agents**-*N-Methyl-D-Aspartate (Nmda) Receptor Antagonists*** | | |
| Namenda ORAL SOLUTION | Tier 3 | |
| Namenda ORAL TABLET | Tier 3 | |
| Namenda Titration Pak ORAL TABLET | Tier 3 | |
| Namenda XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| Namenda XR Titration Pack ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 3 | |
| *Combination Psychotherapeutics**-*Benzodiazepines & Tricyclic Agents*** | | |
| Chlordiazepoxide-Amitriptyline ORAL TABLET | Tier 1 | |
| *Combination Psychotherapeutics**-*Phenothiazines & Tricyclic Agents*** | | |
| Perphenazine-Amitriptyline ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|--|--------|--------------------------------|
| *Combination Psychotherapeutics**-*Thienbenzodiazepines & Ssriss*** | | |
| OLANzapine-FLUoxetine HCl ORAL CAPSULE | Tier 1 | |
| *Fibromyalgia Agents**-*Fibromyalgia Agent - Ssriss*** | | |
| Savella ORAL TABLET | Tier 3 | PA |
| *Movement Disorder Drug Therapy**-*Movement Disorder Drug Therapy*** | | |
| Xenazine ORAL TABLET | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| *Multiple Sclerosis Agents**-*Ms Agents - Pyrimidine Synthesis Inhibitors*** | | |
| Aubagio ORAL TABLET | Tier 4 | PA; SP; QL (30 EA per 30 Days) |
| *Multiple Sclerosis Agents**-*Multiple Sclerosis Agents - Interferons*** | | |
| Avonex INTRAMUSCULAR* KIT | Tier 4 | SP |
| Avonex Pen INTRAMUSCULAR* KIT | Tier 4 | SP |
| Avonex Prefilled INTRAMUSCULAR* KIT | Tier 4 | SP |
| Betaseron SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (15 EA per 30 Days) |
| Extavia SUBCUTANEOUS* KIT | Tier 4 | PA; SP; QL (15 EA per 30 Days) |
| Rebif SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Rebif Rebidose Titration Pack SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| Rebif Titration Pack SUBCUTANEOUS* SOLUTION | Tier 4 | SP |
| *Multiple Sclerosis Agents**-*Multiple Sclerosis Agents - Potassium Channel Blockers*** | | |
| Ampyra ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| *Multiple Sclerosis Agents**-*Multiple Sclerosis Agents*** | | |
| Copaxone SUBCUTANEOUS* KIT | Tier 4 | SP |

| Drug | Tier | Notes |
|---|--------|---------------------------------|
| *Multiple Sclerosis Agents**-*Sphingosine 1-Phosphate (S1p) Receptor Modulators*** | | |
| Gilenya ORAL CAPSULE | Tier 4 | PA; SP; QL (30 EA per 30 Days) |
| *Postherpetic Neuralgia (Phn) Agents**-*Postherpetic Neuralgia (Phn) Agents*** | | |
| Gralise ORAL TABLET | Tier 3 | |
| *Premenstrual Dysphoric Disorder (Pmdd) Agents**-*Premenstrual Dysphoric Disorder (Pmdd) Agents - Ssris*** | | |
| FLUoxetine HCl (PMDD) ORAL CAPSULE 20 MG | Tier 1 | |
| *Pseudobulbar Affect (Pba) Agents**-*Pseudobulbar Affect Agent Combinations*** | | |
| Nuedexta ORAL CAPSULE | Tier 3 | |
| *Psychotherapeutic And Neurological Agents - Misc.**-*Psychotherapeutic And Neurological Agents - Misc.*** | | |
| Ergoloid Mesylates ORAL TABLET | Tier 1 | |
| Orap ORAL TABLET | Tier 2 | |
| *Restless Leg Syndrome (RIs) Agents**-*Restless Leg Syndrome (RIs) Agents*** | | |
| Horizant ORAL TABLET EXTENDEDRELEASE* 600 MG | Tier 3 | |
| *Smoking Deterrents**-*Smoking Deterrents*** | | |
| Buproban ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | 1 (Preventative Medication) |
| BuPROPion HCl ER (Smoking Det) ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | 1 (Preventative Medication) |
| Chantix ORAL TABLET | Tier 3 | |
| Chantix Starting Month Pak ORAL TABLET | Tier 3 | |
| Nicotine TRANSDERMAL KIT | Tier 1 | OTC |
| Nicotine TRANSDERMAL PATCH 24 HR | Tier 1 | OTC |
| Nicotine Polacrilex MOUTH/THROAT GUM | Tier 1 | OTC |
| Nicotine Polacrilex MOUTH/THROAT LOZENGE | Tier 1 | OTC |
| Nicotrol INHALATION INHALER | Tier 3 | PA; 1 (Preventative Medication) |
| Nicotrol NS NASAL SOLUTION | Tier 3 | PA; 1 (Preventative Medication) |

| Drug | Tier | Notes |
|--|--------|--------------------------------|
| *Respiratory Agents - Misc.* | | |
| *Cystic Fibrosis Agents**-*Cftr Potentiators*** | | |
| Kalydeco ORAL TABLET | Tier 4 | PA; SP; QL (60 EA per 30 Days) |
| *Sulfonamides* | | |
| *Sulfonamides**-*Sulfonamides*** | | |
| SulfADIAZINE ORAL TABLET | Tier 1 | |
| *Tetracyclines* | | |
| *Tetracyclines**-*Tetracyclines*** | | |
| Alodox Convenience COMBINATION KIT | Tier 3 | |
| Avidoxy ORAL TABLET | Tier 1 | |
| Demeclocycline HCl ORAL TABLET | Tier 1 | |
| Doxycycline Hyclate ORAL CAPSULE | Tier 1 | |
| Doxycycline Hyclate ORAL TABLET | Tier 1 | |
| Doxycycline Hyclate ORAL TABLET DELAYED RELEASE | Tier 1 | |
| Doxycycline Monohydrate ORAL CAPSULE | Tier 1 | |
| Doxycycline Monohydrate ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Doxycycline Monohydrate ORAL TABLET | Tier 1 | |
| Minocycline HCl ORAL CAPSULE | Tier 1 | |
| Minocycline HCl ORAL TABLET | Tier 1 | |
| Minocycline HCl ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Morgidox COMBINATION KIT 2 x 100 MG | Tier 1 | |
| Morgidox ORAL CAPSULE | Tier 1 | |
| Ocudox COMBINATION KIT | Tier 3 | |
| Solodyn ORAL TABLET EXTENDED RELEASE 24 HR* 55 MG | Tier 3 | PA; QL (30 EA per 30 Days) |
| Vibramycin ORAL SUSPENSION RECONSTITUTED | Tier 3 | |
| *Thyroid Agents* | | |
| *Antithyroid Agents**-*Antithyroid Agents*** | | |
| Methimazole ORAL TABLET | Tier 1 | |
| Propylthiouracil ORAL TABLET | Tier 1 | |
| *Thyroid Hormones**-*Thyroid Hormones*** | | |
| Levothyroxine Sodium ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|-----------------------------|
| Liothyronine Sodium ORAL TABLET | Tier 1 | |
| Nature-Throid ORAL TABLET 130 MG, 16.25 MG, 195 MG, 32.5 MG, 65 MG | Tier 1 | |
| Synthroid ORAL TABLET | Tier 2 | |
| Thyrolar-1 ORAL TABLET | Tier 3 | |
| Thyrolar-1/2 ORAL TABLET | Tier 3 | |
| Thyrolar-1/4 ORAL TABLET | Tier 3 | |
| Thyrolar-2 ORAL TABLET | Tier 3 | |
| Thyrolar-3 ORAL TABLET | Tier 3 | |
| Unithroid ORAL TABLET | Tier 1 | |
| Unithroid Direct ORAL TABLET 112 MCG, 150 MCG, 175 MCG, 300 MCG, 88 MCG | Tier 1 | |
| Westhroid ORAL TABLET 130 MG, 32.5 MG, 65 MG | Tier 1 | |
| *Toxoids* | | |
| *Toxoid Combinations**-*Toxoid Combinations*** | | |
| Adacel INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Boostrix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Daptacel INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Diphtheria-Tetanus Toxoids DT INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Infanrix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Kinrix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Pediarix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Pentacel INTRAMUSCULAR* SUSPENSION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |
| Tenivac INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Tetanus-Diphtheria Toxoids Td INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| *Ulcer Drugs* | | |
| *Antispasmodics**-*Anticholinergic Combinations*** | | |
| Belladonna Alkaloids-Opium SUPPOSITORY | Tier 1 | |
| Belladonna-Opium SUPPOSITORY | Tier 1 | |
| Chlordiazepoxide-Clidinium ORAL CAPSULE | Tier 1 | |
| Donnatal ORAL ELIXIR | Tier 3 | |
| Donnatal ORAL TABLET | Tier 3 | |
| Donnatal Extentabs ORAL TABLET EXTENDEDRELEASE* | Tier 3 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Antispasmodics**-*Antispasmodics*** | | |
| Dicyclomine HCl ORAL CAPSULE | Tier 1 | |
| Dicyclomine HCl ORAL SOLUTION | Tier 1 | |
| Dicyclomine HCl ORAL TABLET | Tier 1 | |
| *Antispasmodics**-*Belladonna Alkaloids*** | | |
| AtroPen INTRAMUSCULAR* DEVICE 0.5 MG/0.7ML | Tier 3 | |
| Atropine Sulfate INJECTION SOLUTION | Tier 1 | |
| Ed-Spaz ORAL TABLET DISPERSIBLE | Tier 1 | |
| HyoMax-SL SUBLINGUAL TABLET SUBLINGUAL | Tier 1 | |
| Hyoscyamine Sulfate ORAL ELIXIR | Tier 1 | |
| Hyoscyamine Sulfate ORAL SOLUTION | Tier 1 | |
| Hyoscyamine Sulfate ORAL TABLET | Tier 1 | |
| Hyoscyamine Sulfate ORAL TABLET DISPERSIBLE | Tier 1 | |
| Hyoscyamine Sulfate SUBLINGUAL TABLET SUBLINGUAL | Tier 1 | |
| Hyoscyamine Sulfate ER ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| NuLev ORAL TABLET DISPERSIBLE | Tier 1 | |
| Oscimin ORAL TABLET | Tier 1 | |
| Oscimin ORAL TABLET DISPERSIBLE | Tier 1 | |
| Oscimin SR ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| Symax Duotab ORAL TABLET EXTENDEDRELEASE* | Tier 1 | |
| Symax FasTabs ORAL TABLET DISPERSIBLE | Tier 1 | |
| Symax-SL SUBLINGUAL TABLET SUBLINGUAL | Tier 1 | |
| Symax-SR ORAL TABLET EXTENDED RELEASE 12 HR* | Tier 1 | |
| *Antispasmodics**-*Quaternary Anticholinergics*** | | |
| Cantil ORAL TABLET | Tier 3 | |
| Glycopyrrolate ORAL TABLET | Tier 1 | |
| Methscopolamine Bromide ORAL TABLET | Tier 1 | |
| Propantheline Bromide ORAL TABLET | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-------|
| *H-2 Antagonists**-*H-2 Antagonists*** | | |
| Cimetidine ORAL TABLET 300 MG, 400 MG, 800 MG | Tier 1 | |
| Cimetidine HCl ORAL SOLUTION | Tier 1 | |
| Famotidine ORAL SUSPENSION RECONSTITUTED | Tier 1 | |
| Famotidine ORAL TABLET 20 MG, 40 MG | Tier 1 | |
| Nizatidine ORAL CAPSULE | Tier 1 | |
| Nizatidine ORAL SOLUTION | Tier 1 | |
| Ranitidine HCl ORAL CAPSULE | Tier 1 | |
| Ranitidine HCl ORAL SYRUP 150 MG/10ML, 75 MG/5ML | Tier 1 | |
| Ranitidine HCl ORAL TABLET 300 MG | Tier 1 | |
| *Misc. Anti-Ulcer**-*Misc. Anti-Ulcer*** | | |
| Sucralfate ORAL TABLET | Tier 1 | |
| *Proton Pump Inhibitors**-*Proton Pump Inhibitors*** | | |
| Dexilant ORAL CAPSULE DELAYED RELEASE | Tier 2 | PA |
| Lansoprazole ORAL CAPSULE DELAYED RELEASE 15 MG | Tier 1 | OTC |
| Lansoprazole ORAL CAPSULE DELAYED RELEASE 30 MG | Tier 1 | |
| NexIUM ORAL CAPSULE DELAYED RELEASE | Tier 3 | PA |
| NexIUM ORAL PACKET | Tier 3 | PA |
| Omeprazole ORAL CAPSULE DELAYED RELEASE | Tier 1 | |
| Pantoprazole Sodium ORAL TABLET DELAYED RELEASE | Tier 1 | |
| RABEprazole Sodium ORAL TABLET DELAYED RELEASE | Tier 1 | PA |
| *Ulcer Drugs - Prostaglandins**-*Ulcer Drugs - Prostaglandins*** | | |
| Misoprostol ORAL TABLET | Tier 1 | |
| *Ulcer Therapy Combinations**-*Proton Pump Inhibitor-Antacid Combinations*** | | |
| Omeprazole-Sodium Bicarbonate ORAL CAPSULE 20-1100 MG | Tier 1 | OTC |
| Omeprazole-Sodium Bicarbonate ORAL CAPSULE 40-1100 MG | Tier 1 | |
| Zegerid ORAL PACKET | Tier 3 | |

| Drug | Tier | Notes |
|--|--------|-------|
| *Ulcer Therapy Combinations**-*Ulcer Anti-Infective W/ Bismuth Combinations*** | | |
| Pylera ORAL CAPSULE | Tier 3 | |
| *Ulcer Therapy Combinations**-*Ulcer Anti-Infective W/ Proton Pump Inhibitors*** | | |
| Amoxicill-Clarithro-Lansopraz ORAL | Tier 1 | |
| *Urinary Anti-Infectives* | | |
| *Urinary Anti-Infective Combinations**-*Urinary Antiseptic-Antispasmodic &/Or Analgesics*** | | |
| Hyophen ORAL TABLET | Tier 1 | |
| Phosphasal ORAL TABLET | Tier 1 | |
| Uretron D/S ORAL TABLET | Tier 1 | |
| Ustell ORAL CAPSULE | Tier 1 | |
| UTA ORAL CAPSULE | Tier 1 | |
| Uticap ORAL CAPSULE | Tier 1 | |
| Utira-C ORAL TABLET | Tier 1 | |
| Utrona-C ORAL TABLET | Tier 1 | |
| *Urinary Anti-Infectives**-*Urinary Anti-Infectives*** | | |
| Methenamine Hippurate ORAL TABLET | Tier 1 | |
| Methenamine Mandelate ORAL TABLET 0.5 GM | Tier 1 | |
| Monurol ORAL PACKET | Tier 3 | |
| Nitrofurantoin ORAL SUSPENSION | Tier 1 | |
| Nitrofurantoin Macrocrystal ORAL CAPSULE | Tier 1 | |
| Nitrofurantoin Monohyd Macro ORAL CAPSULE | Tier 1 | |
| *Urinary Antispasmodics* | | |
| *Urinary Antispasmodic - Antimuscarinics (Anticholinergic)**-*Urinary Antispasmodic - Antimuscarinic (Anticholinergic)*** | | |
| Tolterodine Tartrate ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |

| Drug | Tier | Notes |
|---|--------|-----------------------------|
| *Urinary Antispasmodics - Beta-3 Adrenergic Agonists**-*Urinary Antispasmodics - Beta-3 Adrenergic Agonists*** | | |
| Myrbetriq ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| *Urinary Antispasmodics**-*Urinary Antispasmodics*** | | |
| Bethanechol Chloride ORAL TABLET | Tier 1 | |
| Enablex ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 3 | |
| FlavoxATE HCl ORAL TABLET | Tier 1 | |
| Gelnique TRANSDERMAL | Tier 3 | |
| Oxybutynin Chloride ORAL SYRUP | Tier 1 | |
| Oxybutynin Chloride ORAL TABLET | Tier 1 | |
| Oxybutynin Chloride ER ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 1 | |
| Oxytrol TRANSDERMAL PATCH BIWEEKLY | Tier 3 | |
| Tolterodine Tartrate ORAL TABLET | Tier 1 | |
| Toviaz ORAL TABLET EXTENDED RELEASE 24 HR* | Tier 2 | |
| Trospium Chloride ORAL TABLET | Tier 1 | |
| Trospium Chloride ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR | Tier 1 | |
| VESicare ORAL TABLET | Tier 2 | |
| *Vaccines* | | |
| *Bacterial Vaccines**-*Bacterial Vaccine Combinations** | | |
| Menhibrix INTRAMUSCULAR* SOLUTION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |
| *Bacterial Vaccines**-*Bacterial Vaccines*** | | |
| ActHIB INTRAMUSCULAR* SOLUTION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |
| Hiberix INJECTION SOLUTION RECONSTITUTED | Tier 2 | |
| Menactra INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Menomune SUBCUTANEOUS* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Menveo INTRAMUSCULAR* SOLUTION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |

| Drug | Tier | Notes |
|---|-------------|------------------------------|
| Pedvax HIB INTRAMUSCULAR* SUSPENSION | Tier 2 | |
| Pneumovax 23 INJECTION INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Prevnar 13 INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Typhim VI INTRAMUSCULAR* SOLUTION | Tier 2 | 1 (Preventative Medication) |
| Vivotif Berna Vaccine ORAL CAPSULE DELAYED RELEASE | Tier 3 | 1 (Preventative Medication) |
| *Mixed Vaccine Combinations**-*Mixed Vaccine Combinations*** | | |
| Comvax INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| *Viral Vaccines**-*Viral Vaccine Combinations*** | | |
| M-M-R II SUBCUTANEOUS* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| ProQuad SUBCUTANEOUS* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Twinrix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| *Viral Vaccines**-*Viral Vaccines*** | | |
| Afluria INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative medication.) |
| Afluria Preservative Free INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Cervarix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Engerix-B INJECTION SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Engerix-B INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Fluarix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Fluarix Quadrivalent INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Flublok INTRAMUSCULAR* SOLUTION | Tier 2 | 1 (Preventative Medication) |
| Flucelvax INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Flulaval INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Flulaval Quadrivalent INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| FluMist NASAL LIQUID† | Tier 3 | 1 (Preventative Medication) |
| FluMist Quadrivalent NASAL SUSPENSION | Tier 3 | 1 (Preventative Medication) |
| Fluvirin INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Fluvirin Preservative Free INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Fluzone INTRADERMAL* DEVICE | Tier 2 | 1 (Preventative Medication) |
| Fluzone INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Fluzone High-Dose INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |

| Drug | Tier | Notes |
|--|-------------|-----------------------------|
| Fluzone Quadrivalent INTRAMUSCULAR* SUSPENSION 0.25 ML, 0.5 ML | Tier 2 | 1 (Preventative Medication) |
| Gardasil INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Havrix INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Imovax Rabies INTRAMUSCULAR* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Influenza A (H1N1) Monoval Vac NASAL LIQUID† | Tier 2 | 1 (Preventative Medication) |
| Ipol INJECTION INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Ixiaro INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Medical Provider EZ Flu PF INTRAMUSCULAR* KIT | Tier 2 | 1 (Preventative Medication) |
| Medical Provider EZ Flu Shot INTRAMUSCULAR* KIT | Tier 2 | 1 (Preventative Medication) |
| Recombivax HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML | Tier 2 | 1 (Preventative Medication) |
| Rotarix ORAL SUSPENSION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |
| RotaTeq ORAL SOLUTION | Tier 2 | 1 (Preventative Medication) |
| Vaqta INTRAMUSCULAR* SUSPENSION | Tier 2 | 1 (Preventative Medication) |
| Varivax SUBCUTANEOUS* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| YF-VAX SUBCUTANEOUS* INJECTABLE | Tier 2 | 1 (Preventative Medication) |
| Zostavax SUBCUTANEOUS* SOLUTION RECONSTITUTED | Tier 2 | 1 (Preventative Medication) |
| *Vaginal Products* | | |
| *Vaginal Anti-Infectives**-*Imidazole-Related Antifungals*** | | |
| Gynazole-1 VAGINAL CREAM | Tier 3 | |
| Miconazole 3 Combo Pack VAGINAL KIT 200-2 MG-% (9GM) | Tier 1 | OTC |
| Terconazole VAGINAL CREAM | Tier 1 | |
| Terconazole VAGINAL SUPPOSITORY | Tier 1 | |
| Zazole VAGINAL CREAM | Tier 1 | |
| Zazole VAGINAL SUPPOSITORY | Tier 1 | |
| *Vaginal Anti-Infectives**-*Vaginal Anti-Infectives*** | | |
| AVC Vaginal VAGINAL CREAM | Tier 3 | |
| Cleocin VAGINAL SUPPOSITORY | Tier 3 | |
| Clindamycin Phosphate VAGINAL CREAM | Tier 1 | |
| MetroNIDAZOLE VAGINAL | Tier 1 | |

| Drug | Tier | Notes |
|---|-------------|----------------------------------|
| Vandazole VAGINAL | Tier 1 | |
| *Vaginal Estrogens**-*Vaginal Estrogens*** | | |
| Estrace VAGINAL CREAM | Tier 3 | |
| Estring VAGINAL RING | Tier 3 | |
| Premarin VAGINAL CREAM | Tier 2 | |
| Vagifem VAGINAL TABLET | Tier 2 | |
| *Vaginal Progestins**-*Vaginal Progestins*** | | |
| Crinone VAGINAL | Tier 4 | SP |
| Endometrin VAGINAL INSERT | Tier 3 | |
| *Vasopressors* | | |
| *Anaphylaxis Therapy Agents**-*Anaphylaxis Therapy Agents*** | | |
| Adrenaclick INJECTION | Tier 3 | |
| Auvi-Q INJECTION | Tier 2 | |
| EpiPen 2-Pak INJECTION | Tier 2 | |
| EpiPen Jr 2-Pak INJECTION | Tier 2 | |
| *Vasopressors**-*Vasopressors*** | | |
| ePHEDrine Sulfate INJECTION SOLUTION | Tier 1 | |
| Midodrine HCl ORAL TABLET | Tier 1 | |
| *Vitamins* | | |
| *Oil Soluble Vitamins**-*Vitamin D*** | | |
| Vitamin D (Ergocalciferol) ORAL CAPSULE | Tier 1 | |
| Vitamin D3 ORAL CAPSULE 1000 UNIT, 400 UNIT | Tier 1 | 1 (Preventative Medication); OTC |
| Vitamin D3 ORAL CAPSULE 50000 UNIT | Tier 1 | OTC |
| Vitamin D3 ORAL TABLET 1000 UNIT, 400 UNIT | Tier 1 | 1 (Preventative Medication); OTC |
| *Oil Soluble Vitamins**-*Vitamin K*** | | |
| Mephyton ORAL TABLET | Tier 2 | |
| *Water Soluble Vitamins**-*Paba*** | | |
| Aminobenzoate Potassium ORAL PACKET | Tier 1 | |
| Potaba ORAL CAPSULE | Tier 3 | |
| Potaba ORAL TABLET | Tier 3 | |
| *Water Soluble Vitamins**-*Vitamin B-3*** | | |
| Niacin ORAL TABLET 500 MG | Tier 1 | OTC |
| Niacin ER ORAL TABLET EXTENDEDRELEASE* 1000 MG | Tier 1 | OTC |

