



## Listado Nacional de Medicamentos Preferidos Directos

### **Lista de medicamentos: plan de medicamentos de tres niveles**

Su beneficio de medicamentos recetados viene con una lista de medicamentos, que también se denomina formulario. Esta lista se compone de medicamentos de marca y genéricos con receta aprobados por la Administración de Alimentos y Medicamentos de los Estados Unidos (FDA).

Aquí hay algunas cosas para recordar sobre la lista:

- Usted y su médico pueden usarlo como guía para elegir los medicamentos que sean mejores para usted. Es posible que los medicamentos que no están en esta lista no estén cubiertos por su plan y le cuesten más de su bolsillo.
- Su cobertura tiene limitaciones y exclusiones, lo que significa que existen ciertas reglas sobre lo que está cubierto por su plan y lo que no. Para obtener más información, vea su Certificado/Evidencia de Cobertura o su Descripción resumida del plan iniciando sesión en [anthembluecross.com](http://anthembluecross.com) y vaya a **Mi Plan ->Beneficios-> Documentos del Plan**.
- Para ayudarlo a ver cómo funciona la lista de medicamentos con su beneficio de medicamentos, incluimos algunas preguntas frecuentes sobre cómo está configurada la lista y qué hacer si un medicamento que toma no está en ella.
- Este folleto se actualiza trimestralmente. Para ver la lista más actualizada de medicamentos para su plan, incluidos los medicamentos que se han agregado, los medicamentos genéricos y más, inicie sesión en [anthembluecross.com/pharmacyinformation](http://anthembluecross.com/pharmacyinformation).

Si tiene preguntas sobre sus beneficios de farmacia, estamos aquí para ayudarlo.

Simplemente llámenos al número de Servicios para Miembros de Farmacia que figura en su tarjeta de identificación.



## **Lista Nacional de Medicamentos Preferidos Directos**

### **¿Qué es una lista de medicamentos?**

La lista de medicamentos, también llamada formulario, es una lista de medicamentos recetados que cubre su plan. Incluye cientos de medicamentos de marca y genéricos aprobados por la Administración de Alimentos y Medicamentos de los Estados Unidos (FDA, por sus siglas en inglés).

### **¿Es esta una lista completa de todos los medicamentos cubiertos?**

Sí, esta es una lista completa de todos los medicamentos en la lista de medicamentos. Sin embargo, es posible que uno o varios medicamentos de esta lista no estén cubiertos, según el diseño de su plan. Su cobertura tiene limitaciones y exclusiones, lo que significa que hay ciertas condiciones que determinan qué está cubierto por su plan y qué no. Para obtener más información, lea su Certificado/Evidencia de Cobertura o su Descripción resumida del plan, que obtuvo cuando se inscribió en su plan.

### **¿Cómo puedo encontrar un medicamento en la lista?**

Los medicamentos se enumeran en orden alfabético según el nombre de su clase de medicamento, también llamada clase terapéutica. Puede buscar en la lista de medicamentos en PDF de la siguiente manera:

- Nombre del medicamento, usando Ctrl + F en el teclado y, a continuación, escriba el nombre del medicamento que está buscando.
- Clase de medicamento, utilizando las categorías enumeradas en orden alfabético.

La columna de notas le dirá si necesita aprobación previa antes de poder tomar el medicamento (lo que se denomina autorización previa o PA), o si primero necesita probar otros medicamentos para su tratamiento (lo que se denomina terapia escalonada o ST).

### **Cuando busco en la lista, veo que cada medicamento está en un nivel. ¿Para qué sirven los niveles?**

La lista de medicamentos se configura en niveles o niveles. Colocamos los medicamentos en diferentes niveles en función de qué tan bien funcionan para mejorar la salud, si hay opciones de venta libre (OTC) y sus costos en comparación con otros medicamentos utilizados para el mismo tipo de tratamiento. Su parte del costo del medicamento dependerá del nivel en el que se encuentre un medicamento. Cuanto más bajo sea el nivel, menor será su parte del costo. A continuación, te mostramos un desglose de los niveles de tu plan:

- Los medicamentos de nivel 1 tienen el costo compartido más bajo para usted. Por lo general, estos son medicamentos genéricos que ofrecen el mejor valor en comparación con otros medicamentos que tratan las mismas afecciones. Algunos planes dividen el Nivel 1 en Nivel 1a y Nivel 1b:
  - Los medicamentos de nivel 1a tienen el costo compartido más bajo. A menudo, estos son medicamentos genéricos que ofrecen el mayor valor en comparación con otros que tratan las mismas afecciones.
  - Los medicamentos de nivel 1b tienen una participación de bajo costo. Por lo general, estos son medicamentos genéricos que ofrecen el mayor valor en comparación con otros que tratan las mismas afecciones.
- Los medicamentos del Nivel 2 tienen un costo compartido más alto que los del Nivel 1. Pueden ser medicamentos de marca preferidos, en función de su eficacia y de su costo en comparación con otros medicamentos utilizados para el mismo tipo de tratamiento. Algunos son medicamentos genéricos que pueden costar más porque son más nuevos en el mercado.
- Los medicamentos de nivel 3 tienen el costo compartido más alto. A menudo incluyen medicamentos genéricos y de marca no preferidos. Pueden costar más que los medicamentos de los niveles inferiores que se usan para tratar la misma afección. El Nivel 3 también puede incluir medicamentos que fueron aprobados recientemente por la FDA o medicamentos especializados que se usan para tratar afecciones de salud graves a largo plazo y que pueden necesitar un manejo especial.



### **¿Cómo sabré si mi medicamento está cubierto y cuánto costará?**

Puede ir en línea y, con la herramienta [Fijar el precio de un medicamento](#), obtener detalles de la cobertura de medicamentos específicos de la farmacia y los precios de varias farmacias minoristas locales en su código postal.

### **Si mi medicamento no está en la lista de medicamentos, ¿cuáles son mis opciones?**

Aquí hay algunas cosas en las que pensar:

- Si desea tomar un medicamento que no está en la lista de medicamentos, es posible que tenga que pagar el costo total del mismo.
- También puede hablar con su médico o farmacéutico para ver si hay otro medicamento cubierto por su plan que funcione igual de bien, o si los medicamentos genéricos o de venta libre son una opción. Solo usted y su médico pueden decidir qué medicamentos son adecuados para usted.
- Puede buscar medicamentos genéricos en [anthembluecross.com](http://anthembluecross.com). Los medicamentos de venta libre no se muestran en la lista.
- Si un medicamento que está tomando no está cubierto, su médico puede pedirnos que revisemos la cobertura. Este proceso se denomina aprobación previa o autorización previa. Su médico puede iniciar el proceso llamando al número de Servicios para Miembros que figura en el reverso de su tarjeta de identificación de miembro o descargando un formulario de autorización previa de nuestro sitio web y enviándolo. Si se aprueba su solicitud, el monto que pague por el medicamento dependerá del beneficio de su plan.
- Si el anticonceptivo que está tomando no está en el formulario, su médico puede comunicarse con nosotros si es médica mente necesario porque los anticonceptivos preferidos no son apropiados para usted, y le eximiremos de su costo compartido.

### **¿Quién decide qué medicamentos están en la lista?**

Los medicamentos de la lista se revisan a través de nuestro proceso de Farmacia y Terapéutica (P&T). En este proceso, un grupo de médicos, farmacéuticos y otros profesionales de la salud independientes deciden qué medicamentos incluimos en nuestras listas. Este grupo se reúne regularmente para analizar los medicamentos nuevos y existentes y recomienda medicamentos en función de qué tan seguros son, qué tan bien funcionan y el valor que ofrecen a nuestros miembros.



#### **¿Cuál es la diferencia entre los medicamentos de marca y los genéricos?**

Un medicamento de marca está aprobado por la FDA y, por lo general, solo está disponible en un solo fabricante. Puede estar protegido por una patente, lo que significa que solo puede ser fabricado o vendido por la empresa que tiene la patente.

Un medicamento genérico también está aprobado por la FDA y tiene los mismos ingredientes activos que el medicamento de marca. Sin embargo, un medicamento genérico generalmente está disponible solo después de que finaliza la patente del medicamento de marca. Puede parecer diferente, pero un medicamento genérico funciona igual que el medicamento de marca.

#### **¿Cambia la lista de medicamentos y cómo sabré si cambia?**

Los medicamentos de nuestra lista se revisan periódicamente. A veces, los medicamentos se agregan, se eliminan o se mueven a un nivel diferente. Le informaremos si un medicamento que toma se retira de la lista y, en algunos casos, si un medicamento que toma se transfiere a un nivel superior.

Siempre puede consultar la lista de medicamentos para asegurarse de que los medicamentos que toma todavía estén en ella. Encontrará la lista de medicamentos más actualizada cuando inicie sesión en [anthembluecross.com](http://anthembluecross.com).

#### **¿Mi plan cubre medicamentos preventivos?**

Cubrimos medicamentos de atención preventiva sin costo compartido en cumplimiento con la Ley de Cuidado de Salud a Bajo Precio (ACA).



## Términos clave

Estos son algunos términos y notas que encontrará en la lista de medicamentos.

Los medicamentos de marca están en MAYÚSCULAS, en negrita.

Los medicamentos genéricos están en minúsculas, tipo simple.

**\$0** = medicamentos preventivos. Para algunos miembros, este producto puede estar cubierto al 100% con un costo compartido de \$0 con una receta de su proveedor si se cumplen los criterios especificados.

**AL** = límites de edad. Algunos medicamentos requieren una autorización previa si su edad no cumple con las recomendaciones del fabricante del medicamento, de la Administración de Alimentos y Medicamentos (FDA) o clínicas.

**BE** = exclusión de beneficios. Es posible que este medicamento no esté cubierto según el diseño de su plan. Para averiguar si su medicamento está cubierto, inicie sesión en su portal para miembros o use la aplicación de Sydney para fijar el [precio de un medicamento](#) y consulte los documentos de su plan.

**OD** = optimización de la dosis. Por lo general, esto significa que es posible que deba pasar de tomar un medicamento dos veces al día a tomarlo una vez al día con una concentración más alta.

**LD** = distribución limitada. Estos medicamentos están disponibles solo a través de ciertas farmacias o mayoristas, dependiendo de lo que decida el fabricante.

**PA** = autorización previa. Es posible que deba obtener la aprobación de los beneficios antes de que se puedan surtir ciertas recetas.

**QL** = límites de cantidad. Hay límites en la cantidad de medicamentos cubiertos dentro de un cierto período de tiempo.

**SP** = medicamentos especializados. Los medicamentos especializados se usan para tratar afecciones difíciles a largo plazo. Es posible que deba obtener este medicamento a través de una farmacia especializada.

**ST** = terapia escalonada. Es posible que deba usar otro medicamento recomendado primero antes de que se cubra un medicamento recetado.

## Recursos de farmacia en línea

Encuentre su farmacia de la red más cercana, obtenga la información de cobertura más actualizada en su lista de medicamentos, incluidos detalles sobre el precio de su medicamento, marcas y genéricos, opciones de dosis/concentración y mucho más, cuando inicie sesión en [anthembluecross.com](http://anthembluecross.com).

Una nota sobre los analgésicos opioides: En respuesta a la epidemia de opioides, la Administración de Alimentos y Medicamentos de EE. UU. (FDA, por sus siglas en inglés) alentó el desarrollo de analgésicos que previenen el uso indebido. Es posible que pague menos por estos tipos de opioides en ciertos estados.

Es posible que los medicamentos se excluyan de la lista según el diseño de beneficios de su plan.

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# Lista de Medicamentos Preferencial Nacional Directa

## Tres Niveles

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Tres Niveles

CURRENT AS OF 7/1/2025

Drug Name	Tier	Notes
<b>*Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiants*</b>		
<b>*Adhd Agent - Selective Alpha Adrenergic Agonists***</b>		
clonidine hcl er oral tablet extended release 12 hour	1 or 1b*	PA
guanfacine hcl er oral tablet extended release 24 hour	1 or 1b*	PA
<b>*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor***</b>		
atomoxetine hcl oral capsule	1 or 1b*	PA
<b>*Amphetamine Mixtures***</b>		
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	1 or 1b*	PA; DO
amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	1 or 1b*	PA; QL
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 5 mg, 7.5 mg	1 or 1b*	PA; DO
amphetamine-dextroamphetamine oral tablet 20 mg, 30 mg	1 or 1b*	PA; QL
amphet-dextroamphet 3-bead oral capsule extended release 24 hour	1 or 1b*	PA; QL
<b>*Amphetamines***</b>		
amphetamine sulfate oral tablet 10 mg	1 or 1b*	QL
amphetamine sulfate oral tablet 5 mg	1 or 1b*	DO
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg	1 or 1b*	PA; QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	1 or 1b*	PA; DO
dextroamphetamine sulfate oral solution	1 or 1b*	PA; QL

Drug Name	Tier	Notes
dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 7.5 mg	1 or 1b*	PA; QL
dextroamphetamine sulfate oral tablet 2.5 mg, 5 mg	1 or 1b*	PA; DO
lisdexamfetamine dimesylate oral capsule 10 mg, 20 mg, 30 mg	1 or 1b*	PA; DO
lisdexamfetamine dimesylate oral capsule 40 mg, 50 mg, 60 mg, 70 mg	1 or 1b*	PA; QL
lisdexamfetamine dimesylate oral tablet chewable 10 mg, 20 mg, 30 mg	1 or 1b*	PA; DO
lisdexamfetamine dimesylate oral tablet chewable 40 mg, 50 mg, 60 mg	1 or 1b*	PA; QL
procentra oral solution	1 or 1b*	PA; QL
zenzedi oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 7.5 mg	1 or 1b*	PA; QL
zenzedi oral tablet 2.5 mg, 5 mg	1 or 1b*	PA; DO
<b>*Analeptics***</b>		
caffeine citrate intravenous solution	3	
caffeine citrate oral solution	1 or 1b*	
<b>DOPRAM INTRAVENOUS SOLUTION</b>	3	
<b>*Anorexiants Non-Amphetamine***</b>		
<b>ADIPEX-P ORAL TABLET</b>	3	PA; QL; BE
benzphetamine hcl oral tablet 50 mg	1 or 1b*	PA; QL; BE
diethylpropion hcl er oral tablet extended release 24 hour	1 or 1b*	PA; QL; BE
diethylpropion hcl oral tablet	1 or 1b*	PA; QL; BE
<b>LOMAIRA ORAL TABLET</b>	3	PA; QL; BE
<b>PHENDIMETRAZINE TARTRATE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>	3	PA; QL; BE
phendimetrazine tartrate oral tablet	1 or 1b*	PA; QL; BE
phentermine hcl oral capsule	1 or 1b*	PA; QL; BE
phentermine hcl oral tablet	1 or 1b*	PA; QL; BE

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 07012025

Drug Name	Tier	Notes
<b>*Anti-Obesity - Gip &amp; Glp-1 Receptor Agonists***</b>		
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; QL; BE
<b>*Anti-Obesity - Glp-1 Receptor Agonists***</b>		
SAXENDA SUBCUTANEOUS SOLUTION PEN- INJECTOR	3	PA; QL; BE
WEGOVY SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; QL; BE
<b>*Dopamine And Norepinephrine Reuptake Inhibitors (Dnrts)***</b>		
SUNOSI ORAL TABLET 150 MG	3	PA; QL
SUNOSI ORAL TABLET 75 MG	3	PA; DO
<b>*Histamine H3-Receptor Antagonist/Inverse Agonists***</b>		
WAKIX ORAL TABLET 17.8 MG	3	PA; QL; LD; SP
WAKIX ORAL TABLET 4.45 MG	3	PA; DO; LD; SP
<b>*Lipase Inhibitors***</b>		
orlistat oral capsule	1 or 1b*	PA; QL; BE
<b>*Melanocortin 4 (Mc4) Receptor Agonists***</b>		
IMCIVREE SUBCUTANEOUS SOLUTION	3	PA; QL; LD; BE
<b>*Stimulant Combinations***</b>		
AZSTARYS ORAL CAPSULE	3	PA; QL
<b>*Stimulants - Misc.***</b>		
armodafinil oral tablet	1 or 1b*	PA; QL
dexamethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg	1 or 1b*	ST; DO
dexamethylphenidate hcl er oral capsule extended release 24 hour 25 mg	1 or 1b*	ST; QL

Drug Name	Tier	Notes
dexamethylphenidate hcl er oral capsule extended release 24 hour 30 mg, 35 mg, 40 mg	1 or 1b*	PA; QL
dexamethylphenidate hcl er oral capsule extended release 24 hour 5 mg	1 or 1b*	PA; DO
dexamethylphenidate hcl oral tablet 10 mg	1 or 1b*	PA; QL
dexamethylphenidate hcl oral tablet 2.5 mg, 5 mg	1 or 1b*	PA; DO
methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg	1 or 1b*	PA; DO
methylphenidate hcl er (cd) oral capsule extended release 40 mg, 50 mg, 60 mg	1 or 1b*	PA; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg	1 or 1b*	PA; DO
methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg, 40 mg, 60 mg	1 or 1b*	PA; QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg	1 or 1b*	PA; DO
methylphenidate hcl er (osm) oral tablet extended release 36 mg, 45 mg, 54 mg, 63 mg	1 or 1b*	PA; QL
<b>METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 72 MG</b>	1 or 1b*	PA; QL
methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg	1 or 1b*	PA; DO
methylphenidate hcl er (xr) oral capsule extended release 24 hour 40 mg, 50 mg, 60 mg	1 or 1b*	PA; QL
methylphenidate hcl er oral tablet extended release 10 mg	1 or 1b*	PA; DO
methylphenidate hcl er oral tablet extended release 20 mg	1 or 1b*	PA; QL
methylphenidate hcl er oral tablet extended release 24 hour	1 or 1b*	PA; DO
methylphenidate hcl oral solution	1 or 1b*	PA; QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 07012025

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
methylphenidate hcl oral tablet 10 mg, 5 mg	1 or 1b*	PA; DO
methylphenidate hcl oral tablet 20 mg	1 or 1b*	PA; QL
methylphenidate hcl oral tablet chewable 10 mg	1 or 1b*	PA; QL
methylphenidate hcl oral tablet chewable 2.5 mg	1 or 1b*	ST; DO
methylphenidate hcl oral tablet chewable 5 mg	1 or 1b*	PA; DO
methylphenidate transdermal patch 10 mg/9hr, 15 mg/9hr	1 or 1b*	ST; DO
methylphenidate transdermal patch 20 mg/9hr, 30 mg/9hr	1 or 1b*	ST; QL
modafinil oral tablet 100 mg	1 or 1b*	PA; DO
modafinil oral tablet 200 mg	1 or 1b*	PA; QL
<b>*Allergenic Extracts/Biologicals Misc*</b>		
<b>*Allergenic Extracts***</b>		
<b>GRASTEK SUBLINGUAL TABLET SUBLINGUAL</b>	3	PA; QL
<b>PALFORZIA (12 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (120 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (160 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (20 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (200 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (240 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (3 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (300 MG MAINTENANCE) ORAL PACKET</b>	3	PA; QL; LD
<b>PALFORZIA (300 MG TITRATION) ORAL PACKET</b>	3	PA; QL; LD
<b>PALFORZIA (40 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (6 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA (80 MG DAILY DOSE) ORAL</b>	3	PA; QL; LD
<b>PALFORZIA INITIAL ESCALATION ORAL</b>	3	PA; QL; LD

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>RAGWITEK SUBLINGUAL TABLET SUBLINGUAL</b>	3	PA; QL
<b>*Mixed Allergenic Extracts***</b>		
<b>ODACTRA SUBLINGUAL TABLET SUBLINGUAL</b>	3	PA; QL
<b>ORALAIR SUBLINGUAL TABLET SUBLINGUAL</b>		
<b>*Amebicides*</b>		
<b>*Amebicides***</b>		
<b>SOLOSEC ORAL PACKET</b>	3	PA; QL
<b>*Aminoglycosides*</b>		
<b>*Aminoglycosides***</b>		
amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml	1 or 1b*	
<b>ARIKAYCE INHALATION SUSPENSION</b>	3	PA; QL; LD
<b>BETHKIS INHALATION NEBULIZATION SOLUTION</b>	3	QL; LD; SP
gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-%	1 or 1b*	
gentamicin sulfate injection solution	1 or 1b*	
<b>HUMATIN ORAL CAPSULE</b>	3	PA
neomycin sulfate oral tablet	1 or 1a*	
streptomycin sulfate intramuscular solution reconstituted	1 or 1b*	
<b>TOBI PODHALER INHALATION CAPSULE</b>	3	QL; LD; SP
tobramycin inhalation nebulization solution	3	QL; LD; SP
tobramycin sulfate injection solution	1 or 1b*	QL
tobramycin sulfate injection solution reconstituted	1 or 1b*	QL
<b>ZEMDRI INTRAVENOUS SOLUTION</b>	3	

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Drug Name	Tier	Notes
<b>*Analgesics - Anti-Inflammatory*</b>		
<b>*Antirheumatic - Janus Kinase (Jak) Inhibitors***</b>		
RINVOQ LQ ORAL SOLUTION	3	PA; QL; LD; SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; QL; LD; SP
XELJANZ ORAL SOLUTION	3	PA; QL; LD; SP
XELJANZ ORAL TABLET	3	PA; QL; LD; SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; QL; LD; SP
<b>*Antirheumatic Antimetabolites***</b>		
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	3	PA; QL; LD; SP
<b>*Anti-Tnf-Alpha - Monoclonal Antibodies***</b>		
SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	3	PA; QL; LD; SP
SIMLANDI (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	3	PA; QL
SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	3	PA; QL; LD; SP
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML	3	PA; QL
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	3	PA; QL; LD
SIMPONI ARIA INTRAVENOUS SOLUTION	3	PA; LD; SP

Drug Name	Tier	Notes
<b>*Cyclooxygenase 2 (Cox-2) Inhibitors***</b>		
celecoxib oral capsule	1 or 1b*	QL
<b>*Gold Compounds***</b>		
RIDAURA ORAL CAPSULE	2	QL
<b>*Interleukin-1 Blockers***</b>		
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP
<b>*Interleukin-1Beta Blockers***</b>		
ILARIS SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
<b>*Nonsteroidal Anti-Inflammatory Agent Combinations***</b>		
COMBOGESIC INTRAVENOUS SOLUTION	3	
diclofenac-misoprostol oral tablet delayed release	1 or 1b*	QL
<b>*Nonsteroidal Anti-Inflammatory Agents (Nsaid)s***</b>		
ANAPROX DS ORAL TABLET	3	QL
CALDOLOR INTRAVENOUS SOLUTION 800 MG/200ML, 800 MG/8ML	3	
DAYPRO ORAL TABLET	3	QL
diclofenac potassium oral tablet 50 mg	1 or 1b*	QL
diclofenac sodium er oral tablet extended release 24 hour	1 or 1b*	QL
diclofenac sodium oral tablet delayed release	1 or 1b*	QL
ec-naproxen oral tablet delayed release	1 or 1b*	
etodolac er oral tablet extended release 24 hour	1 or 1b*	QL
etodolac oral capsule	1 or 1b*	QL
etodolac oral tablet	1 or 1b*	QL
flurbiprofen oral tablet	1 or 1b*	QL
ibu oral tablet	1 or 1a*	QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
ibuprofen lysine intravenous solution	1 or 1b*	
ibuprofen oral suspension	1 or 1a*	QL
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1 or 1a*	QL
indomethacin er oral capsule extended release	1 or 1b*	QL
indomethacin oral capsule 25 mg, 50 mg	1 or 1b*	QL
indomethacin sodium intravenous solution reconstituted	3	
ketoprofen er oral capsule extended release 24 hour	1 or 1b*	QL
ketorolac tromethamine injection solution 15 mg/ml	1 or 1b*	QL
<b>KETOROLAC TROMETHAMINE INJECTION SOLUTION 30 MG/ML</b>	1 or 1b*	QL
ketorolac tromethamine intramuscular solution 60 mg/2ml	1 or 1b*	QL
ketorolac tromethamine oral tablet	1 or 1a*	QL
<b>LODINE ORAL TABLET</b>	3	QL
meclofenamate sodium oral capsule	1 or 1b*	QL
mefenamic acid oral capsule	1 or 1b*	QL
meloxicam oral tablet	1 or 1b*	QL
nabumetone oral tablet	1 or 1b*	QL
naproxen dr oral tablet delayed release 500 mg	1 or 1b*	
naproxen oral tablet	1 or 1b*	QL
naproxen oral tablet delayed release	1 or 1b*	
naproxen sodium oral tablet 275 mg, 550 mg	1 or 1b*	QL
<b>NEOPROFEN INTRAVENOUS SOLUTION</b>	3	
oxaprozin oral tablet	1 or 1b*	QL
piroxicam oral capsule	1 or 1b*	QL
sulindac oral tablet	1 or 1b*	QL
tolmetin sodium oral capsule	1 or 1b*	QL
<b>*Phosphodiesterase 4 (Pde4) Inhibitors***</b>		
<b>OTEZLA ORAL TABLET</b>	3	PA; QL; LD; SP

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>OTEZLA ORAL TABLET THERAPY PACK</b>	3	PA; QL; LD; SP
<b>*Pyrimidine Synthesis Inhibitors***</b>		
<b>ARAVA ORAL TABLET</b>	3	QL
leflunomide oral tablet	1 or 1b*	QL
<b>*Selective Costimulation Modulators***</b>		
<b>ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD; SP
<b>ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>*Soluble Tumor Necrosis Factor Receptor Agents***</b>		
<b>ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE</b>	3	PA; QL; LD; SP
<b>ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML</b>	3	PA; QL; LD; SP
<b>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD; SP
<b>*Analgesics - Nonnarcotic*</b>		
<b>*Analgesics Other***</b>		
acetaminophen intravenous solution	1 or 1b*	
<b>*Analgesics-Sedatives***</b>		
butalbital-acetaminophen oral capsule	1 or 1b*	QL
butalbital-acetaminophen oral tablet 50-325 mg	1 or 1b*	QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	1 or 1b*	QL
butalbital-apap-caffeine oral tablet 50-325-40 mg	1 or 1b*	QL
butalbital-aspirin-caffeine oral capsule	1 or 1b*	QL
tencon oral tablet 50-325 mg	1 or 1b*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Salicylates***</b>		
diflunisal oral tablet	1 or 1b*	
<b>*Analgesics - Opioid*</b>		
<b>*Codeine Combinations***</b>		
acetaminophen-codeine oral solution	1 or 1a*	QL; AL
acetaminophen-codeine oral tablet	1 or 1a*	QL; AL
ascomp-codeine oral capsule	1 or 1b*	QL; AL
butalbital-apap-caff-cod oral capsule	1 or 1b*	QL; AL
butalbital-asa-caff-codeine oral capsule	1 or 1b*	QL; AL
<b>*Dihydrocodeine Combinations***</b>		
apap-caff-dihydrocodeine oral capsule	1 or 1b*	QL
trezix oral capsule 320.5-30-16 mg	1 or 1b*	QL
<b>*Hydrocodone Combinations***</b>		
hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1 or 1b*	QL
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	1 or 1b*	QL
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	1 or 1b*	QL
<b>*Opioid Agonists***</b>		
CODEINE SULFATE ORAL TABLET 15 MG, 60 MG	3	QL; AL
codeine sulfate oral tablet 30 mg	1 or 1b*	QL; AL
DEMEROL INJECTION SOLUTION 100 MG/ML, 25 MG/ML, 50 MG/ML, 75 MG/ML	3	
DILAUDID INJECTION SOLUTION 0.2 MG/ML, 1 MG/ML, 2 MG/ML	3	
DILAUDID ORAL LIQUID	3	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
DILAUDID ORAL TABLET	3	QL
DSUVIA SUBLINGUAL TABLET SUBLINGUAL	3	
duramorph injection solution	1 or 1b*	
FENTANYL CITRATE (PF) INJECTION SOLUTION 100 MCG/2ML, 250 MCG/5ML	1 or 1b*	
fentanyl citrate (pf) injection solution 1000 mcg/20ml, 2500 mcg/50ml, 500 mcg/10ml	1 or 1b*	
FENTANYL CITRATE (PF) INJECTION SOLUTION 50 MCG/ML	3	
fentanyl citrate pf injection solution prefilled syringe 25 mcg/0.5ml	3	
FENTANYL CITRATE PF INJECTION SOLUTION PREFILLED SYRINGE 50 MCG/ML	3	
fentanyl transdermal patch 72 hour	1 or 1b*	PA; QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrant	1 or 1b*	PA; QL
hydromorphone hcl er oral tablet extended release 24 hour	1 or 1b*	PA; QL
hydromorphone hcl injection solution 0.25 mg/0.5ml	3	
hydromorphone hcl injection solution 4 mg/ml	1 or 1b*	
hydromorphone hcl oral liquid	1 or 1b*	QL
hydromorphone hcl oral tablet	1 or 1b*	QL
HYDROMORPHONE HCL PF INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2 MG/ML, 4 MG/ML	3	
hydromorphone hcl pf injection solution 50 mg/5ml, 500 mg/50ml	1 or 1b*	
INFUMORPH 200 INJECTION SOLUTION	3	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>INFUMORPH 500 INJECTION SOLUTION</b>	3		morphine sulfate er oral tablet extended release	1 or 1b*	PA; QL
levorphanol tartrate oral tablet 3 mg	1 or 1b*	PA; QL	<b>MORPHINE SULFATE INJECTION SOLUTION 2 MG/ML, 4 MG/ML</b>	3	
meperidine hcl injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml	1 or 1b*		morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml	1 or 1b*	
meperidine hcl oral solution	1 or 1b*	QL	morphine sulfate intravenous solution 50 mg/ml	3	
meperidine hcl oral tablet 50 mg	1 or 1b*	QL	morphine sulfate oral solution	1 or 1b*	QL
<b>METHADONE HCL INJECTION SOLUTION</b>	3	PA; QL	morphine sulfate oral tablet	1 or 1b*	QL
methadone hcl intensol oral concentrate	1 or 1b*	PA; QL	<b>NUCYNTA ORAL TABLET</b>	3	QL
methadone hcl oral concentrate	1 or 1b*	PA; QL	<b>OLINVYK INTRAVENOUS SOLUTION 1 MG/ML, 2 MG/2ML</b>	3	
methadone hcl oral solution	1 or 1b*	PA; QL	oxycodone hcl oral capsule	1 or 1b*	QL
methadone hcl oral tablet	1 or 1b*	PA; QL	oxycodone hcl oral concentrate 100 mg/5ml	1 or 1b*	QL
methadone hcl oral tablet soluble	1 or 1b*	PA; QL	oxycodone hcl oral solution	1 or 1b*	QL
<b>METHADOSE ORAL CONCENTRATE 10 MG/ML</b>	3	PA; QL	oxycodone hcl oral tablet	1 or 1b*	QL
methadose oral tablet soluble	1 or 1b*	PA; QL	oxycodone hcl oral tablet abuse-deterrent 15 mg, 30 mg, 5 mg	1 or 1b*	PA; QL
<b>METHADOSE SUGAR-FREE ORAL CONCENTRATE</b>	3	PA; QL	oxymorphone hcl er oral tablet extended release 12 hour	1 or 1b*	PA; QL
mitigo injection solution	1 or 1b*		oxymorphone hcl oral tablet	1 or 1b*	QL
morphine sulfate (concentrate) oral solution 100 mg/5ml	1 or 1b*		remifentanil hcl intravenous solution reconstituted	1 or 1b*	
morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml	1 or 1b*		<b>ROXICODONE ORAL TABLET 15 MG, 30 MG</b>	3	QL
<b>MORPHINE SULFATE (PF) INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 4 MG/ML</b>	3		<b>ROXYBOND ORAL TABLET ABUSE-DETERRENT</b>	3	PA; QL
<b>MORPHINE SULFATE (PF) INTRAVENOUS SOLUTION 1 MG/ML, 10 MG/ML, 2 MG/ML, 4 MG/ML, 8 MG/ML</b>	3		<b>SUFENTANIL CITRATE INTRAVENOUS SOLUTION</b>	1 or 1b*	
morphine sulfate er beads oral capsule extended release 24 hour	1 or 1b*	PA; QL	tramadol hcl (er biphasic) oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	1 or 1b*	PA; QL
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	1 or 1b*	PA; QL	tramadol hcl (er biphasic) oral tablet extended release 24 hour	1 or 1b*	PA; QL
			tramadol hcl er oral tablet extended release 24 hour	1 or 1b*	PA; QL

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>TRAMADOL HCL ORAL SOLUTION</b>	3	QL; AL	butorphanol tartrate nasal solution	1 or 1b*	QL
tramadol hcl oral tablet 100 mg, 50 mg	1 or 1b*	QL; AL	nalbuphine hcl injection solution	1 or 1b*	QL
tramadol hcl oral tablet 25 mg	1 or 1b*	PA; QL	pentazocine-naloxone hcl oral tablet	1 or 1b*	QL
<b>ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3		<b>SUBLINER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	QL; LD
<b>*Opioid Combinations***</b>			<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL</b>	2	QL
<b>APADAZ ORAL TABLET</b>	3	QL	<b>*Tramadol Combinations***</b>		
<b>BENZHYDROCODONE-ACETAMINOPHEN ORAL TABLET</b>	3	QL	tramadol-acetaminophen oral tablet	1 or 1b*	QL; AL
endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1 or 1b*	QL	<b>*Androgens-Anabolic*</b>		
<b>OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML</b>	1 or 1b*	QL	<b>*Androgens***</b>		
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1 or 1b*	QL	danazol oral capsule	1 or 1b*	QL
<b>*Opioid Partial Agonists***</b>			<b>DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION</b>	1 or 1b*	PA
<b>BELBUCA Buccal FILM</b>	3	PA; QL	<b>JATENZO ORAL CAPSULE</b>	3	PA; QL
<b>BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	QL; LD	<b>NATESTO NASAL GEL</b>	3	PA; QL
<b>BRIXADI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	QL; LD	<b>TESTOPEL IMPLANT PELLET</b>	3	PA; LD
buprenorphine hcl injection solution 0.3 mg/ml	1 or 1b*		testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	1 or 1b*	PA
buprenorphine hcl sublingual tablet sublingual	1 or 1b*	QL	testosterone enanthate intramuscular solution	1 or 1b*	PA
buprenorphine hcl-naloxone hcl sublingual film	1 or 1b*	QL	testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	1 or 1b*	PA; QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1 or 1b*	QL	testosterone transdermal solution	1 or 1b*	PA; QL
buprenorphine transdermal patch weekly	1 or 1b*	PA; QL	<b>XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA
butorphanol tartrate injection solution	1 or 1b*		<b>*Anorectal And Related Products*</b>		
			<b>*Intrarectal Steroids***</b>		
			budesonide rectal foam	1 or 1b*	QL

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Drug Name	Tier	Notes
CORTENEMA RECTAL ENEMA	3	
CORTIFOAM EXTERNAL FOAM	3	QL
hydrocortisone rectal enema	1 or 1b*	
<b>*Nitrate Vasodilating Agents***</b>		
nitroglycerin rectal ointment	1 or 1b*	QL
RECTIV RECTAL OINTMENT	3	QL
<b>*Rectal Anesthetic/Steroids***</b>		
ANALPRAM-HC EXTERNAL CREAM	3	
ANALPRAM-HC EXTERNAL LOTION	3	
hydrocortisone ace-pramoxine external cream 1-1 %	1 or 1b*	
PROCTOFOAM HC EXTERNAL FOAM	3	
<b>*Rectal Steroids***</b>		
ANUSOL-HC EXTERNAL CREAM	3	
hydrocortisone (perianal) external cream	1 or 1b*	
PROCTOCORT EXTERNAL CREAM	1 or 1b*	
procto-med hc external cream	1 or 1b*	
proctosol hc external cream	1 or 1b*	
proctozone-hc external cream	1 or 1b*	
<b>*Anthelmintics*</b>		
<b>*Anthelmintics***</b>		
albendazole oral tablet	1 or 1b*	PA; QL
BENZNIDAZOLE ORAL TABLET	3	
BILTRICIDE ORAL TABLET	3	
EMVERM ORAL TABLET CHEWABLE	3	
ivermectin oral tablet 3 mg	1 or 1b*	QL
praziquantel oral tablet	1 or 1b*	
STROMECTOL ORAL TABLET	3	QL

Drug Name	Tier	Notes
<b>*Antiangular Agents*</b>		
<b>*Antiangulars-Other***</b>		
ASPRUZY SPRINKLE ORAL PACKET 1000 MG	3	PA; QL
ranolazine er oral tablet extended release 12 hour	1 or 1b*	QL
<b>*Nitrates***</b>		
ISORDIL TITRADOSE ORAL TABLET	3	
isosorbide dinitrate oral tablet	1 or 1b*	
isosorbide mononitrate er oral tablet extended release 24 hour	1 or 1b*	
isosorbide mononitrate oral tablet	3	
NITRO-BID TRANSDERMAL OINTMENT	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2	
nitroglycerin in d5w intravenous solution	1 or 1b*	
NITROGLYCERIN INTRAVENOUS SOLUTION	3	
nitroglycerin sublingual tablet sublingual	1 or 1b*	
nitroglycerin transdermal patch 24 hour	1 or 1b*	
nitroglycerin translingual solution	1 or 1b*	
NITROLINGUAL TRANSLINGUAL SOLUTION	3	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	3	
<b>*Antianxiety Agents*</b>		
<b>*Antianxiety Agents - Misc.***</b>		
buspirone hcl oral tablet	1 or 1b*	
droperidol injection solution	1 or 1b*	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
hydroxyzine hcl intramuscular solution	1 or 1b*	
hydroxyzine hcl oral syrup	1 or 1b*	
hydroxyzine hcl oral tablet	1 or 1b*	
hydroxyzine pamoate oral capsule	1 or 1a*	
meprobamate oral tablet	3	
<b>*Benzodiazepines***</b>		
alprazolam er oral tablet extended release 24 hour	1 or 1b*	QL
<b>ALPRAZOLAM INTENSOL ORAL CONCENTRATE</b>	3	QL
alprazolam oral tablet	1 or 1b*	QL
alprazolam oral tablet dispersible	1 or 1b*	QL
alprazolam xr oral tablet extended release 24 hour	1 or 1b*	QL
chlordiazepoxide hcl oral capsule	1 or 1b*	QL
clorazepate dipotassium oral tablet	1 or 1b*	QL
diazepam injection solution 10 mg/2ml	1 or 1a*	
diazepam intensol oral concentrate	1 or 1a*	QL
diazepam oral concentrate	1 or 1a*	QL
diazepam oral solution 5 mg/5ml	1 or 1a*	
diazepam oral tablet	1 or 1a*	QL
lorazepam injection solution	1 or 1b*	
lorazepam intensol oral concentrate	1 or 1b*	QL
lorazepam oral concentrate 2 mg/ml	1 or 1b*	QL
lorazepam oral tablet	1 or 1b*	QL
oxazepam oral capsule	1 or 1b*	QL
<b>*Antiarrhythmics*</b>		
<b>*Antiarrhythmics - Misc.***</b>		
adenosine intravenous solution 12 mg/4ml, 6 mg/2ml	1 or 1b*	
<b>*Antiarrhythmics Type I-A***</b>		
disopyramide phosphate oral capsule	1 or 1b*	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR</b>	2	
<b>NORPACE ORAL CAPSULE</b>	3	
procainamide hcl injection solution	1 or 1b*	
quinidine gluconate er oral tablet extended release	1 or 1b*	
quinidine sulfate oral tablet	1 or 1a*	
<b>*Antiarrhythmics Type I-B***</b>		
lidocaine hcl (cardiac) intravenous solution prefilled syringe 50 mg/5ml	1 or 1b*	
<b>LIDOCAINE HCL (CARDIAC) PF INTRAVENOUS SOLUTION</b>	3	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe	1 or 1b*	
lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%	1 or 1b*	
mexiletine hcl oral capsule	1 or 1b*	
<b>*Antiarrhythmics Type I-C***</b>		
flecainide acetate oral tablet	1 or 1b*	QL
propafenone hcl er oral capsule extended release 12 hour	1 or 1b*	
propafenone hcl oral tablet	1 or 1b*	
<b>*Antiarrhythmics Type Iii***</b>		
amiodarone hcl intravenous solution	1 or 1b*	
amiodarone hcl oral tablet 100 mg, 400 mg	1 or 1b*	
amiodarone hcl oral tablet 200 mg	1 or 1b*	QL
<b>CORVERT INTRAVENOUS SOLUTION</b>	3	
dofetilide oral capsule	1 or 1b*	LD
ibutilide fumarate intravenous solution	1 or 1b*	
<b>MULTAQ ORAL TABLET</b>	3	QL

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Drug Name	Tier	Notes	Drug Name	Tier	Notes	
<b>NEXTERONE INTRAVENOUS SOLUTION</b>	3		<b>TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT</b>	2	QL	
pacerone oral tablet 100 mg, 400 mg	1 or 1b*		wixela inhlab inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1 or 1b*	QL	
pacerone oral tablet 200 mg	1 or 1b*	QL	<b>*Antiasthmatic And Bronchodilator Agents*</b>			
<b>*Adrenergic Combinations***</b>			<b>*Anti-IgE Monoclonal Antibodies***</b>			
<b>AIRSUPRA INHALATION AEROSOL</b>	2	QL	<b>XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD; SP	
<b>ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT</b>	2	QL	<b>XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP	
<b>BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT</b>	1 or 1b*	QL	<b>XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED</b>	3	PA; QL; LD; SP	
<b>BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH</b>	2	QL	<b>*Anti-Inflammatory Agents***</b>			
<b>BREYNA INHALATION AEROSOL</b>	1 or 1b*	QL	cromolyn sodium inhalation nebulization solution	1 or 1b*		
<b>BREZTRI AEROSPHERE INHALATION AEROSOL</b>	2	QL	<b>*Beta Adrenergics***</b>			
budesonide-formoterol fumarate inhalation aerosol	1 or 1b*	QL	albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	1 or 1b*	QL	
<b>COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION</b>	2	QL	albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1 or 1b*	QL	
fluticasone-salmeterol inhalation aerosol	1 or 1b*	QL	<b>ALBUTEROL SULFATE INHALATION NEBULIZATION SOLUTION (5 MG/ML) 0.5%</b>	1 or 1b*	QL	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1 or 1b*	QL	albuterol sulfate oral syrup	1 or 1b*		
ipratropium-albuterol inhalation solution	1 or 1b*	QL	albuterol sulfate oral tablet	1 or 1b*		
<b>STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT</b>	2	QL	arformoterol tartrate inhalation nebulization solution	1 or 1b*	QL	
			<b>BROVANA INHALATION NEBULIZATION SOLUTION</b>	3	QL	

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
formoterol fumarate inhalation nebulization solution	1 or 1b*	QL	<b>FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
isoproterenol hcl injection solution	1 or 1b*		<b>NUCALA SUBCUTANEOUS SOLUTION AUTO- INJECTOR</b>	3	PA; QL; LD; SP
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	1 or 1b*	QL	<b>NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
levalbuterol tartrate inhalation aerosol	1 or 1b*	ST; QL	<b>NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED</b>	3	PA; QL; LD; SP
<b>PERFOROMIST INHALATION NEBULIZATION SOLUTION</b>	3	QL	<b>*Interleukin-5 Antagonists (Igg4 Kappa)***</b>		
<b>PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED</b>	2	QL	<b>CINQAIR INTRAVENOUS SOLUTION</b>	3	PA; LD; SP
<b>SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT</b>	2	QL	<b>*Leukotriene Receptor Antagonists***</b>		
<b>STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION</b>	3	QL	<b>ACCOLATE ORAL TABLET</b>	3	QL
terbutaline sulfate injection solution	1 or 1b*		montelukast sodium oral packet	1 or 1b*	QL
terbutaline sulfate oral tablet	1 or 1b*		montelukast sodium oral tablet	1 or 1b*	QL
<b>*Bronchodilators - Anticholinergics***</b>			montelukast sodium oral tablet chewable	1 or 1b*	QL
<b>ATROVENT HFA INHALATION AEROSOL SOLUTION</b>	2	QL	zafirlukast oral tablet	1 or 1b*	QL
ipratropium bromide inhalation solution	1 or 1b*	QL	<b>*Phosphodiesterase 3 &amp; 4 (Pde3 &amp; Pde4) Inhibitors***</b>		
<b>SPIRIVA HANDIHALER INHALATION CAPSULE</b>	1 or 1b*	QL	<b>OHTUVAYRE INHALATION SUSPENSION</b>	3	PA; QL; LD; SP
<b>SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT</b>	2	QL	<b>*Selective Phosphodiesterase 4 (Pde4) Inhibitors***</b>		
<b>YUPELRI INHALATION SOLUTION</b>	3	ST; QL	roflumilast oral tablet	1 or 1b*	QL
<b>*Interleukin-5 Antagonists (Igg1 Kappa)***</b>			<b>*Steroid Inhalants***</b>		
<b>FASENRA PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR</b>	3	PA; QL; LD; SP	budesonide inhalation suspension	1 or 1b*	QL
			fluticasone propionate diskus inhalation aerosol powder breath activated	2	QL
			fluticasone propionate hfa inhalation aerosol	2	QL

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Drug Name	Tier	Notes
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	2	QL
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	2	QL
<b>*Thymic Stromal Lymphopoietin (Tslp) Antagonists***</b>		
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Xanthines***</b>		
aminophylline intravenous solution	1 or 1b*	
ELIXOPHYLLIN ORAL ELIXIR	1 or 1b*	QL
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	2	QL
theophylline er oral tablet extended release 12 hour 100 mg, 200 mg	1 or 1b*	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	1 or 1b*	QL
theophylline er oral tablet extended release 24 hour	1 or 1b*	QL
theophylline oral elixir	1 or 1b*	QL
theophylline oral solution	1 or 1b*	QL
<b>*Anticoagulants*</b>		
<b>*Anticoagulants - Misc.***</b>		
sodium citrate lock flush intravenous solution	3	
<b>*Coumarin Anticoagulants***</b>		
jantoven oral tablet	1 or 1a*	
warfarin sodium oral tablet	1 or 1a*	

Drug Name	Tier	Notes
<b>*Direct Factor Xa Inhibitors***</b>		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	QL
ELIQUIS ORAL TABLET	2	QL
XARELTO ORAL SUSPENSION RECONSTITUTED	2	QL
XARELTO ORAL TABLET	2	QL
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	2	QL
<b>*Heparins And Heparinoid-Like Agents***</b>		
bd heparin posiflush intravenous solution	1 or 1b*	
heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%, 2000-0.9 unit/l-%	1 or 1b*	
HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 12500-0.45 UT/250ML-%, 25000-0.45 UT/250ML-%, 25000-0.45 UT/500ML-%	3	
heparin na (pork) lock flsh pf intravenous solution	1 or 1b*	
HEPARIN SOD (PORCINE) IN D5W INTRAVENOUS SOLUTION 100 UNIT/ML, 25000-5 UT/500ML-%	3	
heparin sod (porcine) in d5w intravenous solution 40-5 unit/ml-%	1 or 1b*	
heparin sod (pork) lock flush intravenous solution 10 unit/ml, 100 unit/ml	1 or 1b*	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	1 or 1b*	
HEPARIN SODIUM (PORCINE) INJECTION SOLUTION PREFILLED SYRINGE	3	

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
heparin sodium (porcine) pf injection solution 1000 unit/ml, 5000 unit/0.5ml	1 or 1b*		*Thrombin Inhibitors - Selective Direct & Reversible***		
<b>HEPARIN SODIUM (PORCINE) PF INJECTION SOLUTION 5000 UNIT/ML</b>	3		<b>ARGATROBAN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 50-0.9 MG/50ML-%</b>	3	
<b>*In Vitro/Lock Anticoagulant Combinations***</b>			<b>ARGATROBAN INTRAVENOUS SOLUTION 250 MG/2.5ML, 50 MG/50ML</b>	3	
sodium citrate-gentamicin sulf intravenous solution prefilled syringe	3		<b>*Anticonvulsants*</b>		
<b>*Low Molecular Weight Heparins***</b>			<b>*Ampa Glutamate Receptor Antagonists***</b>		
enoxaparin sodium injection solution 300 mg/3ml	1 or 1b*	QL	<b>FYCOMPA ORAL SUSPENSION</b>	3	QL
enoxaparin sodium injection solution prefilled syringe	1 or 1b*	QL	<b>FYCOMPA ORAL TABLET</b>	3	QL
<b>FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML</b>	3	QL	<b>*Anticonvulsants - Benzodiazepines***</b>		
<b>FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	QL	clobazam oral suspension 2.5 mg/ml	1 or 1b*	QL
<b>*Synthetic Heparinoid-Like Agents***</b>			clobazam oral tablet	1 or 1b*	QL
<b>ARIXTRA SUBCUTANEOUS SOLUTION</b>	3	QL	clonazepam oral tablet	1 or 1b*	QL
fondaparinux sodium subcutaneous solution	1 or 1b*	QL	clonazepam oral tablet dispersible	1 or 1b*	QL
<b>*Thrombin Inhibitors - Hirudin Type***</b>			diazepam rectal gel	1 or 1b*	QL
<b>ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED</b>	3		<b>SYMPAZAN ORAL FILM</b>	3	QL
bivalirudin trifluoroacetate intravenous solution	1 or 1b*		<b>*Anticonvulsants - Misc.***</b>		
bivalirudin trifluoroacetate intravenous solution reconstituted	1 or 1b*		<b>APTIOM ORAL TABLET 200 MG, 400 MG</b>	3	DO
			<b>APTIOM ORAL TABLET 600 MG, 800 MG</b>	3	QL
			<b>BANZEL ORAL SUSPENSION</b>	3	QL
			<b>BANZEL ORAL TABLET 200 MG</b>	3	DO
			<b>BANZEL ORAL TABLET 400 MG</b>	3	QL
			<b>BRIVIACT INTRAVENOUS SOLUTION</b>	3	
			<b>BRIVIACT ORAL SOLUTION</b>	3	QL
			<b>BRIVIACT ORAL TABLET</b>	3	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>	<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
carbamazepine er oral capsule extended release 12 hour	1 or 1b*	QL	lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg	1 or 1b*	QL
carbamazepine er oral tablet extended release 12 hour	1 or 1b*	QL	lamotrigine oral tablet dispersible 50 mg	1 or 1b*	DO
carbamazepine oral suspension	1 or 1b*	QL	lamotrigine starter kit-blue oral kit	1 or 1b*	QL
carbamazepine oral tablet	1 or 1b*	QL	lamotrigine starter kit-green oral kit	1 or 1b*	QL
carbamazepine oral tablet chewable	1 or 1b*	QL	lamotrigine starter kit-orange oral kit	1 or 1b*	QL
<b>DIACOMIT ORAL CAPSULE 250 MG</b>	3	PA; DO; LD	levetiracetam er oral tablet extended release 24 hour	1 or 1b*	QL
<b>DIACOMIT ORAL CAPSULE 500 MG</b>	3	PA; QL; LD	<b>LEVETIRACETAM IN NACL INTRAVENOUS SOLUTION 1000 MG/100ML, 1500 MG/100ML, 500 MG/100ML</b>	3	
<b>DIACOMIT ORAL PACKET 250 MG</b>	3	PA; DO; LD	levetiracetam intravenous solution	1 or 1b*	
<b>DIACOMIT ORAL PACKET 500 MG</b>	3	PA; QL; LD	levetiracetam oral solution	1 or 1b*	QL
<b>ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	3	QL	levetiracetam oral tablet 1000 mg	1 or 1b*	QL
<b>EPIDIOLEX ORAL SOLUTION</b>	3	PA; LD; SP	levetiracetam oral tablet 250 mg, 500 mg, 750 mg	1 or 1b*	DO
epitol oral tablet	1 or 1b*	QL	levetiracetam oral tablet disintegrating soluble	3	QL
<b>FINTEPLA ORAL SOLUTION</b>	3	PA; QL; LD	oxcarbazepine er oral tablet extended release 24 hour 150 mg, 300 mg	1 or 1b*	DO
gabapentin oral capsule	1 or 1b*	DO	oxcarbazepine er oral tablet extended release 24 hour 600 mg	1 or 1b*	QL
gabapentin oral solution	1 or 1b*	QL	oxcarbazepine oral suspension	1 or 1b*	QL
gabapentin oral tablet 600 mg, 800 mg	1 or 1b*	QL	oxcarbazepine oral tablet	1 or 1b*	QL
lacosamide intravenous solution	1 or 1b*		pregabalin oral capsule	1 or 1b*	QL
lacosamide oral solution	1 or 1b*	QL	pregabalin oral solution	1 or 1b*	QL
lacosamide oral tablet	1 or 1b*	QL	primidone oral tablet	1 or 1b*	QL
lamotrigine er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	1 or 1b*	DO	<b>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 150 MG, 200 MG, 50 MG</b>	3	QL
lamotrigine er oral tablet extended release 24 hour 200 mg, 250 mg, 300 mg	1 or 1b*	QL	<b>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 25 MG</b>	3	DO
lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg	1 or 1b*	QL	roweepra oral tablet 500 mg	1 or 1b*	DO
lamotrigine oral tablet	1 or 1b*	DO	rufinamide oral suspension	1 or 1b*	QL
lamotrigine oral tablet chewable	1 or 1b*	QL			

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
rufinamide oral tablet 200 mg	1 or 1b*	DO
rufinamide oral tablet 400 mg	1 or 1b*	QL
<b>SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE</b>	3	QL
subvenite oral tablet	1 or 1b*	DO
subvenite starter kit-blue oral kit	1 or 1b*	QL
subvenite starter kit-green oral kit	1 or 1b*	QL
subvenite starter kit-orange oral kit	1 or 1b*	QL
topiramate er oral capsule er 24 hour sprinkle 100 mg, 150 mg, 200 mg, 50 mg	1 or 1b*	QL
topiramate er oral capsule er 24 hour sprinkle 25 mg	1 or 1b*	DO
topiramate er oral capsule extended release 24 hour 100 mg, 200 mg, 50 mg	1 or 1b*	QL
topiramate er oral capsule extended release 24 hour 25 mg	1 or 1b*	DO
topiramate oral capsule sprinkle 15 mg, 25 mg	1 or 1b*	QL
topiramate oral tablet 100 mg, 25 mg, 50 mg	1 or 1b*	DO
topiramate oral tablet 200 mg	1 or 1b*	QL
zonisamide oral capsule	1 or 1b*	QL
<b>ZTALMY ORAL SUSPENSION</b>	3	QL; LD
<b>*Carbamates***</b>		
felbamate oral suspension	1 or 1b*	QL
felbamate oral tablet	1 or 1b*	QL
<b>XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 &amp; 150 MG</b>	3	QL
<b>XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK</b>	3	QL
<b>XCOPRI ORAL TABLET</b>	3	QL
<b>XCOPRI ORAL TABLET THERAPY PACK</b>	3	QL
<b>*Gaba Modulators***</b>		
tiagabine hcl oral tablet	1 or 1b*	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
vigabatrin oral packet	1 or 1b*	QL; LD; SP
vigabatrin oral tablet	1 or 1b*	QL; LD; SP
vigadrona oral packet	1 or 1b*	QL; LD
<b>VIGADRONE ORAL TABLET</b>	1 or 1b*	QL; LD; SP
<b>VIGAFYDE ORAL SOLUTION</b>	3	QL; LD
<b>VIGPODER ORAL PACKET</b>	1 or 1b*	QL; LD
<b>*Hydantoins***</b>		
<b>CEREBYX INJECTION SOLUTION</b>	3	
<b>DILANTIN INFATABS ORAL TABLET CHEWABLE</b>	3	
<b>DILANTIN ORAL CAPSULE 100 MG</b>	3	
<b>DILANTIN ORAL CAPSULE 30 MG</b>	2	
<b>DILANTIN ORAL SUSPENSION</b>	3	
<b>DILANTIN-125 ORAL SUSPENSION</b>	3	
fosphenytoin sodium injection solution	1 or 1b*	
<b>PHENYTEK ORAL CAPSULE</b>	1 or 1b*	
phenytoin infatabs oral tablet chewable	1 or 1b*	
phenytoin oral suspension 125 mg/5ml	1 or 1b*	
phenytoin oral tablet chewable	1 or 1b*	
phenytoin sodium extended oral capsule	1 or 1b*	
phenytoin sodium injection solution	1 or 1b*	
<b>*Succinimides***</b>		
<b>CELONTIN ORAL CAPSULE</b>	3	QL
ethosuximide oral capsule	1 or 1b*	QL
ethosuximide oral solution	1 or 1b*	QL
methylsuximide oral capsule	1 or 1b*	QL
<b>*Valproic Acid***</b>		
divalproex sodium er oral tablet extended release 24 hour	1 or 1b*	QL

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Drug Name	Tier	Notes
divalproex sodium oral capsule delayed release sprinkle	1 or 1b*	QL
divalproex sodium oral tablet delayed release	1 or 1b*	QL
valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml	1 or 1b*	
valproic acid oral capsule	1 or 1b*	QL
valproic acid oral solution	1 or 1b*	
<b>*Antidepressants*</b>		
<b>*Alpha-2 Receptor Antagonists (Tetracyclines)***</b>		
mirtazapine oral tablet	1 or 1b*	
mirtazapine oral tablet dispersible	1 or 1b*	
<b>REMERON ORAL TABLET 15 MG, 30 MG</b>	3	
<b>REMERON SOLTAB ORAL TABLET DISPERSIBLE</b>	3	
<b>*Antidepressants - Misc.***</b>		
<b>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG</b>	3	ST; DO
<b>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 348 MG, 522 MG</b>	3	ST; QL
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg	1 or 1b*	DO
bupropion hcl er (sr) oral tablet extended release 12 hour 150 mg, 200 mg	1 or 1b*	QL
bupropion hcl er (xl) oral tablet extended release 24 hour	1 or 1b*	QL
bupropion hcl oral tablet 100 mg	1 or 1b*	QL
bupropion hcl oral tablet 75 mg	1 or 1b*	DO
<b>WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	3	ST; QL

Drug Name	Tier	Notes
<b>*Gaba Receptor Modulator - Neuroactive Steroid***</b>		
<b>ZURZUVAE ORAL CAPSULE</b>	3	PA; QL; LD
<b>*Monoamine Oxidase Inhibitors (Maois)***</b>		
<b>EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 9 MG/24HR</b>	3	QL
<b>EMSAM TRANSDERMAL PATCH 24 HOUR 6 MG/24HR</b>	3	DO
<b>MARPLAN ORAL TABLET</b>	3	QL
<b>NARDIL ORAL TABLET</b>	3	QL
<b>PARNATE ORAL TABLET</b>	3	QL
phenelzine sulfate oral tablet	1 or 1b*	QL
tranylcypromine sulfate oral tablet	1 or 1b*	QL
<b>*N-Methyl-D-Aspartic Acid (Nmda) Receptor Antagonists***</b>		
<b>SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK</b>	3	PA; QL; LD
<b>SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK</b>	3	PA; QL; LD
<b>*Selective Serotonin Reuptake Inhibitors (Ssris)***</b>		
citalopram hydrobromide oral solution	1 or 1b*	
citalopram hydrobromide oral tablet	1 or 1b*	
escitalopram oxalate oral solution	1 or 1b*	
escitalopram oxalate oral tablet	1 or 1b*	
fluoxetine hcl oral capsule	1 or 1b*	
fluoxetine hcl oral capsule delayed release	1 or 1b*	
fluoxetine hcl oral solution	1 or 1b*	
fluoxetine hcl oral tablet 10 mg, 20 mg	1 or 1b*	

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Drug Name	Tier	Notes
<b>FLUOXETINE HCL ORAL TABLET 60 MG</b>	3	
fluvoxamine maleate er oral capsule extended release 24 hour	1 or 1b*	
fluvoxamine maleate oral tablet	1 or 1b*	
paroxetine hcl er oral tablet extended release 24 hour	1 or 1b*	
paroxetine hcl oral suspension	1 or 1b*	
paroxetine hcl oral tablet	1 or 1b*	
<b>PAXIL ORAL SUSPENSION</b>	3	ST
sertraline hcl oral concentrate	1 or 1b*	
sertraline hcl oral tablet	1 or 1b*	
<b>*Serotonin Modulators***</b>		
nefazodone hcl oral tablet 100 mg, 50 mg	1 or 1b*	DO
nefazodone hcl oral tablet 150 mg, 200 mg, 250 mg	1 or 1b*	QL
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	1 or 1a*	DO
trazodone hcl oral tablet 300 mg	1 or 1a*	QL
<b>TRINTELLIX ORAL TABLET 10 MG, 5 MG</b>	2	DO
<b>TRINTELLIX ORAL TABLET 20 MG</b>	2	QL
vilazodone hcl oral tablet 10 mg, 20 mg	1 or 1b*	DO
vilazodone hcl oral tablet 40 mg	1 or 1b*	QL
<b>*Serotonin-Norepinephrine Reuptake Inhibitors (Snnris)***</b>		
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg	1 or 1b*	QL
desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg	1 or 1b*	DO
duloxetine hcl oral capsule delayed release particles	1 or 1b*	QL
venlafaxine hcl er oral capsule extended release 24 hour	1 or 1b*	QL

Drug Name	Tier	Notes
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	1 or 1b*	QL
venlafaxine hcl oral tablet	1 or 1b*	QL
<b>*Tricyclic Agents***</b>		
amitriptyline hcl oral tablet 10 mg, 25 mg, 50 mg, 75 mg	1 or 1a*	DO
amitriptyline hcl oral tablet 100 mg, 150 mg	1 or 1a*	QL
amoxapine oral tablet 100 mg, 150 mg	1 or 1b*	QL
amoxapine oral tablet 25 mg, 50 mg	1 or 1b*	DO
clomipramine hcl oral capsule 25 mg	1 or 1b*	DO
clomipramine hcl oral capsule 50 mg, 75 mg	1 or 1b*	QL
desipramine hcl oral tablet 10 mg, 25 mg, 50 mg, 75 mg	1 or 1b*	DO
desipramine hcl oral tablet 100 mg, 150 mg	1 or 1b*	QL
doxepin hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	1 or 1b*	DO
doxepin hcl oral capsule 100 mg, 150 mg	1 or 1b*	QL
doxepin hcl oral concentrate	1 or 1b*	QL
imipramine hcl oral tablet 10 mg, 25 mg	1 or 1b*	DO
imipramine hcl oral tablet 50 mg	1 or 1b*	QL
imipramine pamoate oral capsule 100 mg, 75 mg	1 or 1b*	DO
imipramine pamoate oral capsule 125 mg, 150 mg	1 or 1b*	QL
<b>NORPRAMIN ORAL TABLET 10 MG, 25 MG</b>	3	DO
nortriptyline hcl oral capsule 10 mg, 25 mg	1 or 1b*	DO
nortriptyline hcl oral capsule 50 mg, 75 mg	1 or 1b*	QL
nortriptyline hcl oral solution	1 or 1b*	QL
<b>PAMELOR ORAL CAPSULE 10 MG, 25 MG</b>	3	DO
<b>PAMELOR ORAL CAPSULE 50 MG, 75 MG</b>	3	QL
protriptyline hcl oral tablet 10 mg	1 or 1b*	QL
protriptyline hcl oral tablet 5 mg	1 or 1b*	DO

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
trimipramine maleate oral capsule	1 or 1b*	QL
<b>*Antidiabetics*</b>		
<b>*Alpha-Glucosidase Inhibitors***</b>		
acarbose oral tablet	1 or 1b*	QL
miglitol oral tablet	1 or 1b*	QL
<b>*Antidiabetic - Amylin Analogs***</b>		
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	QL
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	QL
<b>*Antidiabetic-Anti-Cd3 Antibodies***</b>		
TZIELD INTRAVENOUS SOLUTION	3	PA; LD
<b>*Biguanides***</b>		
metformin hcl er oral tablet extended release 24 hour	1 or 1b*	QL
metformin hcl oral solution	3	PA; QL
metformin hcl oral tablet 1000 mg, 500 mg	1 or 1b*	QL
metformin hcl oral tablet 850 mg	1 or 1b*	\$0; QL
RIOMET ORAL SOLUTION	3	PA; QL
<b>*Diabetic Other***</b>		
BAQSIMI ONE PACK NASAL POWDER	3	QL
BAQSIMI TWO PACK NASAL POWDER	3	QL
diazoxide oral suspension	1 or 1b*	
GLUCAGON EMERGENCY INJECTION KIT	1 or 1b*	QL
GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED	3	QL
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL

Drug Name	Tier	Notes
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
GVOKE KIT SUBCUTANEOUS SOLUTION	3	QL
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	3	QL
PROGLYCEM ORAL SUSPENSION	3	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL
<b>*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors***</b>		
alogliptin benzoate oral tablet	1 or 1b*	ST; QL
JANUVIA ORAL TABLET	2	ST; QL
<b>*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations***</b>		
alogliptin-metformin hcl oral tablet	1 or 1b*	ST; QL
JANUMET ORAL TABLET	2	ST; QL
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	2	ST; QL
<b>*Dopamine Receptor Agonists - Ergot Derivatives***</b>		
CYCLOSET ORAL TABLET	3	
<b>*Dpp-4 Inhibitor-Thiazolidinedione Combinations***</b>		
alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg	1 or 1b*	ST; QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>*Human Insulin***</b>					
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL	INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
HUMALOG INJECTION SOLUTION	2	QL	INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN- INJECTOR	2	QL
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL	LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR 100 UNIT/ML, 200 UNIT/ML	2	QL	LANTUS SUBCUTANEOUS SOLUTION	2	QL
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	2	QL	LYUMJEV INJECTION SOLUTION	2	QL
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	2	QL	LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	QL	MYXREDLIN INTRAVENOUS SOLUTION	3	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	2	PA; QL	TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; QL	TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL	TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	QL
INSULIN LISPRO INJECTION SOLUTION	2	QL	TRESIBA SUBCUTANEOUS SOLUTION	2	QL
<b>*Incretin Mimetic Agents (Gip &amp; Glp-1 Receptor Agonists)***</b>					
MOUNJARO SUBCUTANEOUS SOLUTION AUTO- INJECTOR			MOUNJARO SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
<b>*Incretin Mimetic Agents (Glp-1 Receptor Agonists)***</b>		
liraglutide subcutaneous solution pen-injector	1 or 1b*	PA; QL
<b>OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR 2 MG/3ML</b>	2	PA; QL
<b>OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR 4 MG/3ML</b>	2	PA; QL
<b>OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>	2	PA; QL
<b>RYBELSUS ORAL TABLET</b>	2	PA; QL
<b>TRULICITY SUBCUTANEOUS SOLUTION AUTO- INJECTOR</b>	2	PA; QL
<b>*Insulin-Incretin Mimetic Combinations***</b>		
<b>SOLIQUA SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>	2	QL
<b>XULTOPHY SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>	2	QL
<b>*Meglitinide Analogues***</b>		
nateglinide oral tablet	1 or 1b*	QL
repaglinide oral tablet	1 or 1b*	QL
<b>*Progesterone Receptor Antagonists***</b>		
mifepristone oral tablet 300 mg	3	PA; QL; LD
<b>*Sglt2 Inhibitor - Dpp-4 Inhibitor - Biguanide Comb***</b>		
<b>TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	2	ST; QL
<b>*Sglt2 Inhibitor - Dpp-4 Inhibitor Combinations***</b>		
<b>GLYXAMBI ORAL TABLET</b>	2	ST; QL

Drug Name	Tier	Notes
<b>*Sodium-Glucose Co-Transporter 2 (Sglt2) Inhibitors***</b>		
<b>FARXIGA ORAL TABLET</b>	2	ST; QL
<b>JARDIANCE ORAL TABLET</b>	2	ST; QL
<b>*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***</b>		
<b>SYNJARDY ORAL TABLET</b>	2	ST; QL
<b>SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	2	ST; QL
<b>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	2	ST; QL
<b>*Sulfonylurea-Biguanide Combinations***</b>		
glipizide-metformin hcl oral tablet	1 or 1b*	QL
glyburide-metformin oral tablet	1 or 1b*	QL
<b>*Sulfonylureas***</b>		
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1 or 1b*	QL
glipizide er oral tablet extended release 24 hour	1 or 1a*	QL
glipizide oral tablet	1 or 1a*	QL
glyburide micronized oral tablet	1 or 1b*	QL
glyburide oral tablet	1 or 1b*	QL
<b>*Sulfonylurea- Thiazolidinedione Combinations***</b>		
<b>DUETACT ORAL TABLET</b>	3	ST; QL
pioglitazone hcl-glimepiride oral tablet	1 or 1b*	ST; QL
<b>*Thiazolidinedione- Biguanide Combinations***</b>		
pioglitazone hcl-metformin hcl oral tablet	1 or 1b*	ST; QL
<b>*Thiazolidinediones***</b>		
pioglitazone hcl oral tablet	1 or 1b*	ST; QL

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Drug Name	Tier	Notes
<b>*Antidiarrheal/Probiotic Agents*</b>		
<b>*Antidiarrheal - Chloride Channel Antagonists***</b>		
MYTESI ORAL TABLET DELAYED RELEASE	3	PA; QL
<b>*Antidiarrheal/Probiotic Agents - Misc.***</b>		
surebiotic probiotic support oral capsule	3	
<b>*Antiperistaltic Agents***</b>		
diphenoxylate-atropine oral liquid	1 or 1b*	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	1 or 1b*	
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1 or 1b*	QL
MOTOFEN ORAL TABLET	3	
<b>*Antidotes And Specific Antagonists*</b>		
<b>*Antidote Combinations***</b>		
NITHIODOTE INTRAVENOUS KIT 300MG/10ML&12.5 GM/50ML	3	
PREVDUO INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
<b>*Antidotes - Chelating Agents***</b>		
CHEMET ORAL CAPSULE	3	
deferasirox granules oral packet	3	PA; LD; SP
deferasirox oral packet	3	PA; LD; SP
deferasirox oral tablet	3	PA; LD; SP
deferasirox oral tablet soluble	3	PA; LD; SP
deferiprone oral tablet	3	PA; LD
FERRIPROX ORAL SOLUTION	3	PA; LD
FERRIPROX TWICE-A-DAY ORAL TABLET	3	PA; LD

Drug Name	Tier	Notes
<b>*Antidotes And Specific Antagonists***</b>		
ACETADOTE INTRAVENOUS SOLUTION	3	
acetylcysteine intravenous solution	1 or 1b*	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	3	
BRIDION INTRAVENOUS SOLUTION	3	
CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED 5 GM	3	
deferoxamine mesylate injection solution reconstituted	3	LD; SP
DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG	3	LD; SP
DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED	3	
edetate calcium disodium injection solution	3	
fomepizole intravenous solution 1.5 gm/1.5ml	1 or 1b*	
methylene blue (antidote) intravenous solution	1 or 1b*	
methylene blue intravenous solution 50 mg/10ml	1 or 1b*	
PRAXBIND INTRAVENOUS SOLUTION	3	
PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED	3	
PROVAYBLUE INTRAVENOUS SOLUTION	3	
RADIOGARDASE ORAL CAPSULE	3	

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Drug Name	Tier	Notes
SODIUM NITRITE INTRAVENOUS SOLUTION	3	
SODIUM THIOSULFATE INTRAVENOUS SOLUTION 250 MG/ML	1 or 1b*	
VISTOGARD ORAL PACKET	3	QL; LD
<b>*Benzodiazepine Antagonists***</b>		
flumazenil intravenous solution	1 or 1b*	
<b>*Opioid Antagonists***</b>		
KLOXXADO NASAL LIQUID	2	QL
nalmefene hcl injection solution	3	QL
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	1 or 1b*	QL
naloxone hcl injection solution cartridge	1 or 1b*	QL
naloxone hcl injection solution prefilled syringe	1 or 1b*	QL
naloxone hcl nasal liquid	1 or 1b*	QL
naltrexone hcl oral tablet	1 or 1b*	
OPVEE NASAL SOLUTION	2	QL
REXTOVY NASAL LIQUID	2	QL
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	QL; LD
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE	2	QL
<b>*Antiemetics*</b>		
<b>*5-HT3 Receptor Antagonists***</b>		
ANZEMET ORAL TABLET 50 MG	3	QL; LD
gransetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	1 or 1b*	LD
gransetron hcl oral tablet	1 or 1b*	QL; LD
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	1 or 1b*	

Drug Name	Tier	Notes
ondansetron hcl injection solution prefilled syringe	1 or 1b*	LD
ondansetron hcl oral solution	1 or 1b*	QL; LD
ondansetron hcl oral tablet	1 or 1b*	QL; LD
ondansetron oral tablet dispersible 16 mg	1 or 1b*	QL
ondansetron oral tablet dispersible 4 mg, 8 mg	1 or 1b*	QL; LD
PALONOSETRON HCL INTRAVENOUS SOLUTION 0.25 MG/2ML	3	PA; LD
palonosetron hcl intravenous solution 0.25 mg/5ml	1 or 1b*	PA; LD
palonosetron hcl intravenous solution prefilled syringe	1 or 1b*	PA; LD
POSFREA INTRAVENOUS SOLUTION	3	PA; LD
SANCUSO TRANSDERMAL PATCH	3	QL; LD
SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	3	LD
<b>*Antiemetic Combinations***</b>		
AKYNZEO (READY-TO-USE) INTRAVENOUS SOLUTION	3	PA; QL; LD
AKYNZEO (TO-BE-DILUTED) INTRAVENOUS SOLUTION	3	PA; QL; LD
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD
AKYNZEO ORAL CAPSULE	3	QL; LD
BONJESTA ORAL TABLET EXTENDED RELEASE	3	PA; QL
doxylamine-pyridoxine oral tablet delayed release	1 or 1b*	PA; QL
<b>*Antiemetics - Anticholinergic***</b>		
DIMENHYDRINATE INJECTION SOLUTION	3	
meclizine hcl oral tablet 25 mg	1 or 1a*	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
meclizine hcl oral tablet 50 mg	1 or 1b*	
scopolamine transdermal patch 72 hour	1 or 1b*	
<b>TIGAN INTRAMUSCULAR SOLUTION</b>	<b>3</b>	
trimethobenzamide hcl oral capsule	1 or 1b*	
<b>*Antiemetics - Antidopaminergic***</b>		
<b>BARHEMSYS INTRAVENOUS SOLUTION</b>	<b>3</b>	
<b>*Antiemetics - Miscellaneous***</b>		
dronabinol oral capsule	1 or 1b*	QL
<b>SYNDROS ORAL SOLUTION</b>	<b>3</b>	QL
<b>*Substance P/Neurokinin 1 (Nk1) Receptor Antagonists***</b>		
<b>APONVIE INTRAVENOUS EMULSION</b>	<b>3</b>	LD
aprepitant oral	1 or 1b*	QL; LD
aprepitant oral capsule	1 or 1b*	QL; LD
<b>CINVANTI INTRAVENOUS EMULSION</b>	<b>3</b>	PA; QL
<b>EMEND ORAL SUSPENSION RECONSTITUTED</b>	<b>3</b>	QL
focinvez intravenous solution	<b>3</b>	PA; QL
fosaprepitant dimeglumine intravenous solution reconstituted	1 or 1b*	PA; QL; LD
<b>VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK</b>	<b>3</b>	QL
<b>*Antifungals*</b>		
<b>*Antifungal - Glucan Synthesis Inhibitors (Echinocandins)***</b>		
<b>CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>CASFOPFUNGIN ACETATE INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	QL
<b>ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	
<b>MICAFUNGIN SODIUM INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	
micafungin sodium-nacl intravenous solution	<b>3</b>	
<b>MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	
<b>REZZAYO INTRAVENOUS SOLUTION RECONSTITUTED</b>	<b>3</b>	
<b>*Antifungal - Glucan Synthesis Inhibitors (Triterpenoids)***</b>		
<b>BREXAFEMME ORAL TABLET</b>	<b>3</b>	PA; QL
<b>*Antifungals***</b>		
<b>ABELCET INTRAVENOUS SUSPENSION</b>	<b>3</b>	
<b>AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED</b>	<b>3</b>	
amphotericin b intravenous solution reconstituted	1 or 1b*	
amphotericin b liposome intravenous suspension reconstituted	1 or 1b*	
<b>ANCOBON ORAL CAPSULE</b>	<b>3</b>	PA
flucytosine oral capsule	1 or 1b*	PA
griseofulvin microsize oral suspension	1 or 1b*	
griseofulvin microsize oral tablet	1 or 1b*	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1 or 1b*	
nystatin oral tablet	1 or 1b*	
terbinafine hcl oral tablet	1 or 1b*	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Imidazoles***</b>		
ketoconazole oral tablet	1 or 1b*	QL
<b>*Tetrazoles***</b>		
<b>VIVJOA ORAL CAPSULE THERAPY PACK</b>	3	PA; QL
<b>*Triazoles***</b>		
<b>CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; QL
<b>CRESEMBA ORAL CAPSULE</b>	3	PA; QL
<b>DIFLUCAN ORAL SUSPENSION RECONSTITUTED 40 MG/ML</b>	3	QL
<b>DIFLUCAN ORAL TABLET 100 MG, 200 MG</b>	3	QL
<b>FLUCONAZOLE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.9 MG/50ML-%</b>	3	
fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%	1 or 1b*	
fluconazole oral suspension reconstituted	1 or 1b*	QL
fluconazole oral tablet	1 or 1b*	QL
itraconazole oral capsule	1 or 1b*	PA; QL
itraconazole oral solution	1 or 1b*	PA; QL
<b>NOXAFIL ORAL PACKET</b>	3	PA; QL
posaconazole intravenous solution	1 or 1b*	
posaconazole oral suspension	1 or 1b*	PA; QL
posaconazole oral tablet delayed release	1 or 1b*	PA; QL
<b>SPORANOX ORAL CAPSULE</b>	3	PA; QL
<b>SPORANOX ORAL SOLUTION</b>	3	PA; QL
<b>TOLSURA ORAL CAPSULE</b>	3	PA; QL
<b>VFEND ORAL SUSPENSION RECONSTITUTED</b>	3	PA; QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>VFEND ORAL TABLET 50 MG</b>	3	PA; QL
voriconazole oral suspension reconstituted	1 or 1b*	PA; QL
voriconazole oral tablet	1 or 1b*	PA; QL
<b>*Antihistamines*</b>		
<b>*Antihistamines - Ethanolamines***</b>		
carbinoxamine maleate er oral suspension extended release	1 or 1b*	ST; QL
carbinoxamine maleate oral solution	1 or 1b*	ST
carbinoxamine maleate oral tablet 4 mg	1 or 1b*	ST
<b>CLEMASTINE FUMARATE ORAL SYRUP</b>	3	ST; QL
clemastine fumarate oral tablet 2.68 mg	1 or 1b*	ST; QL
diphenhydramine hcl injection solution	1 or 1b*	
diphenhydramine hcl oral elixir	1 or 1a*	QL
<b>*Antihistamines - Non-Sedating***</b>		
cetirizine hcl oral solution	1 or 1b*	QL; BE
<b>CLARINEX ORAL TABLET</b>	3	ST; QL
desloratadine oral tablet	1 or 1b*	QL
desloratadine oral tablet dispersible	1 or 1b*	QL
levocetirizine dihydrochloride oral solution	1 or 1b*	QL; BE
levocetirizine dihydrochloride oral tablet	1 or 1b*	QL; BE
<b>QUZYTIR INTRAVENOUS SOLUTION</b>	3	
<b>*Antihistamines - Phenothiazines***</b>		
<b>PHENERGAN INJECTION SOLUTION</b>	3	
promethazine hcl injection solution	1 or 1a*	
promethazine hcl oral solution 6.25 mg/5ml	1 or 1a*	QL
promethazine hcl oral tablet	1 or 1a*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
promethazine hcl rectal suppository 12.5 mg, 25 mg	1 or 1b*	QL
promethegan rectal suppository	1 or 1b*	QL
<b>*Antihistamines - Piperidines***</b>		
cyproheptadine hcl oral syrup	1 or 1b*	
cyproheptadine hcl oral tablet	1 or 1b*	
<b>*Antihyperlipidemics*</b>		
<b>*Acl Inhib-Intestinal Cholesterol Absorption Inhib Comb***</b>		
NEXLIZET ORAL TABLET	3	PA; QL
<b>*Adenosine Triphosphate-Citrate Lyase (Acl) Inhibitors***</b>		
NEXLETOL ORAL TABLET	3	PA; QL
<b>*Angiopoietin-Like Protein 3 (Angptl3) Inhibitors***</b>		
EVKEEZA INTRAVENOUS SOLUTION	3	PA; LD
<b>*Antihyperlipidemics - Misc.***</b>		
omega-3-acid ethyl esters oral capsule	1 or 1b*	PA; QL
VASCEPA ORAL CAPSULE	1 or 1b*	PA; QL
<b>*Bile Acid Sequestrants***</b>		
cholestyramine light oral packet	1 or 1b*	QL
cholestyramine light oral powder	1 or 1b*	QL
cholestyramine oral packet	1 or 1b*	QL
cholestyramine oral powder	1 or 1b*	QL
colesevelam hcl oral packet	3	QL
colesevelam hcl oral tablet	1 or 1b*	QL
COLESTID ORAL GRANULES	3	QL
COLESTID ORAL TABLET	3	QL
colestipol hcl oral granules	1 or 1b*	QL
colestipol hcl oral packet	1 or 1b*	QL
colestipol hcl oral tablet	1 or 1b*	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
prevalite oral packet	1 or 1b*	QL
prevalite oral powder	1 or 1b*	QL
QUESTRAN LIGHT ORAL POWDER	3	QL
QUESTRAN ORAL PACKET	3	QL
QUESTRAN ORAL POWDER	3	QL
<b>*Fibric Acid Derivatives***</b>		
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	1 or 1b*	QL
fenofibrate oral capsule	1 or 1b*	QL
fenofibrate oral tablet 120 mg, 40 mg	3	ST; QL
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1 or 1b*	QL
fenofibric acid oral capsule delayed release	1 or 1b*	QL
fenofibric acid oral tablet	1 or 1b*	QL
gemfibrozil oral tablet	1 or 1b*	QL
LIPOFEN ORAL CAPSULE	3	ST; QL
LOPID ORAL TABLET	3	ST; QL
TRICOR ORAL TABLET	3	ST; QL
<b>*Hmg Coa Reductase Inhibitors***</b>		
atorvastatin calcium oral tablet 10 mg, 20 mg	1 or 1b*	DO; \$0
atorvastatin calcium oral tablet 40 mg	1 or 1b*	DO
atorvastatin calcium oral tablet 80 mg	1 or 1b*	QL
fluvastatin sodium oral capsule	1 or 1b*	DO; \$0
lovastatin oral tablet 10 mg, 20 mg	1 or 1b*	DO; \$0
lovastatin oral tablet 40 mg	1 or 1b*	\$0; QL
pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg	1 or 1b*	DO; \$0
pravastatin sodium oral tablet 80 mg	1 or 1b*	\$0; QL
rosuvastatin calcium oral tablet 10 mg, 5 mg	1 or 1b*	DO; \$0
rosuvastatin calcium oral tablet 20 mg	1 or 1b*	DO

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Drug Name	Tier	Notes
rosuvastatin calcium oral tablet 40 mg	1 or 1b*	QL
simvastatin oral tablet 10 mg, 20 mg, 5 mg	1 or 1b*	DO; \$0
simvastatin oral tablet 40 mg	1 or 1b*	\$0; QL
simvastatin oral tablet 80 mg	1 or 1b*	PA; QL
<b>*Intest Cholest Absorp Inhib-Hmg Coa Reductase Inhib Comb***</b>		
ezetimibe-simvastatin oral tablet	1 or 1b*	ST; QL
<b>*Intestinal Cholesterol Absorption Inhibitors***</b>		
ezetimibe oral tablet	1 or 1b*	QL
<b>*Microsomal Triglyceride Transfer Protein Inhibitors***</b>		
JUXTAPIID ORAL CAPSULE 10 MG, 5 MG	3	PA; DO; LD
JUXTAPIID ORAL CAPSULE 20 MG, 30 MG	3	PA; QL; LD
<b>*Nicotinic Acid Derivatives***</b>		
niacin (antihyperlipidemic) oral tablet	1 or 1b*	ST; QL
niacin er (antihyperlipidemic) oral tablet extended release	1 or 1b*	ST; QL
niacor oral tablet	1 or 1b*	ST; QL
<b>*Pcsk9 Inhibitors***</b>		
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	3	QL
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
<b>*Small Interfering Rna (Sirna) Pcsk9 Inhibitors***</b>		
LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL; LD

Drug Name	Tier	Notes
<b>*Antihypertensives*</b>		
<b>*Ace Inhibitor &amp; Calcium Channel Blocker Combinations***</b>		
amlodipine besy-benazepril hcl oral capsule	1 or 1b*	QL
PRESTALIA ORAL TABLET	3	QL
trandolapril-verapamil hcl er oral tablet extended release	1 or 1b*	QL
<b>*Ace Inhibitors &amp; Thiazide/Thiazide-Like***</b>		
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG	3	QL
benazepril-hydrochlorothiazide oral tablet	1 or 1b*	QL
captopril-hydrochlorothiazide oral tablet	1 or 1b*	QL
enalapril-hydrochlorothiazide oral tablet	1 or 1b*	QL
fosinopril sodium-hctz oral tablet	1 or 1b*	QL
lisinopril-hydrochlorothiazide oral tablet	1 or 1b*	QL
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	QL
quinapril-hydrochlorothiazide oral tablet	1 or 1b*	QL
VASERETIC ORAL TABLET	3	QL
ZESTORETIC ORAL TABLET	3	QL
<b>*Ace Inhibitors***</b>		
benazepril hcl oral tablet	1 or 1a*	QL
captopril oral tablet	1 or 1b*	QL
enalapril maleate oral solution	1 or 1b*	QL
enalapril maleate oral tablet	1 or 1b*	QL
enalaprilat intravenous solution	1 or 1b*	
EPANED ORAL SOLUTION	3	QL
fosinopril sodium oral tablet	1 or 1b*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
lisinopril oral tablet	1 or 1a*	QL
<b>LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG</b>	3	QL
moexipril hcl oral tablet	1 or 1b*	QL
perindopril erbumine oral tablet	1 or 1b*	QL
<b>QBRELIS ORAL SOLUTION</b>	3	QL
quinapril hcl oral tablet	1 or 1b*	QL
ramipril oral capsule	1 or 1b*	QL
trandolapril oral tablet	1 or 1b*	QL
<b>*Agents For Pheochromocytoma***</b>		
<b>DEMSER ORAL CAPSULE</b>	3	PA; QL; LD; SP
<b>DIBENZYLINE ORAL CAPSULE</b>	3	PA; QL
metyrosine oral capsule	1 or 1b*	PA; QL; LD; SP
phenoxybenzamine hcl oral capsule	1 or 1b*	PA; QL
phentolamine mesylate injection solution reconstituted	1 or 1b*	
<b>*Angiotensin II Receptor Antag &amp; Ca Channel Blocker Comb***</b>		
amlodipine besylate-valsartan oral tablet	1 or 1b*	QL
amlodipine-olmesartan oral tablet	1 or 1b*	QL
telmisartan-amldipine oral tablet	1 or 1b*	QL
<b>*Angiotensin II Receptor Antag &amp; Thiazide/Thiazide-Like***</b>		
candesartan cilexetil-hctz oral tablet	1 or 1b*	QL
irbesartan-hydrochlorothiazide oral tablet	1 or 1b*	QL
losartan potassium-hctz oral tablet	1 or 1b*	QL
olmesartan medoxomil-hctz oral tablet	1 or 1b*	QL
telmisartan-hctz oral tablet	1 or 1b*	QL
valsartan-hydrochlorothiazide oral tablet	1 or 1b*	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Angiotensin II Receptor Antagonists***</b>		
candesartan cilexetil oral tablet 16 mg, 32 mg	1 or 1b*	QL
candesartan cilexetil oral tablet 4 mg, 8 mg	1 or 1b*	DO
irbesartan oral tablet 150 mg, 75 mg	1 or 1b*	DO
irbesartan oral tablet 300 mg	1 or 1b*	QL
losartan potassium oral tablet 100 mg, 50 mg	1 or 1b*	QL
losartan potassium oral tablet 25 mg	1 or 1b*	DO
olmesartan medoxomil oral tablet 20 mg, 5 mg	1 or 1b*	DO
olmesartan medoxomil oral tablet 40 mg	1 or 1b*	QL
telmisartan oral tablet 20 mg, 40 mg	1 or 1b*	DO
telmisartan oral tablet 80 mg	1 or 1b*	QL
valsartan oral solution	1 or 1b*	PA; QL
valsartan oral tablet 160 mg, 320 mg	1 or 1b*	QL
valsartan oral tablet 40 mg, 80 mg	1 or 1b*	DO
<b>*Angiotensin II Receptor Ant-Ca Channel Blocker-Thiazides***</b>		
amlodipine-valsartan-hctz oral tablet	1 or 1b*	QL
olmesartan-amldipine-hctz oral tablet	1 or 1b*	QL
<b>*Antiadrenergics - Centrally Acting***</b>		
<b>CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY</b>	3	QL
<b>CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY</b>	3	QL
<b>CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY</b>	3	QL
clonidine hcl oral tablet	1 or 1a*	QL
clonidine transdermal patch weekly	1 or 1b*	QL
guanfacine hcl oral tablet	1 or 1b*	
methyldopa oral tablet	1 or 1b*	QL

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Drug Name	Tier	Notes
<b>*Antiaudrenergics - Peripherally Acting***</b>		
CARDURA ORAL TABLET	3	QL
doxazosin mesylate oral tablet	1 or 1b*	QL
prazosin hcl oral capsule	1 or 1b*	
terazosin hcl oral capsule	1 or 1b*	QL
<b>*Antihypertensives - Misc.***</b>		
VECAMYL ORAL TABLET	3	
<b>*Beta Blocker &amp; Diuretic Combinations***</b>		
atenolol-chlorthalidone oral tablet	1 or 1b*	QL
bisoprolol-hydrochlorothiazide oral tablet	1 or 1b*	QL
metoprolol-hydrochlorothiazide oral tablet	1 or 1b*	QL
TENORETIC 100 ORAL TABLET	3	QL
TENORETIC 50 ORAL TABLET	3	QL
<b>*Direct Renin Inhibitors***</b>		
aliskiren fumarate oral tablet 150 mg	1 or 1b*	DO
aliskiren fumarate oral tablet 300 mg	1 or 1b*	QL
<b>*Endothelin Receptor Antagonists***</b>		
TRYVIO ORAL TABLET	3	PA; QL
<b>*Selective Aldosterone Receptor Antagonists (Saras)***</b>		
eplerenone oral tablet	1 or 1b*	
INSPRA ORAL TABLET	3	
<b>*Vasodilators***</b>		
hydralazine hcl injection solution	1 or 1b*	
hydralazine hcl oral tablet	1 or 1b*	
minoxidil oral tablet	1 or 1b*	

Drug Name	Tier	Notes
NIPRIDE RTU INTRAVENOUS SOLUTION 20-0.9 MG/100ML-%, 50-0.9 MG/100ML-%	3	
nitroprusside sodium intravenous solution	1 or 1b*	
nitroprusside sodium-nacl intravenous solution	1 or 1b*	
sodium nitroprusside intravenous solution	1 or 1b*	
<b>*Anti-Infective Agents - Misc.*</b>		
<b>*Anti-Infective Agents - Misc.***</b>		
IMPAVIDO ORAL CAPSULE	3	PA; QL
METRONIDAZOLE INTRAVENOUS SOLUTION 500 MG/100ML	3	
metronidazole oral capsule	1 or 1a*	
metronidazole oral tablet 250 mg, 500 mg	1 or 1a*	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	3	LD
PENTAM INJECTION SOLUTION RECONSTITUTED	3	LD
pentamidine isethionate inhalation solution reconstituted	1 or 1b*	LD
pentamidine isethionate injection solution reconstituted	3	LD
tinidazole oral tablet	1 or 1b*	QL
TRIMETHOPRIM ORAL TABLET	1 or 1a*	
XIFAXAN ORAL TABLET	3	PA; QL
<b>*Anti-Infective Misc. - Combinations***</b>		
BACTRIM DS ORAL TABLET	3	
BACTRIM ORAL TABLET	3	
sulfamethoxazole-trimethoprim intravenous solution	1 or 1b*	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
sulfamethoxazole-trimethoprim oral suspension	1 or 1a*	
sulfamethoxazole-trimethoprim oral tablet	1 or 1a*	
sulfatrim pediatric oral suspension	1 or 1a*	
<b>*Antiprotozoal Agents***</b>		
atovaquone oral suspension	1 or 1b*	
<b>LAMPIT ORAL TABLET</b>	3	
<b>MEPRON ORAL SUSPENSION</b>	3	
nitazoxanide oral tablet	1 or 1b*	QL
<b>*Beta-Lactamase Inhibitor - Combinations**</b>		
<b>XACDURO INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>*Carbapenem Combinations***</b>		
imipenem-cilastatin intravenous solution reconstituted	1 or 1b*	
<b>PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED 500-500 MG</b>	3	
<b>RECARBRIOS INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>*Carbapenems***</b>		
ertapenem sodium injection solution reconstituted	1 or 1b*	
meropenem intravenous solution reconstituted 1 gm, 500 mg	1 or 1b*	
meropenem intravenous solution reconstituted 2 gm	3	
<b>MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 500 MG/50ML</b>	3	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Chloramphenicals***</b>		
chloramphenicol sod succinate intravenous solution reconstituted	1 or 1b*	
<b>*Cyclic Lipopeptides***</b>		
<b>DAPTOMYCIN INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
daptomycin-sodium chloride intravenous solution	3	
<b>*Glycopeptides***</b>		
<b>DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>FIRVANQ ORAL SOLUTION RECONSTITUTED</b>	3	QL
<b>KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>VANCOCIN ORAL CAPSULE</b>	3	QL
vancomycin hcl in dextrose intravenous solution 1.5-5 gm/300ml-%	3	QL
<b>VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION 1-5 GM/200ML-%, 500-5 MG/100ML-%, 750-5 MG/150ML-%</b>	3	QL
<b>VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1-0.9 GM/200ML-%, 500-0.9 MG/100ML-%</b>	3	QL

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Drug Name	Tier	Notes	Drug Name	Tier	Notes	
<b>VANCOMYCIN HCL INTRAVENOUS SOLUTION 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML, 2000 MG/400ML, 500 MG/100ML, 750 MG/150ML</b>	3	QL	<b>CLINDAMYCIN PHOSPHATE IN NACL INTRAVENOUS SOLUTION</b>	3		
vancomycin hcl intravenous solution reconstituted 1 gm, 1.75 gm, 10 gm, 2 gm, 5 gm, 500 mg	3	QL	clindamycin phosphate injection solution 900 mg/6ml	1 or 1b*		
<b>VANCOMYCIN HCL INTRAVENOUS SOLUTION RECONSTITUTED 1.25 GM, 1.5 GM, 750 MG</b>	3	QL	<b>LINCOCIN INJECTION SOLUTION</b>	3		
vancomycin hcl intravenous solution reconstituted 100 gm	1 or 1b*	QL	lincomycin hcl injection solution	1 or 1b*		
vancomycin hcl oral capsule	1 or 1b*	QL	<b>*Monobactams***</b>			
vancomycin hcl oral solution reconstituted 25 mg/ml, 50 mg/ml	1 or 1b*	QL	<b>AZACTAM INJECTION SOLUTION RECONSTITUTED</b>	3		
<b>VANCOMYCIN HCL ORAL SOLUTION RECONSTITUTED 250 MG/5ML</b>	1 or 1b*	QL	aztreonam injection solution reconstituted	1 or 1b*		
<b>VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED 750 MG</b>	3		<b>CAYSTON INHALATION SOLUTION RECONSTITUTED</b>	3	QL; LD; SP	
<b>*Leprostatics***</b>			linezolid in sodium chloride intravenous solution	3		
dapsone oral tablet	1 or 1b*		linezolid intravenous solution 600 mg/300ml	1 or 1b*		
<b>*Lincosamides***</b>			linezolid oral suspension reconstituted	1 or 1b*	PA; QL	
<b>CLEOCIN ORAL CAPSULE</b>	3		linezolid oral tablet	1 or 1b*	PA; QL	
<b>CLEOCIN ORAL SOLUTION RECONSTITUTED</b>	3		<b>SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED</b>	3		
<b>CLEOCIN PHOSPHATE INJECTION SOLUTION</b>	3		<b>SIVEXTRO ORAL TABLET</b>	3	PA; QL	
clindamycin hcl oral capsule	1 or 1b*		<b>ZYVOX INTRAVENOUS SOLUTION 200 MG/100ML, 600 MG/300ML</b>	3		
clindamycin palmitate hcl oral solution reconstituted	1 or 1b*		<b>ZYVOX ORAL SUSPENSION RECONSTITUTED</b>	3	PA; QL	
clindamycin phosphate in d5w intravenous solution	1 or 1b*		<b>ZYVOX ORAL TABLET</b>	3	PA; QL	
<b>*Polymyxins***</b>			colistimethate sodium (cba) injection solution reconstituted	1 or 1b*		
<b>COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED</b>			<b>COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED</b>	3		

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Drug Name	Tier	Notes
polymyxin b sulfate injection solution reconstituted	1 or 1b*	
<b>*Urinary Anti-Infectives***</b>		
fosfomycin tromethamine oral packet	1 or 1b*	
<b>HIPREX ORAL TABLET</b>	3	
<b>MACROBID ORAL CAPSULE</b>	3	
<b>MACRODANTIN ORAL CAPSULE</b>	3	
methenamine hippurate oral tablet	1 or 1b*	
nitrofurantoin macrocrystal oral capsule	1 or 1b*	
nitrofurantoin monohyd macro oral capsule	1 or 1b*	
nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml	1 or 1b*	
nitrofurantoin oral suspension 50 mg/5ml	3	
<b>*Antimalarials*</b>		
<b>*Antimalarial Combinations***</b>		
atovaquone-proguanil hcl oral tablet	1 or 1b*	
<b>COARTEM ORAL TABLET</b>	3	
<b>MALARONE ORAL TABLET</b>	3	
<b>*Antimalarials***</b>		
<b>ARAKODA ORAL TABLET</b>	3	QL
<b>ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
chloroquine phosphate oral tablet	1 or 1a*	
<b>DARAPRIM ORAL TABLET</b>	3	PA; QL
<b>HYDROXYCHLOROQUINE SULFATE ORAL TABLET 100 MG, 300 MG, 400 MG</b>	1 or 1b*	QL
hydroxychloroquine sulfate oral tablet 200 mg	1 or 1b*	QL

Drug Name	Tier	Notes
<b>KRINTAFEL ORAL TABLET</b>	3	QL
mefloquine hcl oral tablet	1 or 1b*	QL
<b>PRIMAQUINE PHOSPHATE ORAL TABLET 26.3 (15 BASE) MG</b>	3	
pyrimethamine oral tablet	1 or 1b*	PA; QL
<b>QUALAQUIN ORAL CAPSULE</b>	3	PA; QL
quinine sulfate oral capsule	1 or 1b*	PA; QL
<b>*Antimyasthenic/Cholinergic Agents*</b>		
<b>*Antimyasthenic/Cholinergic Agents***</b>		
<b>BLOXIVERZ INTRAVENOUS SOLUTION</b>	3	
<b>BLOXIVERZ INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>	3	
<b>FIRDAPSE ORAL TABLET</b>	3	PA; QL; LD
<b>MESTINON ORAL SOLUTION</b>	3	
<b>MESTINON ORAL TABLET</b>	3	
<b>MESTINON ORAL TABLET EXTENDED RELEASE</b>	3	
<b>NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 10 MG/10ML, 5 MG/10ML</b>	3	
pyridostigmine bromide er oral tablet extended release	1 or 1b*	
pyridostigmine bromide oral solution	1 or 1b*	
pyridostigmine bromide oral tablet	1 or 1b*	
<b>REGONOL INTRAVENOUS SOLUTION</b>	3	
<b>*Antimycobacterial Agents*</b>		
<b>*Antimycobacterial Agents***</b>		
cycloserine oral capsule	1 or 1b*	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
ethambutol hcl oral tablet	1 or 1b*	
isoniazid injection solution	1 or 1a*	
isoniazid oral syrup	1 or 1a*	
isoniazid oral tablet	1 or 1a*	
<b>PRETOMANID ORAL TABLET</b>	3	
<b>PRIFTIN ORAL TABLET</b>	2	
pyrazinamide oral tablet	1 or 1b*	
rifabutin oral capsule	1 or 1b*	
<b>RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
rifampin intravenous solution reconstituted	1 or 1b*	
rifampin oral capsule	1 or 1b*	
<b>SIRTURO ORAL TABLET</b>	3	
<b>TRECATOR ORAL TABLET</b>	3	
<b>*Antineoplastics And Adjunctive Therapies*</b>		
<b>*Alkylating Agents***</b>		
<b>BELRAPZO INTRAVENOUS SOLUTION</b>	3	PA; LD; SP
bendamustine hcl intravenous solution	3	PA; LD; SP
bendamustine hcl intravenous solution reconstituted	1 or 1b*	PA; LD; SP
<b>BENDEKA INTRAVENOUS SOLUTION</b>	3	PA; LD; SP
busulfan intravenous solution	1 or 1b*	LD; SP
<b>BUSULFEX INTRAVENOUS SOLUTION</b>	3	LD; SP
carboplatin intravenous solution	1 or 1b*	LD; SP
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml	1 or 1b*	LD; SP
<b>CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	LD; SP
<b>MYLERAN ORAL TABLET</b>	2	LD

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
oxaliplatin intravenous solution	1 or 1b*	LD; SP
oxaliplatin intravenous solution reconstituted	1 or 1b*	LD; SP
paraplatin intravenous solution 1000 mg/100ml	1 or 1b*	LD; SP
<b>TEPADINA INJECTION SOLUTION RECONSTITUTED</b>	3	LD; SP
thiotepa injection solution reconstituted	1 or 1b*	LD; SP
<b>TREANDA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
vivimusta intravenous solution	3	PA; LD; SP
<b>ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>*Androgen Biosynthesis Inhibitors***</b>		
abiraterone acetate oral tablet	1 or 1b*	PA; QL; LD; SP
<b>YONSA ORAL TABLET</b>	2	PA; QL; LD; SP
<b>*Antiadrenals***</b>		
<b>LYSODREN ORAL TABLET</b>	2	QL; LD
<b>*Antiandrogens***</b>		
bicalutamide oral tablet	1 or 1b*	QL; LD
<b>CASODEX ORAL TABLET</b>	3	QL; LD
<b>ERLEADA ORAL TABLET</b>	2	PA; QL; LD; SP
<b>EULEXIN ORAL CAPSULE</b>	3	
nilutamide oral tablet	1 or 1b*	QL; LD
<b>NUBEQA ORAL TABLET</b>	2	PA; QL; LD; SP
<b>XTANDI ORAL CAPSULE</b>	2	PA; QL; LD; SP
<b>XTANDI ORAL TABLET</b>	2	PA; QL; LD; SP
<b>*Antiestrogens***</b>		
<b>FARESTON ORAL TABLET</b>	3	LD
<b>SOLTAMOX ORAL SOLUTION</b>	2	\$0; LD
tamoxifen citrate oral tablet	1 or 1b*	\$0; LD
toremifene citrate oral tablet	1 or 1b*	LD

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Antimetabolites***</b>		
<b>ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>ARRANON INTRAVENOUS SOLUTION</b>	3	LD; SP
<b>AXTLE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA
azacitidine injection suspension reconstituted	1 or 1b*	PA; LD; SP
capecitabine oral tablet	1 or 1b*	PA; LD; SP
cladribine intravenous solution 10 mg/10ml	1 or 1b*	LD; SP
clofarabine intravenous solution	1 or 1b*	LD; SP
cytarabine (pf) injection solution	1 or 1b*	LD; SP
cytarabine injection solution	1 or 1b*	LD; SP
decitabine intravenous solution reconstituted	1 or 1b*	LD; SP
floxuridine injection solution reconstituted	1 or 1b*	LD; SP
fludarabine phosphate intravenous solution 50 mg/2ml	1 or 1b*	LD; SP
fludarabine phosphate intravenous solution reconstituted	1 or 1b*	LD; SP
fluorouracil intravenous solution	1 or 1b*	LD; SP
<b>FOLOTYN INTRAVENOUS SOLUTION</b>	3	LD; SP
<b>GEMCITABINE HCL INTRAVENOUS SOLUTION</b>	3	LD; SP
gemcitabine hcl intravenous solution reconstituted	1 or 1b*	LD; SP
<b>JYLAMVO ORAL SOLUTION</b>	3	PA; LD
mercaptopurine oral tablet	1 or 1b*	LD
methotrexate intravenous solution	3	
methotrexate sodium (pf) injection solution 1 gm/40ml, 1000 mg/40ml, 250 mg/10ml, 50 mg/2ml	1 or 1b*	LD

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
methotrexate sodium injection solution 250 mg/10ml	1 or 1b*	LD
methotrexate sodium injection solution 50 mg/2ml	3	LD
methotrexate sodium injection solution reconstituted	1 or 1b*	LD
methotrexate sodium oral tablet	1 or 1b*	LD
nelarabine intravenous solution	1 or 1b*	LD; SP
<b>ONUREG ORAL TABLET</b>	3	PA; QL; LD; SP
pemetrexed dipotassium intravenous solution reconstituted	3	PA
pemetrexed disodium intravenous solution 1 gm/40ml, 100 mg/4ml, 500 mg/20ml	3	PA; LD; SP
pemetrexed disodium intravenous solution reconstituted	1 or 1b*	PA; LD; SP
pemetrexed ditromethamine intravenous solution reconstituted	3	PA; LD; SP
pemetrexed intravenous solution 1 gm/40ml, 100 mg/4ml	3	PA; LD; SP
pemetrexed intravenous solution 500 mg/20ml	3	PA; LD
<b>PEMFEXY INTRAVENOUS SOLUTION</b>	3	PA; LD
<b>PEMRYDI RTU INTRAVENOUS SOLUTION</b>	3	PA; LD; SP
<b>TABLOID ORAL TABLET</b>	2	LD
<b>TREXALL ORAL TABLET</b>	2	ST; LD
<b>VIDAZA INJECTION SUSPENSION RECONSTITUTED</b>	3	PA; LD; SP
<b>XATMEP ORAL SOLUTION</b>	3	PA; LD
<b>*Antineoplastic - Akt Inhibitors***</b>		
<b>TRUQAP ORAL TABLET 200 MG</b>	3	PA; QL; LD

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes			
TRUQAP ORAL TABLET THERAPY PACK	3	PA; QL; LD	RIABNI INTRAVENOUS SOLUTION	3	PA; LD; SP			
<b>*Antineoplastic - Alk Inhibitors***</b>								
ALECENSA ORAL CAPSULE	2	PA; QL; LD; SP	RITUXAN INTRAVENOUS SOLUTION 500 MG/50ML	3	PA; LD; SP			
ALUNBRIG ORAL TABLET	2	PA; QL; LD	RUXIENCE INTRAVENOUS SOLUTION	3	PA; LD; SP			
ALUNBRIG ORAL TABLET THERAPY PACK	2	PA; QL; LD	TRUXIMA INTRAVENOUS SOLUTION	3	PA; LD; SP			
LORBRENA ORAL TABLET	3	PA; QL; LD; SP	<b>*Antineoplastic - Anti-Cd22 Antibody-Drug Complex***</b>					
XALKORI ORAL CAPSULE	3	PA; QL; LD; SP	BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP			
XALKORI ORAL CAPSULE SPRINKLE	3	PA; QL; LD; SP	<b>*Antineoplastic - Anti-Cd30 Antibody-Drug Complex***</b>					
ZYKADIA ORAL TABLET	3	PA; QL; LD; SP	ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP			
<b>*Antineoplastic - Antibody Combinations***</b>								
OPDUALAG INTRAVENOUS SOLUTION	3	PA; LD; SP	<b>*Antineoplastic - Anti-Cd33 Antibody-Drug Complex***</b>					
<b>*Antineoplastic - Anti-Ccr4 Antibodies***</b>								
POTELIGEO INTRAVENOUS SOLUTION	3	LD; SP	MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG	3	PA; LD; SP			
<b>*Antineoplastic - Anti-Cd19 Antibodies***</b>								
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD	<b>*Antineoplastic - Anti-Cd38 Antibodies***</b>					
<b>*Antineoplastic - Anti-Cd19 Antibody-Drug Complex***</b>								
ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD	DARZALEX INTRAVENOUS SOLUTION	3	PA; LD; SP			
<b>*Antineoplastic - Anti-Cd20 Antibodies***</b>								
ARZERRA INTRAVENOUS CONCENTRATE	3	PA; LD; SP	SARCLISA INTRAVENOUS SOLUTION	3	PA; LD; SP			
GAZYVA INTRAVENOUS SOLUTION	3	PA; LD; SP	<b>*Antineoplastic - Anti-Cd79b Antibody-Drug Complex***</b>					
<b>*Antineoplastic - Anti-Cldn18.2 Antibodies***</b>								
<b>VYLOY INTRAVENOUS SOLUTION RECONSTITUTED</b>								

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Drug Name	Tier	Notes
<b>*Antineoplastic - Anti-Ctla-4 Antibodies***</b>		
IMJUDO INTRAVENOUS SOLUTION	3	PA; LD; SP
YERVOY INTRAVENOUS SOLUTION	3	PA; LD; SP
<b>*Antineoplastic - Anti-Gd2 Antibodies***</b>		
DANYELZA INTRAVENOUS SOLUTION	3	PA; LD
UNITUXIN INTRAVENOUS SOLUTION	3	LD
<b>*Antineoplastic - Anti-Her2 Agents***</b>		
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	3	LD; SP
HERCESSI INTRAVENOUS SOLUTION RECONSTITUTED	3	ST
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED	3	ST; LD; SP
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
MARGENZA INTRAVENOUS SOLUTION	3	PA; LD; SP
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED	3	ST; LD; SP
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED	3	ST; LD; SP
PERJETA INTRAVENOUS SOLUTION	3	PA; LD; SP
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED	3	ST; LD; SP
<b>TUKYSA ORAL TABLET</b>	3	PA; QL; LD

Drug Name	Tier	Notes
ZIIHERA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA
<b>*Antineoplastic - Anti-Nectin-4 Antibody-Drug Complex***</b>		
PADCEV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
<b>*Antineoplastic - Anti-Pd-1 Antibodies***</b>		
JEMPERLI INTRAVENOUS SOLUTION	3	PA; LD; SP
KEYTRUDA INTRAVENOUS SOLUTION	3	PA; LD; SP
LIBTAYO INTRAVENOUS SOLUTION	3	PA; LD
LOQTORZI INTRAVENOUS SOLUTION	3	PA; LD; SP
OPDIVO INTRAVENOUS SOLUTION	3	PA; LD; SP
TEVIMBRA INTRAVENOUS SOLUTION	3	PA; LD
ZYNZY INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
<b>*Antineoplastic - Anti-Pd-L1 Antibodies***</b>		
BAVENCIO INTRAVENOUS SOLUTION	3	PA; LD
IMFINZI INTRAVENOUS SOLUTION	3	PA; LD; SP
TECENTRIQ INTRAVENOUS SOLUTION	3	PA; LD; SP
<b>*Antineoplastic - Anti-Slamf7 Antibodies***</b>		
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
*Antineoplastic - Anti-Tf Antibody-Drug Complex***			<b>TALVEY SUBCUTANEOUS SOLUTION</b>	3	PA; LD
<b>TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP	<b>TECVAYLI SUBCUTANEOUS SOLUTION</b>	3	PA; LD
*Antineoplastic - Bcl-2 Inhibitors***			*Antineoplastic - Braf Kinase Inhibitors***		
<b>VENCLEXTA ORAL TABLET</b>	3	PA; QL; LD	<b>BRAFTOVI ORAL CAPSULE 75 MG</b>	3	PA; QL; LD; SP
<b>VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK</b>	3	PA; QL; LD	<b>OJEMDA ORAL SUSPENSION RECONSTITUTED</b>	3	PA; QL; LD
*Antineoplastic - Bcr-Abl Kinase Inhibitors***			<b>OJEMDA ORAL TABLET 100 MG</b>	3	PA; QL; LD
<b>BOSULIF ORAL CAPSULE</b>	2	PA; QL; LD; SP	<b>TAFINLAR ORAL CAPSULE</b>	3	PA; QL; LD; SP
<b>BOSULIF ORAL TABLET</b>	2	PA; QL; LD; SP	<b>TAFINLAR ORAL TABLET SOLUBLE</b>	3	PA; QL; LD; SP
dasatinib oral tablet	1 or 1b*	PA; QL; LD; SP	<b>ZELBORAF ORAL TABLET</b>	2	PA; QL; LD; SP
<b>ICLUSIG ORAL TABLET</b>	3	PA; QL; LD	*Antineoplastic - Btk Inhibitors***		
imatinib mesylate oral tablet	1 or 1b*	PA; QL; LD; SP	<b>BRUKINSA ORAL CAPSULE</b>	3	PA; QL; LD
<b>SCEMBLIX ORAL TABLET</b>	3	PA; QL; LD	<b>CALQUENCE ORAL TABLET</b>	2	PA; QL; LD
<b>TASIGNA ORAL CAPSULE</b>	2	PA; QL; LD; SP	<b>IMBRUVICA ORAL CAPSULE</b>	2	PA; QL; LD
*Antineoplastic - Bispecific T-Cell Engagers***			<b>IMBRUVICA ORAL SUSPENSION</b>	2	PA; QL; LD
<b>BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP	<b>IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG</b>	2	PA; QL; LD
<b>COLUMVI INTRAVENOUS SOLUTION</b>	3	PA; LD; SP	<b>JAYPIRCA ORAL TABLET</b>	3	PA; QL; LD; SP
<b>ELREXFIO SUBCUTANEOUS SOLUTION</b>	3	PA; LD	*Antineoplastic - Egfr Inhibitors***		
<b>EPKINLY SUBCUTANEOUS SOLUTION</b>	3	PA; LD	<b>ERBITUX INTRAVENOUS SOLUTION</b>	3	PA; LD; SP
<b>IMDELLTRA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP	erlotinib hcl oral tablet	1 or 1b*	PA; QL; LD; SP
<b>KIMMTRAK INTRAVENOUS SOLUTION</b>	3	PA; LD	gefitinib oral tablet	1 or 1b*	PA; QL; LD; SP
<b>LUNSUMIO INTRAVENOUS SOLUTION</b>	3	PA; LD; SP	<b>GILOTrif ORAL TABLET</b>	3	PA; QL; LD
			<b>IRESSA ORAL TABLET</b>	3	PA; QL; LD; SP
			<b>LAZCLUZE ORAL TABLET</b>	3	PA; QL; LD

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
PORTRAZZA INTRAVENOUS SOLUTION	3	LD; SP	ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
TAGRISSO ORAL TABLET	3	PA; QL; LD; SP	romidepsin intravenous solution reconstituted	1 or 1b*	PA; LD; SP
VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML	3	PA; LD; SP	ZOLINZA ORAL CAPSULE	2	PA; QL; LD; SP
VIZIMPRO ORAL TABLET	3	PA; QL; LD; SP	<b>*Antineoplastic - Hormonal And Related Agent Combinations***</b>		
<b>*Antineoplastic - Fgfr Kinase Inhibitors***</b>			AKEEGA ORAL TABLET	3	PA; QL; LD
BALVERSA ORAL TABLET	3	PA; QL; LD; SP	<b>*Antineoplastic - Immunomodulators***</b>		
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD	POMALYST ORAL CAPSULE	3	PA; QL; LD; SP
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD	<b>*Antineoplastic - Kras Inhibitors***</b>		
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD	KRAZATI ORAL TABLET	3	PA; QL; LD
PEMAZYRE ORAL TABLET	3	PA; QL; LD	LUMAKRAS ORAL TABLET 120 MG, 320 MG	3	PA; QL; LD; SP
<b>*Antineoplastic - Gamma Secretase Inhibitors***</b>			LUMAKRAS ORAL TABLET 240 MG	3	PA; QL; SP
OGSIVEO ORAL TABLET	3	PA; QL; LD	<b>*Antineoplastic - Mek Inhibitors***</b>		
<b>*Antineoplastic - Hedgehog Pathway Inhibitors***</b>			COTELLIC ORAL TABLET	3	PA; QL; LD; SP
DAURISMO ORAL TABLET	3	PA; QL; LD; SP	KOSELUGO ORAL CAPSULE	3	PA; QL; LD
ERIVEDGE ORAL CAPSULE	2	PA; QL; LD; SP	MEKINIST ORAL SOLUTION RECONSTITUTED	3	PA; QL; LD; SP
ODOMZO ORAL CAPSULE	3	PA; QL; LD; SP	MEKINIST ORAL TABLET	3	PA; QL; LD; SP
<b>*Antineoplastic - Hif-2- Alpha Inhibitors***</b>			MEKTOVI ORAL TABLET	3	PA; QL; LD; SP
WELIREG ORAL TABLET	3	PA; QL; LD	<b>*Antineoplastic - Menin Inhibitors***</b>		
<b>*Antineoplastic - Histone Deacetylase Inhibitors***</b>			REVUFORJ ORAL TABLET 110 MG, 160 MG	3	PA; QL
BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	<b>*Antineoplastic - Met Inhibitors***</b>		
			TABRECTA ORAL TABLET	3	PA; QL; LD; SP
			TEPMETKO ORAL TABLET	3	PA; QL; LD

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Drug Name	Tier	Notes
<b>*Antineoplastic - Methyltransferase Inhibitors***</b>		
TAZVERIK ORAL TABLET	3	PA; QL; LD
<b>*Antineoplastic - Mtor Kinase Inhibitors***</b>		
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1 or 1b*	PA; LD; SP
everolimus oral tablet soluble	1 or 1b*	PA; LD; SP
FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA; LD
temsirolimus intravenous solution	1 or 1b*	PA; LD; SP
TORISEL INTRAVENOUS SOLUTION	3	PA; LD; SP
TORPENZ ORAL TABLET	1 or 1b*	PA; LD; SP
<b>*Antineoplastic - Multikinase Inhibitors***</b>		
CABOMETYX ORAL TABLET	2	PA; QL; LD; SP
CAPRELSA ORAL TABLET	2	PA; QL; LD
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	3	PA; QL; LD; SP
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	3	PA; QL; LD; SP
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	3	PA; QL; LD; SP
FOTIVDA ORAL CAPSULE	3	PA; QL; LD
lapatinib ditosylate oral tablet	1 or 1b*	PA; QL; LD; SP
NERLYNX ORAL TABLET	3	PA; QL; LD; SP
NEXAVAR ORAL TABLET	3	PA; QL; LD; SP
pazopanib hcl oral tablet	1 or 1b*	PA; QL; LD; SP
QINLOCK ORAL TABLET	3	PA; QL; LD
RYDAPT ORAL CAPSULE	3	PA; QL; LD; SP
sorafenib tosylate oral tablet	1 or 1b*	PA; QL; LD; SP

Drug Name	Tier	Notes
STIVARGA ORAL TABLET	2	PA; QL; LD; SP
sunitinib malate oral capsule	1 or 1b*	PA; QL; LD; SP
SUTENT ORAL CAPSULE	3	PA; QL; LD; SP
TURALIO ORAL CAPSULE 125 MG	3	PA; QL; LD
VANFLYTA ORAL TABLET	3	PA; QL; LD
XOSPATA ORAL TABLET	3	PA; QL; LD; SP
<b>*Antineoplastic - Multiple Receptor Antibodies***</b>		
BIZENGRI (750 MG DOSE) INTRAVENOUS SOLUTION THERAPY PACK	3	PA; QL
RYBREVANT INTRAVENOUS SOLUTION	3	PA; LD; SP
<b>*Antineoplastic - Pdgfr-Alpha Inhibitors***</b>		
AYVAKIT ORAL TABLET	3	PA; QL; LD
<b>*Antineoplastic - Proteasome Inhibitors***</b>		
bortezomib injection solution reconstituted 1 mg, 2.5 mg	3	PA; LD; SP
bortezomib injection solution reconstituted 3.5 mg	1 or 1b*	PA; LD; SP
BORUZU INJECTION SOLUTION	3	PA; SP
KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
NINLARO ORAL CAPSULE	3	PA; QL; LD; SP
VELCADE INJECTION SOLUTION RECONSTITUTED	3	PA; LD; SP
<b>*Antineoplastic - Ret Inhibitors***</b>		
GAVRETO ORAL CAPSULE	3	PA; QL; LD
RETEVMO ORAL TABLET	3	PA; QL; LD; SP

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
*Antineoplastic - Tropomyosin Receptor Kinase Inhibitors***			dactinomycin intravenous solution reconstituted	1 or 1b*	LD; SP
AUGTYRO ORAL CAPSULE 160 MG	3	QL; SP	DAUNORUBICIN HCL INTRAVENOUS SOLUTION	3	LD; SP
AUGTYRO ORAL CAPSULE 40 MG	3	PA; QL; LD; SP	DOXIL INTRAVENOUS SUSPENSION	3	PA; LD; SP
ROZLYTREK ORAL CAPSULE	2	PA; QL; LD; SP	doxorubicin hcl intravenous solution	3	LD; SP
ROZLYTREK ORAL PACKET	2	PA; QL; LD; SP	doxorubicin hcl intravenous solution reconstituted	1 or 1b*	LD; SP
VITRAKVI ORAL CAPSULE	2	PA; QL; LD; SP	doxorubicin hcl liposomal intravenous suspension	1 or 1b*	PA; LD; SP
VITRAKVI ORAL SOLUTION	2	PA; QL; LD; SP	ELLENCE INTRAVENOUS SOLUTION	3	PA; LD; SP
*Antineoplastic - Xpo1 Inhibitors***			IDAMYCIN PFS INTRAVENOUS SOLUTION	3	LD; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	3	PA; QL; LD	idarubicin hcl intravenous solution	1 or 1b*	LD; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; QL; LD	JELMYTO SOLUTION RECONSTITUTED	3	PA; LD
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; QL; LD	mitomycin intravenous solution reconstituted	1 or 1b*	LD; SP
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	3	PA; QL; LD	mitomycin intravesical solution prefilled syringe	3	LD
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; QL; LD	mitoxantrone hcl intravenous concentrate	1 or 1b*	LD; SP
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; QL; LD	mutamycin intravenous solution reconstituted 40 mg, 5 mg	1 or 1b*	LD; SP
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	3	PA; QL; LD	valrubicin intravesical solution	1 or 1b*	LD; SP
*Antineoplastic Antibiotics***			VALSTAR INTRAVESICAL SOLUTION	3	LD; SP
adriamycin intravenous solution reconstituted 50 mg	1 or 1b*	LD; SP	*Antineoplastic -Antibody For Radiopharmaceutical Therapy***		
bleomycin sulfate injection solution reconstituted	1 or 1b*	LD; SP	ZEVALIN Y-90 INTRAVENOUS KIT	3	PA; LD
			*Antineoplastic Antibody- Drug Complexes***		
			ELAHERE INTRAVENOUS SOLUTION	3	PA; LD
			ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP

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Drug Name	Tier	Notes
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
*Antineoplastic Combinations***		
DARZALEX FASPRO SUBCUTANEOUS SOLUTION	3	PA; LD; SP
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	3	LD; SP
INQOVI ORAL TABLET	3	PA; QL; LD; SP
LONSURF ORAL TABLET	3	PA; LD; SP
PHESGO SUBCUTANEOUS SOLUTION	3	PA; LD; SP
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	3	LD; SP
TECENTRIQ HYBREZA SUBCUTANEOUS SOLUTION	3	PA; LD; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44-100 MG	3	LD; SP
*Antineoplastic Enzymes***		
ASPARLAS INTRAVENOUS SOLUTION	3	PA; LD
ONCASPAR INJECTION SOLUTION	3	PA; LD
RYLAZE INTRAMUSCULAR SOLUTION	3	PA; LD; SP
*Antineoplastic Radiopharmaceuticals***		
LUTATHERA INTRAVENOUS SOLUTION	3	PA; LD
PLUVICTO INTRAVENOUS SOLUTION	3	PA; LD
STRONTIUM CHLORIDE SR-89 INTRAVENOUS SOLUTION	3	
XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML	3	PA; LD

Drug Name	Tier	Notes
*Antineoplastics - Interleukins & Agonists***		
ANKTIVA INTRAVESICAL SOLUTION	3	PA; LD
ELZONRIS INTRAVENOUS SOLUTION	3	PA; LD
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
*Antineoplastics - Photoactivated Agents***		
PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED	3	LD
UVADEX EXTRACORPOREAL SOLUTION	3	
*Antineoplastics Misc.***		
ACTIMMUNE SUBCUTANEOUS SOLUTION	3	PA; LD; SP
arsenic trioxide intravenous solution	1 or 1b*	LD; SP
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD
dacarbazine intravenous solution reconstituted	1 or 1b*	LD; SP
HYDREA ORAL CAPSULE	3	LD
hydroxyurea oral capsule	1 or 1b*	LD
MATULANE ORAL CAPSULE	2	LD
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	3	LD; SP
TRISENOX INTRAVENOUS SOLUTION 12 MG/6ML	3	LD; SP
*Aromatase Inhibitors***		
anastrozole oral tablet	1 or 1b*	\$0; LD

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Drug Name	Tier	Notes
AROMASIN ORAL TABLET	3	LD
exemestane oral tablet	1 or 1b*	\$0; LD
FEMARA ORAL TABLET	3	LD
letrozole oral tablet	1 or 1b*	\$0; LD
<b>*Carboxypeptidase Enzyme Agents***</b>		
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED	3	LD
<b>*Cardiac Protective Agents***</b>		
dexrazoxane hcl intravenous solution reconstituted	1 or 1b*	LD; SP
dexrazoxane intravenous solution reconstituted 250 mg	1 or 1b*	LD; SP
<b>*Chemotherapy Adjuncts - Hyperuricemia Agents***</b>		
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
<b>*Chemotherapy Adjuncts - Keratinocyte Growth Factors***</b>		
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED 5.16 MG	3	LD; SP
<b>*Cyclin-Dependent Kinases (Cdk) Inhibitors***</b>		
IBRANCE ORAL CAPSULE	2	PA; QL; LD; SP
IBRANCE ORAL TABLET	2	PA; QL; LD; SP
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	2	PA; QL; LD; SP
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	2	PA; QL; LD; SP
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	2	PA; QL; LD; SP
VERZENIO ORAL TABLET	3	PA; QL; LD; SP

Drug Name	Tier	Notes
<b>*Estrogen Receptor Antagonist***</b>		
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
fulvestrant intramuscular solution prefilled syringe	1 or 1b*	PA; LD; SP
<b>*Folic Acid Antagonists Rescue Agents***</b>		
KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED 175 MG	3	PA; LD; SP
leucovorin calcium injection solution	1 or 1b*	LD
leucovorin calcium injection solution reconstituted	1 or 1b*	LD
leucovorin calcium oral tablet	1 or 1b*	
levoleucovorin calcium intravenous solution reconstituted 50 mg	1 or 1b*	PA; LD
levoleucovorin calcium pf intravenous solution	1 or 1b*	PA; LD
<b>*Gonadotropin Releasing Hormone (Gnrh) Antagonists***</b>		
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	3	PA; QL; LD; SP
ORGOVYX ORAL TABLET	3	PA; QL; LD
<b>*Imidazotetrazines***</b>		
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED	2	PA; LD; SP
temozolomide oral capsule	1 or 1b*	PA; QL; LD; SP
<b>*Isocitrate Dehydrogenase 1 &amp; 2 (Idh1 &amp; Idh2) Inhibitors***</b>		
VORANIGO ORAL TABLET	3	PA; QL; LD

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>*Isocitrate Dehydrogenase-1 (Idh1) Inhibitors***</b>					
REZLIDHIA ORAL CAPSULE	3	PA; QL; LD	TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PA; QL; LD; SP
TIBSOVO ORAL TABLET	3	PA; QL; LD	ZOLADEX SUBCUTANEOUS IMPLANT	3	PA; QL; LD; SP
<b>*Isocitrate Dehydrogenase-2 (Idh2) Inhibitors***</b>					
IDHIFA ORAL TABLET	3	PA; QL; LD; SP	<b>*Mitotic Inhibitors***</b>		
<b>*Janus Associated Kinase (Jak) Inhibitors***</b>					
INREBIC ORAL CAPSULE	3	PA; QL; LD; SP	ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA; LD; SP
JAKAFI ORAL TABLET	2	PA; QL; LD; SP	DOCETAXEL INTRAVENOUS CONCENTRATE 160 MG/8ML, 20 MG/ML, 80 MG/4ML	3	LD; SP
OJJAARA ORAL TABLET	3	QL; LD	DOCETAXEL INTRAVENOUS SOLUTION 160 MG/16ML, 20 MG/2ML, 80 MG/8ML	3	LD; SP
VONJO ORAL CAPSULE	3	PA; QL; LD	DOCIVYX INTRAVENOUS SOLUTION	3	LD; SP
<b>*Lhrh Analogs***</b>					
CAMCEVI SUBCUTANEOUS PREFILLED SYRINGE	3	PA; QL; LD	eribulin mesylate intravenous solution	1 or 1b*	PA; LD; SP
ELIGARD SUBCUTANEOUS KIT	3	PA; QL; LD; SP	ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
leuprolide acetate (3 month) intramuscular injectable	3	PA; QL; LD; SP	etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1 or 1b*	LD; SP
leuprolide acetate injection kit	1 or 1b*	PA; LD; SP	etoposide oral capsule	1 or 1b*	LD; SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	3	PA; QL; LD; SP	HALAVEN INTRAVENOUS SOLUTION	3	PA; LD; SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	QL; LD; SP	IXEMPRADA KIT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	3	PA; QL; LD; SP	JEVTANA INTRAVENOUS SOLUTION	3	PA; LD; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	QL; LD; SP	paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml	1 or 1b*	LD; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	2	QL; LD; SP			
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	2	QL; LD; SP			

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
PACLITAXEL PROTEIN-BOUND PART INTRAVENOUS SUSPENSION RECONSTITUTED	3	PA; LD; SP	IFEX INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
vinblastine sulfate intravenous solution	1 or 1b*	LD; SP	ifosfamide intravenous solution	1 or 1b*	LD; SP
vincristine sulfate intravenous solution	1 or 1b*	LD; SP	ifosfamide intravenous solution reconstituted 1 gm	1 or 1b*	LD; SP
vinorelbine tartrate intravenous solution	1 or 1b*	LD; SP	IFOSFAMIDE INTRAVENOUS SOLUTION RECONSTITUTED 3 GM	3	LD; SP
<b>*Myeloprotective Agents***</b>			LEUKERAN ORAL TABLET	2	LD
COSELA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD	melphalan hcl intravenous solution reconstituted	1 or 1b*	LD; SP
<b>*Nitrogen Mustards And Related Analogues***</b>			<b>*Nitrosoureas***</b>		
cyclophosphamide injection solution reconstituted	1 or 1b*	LD; SP	carmustine intravenous solution reconstituted 100 mg	1 or 1b*	LD; SP
cyclophosphamide intravenous solution 1 gm/2ml, 1000 mg/10ml, 2 gm/4ml, 2000 mg/20ml, 500 mg/5ml	3	LD; SP	GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	3	PA; LD; SP
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 1 GM/5ML, 500 MG/2.5ML	3	LD; SP	GLIADEL WAFER IMPLANT WAVER	3	
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 2 GM/10ML	3	LD	<b>*Oligonucleotide Telomerase Inhibitors***</b>		
cyclophosphamide intravenous solution 500 mg/ml	3	LD	RYTELO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD
cyclophosphamide oral capsule	1 or 1b*	LD; SP	<b>*Ornithine Decarboxylase (Odc) Inhibitors***</b>		
CYCLOPHOSPHAMIDE ORAL TABLET	3	LD	IWILFIN ORAL TABLET	3	PA; QL; LD
EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP	<b>*Otoprotective Agents***</b>		
HEPZATO W/50MM CATHETER INTRA-ARTERIAL SOLUTION RECONSTITUTED	3	LD	PEDMARK INTRAVENOUS SOLUTION	3	PA; LD
HEPZATO W/62MM CATHETER INTRA-ARTERIAL SOLUTION RECONSTITUTED	3	LD	<b>*Phosphatidylinositol 3-Kinase (Pi3k) Inhibitors***</b>		
			COPIKTRA ORAL CAPSULE	3	PA; QL; LD; SP
			ITOVEBI ORAL TABLET	3	PA; QL; SP
			PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
			PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
			PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP

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Drug Name	Tier	Notes
ZYDELIG ORAL TABLET	3	PA; QL; LD; SP
<b>*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors***</b>		
LYNPARZA ORAL TABLET	3	PA; QL; LD; SP
RUBRACA ORAL TABLET	3	PA; QL; LD; SP
TALZENNA ORAL CAPSULE	3	PA; QL; LD; SP
ZEJULA ORAL TABLET	3	PA; QL; LD; SP
<b>*Progestins- Antineoplastic***</b>		
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1 or 1b*	LD
megestrol acetate oral tablet	1 or 1b*	LD
<b>*Retinoids***</b>		
tretinoïn oral capsule	1 or 1b*	LD
<b>*Selective Estrogen Receptor Degraders***</b>		
ORSERDU ORAL TABLET	3	PA; QL; LD
<b>*Selective Retinoid X Receptor Agonists***</b>		
bexarotene oral capsule	1 or 1b*	PA; QL; LD; SP
<b>*Tetrahydroisoquinolines*</b> ***		
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
<b>*Topoisomerase I Inhibitors - Antibody-Drug Complex***</b>		
TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD
<b>*Topoisomerase I Inhibitors***</b>		
CAMPTOSAR INTRAVENOUS SOLUTION	3	LD; SP
HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP

Drug Name	Tier	Notes
HYCAMTIN ORAL CAPSULE	2	PA; LD; SP
irinotecan hcl intravenous solution	1 or 1b*	LD; SP
ONIVYDE INTRAVENOUS INJECTABLE	3	LD; SP
TOPOTECAN HCL INTRAVENOUS SOLUTION	3	LD; SP
topotecan hcl intravenous solution reconstituted	1 or 1b*	LD; SP
<b>*Urinary Tract Protective Agents***</b>		
mesna intravenous solution	1 or 1b*	PA; LD
mesna oral tablet	1 or 1b*	PA; LD
MESNEX INTRAVENOUS SOLUTION	3	PA; LD
<b>*Vascular Endothelial Growth Factor (Vegf) Inhibitors***</b>		
AVASTIN INTRAVENOUS SOLUTION	3	PA; LD; SP
CYRAMZA INTRAVENOUS SOLUTION	3	PA; LD; SP
FRUZAQLA ORAL CAPSULE	3	PA; QL; LD
INLYTA ORAL TABLET	2	PA; QL; LD; SP
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP

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Drug Name	Tier	Notes
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	2	PA; QL; LD; SP
MVASI INTRAVENOUS SOLUTION	3	PA; LD; SP
ZALTRAP INTRAVENOUS SOLUTION	3	PA; LD; SP
<b>*Antiparkinson And Related Therapy Agents*</b>		
<b>*Adenosine Receptor Antagonist***</b>		
NOURIANZ ORAL TABLET	3	PA; QL; LD; SP
<b>*Antiparkinson Anticholinergics***</b>		
benztropine mesylate injection solution	1 or 1a*	
benztropine mesylate oral tablet	1 or 1a*	
trihexyphenidyl hcl oral solution	1 or 1a*	
trihexyphenidyl hcl oral tablet	1 or 1a*	
<b>*Antiparkinson Dopaminergics***</b>		
amantadine hcl oral capsule	1 or 1b*	QL
amantadine hcl oral solution	1 or 1b*	QL
amantadine hcl oral tablet	1 or 1b*	QL
bromocriptine mesylate oral capsule	1 or 1b*	
bromocriptine mesylate oral tablet	1 or 1b*	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG	3	PA; QL
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 68.5 MG	3	PA; DO
INBRIJA INHALATION CAPSULE	3	PA; QL; LD
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG	3	PA; DO

Drug Name	Tier	Notes
PARLODEL ORAL CAPSULE	3	
PARLODEL ORAL TABLET	3	
<b>*Antiparkinson Monoamine Oxidase Inhibitors***</b>		
AZILECT ORAL TABLET	3	QL
rasagiline mesylate oral tablet	1 or 1b*	QL
selegiline hcl oral capsule	1 or 1b*	
selegiline hcl oral tablet	1 or 1b*	
XADAGO ORAL TABLET	3	PA; QL
ZELAPAR ORAL TABLET DISPERSIBLE	3	PA; QL
<b>*Central/Peripheral Comt Inhibitors***</b>		
TASMAR ORAL TABLET 100 MG	3	PA; QL
tolcapone oral tablet	1 or 1b*	PA; QL
<b>*Decarboxylase Inhibitors***</b>		
carbidopa oral tablet	1 or 1b*	
LODOSYN ORAL TABLET	3	
<b>*Levodopa Combinations***</b>		
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	1 or 1b*	
carbidopa-levodopa oral tablet	1 or 1b*	
carbidopa-levodopa oral tablet dispersible	1 or 1b*	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	1 or 1b*	
DHIVY ORAL TABLET 25-100 MG	3	
DUOPA ENTERAL SUSPENSION	3	PA; LD; SP
RYTARY ORAL CAPSULE EXTENDED RELEASE	3	QL

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Drug Name	Tier	Notes
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	
<b>*Nonergoline Dopamine Receptor Agonists***</b>		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL; LD; SP
apomorphine hcl subcutaneous solution cartridge	3	PA; QL; LD; SP
NEUPRO TRANSDERMAL PATCH 24 HOUR	3	QL
pramipexole dihydrochloride er oral tablet extended release 24 hour	1 or 1b*	QL
pramipexole dihydrochloride oral tablet	1 or 1b*	QL
ropinirole hcl er oral tablet extended release 24 hour	1 or 1b*	
ropinirole hcl oral tablet	1 or 1b*	
<b>*Peripheral Comt Inhibitors***</b>		
entacapone oral tablet	1 or 1b*	QL
ONGENTYS ORAL CAPSULE	3	PA; QL
<b>*Antipsychotics/Antimanic Agents*</b>		
<b>*Antimanic Agents***</b>		
lithium carbonate er oral tablet extended release	1 or 1a*	QL
lithium carbonate oral capsule	1 or 1a*	QL
lithium carbonate oral tablet	1 or 1a*	QL
lithium oral solution	1 or 1b*	
<b>*Antipsychotics - Misc.***</b>		
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG	3	DO; AL
CAPLYTA ORAL CAPSULE 42 MG	3	QL; AL
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	3	QL
lurasidone hcl oral tablet 120 mg	1 or 1b*	AL
lurasidone hcl oral tablet 20 mg, 40 mg	1 or 1b*	DO; AL

Drug Name	Tier	Notes
lurasidone hcl oral tablet 60 mg, 80 mg	1 or 1b*	QL; AL
NUPLAZID ORAL CAPSULE	3	PA; QL; LD; SP
NUPLAZID ORAL TABLET 10 MG	3	PA; QL; LD; SP
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG	2	DO; AL
VRAYLAR ORAL CAPSULE 4.5 MG, 6 MG	2	QL; AL
ziprasidone hcl oral capsule 20 mg, 40 mg	1 or 1b*	DO; AL
ziprasidone hcl oral capsule 60 mg, 80 mg	1 or 1b*	QL; AL
ziprasidone mesylate intramuscular solution reconstituted	1 or 1b*	QL; AL
<b>*Benzisoxazoles***</b>		
FANAPT ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG	3	ST; DO
FANAPT ORAL TABLET 10 MG, 12 MG, 8 MG	3	ST; QL
FANAPT TITRATION PACK ORAL TABLET	3	ST; QL
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL; AL
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL; AL
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	3	QL; AL
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg	1 or 1b*	DO
paliperidone er oral tablet extended release 24 hour 6 mg, 9 mg	1 or 1b*	QL
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	3	QL; AL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
risperidone microspheres er intramuscular suspension reconstituted er	1 or 1b*	QL; AL
risperidone oral solution	1 or 1b*	QL; AL
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	1 or 1b*	DO; AL
risperidone oral tablet 3 mg, 4 mg	1 or 1b*	QL; AL
risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg	1 or 1b*	DO; AL
risperidone oral tablet dispersible 3 mg, 4 mg	1 or 1b*	QL; AL
<b>*Butyrophenones***</b>		
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1 or 1b*	QL; AL
haloperidol lactate injection solution 5 mg/ml	1 or 1b*	AL
haloperidol lactate oral concentrate 2 mg/ml	1 or 1b*	QL; AL
haloperidol oral tablet 0.5 mg, 1 mg, 2 mg	1 or 1b*	DO; AL
haloperidol oral tablet 10 mg, 20 mg, 5 mg	1 or 1b*	QL; AL
<b>*Dibenzodiazepines***</b>		
clozapine oral tablet 100 mg, 200 mg	1 or 1b*	QL; AL
clozapine oral tablet 25 mg, 50 mg	1 or 1b*	DO; AL
clozapine oral tablet dispersible 100 mg, 150 mg, 200 mg	1 or 1b*	QL; AL
clozapine oral tablet dispersible 12.5 mg, 25 mg	1 or 1b*	DO; AL
<b>VERSACLOZ ORAL SUSPENSION</b>	3	QL; AL
<b>*Dibenzo-Oxepino Pyrroles***</b>		
asenapine maleate sublingual tablet sublingual 10 mg	1 or 1b*	QL; AL
asenapine maleate sublingual tablet sublingual 2.5 mg, 5 mg	1 or 1b*	DO; AL
<b>SECUADO TRANSDERMAL PATCH 24 HOUR</b>	3	ST; QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Dibenzothiazepines***</b>		
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg	1 or 1b*	DO; AL
quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg	1 or 1b*	QL; AL
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1 or 1b*	DO; AL
quetiapine fumarate oral tablet 150 mg, 300 mg, 400 mg	1 or 1b*	QL; AL
<b>*Dibenzoxazepines***</b>		
<b>ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED</b>	3	AL
loxpipine succinate oral capsule 10 mg, 25 mg, 5 mg	1 or 1b*	DO; AL
loxpipine succinate oral capsule 50 mg	1 or 1b*	QL; AL
<b>*Dihydroindolones***</b>		
molindone hcl oral tablet 10 mg, 5 mg	1 or 1b*	DO; AL
molindone hcl oral tablet 25 mg	1 or 1b*	QL; AL
<b>*Phenothiazines***</b>		
chlorpromazine hcl injection solution	1 or 1b*	AL
<b>CHLORPROMAZINE HCL ORAL CONCENTRATE</b>	1 or 1b*	QL; AL
chlorpromazine hcl oral tablet 10 mg, 25 mg, 50 mg	1 or 1b*	DO; AL
chlorpromazine hcl oral tablet 100 mg, 200 mg	1 or 1b*	QL; AL
compro rectal suppository	1 or 1b*	AL
fluphenazine decanoate injection solution	1 or 1b*	AL
fluphenazine hcl injection solution	1 or 1b*	AL
fluphenazine hcl oral concentrate	1 or 1b*	QL; AL
fluphenazine hcl oral elixir	1 or 1b*	QL; AL
fluphenazine hcl oral tablet 1 mg, 2.5 mg, 5 mg	1 or 1b*	DO; AL
fluphenazine hcl oral tablet 10 mg	1 or 1b*	QL; AL

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
perphenazine oral tablet 16 mg, 4 mg, 8 mg	1 or 1b*	QL; AL	aripiprazole oral tablet dispersible	1 or 1b*	QL; AL
perphenazine oral tablet 2 mg	1 or 1b*	DO; AL	<b>ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE</b>	3	QL; AL
prochlorperazine edisylate injection solution 10 mg/2ml	1 or 1b*	AL	<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE</b>	3	QL; AL
prochlorperazine maleate oral tablet	1 or 1a*	AL	<b>REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG</b>	3	DO; AL
prochlorperazine rectal suppository	1 or 1b*	AL	<b>REXULTI ORAL TABLET 3 MG, 4 MG</b>	3	QL; AL
thioridazine hcl oral tablet 10 mg, 25 mg, 50 mg	1 or 1b*	DO; AL	<b>*Thienbenzodiazepines***</b>		
thioridazine hcl oral tablet 100 mg	1 or 1b*	QL; AL	olanzapine intramuscular solution reconstituted	1 or 1b*	QL; AL
trifluoperazine hcl oral tablet 1 mg, 2 mg	1 or 1b*	DO; AL	olanzapine oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1 or 1b*	DO; AL
trifluoperazine hcl oral tablet 10 mg, 5 mg	1 or 1b*	QL; AL	olanzapine oral tablet 15 mg, 20 mg	1 or 1b*	QL; AL
<b>*Quinolinone Derivatives***</b>			olanzapine oral tablet dispersible 10 mg, 5 mg	1 or 1b*	DO; AL
<b>ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE</b>	2	QL; AL	olanzapine oral tablet dispersible 15 mg, 20 mg	1 or 1b*	QL; AL
<b>ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER</b>	2	QL; AL	<b>*Thioxanthenes***</b>		
<b>ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 2 MG, 5 MG</b>	3	ST; DO	thiothixene oral capsule 1 mg, 2 mg, 5 mg	1 or 1b*	ST; DO; AL
<b>ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 20 MG, 30 MG</b>	3	ST; QL	thiothixene oral capsule 10 mg	1 or 1b*	ST; QL; AL
<b>ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 2 MG, 5 MG</b>	3	ST; DO	<b>*Antiseptics &amp; Disinfectants*</b>		
<b>ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 20 MG, 30 MG</b>	3	ST; QL	<b>*Antiseptics &amp; Disinfectants***</b>		
aripiprazole oral solution	1 or 1b*	QL; AL	formaldehyde external solution 10 %	1 or 1b*	
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 5 mg	1 or 1b*	DO; AL	<b>*Chlorine Antiseptics***</b>		
aripiprazole oral tablet 20 mg, 30 mg	1 or 1b*	QL; AL	<b>BENZALKONIUM CHLORIDE EXTERNAL SOLUTION</b>	3	
<b>*Iodine Antiseptics***</b>			<b>*Iodine Antiseptics***</b>		
<b>LUGOLS STRONG IODINE EXTERNAL SOLUTION</b>			<b>LUGOLS STRONG IODINE EXTERNAL SOLUTION</b>	3	
<b>*Antivirals*</b>			<b>*Antivirals*</b>		
<b>*Antiretroviral Combinations***</b>			<b>*Antiretroviral Combinations***</b>		
abacavir sulfate-lamivudine oral tablet			abacavir sulfate-lamivudine oral tablet	1 or 1b*	QL; LD

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Drug Name	Tier	Notes
BIKTARVY ORAL TABLET	2	QL; LD
CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	3	PA; QL; LD
CIMDUO ORAL TABLET	3	QL; LD
DELSTRIGO ORAL TABLET	3	QL; LD
DESCOVY ORAL TABLET 120-15 MG	2	QL; LD
DESCOVY ORAL TABLET 200-25 MG	2	\$0; QL; LD
DOVATO ORAL TABLET	2	QL; LD
efavirenz-emtricitab-tenofo df oral tablet	1 or 1b*	QL; LD
efavirenz-lamivudine- tenofovir oral tablet	1 or 1b*	QL; LD
emtricitabine-tenofovir df oral tablet 100-150 mg, 133- 200 mg, 167-250 mg	1 or 1b*	QL; LD
emtricitabine-tenofovir df oral tablet 200-300 mg	1 or 1b*	\$0; QL; LD
EVOTAZ ORAL TABLET	3	QL; LD
GENVOYA ORAL TABLET	2	QL; LD
JULUCA ORAL TABLET	3	PA; QL; LD
lamivudine-zidovudine oral tablet	1 or 1b*	QL; LD
lopinavir-ritonavir oral tablet	1 or 1b*	QL; LD
ODEFSEY ORAL TABLET	2	QL; LD
STRIBILD ORAL TABLET	2	QL; LD
SYMTUZA ORAL TABLET	2	QL; LD
TRIUMEQ ORAL TABLET	2	QL; LD
TRIUMEQ PD ORAL TABLET SOLUBLE	2	QL; LD
*Antiretrovirals - Capsid Inhibitors***		
SUNLENCA ORAL TABLET THERAPY PACK	3	PA; QL; LD
SUNLENCA SUBCUTANEOUS SOLUTION	3	PA; QL; LD

Drug Name	Tier	Notes
<b>*Antiretrovirals - Ccr5 Antagonists (Entry Inhibitor)***</b>		
maraviroc oral tablet	1 or 1b*	QL; LD
SELZENTRY ORAL SOLUTION	3	QL; LD
<b>*Antiretrovirals - Cd4-Directed Post-Attachment Inhibitor***</b>		
TROGARZO INTRAVENOUS SOLUTION	3	PA; QL; LD
<b>*Antiretrovirals - Fusion Inhibitors***</b>		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; QL; LD
<b>*Antiretrovirals - Gp120-Directed Attachment Inhibitor***</b>		
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA; QL; LD
<b>*Antiretrovirals - Integrase Inhibitors***</b>		
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	3	QL; LD
ISENTRESS HD ORAL TABLET	3	QL; LD
ISENTRESS ORAL PACKET	3	QL; LD
ISENTRESS ORAL TABLET	3	QL; LD
ISENTRESS ORAL TABLET CHEWABLE	3	QL; LD
TIVICAY ORAL TABLET 50 MG	3	QL; LD
TIVICAY PD ORAL TABLET SOLUBLE	3	QL; LD
<b>*Antiretrovirals - Protease Inhibitors***</b>		
APTIVUS ORAL CAPSULE	2	PA; QL; LD
atazanavir sulfate oral capsule	1 or 1b*	QL; LD
darunavir oral tablet	1 or 1b*	QL; LD

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
fosamprenavir calcium oral tablet	1 or 1b*	QL; LD
<b>NORVIR ORAL PACKET</b>	3	QL; LD
<b>PREZISTA ORAL SUSPENSION</b>	2	QL; LD
<b>PREZISTA ORAL TABLET 150 MG, 75 MG</b>	2	QL; LD
<b>REYATAZ ORAL PACKET</b>	2	QL; LD
ritonavir oral tablet	1 or 1b*	QL; LD
<b>VIRACEPT ORAL TABLET</b>	2	QL; LD
<b>*Antiretrovirals - Rti-Non-Nucleoside Analogues***</b>		
<b>EDURANT ORAL TABLET</b>	2	PA; QL; LD
efavirenz oral tablet	1 or 1b*	QL; LD
etravirine oral tablet	1 or 1b*	PA; QL; LD
<b>INTELENCE ORAL TABLET 25 MG</b>	2	PA; QL; LD
nevirapine er oral tablet extended release 24 hour 400 mg	1 or 1b*	QL; LD
nevirapine oral suspension	1 or 1b*	QL; LD
nevirapine oral tablet	1 or 1b*	QL; LD
<b>PIFELTRO ORAL TABLET</b>	3	QL; LD
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Purines***</b>		
abacavir sulfate oral solution	1 or 1b*	QL; LD
abacavir sulfate oral tablet	1 or 1b*	QL; LD
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Pyrimidines***</b>		
emtricitabine oral capsule	1 or 1b*	\$0; QL; LD
<b>EMTRIVA ORAL SOLUTION</b>	2	QL; LD
lamivudine oral solution	1 or 1b*	QL; LD
lamivudine oral tablet 150 mg, 300 mg	1 or 1b*	PA; QL; LD
<b>*Antiretrovirals - Rti-Nucleoside Analogues-Thymidines***</b>		
<b>RETROVIR INTRAVENOUS SOLUTION</b>	2	LD
zidovudine oral capsule	1 or 1b*	QL; LD

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
zidovudine oral syrup	1 or 1b*	QL; LD
zidovudine oral tablet	1 or 1b*	QL; LD
<b>*Antiretrovirals - Rti-Nucleotide Analogues***</b>		
tenofovir disoproxil fumarate oral tablet	1 or 1b*	\$0; QL; LD
<b>VIREAD ORAL POWDER</b>	2	QL; LD
<b>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG</b>	2	QL; LD
<b>*Antiretrovirals Adjuvants***</b>		
<b>TYBOST ORAL TABLET</b>	3	QL; LD
<b>*Antiviral Combinations***</b>		
<b>PAXLOVID (150/100) ORAL TABLET THERAPY PACK</b>	1 or 1b*	QL
<b>PAXLOVID (300/100) ORAL TABLET THERAPY PACK</b>	1 or 1b*	QL
<b>*Cmv Agents***</b>		
cidofovir intravenous solution	1 or 1b*	LD
foscarnet sodium intravenous solution 6000 mg/250ml	1 or 1b*	LD
<b>FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML</b>	3	LD
<b>GANCICLOVIR INTRAVENOUS SOLUTION</b>	3	LD; SP
<b>GANCICLOVIR SODIUM INTRAVENOUS SOLUTION</b>	3	LD; SP
ganciclovir sodium intravenous solution reconstituted	3	LD; SP
<b>LIVTENCITY ORAL TABLET</b>	3	PA; QL; LD
<b>PREVYMIS INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP
<b>PREVYMIS ORAL TABLET</b>	3	PA; QL; LD; SP
<b>VALCYTE ORAL SOLUTION RECONSTITUTED</b>	3	LD
<b>VALCYTE ORAL TABLET</b>	3	LD

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Drug Name	Tier	Notes
valganciclovir hcl oral solution reconstituted	1 or 1b*	LD
valganciclovir hcl oral tablet	1 or 1b*	LD
<b>*Hepatitis B Agents***</b>		
adefovir dipivoxil oral tablet	3	PA; QL; LD; SP
<b>BARACLUDE ORAL SOLUTION</b>	3	PA; QL; LD
entecavir oral tablet	3	PA; QL; LD
lamivudine oral tablet 100 mg	1 or 1b*	PA; QL; LD
<b>VEMLIDY ORAL TABLET</b>	3	PA; QL; LD; SP
<b>*Hepatitis C Agent - Combinations***</b>		
<b>EPCLUSA ORAL PACKET</b>	3	PA; QL; LD; SP
<b>EPCLUSA ORAL TABLET</b>	3	PA; QL; LD; SP
<b>HARVONI ORAL PACKET</b>	3	PA; QL; LD; SP
<b>HARVONI ORAL TABLET</b>	3	PA; QL; LD; SP
<b>VOSEVI ORAL TABLET</b>	3	PA; QL; LD; SP
<b>*Hepatitis C Agents***</b>		
<b>PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML</b>	3	QL; LD; SP
<b>PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	QL; LD; SP
ribavirin oral capsule	3	QL; LD; SP
ribavirin oral tablet 200 mg	3	QL; LD; SP
<b>*Herpes Agents - Purine Analogues***</b>		
acyclovir oral capsule	1 or 1b*	
acyclovir oral suspension 200 mg/5ml	1 or 1b*	
acyclovir oral tablet	1 or 1b*	
acyclovir sodium intravenous solution	1 or 1b*	
valacyclovir hcl oral tablet	1 or 1b*	QL
<b>*Herpes Agents - Thymidine Analogues***</b>		
famciclovir oral tablet	1 or 1b*	QL
<b>*Influenza Agents***</b>		
rimantadine hcl oral tablet	1 or 1b*	

Drug Name	Tier	Notes
<b>*Misc. Antivirals***</b>		
<b>LAGEVRIA ORAL CAPSULE</b>	3	QL
<b>TEMBEXA ORAL SUSPENSION</b>	3	
<b>TEMBEXA ORAL TABLET</b>	3	
<b>TPOXX INTRAVENOUS SOLUTION</b>	3	
<b>TPOXX ORAL CAPSULE</b>	3	
<b>*Neuraminidase Inhibitors***</b>		
oseltamivir phosphate oral capsule	1 or 1b*	QL
oseltamivir phosphate oral suspension reconstituted	1 or 1b*	QL
<b>RAPIVAB INTRAVENOUS SOLUTION</b>	3	
<b>RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT</b>	2	QL
<b>TAMIFLU ORAL CAPSULE</b>	3	QL
<b>TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML</b>	3	QL
<b>*Pa Endonuclease Inhibitors***</b>		
<b>XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG</b>	3	QL
<b>XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG</b>	3	QL
<b>*Rsv Agents - Nucleoside Analogues***</b>		
ribavirin inhalation solution reconstituted	1 or 1b*	
<b>VIRAZOLE INHALATION SOLUTION RECONSTITUTED</b>	3	
<b>*Beta Blockers*</b>		
<b>*Alpha-Beta Blockers***</b>		
carvedilol oral tablet	1 or 1b*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
carvedilol phosphate er oral capsule extended release 24 hour	1 or 1b*	QL
labetalol hcl intravenous solution prefilled syringe 10 mg/2ml	3	
labetalol hcl oral tablet	1 or 1b*	QL
<b>*Beta Blockers Cardio-Selective***</b>		
acebutolol hcl oral capsule	1 or 1b*	
atenolol oral tablet	1 or 1a*	
betaxolol hcl oral tablet	1 or 1b*	
bisoprolol fumarate oral tablet	1 or 1b*	
<b>BREVIBLOC IN NACL INTRAVENOUS SOLUTION</b>	3	
<b>BREVIBLOC INTRAVENOUS SOLUTION 100 MG/10ML</b>	3	
<b>BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION</b>	3	
<b>BREVIBLOC PREMIXED INTRAVENOUS SOLUTION</b>	3	
esmolol hcl intravenous solution 100 mg/10ml	1 or 1b*	
<b>ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML</b>	3	
esmolol hcl-sodium chloride intravenous solution	1 or 1b*	
<b>KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE</b>	3	
metoprolol succinate er oral tablet extended release 24 hour	1 or 1b*	
metoprolol tartrate intravenous solution 5 mg/5ml	1 or 1a*	
metoprolol tartrate oral tablet	1 or 1a*	
nebivolol hcl oral tablet	1 or 1b*	
<b>*Beta Blockers Non-Selective***</b>		
<b>HEMANGEOL ORAL SOLUTION</b>	3	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>	3	QL
<b>INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>	3	QL
nadolol oral tablet 20 mg, 40 mg, 80 mg	1 or 1b*	QL
pindolol oral tablet	1 or 1b*	QL
propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg	1 or 1b*	QL
propranolol hcl er oral capsule extended release 24 hour 80 mg	1 or 1b*	DO
propranolol hcl intravenous solution	1 or 1b*	
propranolol hcl oral solution	1 or 1b*	QL
propranolol hcl oral tablet	1 or 1b*	QL
sotalol hcl (af) oral tablet	1 or 1b*	QL
<b>SOTALOL HCL INTRAVENOUS SOLUTION</b>	3	
sotalol hcl oral tablet	1 or 1b*	QL
<b>SOTYLIZE ORAL SOLUTION</b>	3	
timolol maleate oral tablet	1 or 1b*	QL
<b>*Calcium Channel Blockers*</b>		
<b>*Calcium Channel Blockers***</b>		
amlodipine besylate oral tablet 10 mg	1 or 1b*	QL
amlodipine besylate oral tablet 2.5 mg, 5 mg	1 or 1b*	DO
<b>CARDENE IV INTRAVENOUS SOLUTION 20-0.86 MG/200ML-%, 40-0.83 MG/200ML-%</b>	3	
<b>CARDIZEM ORAL TABLET 120 MG</b>	3	QL
<b>CARDIZEM ORAL TABLET 30 MG, 60 MG</b>	3	DO
cartia xt oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
cartia xt oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg	1 or 1b*	QL

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Drug Name	Tier	Notes
CLEVIPREX INTRAVENOUS EMULSION 25 MG/50ML, 50 MG/100ML	3	
CONJUPRI ORAL TABLET 2.5 MG	3	ST; DO
CONJUPRI ORAL TABLET 5 MG	3	ST; QL
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
diltiazem hcl er beads oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1 or 1b*	QL
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
diltiazem hcl er coated beads oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg	1 or 1b*	QL
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 90 mg	1 or 1b*	QL
diltiazem hcl er oral capsule extended release 12 hour 60 mg	1 or 1b*	DO
diltiazem hcl er oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
diltiazem hcl er oral capsule extended release 24 hour 180 mg, 240 mg	1 or 1b*	QL
diltiazem hcl er oral tablet extended release 24 hour 120 mg	1 or 1b*	DO
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1 or 1b*	QL
diltiazem hcl intravenous solution	1 or 1b*	
<b>DILTIAZEM HCL INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
diltiazem hcl oral tablet 120 mg, 90 mg	1 or 1b*	QL
diltiazem hcl oral tablet 30 mg, 60 mg	1 or 1b*	DO

Drug Name	Tier	Notes
diltiazem hcl-dextrose intravenous solution 5-125 %-mg/125ml	3	
dilt-xr oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
dilt-xr oral capsule extended release 24 hour 180 mg, 240 mg	1 or 1b*	QL
felodipine er oral tablet extended release 24 hour 10 mg	1 or 1b*	QL
felodipine er oral tablet extended release 24 hour 2.5 mg, 5 mg	1 or 1b*	DO
isradipine oral capsule 2.5 mg	1 or 1b*	DO
isradipine oral capsule 5 mg	1 or 1b*	QL
<b>KATERZIA ORAL SUSPENSION</b>	3	PA; QL
levamlodipine maleate oral tablet 2.5 mg	1 or 1b*	ST; DO
levamlodipine maleate oral tablet 5 mg	1 or 1b*	ST; QL
matzim la oral tablet extended release 24 hour	1 or 1b*	QL
<b>NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION 20-0.9 MG/200ML-%, 40-0.9 MG/200ML-%</b>	3	
nicardipine hcl intravenous solution	3	
nicardipine hcl oral capsule	1 or 1b*	QL
nifedipine er oral tablet extended release 24 hour	1 or 1b*	QL
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg	1 or 1b*	DO
nifedipine er osmotic release oral tablet extended release 24 hour 60 mg, 90 mg	1 or 1b*	QL
nifedipine oral capsule 10 mg	1 or 1b*	DO
nifedipine oral capsule 20 mg	1 or 1b*	QL
nimodipine oral capsule	1 or 1b*	QL
nimodipine oral solution	1 or 1b*	QL
nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 8.5 mg	1 or 1b*	DO

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Drug Name	Tier	Notes
nisoldipine er oral tablet extended release 24 hour 25.5 mg, 30 mg, 34 mg, 40 mg	1 or 1b*	QL
<b>NORLIQVA ORAL SOLUTION</b>	3	PA; QL
<b>NYMALIZE ORAL SOLUTION 6 MG/ML</b>	3	QL
<b>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG</b>	3	DO
<b>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG, 90 MG</b>	3	QL
<b>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 8.5 MG</b>	3	DO
<b>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 34 MG</b>	3	QL
tiadylt er oral capsule extended release 24 hour 120 mg	1 or 1b*	DO
tiadylt er oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1 or 1b*	QL
<b>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>	3	DO
<b>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>	3	QL
verapamil hcl er oral capsule extended release 24 hour 100 mg	3	DO
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg	1 or 1b*	DO
verapamil hcl er oral capsule extended release 24 hour 200 mg, 240 mg, 300 mg, 360 mg	1 or 1b*	QL
verapamil hcl er oral tablet extended release 120 mg	1 or 1b*	DO
verapamil hcl er oral tablet extended release 180 mg, 240 mg	1 or 1b*	QL

Drug Name	Tier	Notes
verapamil hcl intravenous solution	1 or 1b*	
verapamil hcl oral tablet 120 mg	1 or 1b*	QL
verapamil hcl oral tablet 40 mg, 80 mg	1 or 1b*	DO
<b>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG</b>	3	DO
<b>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 240 MG, 360 MG</b>	3	QL
<b>*Cardiotonics*</b>		
<b>*Cardiac Glycosides***</b>		
digoxin injection solution	1 or 1b*	
digoxin oral solution	1 or 1b*	QL
digoxin oral tablet 125 mcg, 62.5 mcg	1 or 1b*	DO
digoxin oral tablet 250 mcg	1 or 1b*	QL
<b>LANOXIN INJECTION SOLUTION 0.25 MG/ML</b>	3	
<b>LANOXIN PEDIATRIC INJECTION SOLUTION</b>	2	
<b>*Inotropes***</b>		
dobutamine hcl intravenous solution 12.5 mg/ml, 250 mg/20ml	1 or 1b*	
<b>DOBUTAMINE-DEXTROSE INTRAVENOUS SOLUTION</b>	3	
<b>DOPAMINE HCL INTRAVENOUS SOLUTION 40 MG/ML</b>	3	
<b>DOPAMINE-DEXTROSE INTRAVENOUS SOLUTION</b>	3	
milrinone lactate in dextrose intravenous solution	1 or 1b*	
milrinone lactate intravenous solution 10 mg/10ml, 20 mg/20ml, 50 mg/50ml	1 or 1b*	

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Drug Name	Tier	Notes
<b>*Cardiovascular Agents - Misc.*</b>		
<b>*Calcium Channel Blocker &amp; Hmg Coa Reductase Inhibit Comb***</b>		
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-80 mg	1 or 1b*	QL
amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg	1 or 1b*	DO
<b>CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-80 MG</b>	3	QL
<b>CADUET ORAL TABLET 5-10 MG, 5-20 MG, 5-40 MG</b>	3	DO
<b>*Cardiac Myosin Inhibitors***</b>		
<b>CAMZYOS ORAL CAPSULE</b>	3	PA; QL; LD; SP
<b>*Neprilysin Inhib (Arni)- Angiotensin II Recept Antag Comb***</b>		
<b>ENTRESTO ORAL CAPSULE SPRINKLE</b>	2	QL
<b>ENTRESTO ORAL TABLET</b>	2	QL
<b>*Nitrate &amp; Vasodilator Combinations***</b>		
<b>BIDIL ORAL TABLET</b>	3	QL
isosorb dinitrate-hydralazine oral tablet 20-37.5 mg	1 or 1b*	QL
<b>*Pde Inhibitor-Endothelin Recptor Antagonist Combinations***</b>		
<b>OPSYNVI ORAL TABLET</b>	3	PA; QL; LD; SP
<b>*Prostaglandin - Impotence Agents***</b>		
<b>CAVERJECT IMPULSE INTRACAVERNOSAL KIT</b>	3	PA
<b>CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED</b>	3	PA

Drug Name	Tier	Notes
<b>EDEX INTRACAVERNOSAL KIT</b>	3	PA
<b>*Prostaglandin Vasodilators***</b>		
alprostadil injection solution	1 or 1b*	
<b>AURLUMYN INTRAVENOUS SOLUTION</b>	3	
epoprostenol sodium intravenous solution reconstituted	3	PA; LD; SP
<b>FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>	3	PA; QL; LD; SP
<b>ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>	3	PA; QL; LD; SP
<b>ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>	3	PA; QL; LD; SP
<b>ORENITRAM ORAL TABLET EXTENDED RELEASE</b>	3	PA; LD; SP
<b>PROSTIN VR INJECTION SOLUTION</b>	3	
<b>REMODULIN INJECTION SOLUTION 100 MG/20ML, 200 MG/20ML, 50 MG/20ML</b>	3	PA; LD; SP
treprostinil injection solution	3	PA; LD; SP
<b>TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER</b>	3	PA; QL; LD; SP
<b>TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG</b>	3	PA; QL; LD; SP
<b>TYVASO DPI TITRATION KIT INHALATION POWDER 16 &amp; 32 &amp; 48 MCG</b>	3	PA; QL; LD; SP
<b>TYVASO INHALATION SOLUTION</b>	3	PA; QL; LD; SP

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
TYVASO REFILL KIT INHALATION SOLUTION	3	PA; QL; LD; SP	*Pulmonary Hypertension - Prostacyclin Receptor Agonist***		
TYVASO STARTER KIT INHALATION SOLUTION	3	PA; QL; LD; SP	UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	UPTRAVI ORAL TABLET	3	PA; QL; LD; SP
VENTAVIS INHALATION SOLUTION	3	PA; QL; LD; SP	UPTRAVI TITRATION ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
*Pulm Hyperten-Soluble Guanylate Cyclase Stimulator (Sgc)***			*Selective Cgmp Phosphodiesterase Type 5 Inhibitors***		
ADEMPAS ORAL TABLET	3	PA; QL; LD; SP	sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1 or 1b*	PA
*Pulmonary Hypertension - Activin Signaling Inhibitor***			tadalafil oral tablet 10 mg, 20 mg	1 or 1b*	PA
WINREVAIR SUBCUTANEOUS KIT	3	PA; QL; LD; SP	tadalafil oral tablet 2.5 mg, 5 mg	1 or 1b*	PA; QL
*Pulmonary Hypertension - Endothelin Receptor Antagonists***			vardenafil hcl oral tablet dispersible	1 or 1b*	PA
ambrisentan oral tablet	3	PA; QL; LD; SP	*Septal Agents - Ablation**		
bosentan oral tablet	3	PA; QL; LD; SP	ABLYSINOL INTRA- ARTERIAL SOLUTION	3	
OPSUMIT ORAL TABLET	3	PA; QL; LD; SP	*Sinus Node Inhibitors**		
TRACLEER ORAL TABLET SOLUBLE	3	PA; QL; LD; SP	CORLANOR ORAL SOLUTION	3	PA; QL
*Pulmonary Hypertension - Phosphodiesterase Inhibitors***			ivabradine hcl oral tablet	1 or 1b*	PA; QL
alyq oral tablet	3	PA; QL; LD; SP	*Transthyretin Stabilizers***		
sildenafil citrate intravenous solution	3	PA; QL; LD; SP	VYNDAMAX ORAL CAPSULE	3	PA; QL; LD; SP
sildenafil citrate oral suspension reconstituted	3	PA; QL; LD; SP	VYNDAQEL ORAL CAPSULE	3	PA; QL; LD; SP
sildenafil citrate oral tablet 20 mg	3	PA; QL; LD; SP	*Vasoactive Soluble Guanylate Cyclase Stimulator (Sgc)***		
tadalafil (pah) oral tablet	3	PA; QL; LD; SP	VERQUVO ORAL TABLET	3	PA; QL
TADLIQ ORAL SUSPENSION	3	PA; QL; LD; SP	*Cephalosporins*		
			*Cephalosporin Combinations***		
			AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	3	

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Drug Name	Tier	Notes
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	3	
<b>*Cephalosporins - 1St Generation***</b>		
cefadroxil oral capsule	1 or 1b*	
cefadroxil oral suspension reconstituted	1 or 1b*	
cefadroxil oral tablet	1 or 1b*	
cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 2 gm, 3 gm, 500 mg	1 or 1b*	
<b>CEFAZOLIN SODIUM INJECTION SOLUTION RECONSTITUTED 100 GM, 300 GM</b>	3	
cefazolin sodium intravenous solution reconstituted 1 gm	1 or 1b*	
cefazolin sodium intravenous solution reconstituted 2 gm, 3 gm	3	
<b>CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION 1-4 GM/50ML-%, 2-4 GM/100ML-%</b>	3	
cefazolin sodium-dextrose intravenous solution 3-4 gm/150ml-%	3	
<b>CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-4 GM-%(50ML), 2-3 GM-%(50ML)</b>	3	
cephalexin oral capsule	1 or 1a*	
cephalexin oral suspension reconstituted	1 or 1a*	
cephalexin oral tablet	1 or 1a*	
<b>*Cephalosporins - 2Nd Generation***</b>		
<b>CEFACLOR ER ORAL TABLET EXTENDED RELEASE 12 HOUR</b>	3	
cefaclor oral capsule	1 or 1b*	
cefaclor oral suspension reconstituted 250 mg/5ml	1 or 1b*	

Drug Name	Tier	Notes
<b>CEFOTAN INJECTION SOLUTION RECONSTITUTED</b>	3	
cefotetan disodium injection solution reconstituted 1 gm, 2 gm	1 or 1b*	
cefoxitin sodium intravenous solution reconstituted	1 or 1b*	
<b>CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-4 GM-%(50ML), 2-2.2 GM-%(50ML)</b>	3	
cefprozil oral suspension reconstituted	1 or 1b*	
cefprozil oral tablet	1 or 1b*	
cefuroxime axetil oral tablet	1 or 1b*	
cefuroxime sodium injection solution reconstituted 750 mg	1 or 1b*	
cefuroxime sodium intravenous solution reconstituted 1.5 gm	1 or 1b*	
<b>*Cephalosporins - 3Rd Generation***</b>		
cefdinir oral capsule	1 or 1b*	
cefdinir oral suspension reconstituted	1 or 1b*	
cefixime oral capsule	1 or 1b*	
cefixime oral suspension reconstituted	1 or 1b*	
cefotaxime sodium injection solution reconstituted 1 gm, 2 gm	3	
cefpodoxime proxetil oral suspension reconstituted	1 or 1b*	
cefpodoxime proxetil oral tablet	1 or 1b*	
ceftazidime injection solution reconstituted 1 gm, 6 gm	1 or 1b*	
ceftazidime intravenous solution reconstituted	1 or 1b*	
ceftriaxone sodium in dextrose intravenous solution	1 or 1b*	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1 or 1b*	

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Drug Name	Tier	Notes
<b>CEFTRIAXONE SODIUM INJECTION SOLUTION RECONSTITUTED 100 GM</b>	3	
ceftriaxone sodium intravenous solution reconstituted	1 or 1b*	
<b>CEFTRIAXONE SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-3.74 GM-%(50ML), 2-2.22 GM-%(50ML)</b>	3	
tazicef injection solution reconstituted 1 gm	1 or 1b*	
<b>TAZICEF INTRAVENOUS SOLUTION</b>	3	
tazicef intravenous solution reconstituted	1 or 1b*	
<b>*Cephalosporins - 4Th Generation***</b>		
cefepime hcl injection solution reconstituted 1 gm	1 or 1b*	
<b>CEFEPIME HCL INTRAVENOUS SOLUTION</b>	3	
<b>CEFEPIME HCL INTRAVENOUS SOLUTION RECONSTITUTED 100 GM</b>	3	
cefepime hcl intravenous solution reconstituted 2 gm	1 or 1b*	
<b>CEFEPIME-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-5 GM-%(50ML), 2-5 GM-%(50ML)</b>	3	
<b>*Cephalosporins - 5Th Generation***</b>		
<b>TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>*Cephalosporins - Siderophores***</b>		
<b>FETROJA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	

Drug Name	Tier	Notes
<b>*Contraceptives*</b>		
<b>*Biphasic Contraceptives - Oral***</b>		
azurette oral tablet	1 or 1b*	\$0
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	1 or 1b*	\$0
kariva oral tablet	1 or 1b*	\$0
<b>LO LOESTRIN FE ORAL TABLET</b>	2	
pimtrea oral tablet	1 or 1b*	\$0
simliya oral tablet	1 or 1b*	\$0
viorele oral tablet	1 or 1b*	\$0
volnea oral tablet	1 or 1b*	\$0
<b>*Combination Contraceptives - Oral***</b>		
afirmelle oral tablet	1 or 1a*	\$0
altavera oral tablet	1 or 1a*	\$0
alyacen 1/35 oral tablet	1 or 1a*	\$0
apri oral tablet	1 or 1a*	\$0
aubra eq oral tablet	1 or 1a*	\$0
aurovela 1.5/30 oral tablet	1 or 1a*	\$0
aurovela 1/20 oral tablet	1 or 1a*	\$0
aurovela 24 fe oral tablet	1 or 1a*	\$0
aurovela fe 1.5/30 oral tablet	1 or 1a*	\$0
aurovela fe 1/20 oral tablet	1 or 1a*	\$0
aviane oral tablet	1 or 1a*	\$0
ayuna oral tablet	1 or 1a*	\$0
balziva oral tablet	1 or 1a*	\$0
blisovi 24 fe oral tablet	1 or 1a*	\$0
blisovi fe 1.5/30 oral tablet	1 or 1a*	\$0
blisovi fe 1/20 oral tablet	1 or 1a*	\$0
briellyn oral tablet	1 or 1a*	\$0
charlotte 24 fe oral tablet chewable	1 or 1a*	\$0
chateal eq oral tablet	1 or 1a*	\$0
cryselle-28 oral tablet	1 or 1a*	\$0
cyred eq oral tablet	1 or 1a*	\$0
dasetta 1/35 (28) oral tablet	1 or 1a*	\$0
delyla oral tablet	1 or 1a*	\$0
drospirene-eth estrad-levomefol oral tablet	1 or 1b*	\$0
drospirenone-ethinyl estradiol oral tablet	1 or 1b*	\$0

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
elinest oral tablet	1 or 1a*	\$0
enskyce oral tablet 0.15-30 mg-mcg	1 or 1a*	\$0
estarrylla oral tablet	1 or 1a*	\$0
ethynodiol diac-eth estradiol oral tablet	1 or 1a*	\$0
falmina oral tablet	1 or 1a*	\$0
<b>FEMLYV ORAL TABLET DISPERSIBLE</b>	<b>3</b>	
<b>FINZALA ORAL TABLET CHEWABLE</b>	1 or 1a*	\$0
gummily oral capsule	1 or 1b*	\$0
hailey 1.5/30 oral tablet	1 or 1a*	\$0
hailey 24 fe oral tablet	1 or 1a*	\$0
hailey fe 1.5/30 oral tablet	1 or 1a*	\$0
hailey fe 1/20 oral tablet	1 or 1a*	\$0
isibloom oral tablet	1 or 1a*	\$0
jasmiel oral tablet	1 or 1b*	\$0
<b>JOYEUX ORAL TABLET</b>	1 or 1b*	\$0
juleber oral tablet	1 or 1a*	\$0
junel 1.5/30 oral tablet	1 or 1a*	\$0
junel 1/20 oral tablet	1 or 1a*	\$0
junel fe 1.5/30 oral tablet	1 or 1a*	\$0
junel fe 1/20 oral tablet	1 or 1a*	\$0
junel fe 24 oral tablet	1 or 1a*	\$0
kaitlib fe oral tablet chewable	1 or 1b*	\$0
kalliga oral tablet	1 or 1a*	\$0
kelnor 1/35 oral tablet	1 or 1a*	\$0
kelnor 1/50 oral tablet	1 or 1a*	\$0
kurvelo oral tablet	1 or 1a*	\$0
larin 1.5/30 oral tablet	1 or 1a*	\$0
larin 1/20 oral tablet	1 or 1a*	\$0
larin 24 fe oral tablet	1 or 1a*	\$0
larin fe 1.5/30 oral tablet	1 or 1a*	\$0
larin fe 1/20 oral tablet	1 or 1a*	\$0
layolis fe oral tablet chewable	1 or 1b*	\$0
lessina oral tablet	1 or 1a*	\$0
levonorgest-eth estradiol-iron oral tablet	1 or 1b*	\$0
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1 or 1a*	\$0

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
levora 0.15/30 (28) oral tablet	1 or 1a*	\$0
loestrin 1.5/30 (21) oral tablet	1 or 1a*	\$0
loestrin 1/20 (21) oral tablet	1 or 1a*	\$0
loestrin fe 1.5/30 oral tablet	1 or 1a*	\$0
loestrin fe 1/20 oral tablet	1 or 1a*	\$0
loryna oral tablet	1 or 1b*	\$0
low-ogestrel oral tablet	1 or 1a*	\$0
lo-zumandimine oral tablet	1 or 1b*	\$0
lutera oral tablet	1 or 1a*	\$0
marlissa oral tablet	1 or 1a*	\$0
merzee oral capsule	1 or 1b*	\$0
<b>MIBELAS 24 FE ORAL TABLET CHEWABLE</b>	1 or 1a*	\$0
microgestin 1.5/30 oral tablet	1 or 1a*	\$0
microgestin 1/20 oral tablet	1 or 1a*	\$0
microgestin fe 1.5/30 oral tablet	1 or 1a*	\$0
microgestin fe 1/20 oral tablet	1 or 1a*	\$0
mili oral tablet	1 or 1a*	\$0
<b>MINZOYA ORAL TABLET</b>	1 or 1b*	\$0
mono-linyah oral tablet	1 or 1a*	\$0
necon 0.5/35 (28) oral tablet	1 or 1a*	\$0
nikki oral tablet	1 or 1b*	\$0
norethin ace-eth estrad-fe oral capsule	1 or 1b*	\$0
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	1 or 1a*	\$0
norethin ace-eth estrad-fe oral tablet chewable	1 or 1a*	\$0
norethindrone acet-ethinyl est oral tablet	1 or 1a*	\$0
norethin-eth estradiol-fe oral tablet chewable	1 or 1b*	\$0
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1 or 1a*	\$0
nortrel 0.5/35 (28) oral tablet	1 or 1a*	\$0
nortrel 1/35 (21) oral tablet	1 or 1a*	\$0
nortrel 1/35 (28) oral tablet	1 or 1a*	\$0
nylia 1/35 oral tablet	1 or 1a*	\$0
ocella oral tablet	1 or 1b*	\$0
philith oral tablet	1 or 1a*	\$0

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
portia-28 oral tablet	1 or 1a*	\$0
reclipsen oral tablet	1 or 1a*	\$0
sprintec 28 oral tablet	1 or 1a*	\$0
sronyx oral tablet	1 or 1a*	\$0
syeda oral tablet	1 or 1b*	\$0
tarina 24 fe oral tablet	1 or 1a*	\$0
tarina fe 1/20 eq oral tablet	1 or 1a*	\$0
taysofy oral capsule	1 or 1b*	\$0
<b>TURQOZ ORAL TABLET</b>	1 or 1a*	\$0
vestura oral tablet	1 or 1b*	\$0
vienna oral tablet	1 or 1a*	\$0
vyfemla oral tablet	1 or 1a*	\$0
vylibra oral tablet	1 or 1a*	\$0
wera oral tablet	1 or 1a*	\$0
wymzya fe oral tablet chewable	1 or 1b*	\$0
zovia 1/35 (28) oral tablet	1 or 1a*	\$0
zumandimine oral tablet	1 or 1b*	\$0
<b>*Combination Contraceptives - Transdermal***</b>		
norelgestromin-eth estradiol transdermal patch weekly	1 or 1b*	\$0
<b>TWIRLA TRANSDERMAL PATCH WEEKLY</b>	3	
xulane transdermal patch weekly	1 or 1b*	\$0
zafemy transdermal patch weekly	1 or 1b*	\$0
<b>*Combination Contraceptives - Vaginal***</b>		
<b>ANNOVERA VAGINAL RING</b>	3	
eluryng vaginal ring	1 or 1b*	\$0
<b>ENILLORING VAGINAL RING</b>	1 or 1b*	\$0
etonogestrel-ethynodiol vaginal ring	1 or 1b*	\$0
<b>HALOETTE VAGINAL RING</b>	1 or 1b*	\$0
<b>*Continuous Contraceptives - Oral***</b>		
amethyst oral tablet	1 or 1b*	\$0
dolishale oral tablet	1 or 1b*	\$0

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
levonorgestrel-ethynodiol oral tablet 90-20 mcg	1 or 1b*	\$0
<b>*Copper Contraceptives - Iud***</b>		
<b>PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE</b>	3	
<b>*Emergency Contraceptives***</b>		
<b>ELLA ORAL TABLET</b>	3	\$0
<b>*Extended-Cycle Contraceptives - Oral***</b>		
ashlyna oral tablet	1 or 1b*	\$0
camrese lo oral tablet	1 or 1b*	\$0
camrese oral tablet	1 or 1b*	\$0
daysee oral tablet	1 or 1b*	\$0
iclevia oral tablet	1 or 1b*	\$0
introvale oral tablet	1 or 1b*	\$0
jaimiess oral tablet	1 or 1b*	\$0
jolessa oral tablet	1 or 1b*	\$0
levonorgest-eth est & eth est oral tablet	1 or 1b*	\$0
levonorgest-eth estrad 91-day oral tablet	1 or 1b*	\$0
lojaimiess oral tablet	1 or 1b*	\$0
rivelsa oral tablet	1 or 1b*	\$0
setlakin oral tablet	1 or 1b*	\$0
simpesse oral tablet	1 or 1b*	\$0
<b>*Progestin Contraceptives - Implants***</b>		
<b>NEXPLANON SUBCUTANEOUS IMPLANT</b>	3	LD; SP
<b>*Progestin Contraceptives - Injectable***</b>		
<b>DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML</b>	3	
<b>DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	
<b>DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE</b>	3	\$0

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
medroxyprogesterone acetate intramuscular suspension	1 or 1b*	\$0
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1 or 1b*	\$0
<b>*Progestin Contraceptives - Iud***</b>		
KYLEENA <b>INTRAUTERINE INTRAUTERINE DEVICE</b>	3	LD; SP
LILETTA (52 MG) <b>INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY</b>	3	LD; SP
MIRENA (52 MG) <b>INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY</b>	3	LD; SP
SKYLA INTRAUTERINE <b>INTRAUTERINE DEVICE</b>	3	LD; SP
<b>*Progestin Contraceptives - Oral***</b>		
camila oral tablet	1 or 1b*	\$0
deblitane oral tablet	1 or 1b*	\$0
EMZAHH ORAL TABLET	1 or 1b*	\$0
errin oral tablet	1 or 1b*	\$0
heather oral tablet	1 or 1b*	\$0
incassia oral tablet	1 or 1b*	\$0
jencycla oral tablet	1 or 1b*	\$0
lyleq oral tablet	1 or 1b*	\$0
lyza oral tablet	1 or 1b*	\$0
nora-be oral tablet	1 or 1b*	\$0
norethindrone oral tablet	1 or 1b*	\$0
norlyroc oral tablet	1 or 1b*	\$0
sharobel oral tablet	1 or 1b*	\$0
SLYND ORAL TABLET	3	
<b>*Triphasic Contraceptives - Oral***</b>		
alyacen 7/7/7 oral tablet	1 or 1a*	\$0
aranelle oral tablet	1 or 1a*	\$0
dasetta 7/7/7 oral tablet	1 or 1a*	\$0
empresse-28 oral tablet	1 or 1a*	\$0
leena oral tablet	1 or 1a*	\$0
levonest oral tablet	1 or 1a*	\$0

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	1 or 1a*	\$0
norgestim-eth estrad triphasic oral tablet	1 or 1b*	\$0
nortrel 7/7/7 oral tablet	1 or 1a*	\$0
nylia 7/7/7 oral tablet	1 or 1a*	\$0
tilia fe oral tablet	1 or 1b*	\$0
tri-estarylla oral tablet	1 or 1b*	\$0
tri-legest fe oral tablet	1 or 1b*	\$0
tri-linyah oral tablet	1 or 1b*	\$0
tri-lo-estarylla oral tablet	1 or 1b*	\$0
tri-lo-marzia oral tablet	1 or 1b*	\$0
tri-lo-mili oral tablet	1 or 1b*	\$0
tri-lo-sprintec oral tablet	1 or 1b*	\$0
tri-mili oral tablet	1 or 1b*	\$0
tri-sprintec oral tablet	1 or 1b*	\$0
trivora (28) oral tablet	1 or 1a*	\$0
tri-vylibra lo oral tablet	1 or 1b*	\$0
tri-vylibra oral tablet	1 or 1b*	\$0
velivet oral tablet	1 or 1a*	\$0
<b>*Corticosteroids*</b>		
<b>*Glucocorticosteroids***</b>		
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE	3	PA
budesonide er oral tablet extended release 24 hour	1 or 1b*	QL
budesonide oral capsule delayed release particles	1 or 1b*	QL
CORTEF ORAL TABLET	3	
DEPO-MEDROL INJECTION SUSPENSION	3	
DEXABLISS ORAL TABLET THERAPY PACK	3	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	2	
dexamethasone oral elixir	1 or 1a*	
dexamethasone oral solution	1 or 1a*	
dexamethasone oral tablet	1 or 1a*	
dexamethasone oral tablet therapy pack	1 or 1b*	

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
dexamethasone sod phos +rfid injection solution prefilled syringe	1 or 1b*		methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg	1 or 1b*	
dexamethasone sod phosphate pf injection solution	1 or 1b*		<b>ORAPRED ODT ORAL TABLET DISPERSIBLE</b>	3	QL
<b>DEXAMETHASONE SOD PHOSPHATE PF INJECTION SOLUTION PREFILLED SYRINGE</b>	1 or 1b*		<b>PEDIAPRED ORAL SOLUTION</b>	3	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1 or 1b*		prednisolone oral solution	1 or 1a*	
<b>DEXAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION PREFILLED SYRINGE</b>	1 or 1b*		prednisolone oral tablet	1 or 1b*	
<b>HEMADY ORAL TABLET</b>	3	PA; QL	prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 5 mg/5ml	1 or 1a*	
<b>HEXATRIONE INTRA-ARTICULAR SUSPENSION</b>	3		prednisolone sodium phosphate oral tablet dispersible	1 or 1a*	QL
hidex 6-day oral tablet therapy pack	1 or 1b*		<b>PREDNISONE INTENSOL ORAL CONCENTRATE</b>	3	
hydrocortisone oral tablet	1 or 1b*		prednisone oral solution	1 or 1a*	
hydrocortisone sod suc (pf) injection solution reconstituted	1 or 1b*		prednisone oral tablet	1 or 1a*	
<b>KENALOG-10 INJECTION SUSPENSION</b>	3		prednisone oral tablet therapy pack	1 or 1a*	
<b>KENALOG-40 INJECTION SUSPENSION</b>	3		<b>SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED</b>	3	
<b>KENALOG-80 INJECTION SUSPENSION</b>	3		<b>SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED</b>	3	
<b>MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG</b>	3		<b>SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG, 2 GM, 500 MG</b>	3	
<b>MEDROL ORAL TABLET 2 MG</b>	2		taperdex 12-day oral tablet therapy pack	1 or 1b*	
<b>MEDROL ORAL TABLET THERAPY PACK</b>	3		taperdex 6-day oral tablet therapy pack	1 or 1b*	
methylprednisolone oral tablet	1 or 1a*		taperdex 7-day oral tablet therapy pack 1.5 mg (27)	1 or 1b*	
methylprednisolone oral tablet therapy pack	1 or 1a*		<b>TARPEYO ORAL CAPSULE DELAYED RELEASE</b>	3	PA; QL; LD
			<b>UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	3	QL
			<b>ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER</b>	3	PA; QL; LD

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Drug Name	Tier	Notes
<b>*Mineralocorticoids***</b>		
fludrocortisone acetate oral tablet	1 or 1b*	
<b>*Steroid Combinations***</b>		
CELESTONE SOLUSPAN INJECTION SUSPENSION	3	
<b>*Cough/Cold/Allergy*</b>		
<b>*Antitussive - Nonnarcotic***</b>		
benzonatate oral capsule	1 or 1b*	
<b>*Antitussive - Opioid***</b>		
HYCODAN ORAL SOLUTION	3	QL; AL
HYCODAN ORAL TABLET	3	PA; QL
hydrocodone bit-homatrop mbr oral solution	1 or 1a*	QL; AL
hydrocodone bit-homatrop mbr oral tablet	1 or 1a*	PA; QL
hydromet oral solution	1 or 1a*	QL; AL
<b>*Decongestant &amp; Antihistamine***</b>		
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	3	ST; QL
promethazine vc oral syrup	1 or 1b*	QL
promethazine-phenylephrine oral syrup	1 or 1b*	QL
<b>*Misc. Respiratory Inhalants***</b>		
HYPERSAL INHALATION NEBULIZATION SOLUTION 7 %	3	
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	1 or 1b*	
PULMOSAL INHALATION NEBULIZATION SOLUTION	1 or 1b*	
sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 %	1 or 1b*	
<b>*Mucolytics***</b>		
acetylcysteine inhalation solution	1 or 1b*	

Drug Name	Tier	Notes
<b>*Non-Narc Antitussive-Antihistamine***</b>		
promethazine-dm oral syrup	1 or 1a*	QL
<b>*Non-Narc Antitussive-Decongestant-Antihistamine***</b>		
bromphen-pseudoeph-dm oral syrup	1 or 1b*	
pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml	1 or 1b*	
<b>*Opioid Antitussive-Antihistamine***</b>		
hydrocod poli-chlorphe poli er oral suspension extended release	1 or 1b*	QL; AL
promethazine-codeine oral solution	1 or 1a*	QL; AL
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR	3	QL; AL
<b>*Dermatologicals*</b>		
<b>*Acne Antibiotics***</b>		
CLEOCIN-T EXTERNAL LOTION	3	ST; QL
clindacin etz external swab	1 or 1b*	QL
CLINDACIN EXTERNAL FOAM	1 or 1b*	QL
clindacin-p external swab	1 or 1b*	QL
clindamycin phos (twice-daily) external gel	1 or 1b*	QL
clindamycin phosphate external foam	1 or 1b*	QL
clindamycin phosphate external lotion	1 or 1b*	QL
clindamycin phosphate external solution	1 or 1b*	QL
clindamycin phosphate external swab	1 or 1b*	QL
dapsone external gel	3	ST; QL
ery external pad	1 or 1b*	QL
ERYGEL EXTERNAL GEL	3	QL
erythromycin external gel	1 or 1b*	QL
erythromycin external solution	1 or 1b*	QL
KLARON EXTERNAL LOTION	3	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
sulfacetamide sodium (acne) external lotion	1 or 1b*	
<b>*Acne Combinations***</b>		
abenor external cream	3	
adapalene-benzoyl peroxide external gel	1 or 1b*	PA; QL
apexol cleanser external suspension	3	
apexol hp cleanser external suspension	3	
benzoyl peroxide-erythromycin external gel	1 or 1b*	QL
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	1 or 1b*	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	1 or 1b*	QL
clindamycin-tretinoin external gel	3	PA; QL
neuac external gel	1 or 1b*	QL
<b>*Acne Products***</b>		
<b>ABSORICA LD ORAL CAPSULE</b>	3	PA
<b>ABSORICA ORAL CAPSULE</b>	3	PA
accutane oral capsule	2	PA
adapalene external cream	1 or 1b*	PA; QL
adapalene external gel	1 or 1b*	PA; QL
adapalene external pad	1 or 1b*	PA; QL
amnesteem oral capsule	2	PA
claravis oral capsule	2	PA
isotretinoin oral capsule	2	PA
<b>RETIN-A MICRO EXTERNAL GEL</b>	3	PA; QL
<b>RETIN-A MICRO PUMP EXTERNAL GEL</b>	3	PA; QL
tretinoin external cream	1 or 1b*	PA; QL
tretinoin external gel	1 or 1b*	PA; QL
tretinoin microsphere external gel	1 or 1b*	PA; QL
tretinoin microsphere pump external gel 0.04 %, 0.1 %	1 or 1b*	PA; QL
tretinoin microsphere pump external gel 0.08 %	1 or 1b*	
<b>WINLEVI EXTERNAL CREAM</b>	2	PA; QL
zenatane oral capsule	2	PA

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Agents For External Genital And Perianal Warts***</b>		
<b>VEREGEN EXTERNAL OINTMENT</b>	3	ST; QL
<b>*Agents For Facial Wrinkles - Retinoids***</b>		
<b>RENOVA EXTERNAL CREAM</b>	3	PA; QL
<b>RENOVA PUMP EXTERNAL CREAM</b>	3	PA; QL
<b>*Antibiotic Steroid Combinations - Topical***</b>		
<b>NEO-SYNALAR EXTERNAL CREAM</b>	3	
<b>*Antibiotics - Topical***</b>		
gentamicin sulfate external cream	1 or 1b*	QL
gentamicin sulfate external ointment	1 or 1b*	QL
mupirocin external ointment	1 or 1b*	QL
<b>*Antifungals - Topical Combinations***</b>		
clotrimazole-betamethasone external cream	1 or 1b*	QL
clotrimazole-betamethasone external lotion	1 or 1b*	QL
fidila external shampoo	3	
<b>FUNGIMEZ EXTERNAL SOLUTION</b>	3	
miconazole-zinc oxide-petrolat external ointment	1 or 1b*	QL
nystatin-triamcinolone external cream	1 or 1b*	QL
nystatin-triamcinolone external ointment	1 or 1b*	QL
<b>VUSION EXTERNAL OINTMENT</b>	3	QL
<b>*Antifungals - Topical***</b>		
ciclodan external solution	1 or 1b*	QL
ciclopirox external gel	1 or 1b*	QL
ciclopirox external shampoo	1 or 1b*	QL
ciclopirox external solution	1 or 1b*	QL
ciclopirox olamine external cream	1 or 1b*	QL
ciclopirox olamine external suspension	1 or 1b*	QL

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>KLAYESTA EXTERNAL POWDER</b>	1 or 1b*	QL	<b>COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD; SP
naftifine hcl external cream	1 or 1b*	ST; QL	<b>COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML</b>	3	PA; QL; LD; SP
naftifine hcl external gel 2 %	1 or 1b*	ST; QL	<b>COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>NAFTIN EXTERNAL GEL 2 %</b>	3	ST; QL	<b>COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	LD; SP
nyamyc external powder	1 or 1b*	QL	methoxsalen rapid oral capsule	1 or 1b*	LD; SP
nystatin external cream	1 or 1b*	QL	<b>SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL
nystatin external ointment	1 or 1b*	QL	<b>SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD; SP
nystatin external powder	1 or 1b*	QL	<b>SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
nystop external powder	1 or 1b*	QL	<b>SPEVIGO INTRAVENOUS SOLUTION</b>	3	PA; QL; LD
<b>*Anti-Inflammatory Agents - Topical***</b>			<b>SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD
diclofenac sodium external gel 1 %	1 or 1b*	QL; BE	<b>TREMFYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML</b>	3	PA; QL; LD; SP
<b>*Antineoplastic Alkylating Agents - Topical***</b>			<b>TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML</b>	3	PA; QL; LD; SP
<b>VALCHLOR EXTERNAL GEL</b>	3	PA; QL; LD	<b>*Antipsoriatics***</b>		
<b>*Antineoplastic Antimetabolites - Topical***</b>			calcipotriene external cream	1 or 1b*	QL
fluorouracil external cream 5 %	1 or 1b*	QL; AL	calcipotriene external foam	1 or 1b*	ST; QL
fluorouracil external solution	1 or 1b*	QL; AL	calcipotriene external ointment	1 or 1b*	QL
<b>TOLAK EXTERNAL CREAM</b>	3	ST; QL			
<b>*Antineoplastic Or Premalignant Lesions - Topical Nsaid's***</b>					
diclofenac sodium external gel 3 %	1 or 1b*	PA; QL			
<b>*Antineoplastic Retinoids - Topical***</b>					
<b>PANRETIN EXTERNAL GEL</b>	3	LD; SP			
<b>*Antipruritics - Topical***</b>					
doxepin hcl external cream	1 or 1b*	PA; QL			
<b>*Antipsoriatics - Systemic***</b>					
acitretin oral capsule	1 or 1b*	QL			
<b>COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP			

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
calcipotriene external solution	1 or 1b*	QL
calcitrene external ointment	1 or 1b*	QL
calcitriol external ointment	1 or 1b*	QL
tazarotene external cream	1 or 1b*	QL
tazarotene external gel	1 or 1b*	QL
<b>TAZORAC EXTERNAL GEL</b>	<b>3</b>	<b>QL</b>
<b>*Antiseborrheic Combinations***</b>		
dafilor external shampoo	3	
dionaris external shampoo	3	
divendo external shampoo	3	
<b>*Antiseborrheic Products***</b>		
selenium sulfide external lotion	1 or 1a*	QL
<b>*Antiviral Topical Combinations***</b>		
<b>XERESE EXTERNAL CREAM</b>	<b>3</b>	<b>PA; QL</b>
<b>*Antivirals - Topical***</b>		
acyclovir external cream	1 or 1b*	PA; QL
acyclovir external ointment	1 or 1b*	QL
<b>DENAVIR EXTERNAL CREAM</b>	<b>3</b>	<b>PA; QL</b>
penciclovir external cream	1 or 1b*	PA; QL
<b>ZOVIRAX EXTERNAL OINTMENT</b>	<b>3</b>	<b>QL</b>
<b>*Atopic Dermatitis - Janus Kinase (Jak) Inhibitors***</b>		
<b>OPZELURA EXTERNAL CREAM</b>	<b>3</b>	<b>PA; QL</b>
<b>*Atopic Dermatitis - Monoclonal Antibodies***</b>		
<b>DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	<b>3</b>	<b>PA; LD; SP</b>
<b>DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML</b>	<b>3</b>	<b>PA; LD; SP</b>
<b>*Burn Products***</b>		
mafenide acetate external packet	1 or 1b*	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>SILVADENE EXTERNAL CREAM</b>	<b>3</b>	
silver sulfadiazine external cream	1 or 1a*	
ssd external cream	1 or 1a*	
<b>SULFAMYLYON EXTERNAL CREAM</b>	<b>3</b>	
<b>*Corticosteroids - Topical***</b>		
ala-cort external cream 1 %	1 or 1a*	QL
alclometasone dipropionate external cream	1 or 1b*	QL
alclometasone dipropionate external ointment	1 or 1b*	QL
amcinonide external cream	3	QL
betamethasone dipropionate aug external cream	1 or 1b*	QL
betamethasone dipropionate aug external gel	1 or 1b*	QL
betamethasone dipropionate aug external lotion	1 or 1b*	QL
betamethasone dipropionate aug external ointment	1 or 1b*	QL
betamethasone dipropionate external cream	1 or 1b*	QL
betamethasone dipropionate external lotion	1 or 1b*	QL
betamethasone dipropionate external ointment	1 or 1b*	QL
betamethasone valerate external cream	1 or 1b*	QL
betamethasone valerate external foam	3	ST; QL
betamethasone valerate external lotion	1 or 1b*	QL
betamethasone valerate external ointment	1 or 1b*	QL
clobetasol propionate e external cream	1 or 1b*	QL
clobetasol propionate emulsion external foam	1 or 1b*	QL
clobetasol propionate external cream 0.05 %	1 or 1b*	QL
clobetasol propionate external foam	1 or 1b*	QL
clobetasol propionate external gel	1 or 1b*	QL
clobetasol propionate external liquid	1 or 1b*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>	<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
clobetasol propionate external lotion	1 or 1b*	QL	fluticasone propionate external cream	1 or 1b*	QL
clobetasol propionate external ointment	1 or 1b*	QL	fluticasone propionate external lotion	1 or 1b*	QL
clobetasol propionate external shampoo	1 or 1b*	QL	fluticasone propionate external ointment	1 or 1b*	QL
clobetasol propionate external solution	1 or 1b*	QL	halcinonide external cream	3	ST; QL
clocortolone pivalate external cream	3	ST; QL	halobetasol propionate external cream	1 or 1b*	QL
clodan external shampoo	1 or 1b*	QL	halobetasol propionate external ointment	1 or 1b*	QL
desonide external cream	1 or 1b*	QL	hydrocortisone butyrate external cream	3	ST; QL
desonide external gel	1 or 1b*	QL	hydrocortisone butyrate external lotion	3	ST; QL
desonide external lotion	1 or 1b*	QL	hydrocortisone butyrate external ointment	3	ST; QL
desonide external ointment	1 or 1b*	QL	hydrocortisone butyrate external solution	3	ST; QL
desoximetasone external cream	3	ST; QL	hydrocortisone external cream 2.5 %	1 or 1a*	QL
desoximetasone external gel	3	ST; QL	hydrocortisone external lotion 2.5 %	1 or 1a*	QL
desoximetasone external liquid	3	ST; QL	hydrocortisone external ointment 2.5 %	1 or 1a*	QL
desoximetasone external ointment	3	ST; QL	hydrocortisone valerate external cream	3	ST; QL
diflorasone diacetate external cream	3	ST; QL	hydrocortisone valerate external ointment	3	ST; QL
diflorasone diacetate external ointment	3	ST; QL	mometasone furoate external cream	1 or 1b*	QL
fluocinolone acetonide body external oil	1 or 1b*	QL	mometasone furoate external ointment	1 or 1b*	QL
fluocinolone acetonide external cream	1 or 1b*	QL	mometasone furoate external solution	1 or 1b*	QL
fluocinolone acetonide external ointment	1 or 1b*	QL	tovet external foam	1 or 1b*	QL
fluocinolone acetonide external solution	1 or 1b*	QL	triamicinolone acetonide external aerosol solution	3	ST; QL
fluocinolone acetonide scalp external oil	1 or 1b*	QL	triamicinolone acetonide external cream	1 or 1a*	QL
fluocinonide emulsified base external cream	1 or 1b*	QL	triamicinolone acetonide external lotion	1 or 1a*	QL
fluocinonide external cream	1 or 1b*	QL	triamicinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1 or 1a*	QL
fluocinonide external gel	1 or 1b*	QL	triamicinolone acetonide external ointment 0.05 %	3	ST; QL
fluocinonide external ointment	1 or 1b*	QL	triamicinolone in absorbbase external ointment	3	ST; QL
fluocinonide external solution	1 or 1b*	QL			
flurandrenolide external cream	3	ST; QL			
flurandrenolide external lotion	3	ST; QL			

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
triderm external cream 0.5 %	1 or 1a*	QL
<b>*Depigmenting Combinations***</b>		
<b>TRI-LUMA EXTERNAL CREAM</b>	3	
<b>*Enzymes - Topical***</b>		
<b>NEXOBRID EXTERNAL GEL</b>	3	PA; QL; LD
<b>SANTYL EXTERNAL OINTMENT</b>	3	PA; QL
<b>*Glabellar Lines (Frown Lines) Agents***</b>		
<b>BOTOX COSMETIC INTRAMUSCULAR SOLUTION RECONSTITUTED</b>	3	PA; LD
<b>DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED</b>	3	PA; LD
<b>JEUVEAU INTRAMUSCULAR SOLUTION RECONSTITUTED</b>	3	
<b>*Imidazole-Related Antifungals - Topical***</b>		
clotrimazole external cream	1 or 1b*	QL
econazole nitrate external cream	1 or 1b*	QL
<b>ECOZA EXTERNAL FOAM</b>	3	ST; QL
<b>ERTACZO EXTERNAL CREAM</b>	3	ST; QL
<b>EXELDERM EXTERNAL CREAM</b>	3	ST; QL
<b>EXELDERM EXTERNAL SOLUTION</b>	3	ST; QL
<b>JUBLIA EXTERNAL SOLUTION</b>	3	QL
ketoconazole external cream	1 or 1b*	QL
ketoconazole external foam	3	QL
ketoconazole external shampoo 2 %	1 or 1b*	QL
ketodan external foam	3	QL
luliconazole external cream	1 or 1b*	ST; QL
<b>LUZU EXTERNAL CREAM</b>	3	ST; QL
oxiconazole nitrate external cream	3	ST; QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>OXISTAT EXTERNAL LOTION</b>	3	ST; QL
sulconazole nitrate external cream	1 or 1b*	ST; QL
sulconazole nitrate external solution	1 or 1b*	ST; QL
<b>*Immunomodulators Imidazoquinolinamines - Topical***</b>		
imiquimod external cream	1 or 1b*	QL
imiquimod pump external cream	1 or 1b*	ST; QL
<b>ZYCLARA EXTERNAL CREAM</b>	3	ST; QL
<b>ZYCLARA PUMP EXTERNAL CREAM</b>	3	ST; QL
<b>*Keratolytic/Antimitotic/Vesicant Agents***</b>		
<b>CONDYLOX EXTERNAL GEL</b>	3	ST; QL
podofilox external gel	1 or 1b*	QL
podofilox external solution	1 or 1b*	QL
<b>YCANTH EXTERNAL SOLUTION</b>	3	PA; QL
<b>*Liniments***</b>		
<b>TURPENTINE EXTERNAL SPIRIT</b>	3	
<b>*Local Anesthetics - Topical***</b>		
dyclopro external solution	3	
glydo external prefilled syringe	1 or 1b*	
lidocaine external ointment 5 %	1 or 1b*	QL
lidocaine external patch 5 %	1 or 1b*	PA; QL
lidocaine hcl external solution	1 or 1b*	QL
lidocaine hcl urethral/mucosal external prefilled syringe	1 or 1b*	
<b>TRIDACAIN II EXTERNAL PATCH</b>	1 or 1b*	PA; QL
<b>TRIDACAIN III EXTERNAL PATCH</b>	1 or 1b*	PA; QL
<b>ZTLIDO EXTERNAL PATCH</b>	2	PA; QL

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Drug Name	Tier	Notes
<b>*Macrolide Immunosuppressants - Topical***</b>		
<b>HYFTOR EXTERNAL GEL</b>	3	PA; QL
pimecrolimus external cream	1 or 1b*	ST; QL
tacrolimus external ointment	1 or 1b*	ST; QL
<b>*Melanocortin Receptor Agonists (Uv Protective)***</b>		
<b>SCENESSE SUBCUTANEOUS IMPLANT</b>	3	PA; QL; LD
<b>*Microtubule Inhibitors - Topical***</b>		
<b>KLISYRI (250 MG) EXTERNAL OINTMENT</b>	3	
<b>KLISYRI (350 MG) EXTERNAL OINTMENT</b>	3	
<b>*Misc. Dermatological Products***</b>		
<b>ILIDERM EXTERNAL EMULSION</b>	3	
<b>*Misc. Topical***</b>		
<b>QBREXZA EXTERNAL PAD</b>	3	PA; QL
<b>*Oxaborole-Related Antifungals - Topical***</b>		
tavaborole external solution	1 or 1b*	ST; QL
<b>*Phosphodiesterase 4 (Pde4) Inhibitors - Topical***</b>		
<b>EUCRISA EXTERNAL OINTMENT</b>	3	ST; QL
<b>*Photodynamic Therapy Agents - Topical***</b>		
<b>AMELUZ EXTERNAL GEL</b>	3	
<b>LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED</b>	3	
<b>*Prostaglandins - Topical***</b>		
bimatoprost external solution	1 or 1b*	
<b>LATISSE EXTERNAL SOLUTION</b>	3	
<b>*Rosacea Agents***</b>		
azelaic acid external gel	1 or 1b*	QL
brimonidine tartrate external gel	1 or 1b*	QL

Drug Name	Tier	Notes
<b>FINACEA EXTERNAL FOAM</b>	2	QL
ivermectin external cream	1 or 1b*	QL
<b>METROCREAM EXTERNAL CREAM</b>	3	ST; QL
metronidazole external cream	1 or 1b*	QL
metronidazole external gel	1 or 1b*	QL
metronidazole external lotion	1 or 1b*	QL
<b>MIRVASO EXTERNAL GEL</b>	3	QL
<b>SOOLANTRA EXTERNAL CREAM</b>	2	QL
<b>ZILXI EXTERNAL FOAM</b>	2	QL
<b>*Scabicides &amp; Pediculicides***</b>		
crotan external lotion	1 or 1b*	QL
<b>ELIMITE EXTERNAL CREAM</b>	3	QL
malathion external lotion	1 or 1b*	QL
<b>NATROBA EXTERNAL SUSPENSION</b>	3	QL
<b>OVIDE EXTERNAL LOTION</b>	3	QL
permethrin external cream	1 or 1b*	QL
spinosad external suspension	1 or 1b*	QL
<b>*Scar Treatment Products***</b>		
<b>COPASIL EXTERNAL GEL</b>	3	
<b>*Seborrheic Keratosis Products**</b>		
<b>ESKATA EXTERNAL SOLUTION</b>	3	
<b>*Steroid-Local Anesthetic Combinations***</b>		
<b>EPIFOAM EXTERNAL FOAM</b>	3	
<b>PRAMOSONE EXTERNAL CREAM 1-1 %</b>	2	
<b>PRAMOSONE EXTERNAL LOTION</b>	2	
<b>*Tar Products***</b>		
coal tar external solution	1 or 1b*	
<b>*Tissue Replacements***</b>		
<b>AMNIOTEXT EXTERNAL SHEET</b>	3	

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Drug Name	Tier	Notes
AMPHENOL-40 INJECTION SUSPENSION RECONSTITUTED	3	
CYGNUS DUAL EXTERNAL SHEET	3	
KARDIAMEMBRANE EXTERNAL SHEET	3	
NEOX 100 EXTERNAL SHEET	3	
NEOX CORD 1K EXTERNAL SHEET	3	
PALINGEN FLOW INJECTION INJECTABLE	3	
PALINGEN HYDROMEMBRANE EXTERNAL SHEET	3	
PALINGEN INOVOFLO INJECTION INJECTABLE	3	
PALINGEN MEMBRANE EXTERNAL SHEET	3	
PALINGEN XPLUS HYDROMEMBRANE EXTERNAL SHEET	3	
PALINGEN XPLUS MEMBRANE EXTERNAL SHEET	3	
*Topical Anesthetic Combinations***		
lidocaine-prilocaine external cream	1 or 1b*	QL
lidocaine-prilocaine external kit	1 or 1b*	QL
VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT	3	
*Topical Selective Retinoid X Receptor Agonists***		
bexarotene external gel	1 or 1b*	PA; QL; LD; SP
TARGRETIN EXTERNAL GEL	3	PA; QL; LD; SP
*Topical Steroid Combinations***		
calcipotriene-betameth diprop external ointment	2	ST; QL
calcipotriene-betameth diprop external suspension	2	ST; QL

Drug Name	Tier	Notes
DUOBRII EXTERNAL LOTION	3	PA; QL
ENSTILAR EXTERNAL FOAM	3	QL
ilexor external shampoo	3	
TACLONEX EXTERNAL SUSPENSION	3	ST; QL
*Type II 5-Alpha Reductase Inhibitors***		
finasteride oral tablet 1 mg	1 or 1b*	
PROPECIA ORAL TABLET	3	
*Wound Care - Growth Factor Agents***		
REGRANEX EXTERNAL GEL	3	QL
*Wound Cleansers/Decubitus Ulcer Therapy***		
LAVARE WOUND WASH EXTERNAL GEL	3	
*Wound Dressings***		
FILSUVEZ EXTERNAL GEL	3	PA; LD
KENDALL HYDROGEL WOUND DRESS EXTERNAL	3	
*Digestive Aids*		
*Digestive Enzymes***		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	2	QL
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT	3	ST; QL
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	3	ST; QL
SUCRAID ORAL SOLUTION	3	PA; QL; LD
VIOKACE ORAL TABLET	2	QL

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Drug Name	Tier	Notes
<b>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT</b>	2	QL
<b>*Diuretics*</b>		
<b>*Carbonic Anhydrase Inhibitors***</b>		
acetazolamide er oral capsule extended release 12 hour	1 or 1b*	
acetazolamide oral tablet	1 or 1b*	
acetazolamide sodium injection solution reconstituted	1 or 1b*	
dichlorphenamide oral tablet	3	PA; QL; LD
methazolamide oral tablet	1 or 1b*	
<b>ORMALVI ORAL TABLET</b>	3	PA; QL; LD
<b>*Diuretic Combinations***</b>		
amiloride-hydrochlorothiazide oral tablet	1 or 1b*	
spironolactone-hctz oral tablet	1 or 1b*	
triamterene-hctz oral capsule 37.5-25 mg	1 or 1a*	
triamterene-hctz oral tablet	1 or 1a*	
<b>*Loop Diuretics***</b>		
bumetanide injection solution	1 or 1b*	
bumetanide oral tablet	1 or 1b*	
<b>BUMEX ORAL TABLET 0.5 MG</b>	3	
<b>EDECRIN ORAL TABLET</b>	3	
ethacrynone sodium intravenous solution reconstituted	1 or 1b*	
ethacrynic acid oral tablet	1 or 1b*	
<b>FUROSCIX SUBCUTANEOUS CARTRIDGE KIT</b>	3	PA; QL; LD
furosemide injection solution 10 mg/ml	1 or 1a*	
furosemide oral solution 10 mg/ml, 8 mg/ml	1 or 1a*	

Drug Name	Tier	Notes
furosemide oral tablet	1 or 1a*	
<b>LASIX ORAL TABLET</b>	3	
torsemide oral tablet	1 or 1b*	
<b>*Osmotic Diuretics***</b>		
mannitol intravenous solution 20 %, 25 %	1 or 1b*	
osmitrol intravenous solution 10 %, 20 %	1 or 1b*	
<b>*Potassium Sparing Diuretics***</b>		
<b>ALDACTONE ORAL TABLET</b>	3	
amiloride hcl oral tablet	1 or 1b*	
<b>CAROSPIR ORAL SUSPENSION</b>	3	
spironolactone oral suspension	1 or 1b*	
spironolactone oral tablet	1 or 1a*	
triamterene oral capsule	1 or 1b*	
<b>*Thiazides And Thiazide-Like Diuretics***</b>		
chlorothiazide sodium intravenous solution reconstituted	1 or 1b*	
chlorthalidone oral tablet 25 mg, 50 mg	1 or 1a*	
<b>DIURIL ORAL SUSPENSION</b>	3	
hydrochlorothiazide oral capsule	1 or 1a*	
hydrochlorothiazide oral tablet	1 or 1a*	
indapamide oral tablet	1 or 1b*	
metolazone oral tablet	1 or 1b*	
<b>THALITONE ORAL TABLET</b>	3	
<b>*Endocrine And Metabolic Agents - Misc.*</b>		
<b>*Abortifacient - Progesterone Receptor Antagonists***</b>		
<b>MIFEPREX ORAL TABLET</b>	3	
mifepristone oral tablet 200 mg	1 or 1b*	

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Drug Name	Tier	Notes
*Acid Sphingomyelinase Deficiency (Asmd) - Agents***		
XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
*Adenosine Deaminase Scid Treatment - Agents***		
REVCOVİ INTRAMUSCULAR SOLUTION	3	PA; LD
*Alpha-Mannosidosis Treatment - Agents***		
LAMZEDE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD
*Bisphosphonates***		
ACTONEL ORAL TABLET 150 MG, 35 MG	3	QL
alendronate sodium oral solution	1 or 1b*	QL
alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg	1 or 1b*	QL
ATELVIA ORAL TABLET DELAYED RELEASE	3	QL
BINOSTO ORAL TABLET EFFERVESCENT	3	QL
FOSAMAX ORAL TABLET 70 MG	3	QL
FOSAMAX PLUS D ORAL TABLET	2	QL
ibandronate sodium intravenous solution 3 mg/3ml	3	LD
ibandronate sodium oral tablet	1 or 1b*	QL
pamidronate disodium intravenous solution 30 mg/10ml, 90 mg/10ml	3	LD; SP
PAMIDRONATE DISODIUM INTRAVENOUS SOLUTION 6 MG/ML	3	LD; SP

Drug Name	Tier	Notes
RECLAST INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	1 or 1b*	QL
risedronate sodium oral tablet delayed release	1 or 1b*	QL
zoledronic acid intravenous concentrate	1 or 1b*	PA; LD; SP
ZOLEDRONIC ACID INTRAVENOUS SOLUTION 4 MG/100ML	3	PA; LD; SP
zoledronic acid intravenous solution 5 mg/100ml	3	PA; QL; LD; SP
*Calcimimetic Agents***		
cinacalcet hcl oral tablet	3	PA; QL; LD
PARSABIV INTRAVENOUS SOLUTION	3	PA; LD
*Calcitonins***		
calcitonin (salmon) injection solution	3	LD
calcitonin (salmon) nasal solution	1 or 1b*	QL
MIACALCIN INJECTION SOLUTION	3	LD
*Carnitine Replenisher - Agents***		
CARNITOR INTRAVENOUS SOLUTION	3	
CARNITOR ORAL SOLUTION	3	
CARNITOR ORAL TABLET	3	
CARNITOR SF ORAL SOLUTION	3	
levocarnitine intravenous solution	1 or 1b*	
levocarnitine oral solution	1 or 1b*	
levocarnitine oral tablet	1 or 1b*	
levocarnitine sf oral solution	1 or 1b*	
*Ckd Agent- Sodium/Hydrogen Exchanger 3 (Nhe3) Inhibitor***		
XPHOZAH ORAL TABLET	3	PA; QL

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Drug Name	Tier	Notes
<b>*Corticotropin***</b>		
ACTHAR GEL SUBCUTANEOUS PEN-INJECTOR	3	PA; LD; SP
ACTHAR INJECTION GEL	3	PA; LD; SP
CORTROPHIN INJECTION GEL	3	PA; LD; SP
<b>*Cortisol Synthesis Inhibitors***</b>		
ISTURISA ORAL TABLET 1 MG, 5 MG	3	PA; QL; LD
<b>*Dopamine Receptor Agonists***</b>		
cabergoline oral tablet	1 or 1b*	QL
<b>*Fabry Disease - Agents***</b>		
ELFABRIO INTRAVENOUS SOLUTION	3	PA; LD; SP
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
GALAFOLD ORAL CAPSULE	3	PA; QL; LD
<b>*Gaa Deficiency Treatment - Agents***</b>		
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
OPFOLDA ORAL CAPSULE	3	PA; QL; LD; SP
POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
<b>*Gnrh/Lhrh Antagonists***</b>		
cetrorelix acetate subcutaneous kit	3	PA; LD; SP
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	3	PA; LD; SP
fyremadel subcutaneous solution prefilled syringe	3	PA; LD; SP

Drug Name	Tier	Notes
GANIRELIX ACETATE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
ORILISSA ORAL TABLET	2	PA; QL
<b>*Growth Hormone Receptor Antagonists***</b>		
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP
<b>*Growth Hormone Releasing Hormones (Ghrh)***</b>		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD
<b>*Growth Hormones***</b>		
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	3	PA; QL; LD; SP
GENOTROPIN SUBCUTANEOUS CARTRIDGE	3	PA; QL; LD; SP
HUMATROPE INJECTION CARTRIDGE	3	PA; QL; LD; SP
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	3	PA; QL; LD
SKYTROFA SUBCUTANEOUS CARTRIDGE	3	PA; QL; LD; SP
<b>*Hereditary Orotic Aciduria Treatment - Agents**</b>		
XURIDEN ORAL PACKET	3	PA; QL; LD
<b>*Hereditary Tyrosinemia Type 1 (Ht-1) Treatment - Agents***</b>		
nitisinone oral capsule 10 mg, 2 mg, 5 mg	3	PA; LD; SP
nitisinone oral capsule 20 mg	3	PA; LD
<b>NITYR ORAL TABLET</b>	3	PA; LD

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Drug Name	Tier	Notes
ORFADIN ORAL CAPSULE	3	PA; LD
ORFADIN ORAL SUSPENSION	3	PA; LD
<b>*Homocystinuria Treatment - Agents***</b>		
betaine oral powder	1 or 1b*	LD
CYSTADANE ORAL POWDER	3	LD
<b>*Hyperammonemia Treatment - Agents***</b>		
carglumic acid oral tablet soluble	3	PA; LD
<b>*Hyperparathyroid Treatment - Vitamin D Analogs***</b>		
calcitriol intravenous solution 1 mcg/ml	1 or 1b*	PA
calcitriol oral capsule	1 or 1b*	PA
calcitriol oral solution	1 or 1b*	PA
doxercalciferol intravenous solution	1 or 1b*	PA
doxercalciferol oral capsule	1 or 1b*	PA
HECTOROL INTRAVENOUS SOLUTION 4 MCG/2ML	3	PA
paricalcitol intravenous solution	1 or 1b*	PA
paricalcitol oral capsule	1 or 1b*	PA
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	3	PA; QL
ZEMPLAR INTRAVENOUS SOLUTION	3	PA
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	PA
<b>*Hypoparathyroid Treatment - Parathyroid Hormone Analogs***</b>		
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL; LD
<b>*Hypophosphatasia (Hpp) Agents***</b>		
STRENSIQ SUBCUTANEOUS SOLUTION	3	PA; LD

Drug Name	Tier	Notes
<b>*Insulin-Like Growth Factor-1 Receptor Inhibitors(Igf-1R)***</b>		
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD
<b>*Insulin-Like Growth Factors (Somatomedins)***</b>		
INCRELEX SUBCUTANEOUS SOLUTION	3	PA; LD; SP
<b>*Leptin Analogues***</b>		
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD
<b>*Lhrh/Gnrh Agonist Analog Pituitary Suppressants***</b>		
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	3	PA; QL; LD; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT	3	PA; QL; LD; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT	3	PA; QL; LD; SP
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT	3	PA; QL; LD; SP
SUPRELIN LA SUBCUTANEOUS KIT	3	PA; QL; LD; SP
SYNAREL NASAL SOLUTION	3	PA; QL; LD; SP
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA; QL; LD
<b>*Lysosomal Acid Lipase (Lal) Deficiency - Agents***</b>		
KANUMA INTRAVENOUS SOLUTION	3	PA; LD; SP

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
*Molybdenum Cofactor Deficiency (Mocd) - Agents***			*Ovulation Stimulants- Gonadotropins***		
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD	CHORIONIC GONADOTROPIN INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA; LD; SP
*Mucopolysaccharidosis I (Mps I) - Agents***			GONAL-F INJECTION SOLUTION RECONSTITUTED	3	PA; LD; SP
ALDURAZYME INTRAVENOUS SOLUTION	3	PA; LD; SP	GONAL-F RFF REDIRECT SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; LD; SP
*Mucopolysaccharidosis II (Mps II) - Agents***			GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
ELAPRASE INTRAVENOUS SOLUTION	3	PA; LD; SP	MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
*Mucopolysaccharidosis IV (Mps Iv) - Agents***			NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	3	PA; LD; SP
VIMIZIM INTRAVENOUS SOLUTION	3	PA; LD; SP	OVIDREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
*Mucopolysaccharidosis VI (Mps Vi) - Agents***			PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA; LD; SP
NAGLAZYME INTRAVENOUS SOLUTION	3	PA; LD; SP	*Ovulation Stimulants- Synthetic***		
*Mucopolysaccharidosis VII (Mps VII) - Agents***			CLOMID ORAL TABLET	1 or 1b*	PA
MEPSEVII INTRAVENOUS SOLUTION	3	PA; LD	clomiphene citrate oral tablet	1 or 1b*	PA
*Natriuretic Peptides***			*Phenylketonuria Treatment - Agents***		
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP	JAVYGTOR ORAL PACKET	3	PA; LD
*Neurokinin 3 (Nk3) Receptor Antagonists***			JAVYGTOR ORAL TABLET	3	PA; LD
VEOZAH ORAL TABLET	3	PA; QL	PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML	3	PA; LD; SP
*Non-Steroidal Mineralocorticoid Receptor Antagonists***					
KERENDIA ORAL TABLET	3	PA; QL			

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Drug Name	Tier	Notes
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	3	PA; QL; LD; SP
sapropterin dihydrochloride oral packet	3	PA; LD; SP
sapropterin dihydrochloride oral tablet	3	PA; LD; SP
<b>*Rank Ligand (Rankl) Inhibitors***</b>		
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
XGEVA SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
<b>*Sclerostin Inhibitors***</b>		
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Selective Estrogen Receptor Modulators (Serms)***</b>		
EVISTA ORAL TABLET	3	\$0; QL
OSPHENA ORAL TABLET	3	PA; QL
raloxifene hcl oral tablet	1 or 1b*	\$0; QL
<b>*Selective Vasopressin V2- Receptor Antagonists***</b>		
JYNARQUE ORAL TABLET	3	PA; QL; LD
JYNARQUE ORAL TABLET THERAPY PACK	3	PA; QL; LD
tolvaptan oral tablet	1 or 1b*	PA; QL; LD; SP
<b>*Somatostatic Agents***</b>		
LANREOTIDE ACETATE SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	3	PA; QL; LD
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	3	PA; LD; SP
octreotide acetate intramuscular kit 20 mg, 30 mg	3	PA; QL; LD; SP

Drug Name	Tier	Notes
octreotide acetate subcutaneous solution prefilled syringe	3	PA; LD; SP
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	3	PA; LD; SP
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT	3	PA; QL; LD; SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA; QL; LD
SIGNIFOR SUBCUTANEOUS SOLUTION	3	PA; QL; LD
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
<b>*Urea Cycle Disorder - Agents***</b>		
AMMONUL INTRAVENOUS SOLUTION	3	
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK	3	PA; QL; LD
PHEBURANE ORAL PELLET	3	PA; QL; LD; SP
RAVICTI ORAL LIQUID	3	PA; QL; LD; SP
sod benz-sod phenylacet intravenous solution	1 or 1b*	
sodium phenylbutyrate oral powder 3 gm/tsp	1 or 1b*	PA; QL; LD; SP
sodium phenylbutyrate oral tablet	1 or 1b*	PA; QL; LD; SP
<b>*Vasopressin***</b>		
DDAVP INJECTION SOLUTION 4 MCG/ML	3	LD

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Drug Name	Tier	Notes
DDAVP ORAL TABLET	3	QL; LD
DDAVP PF INJECTION SOLUTION	3	LD
desmopressin ace spray refrig nasal solution	1 or 1b*	
desmopressin acetate injection solution	1 or 1b*	LD
DESMOPRESSIN ACETATE NASAL SOLUTION	3	QL; LD
desmopressin acetate oral tablet	1 or 1b*	QL; LD
desmopressin acetate pf injection solution	1 or 1b*	LD
desmopressin acetate spray nasal solution	1 or 1b*	
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL	3	PA; QL; LD
TERLIVAZ INTRAVENOUS SOLUTION RECONSTITUTED	3	
vasopressin +rfid intravenous solution	1 or 1b*	
vasopressin intravenous solution	1 or 1b*	
vasopressin-sodium chloride intravenous solution 20-0.9 ut/100ml-%, 40-0.9 ut/100ml-%	3	
VASOSTRICT INTRAVENOUS SOLUTION 20 UNIT/ML, 20-5 UT/100ML-%, 40-5 UT/100ML-%	3	
<b>*X-Linked Hypophosphatemia (Xlh) Treatment - Agents***</b>		
CRYSVITA SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
<b>*Estrogens*</b>		
<b>*Estrogen &amp; Progestin***</b>		
ACTIVELLA ORAL TABLET 1-0.5 MG	3	
ANGELIQ ORAL TABLET	3	
BIJUVA ORAL CAPSULE	2	QL

Drug Name	Tier	Notes
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	2	QL
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	2	QL
estradiol-norethindrone acet oral tablet	1 or 1b*	
fyavolv oral tablet	1 or 1b*	
jinteli oral tablet	1 or 1b*	
mimvey oral tablet	1 or 1b*	
norethindrone-eth estradiol oral tablet	1 or 1b*	
PREMPHASE ORAL TABLET	2	
PREMPRO ORAL TABLET	2	
<b>*Estrogen-Progestin-GnRh Antagonist***</b>		
MYFEMBREE ORAL TABLET	3	PA; QL
ORIAHNN ORAL CAPSULE THERAPY PACK	3	PA; QL
<b>*Estrogens***</b>		
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	3	QL
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML	3	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	3	
dotti transdermal patch twice weekly	1 or 1b*	QL
estradiol oral tablet	1 or 1b*	
estradiol transdermal gel	1 or 1b*	QL
estradiol transdermal patch twice weekly	1 or 1b*	QL
estradiol transdermal patch weekly	1 or 1b*	QL
estradiol valerate intramuscular oil	1 or 1b*	
EVAMIST TRANSDERMAL SOLUTION	2	QL

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Drug Name	Tier	Notes
lyllana transdermal patch twice weekly	1 or 1b*	QL
<b>MENEST ORAL TABLET</b>	2	
<b>MENOSTAR TRANSDERMAL PATCH WEEKLY</b>	3	QL
<b>PREMARIN INJECTION SOLUTION RECONSTITUTED</b>	2	
<b>PREMARIN ORAL TABLET</b>	2	QL
<b>*Estrogen-Selective Estrogen Receptor Modulator Comb***</b>		
<b>DUAVEE ORAL TABLET</b>	3	PA; QL
<b>*Fluoroquinolones*</b>		
<b>*Fluoroquinolones***</b>		
<b>BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>BAXDELA ORAL TABLET</b>	3	PA
<b>CIPRO ORAL SUSPENSION RECONSTITUTED</b>	3	
<b>CIPRO ORAL TABLET 250 MG, 500 MG</b>	3	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	1 or 1b*	
ciprofloxacin in d5w intravenous solution	1 or 1b*	
levofloxacin in d5w intravenous solution	1 or 1b*	
levofloxacin intravenous solution	1 or 1b*	QL
levofloxacin oral solution	1 or 1b*	
levofloxacin oral tablet	1 or 1b*	
moxifloxacin hcl in nacl intravenous solution	1 or 1b*	
<b>MOXIFLOXACIN HCL INTRAVENOUS SOLUTION</b>	3	
moxifloxacin hcl oral tablet	1 or 1b*	
ofloxacin oral tablet 300 mg, 400 mg	1 or 1b*	

Drug Name	Tier	Notes
<b>*Gastrointestinal Agents - Misc.*</b>		
<b>*Bile Acid Synthesis Disorder Agents***</b>		
<b>CHOLBAM ORAL CAPSULE</b>	3	PA; QL; LD
<b>*Cic Agents - Guanylate Cyclase-C (Gc-C) Agonists***</b>		
<b>TRULANCE ORAL TABLET</b>	3	QL
<b>*Gallstone Solubilizing Agents***</b>		
<b>URSO FORTE ORAL TABLET</b>	3	
ursodiol oral capsule 300 mg	1 or 1b*	
ursodiol oral tablet	1 or 1b*	
<b>*Gastrointestinal Antiallergy Agents***</b>		
cromolyn sodium oral concentrate	1 or 1b*	
<b>GASTROCROM ORAL CONCENTRATE</b>	3	
<b>*Gastrointestinal Chloride Channel Activators***</b>		
lubiprostone oral capsule	1 or 1b*	QL
<b>*Gastrointestinal Stimulants***</b>		
<b>GIMOTI NASAL SOLUTION</b>	3	PA; QL
metoclopramide hcl injection solution	1 or 1a*	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	1 or 1a*	QL
metoclopramide hcl oral tablet	1 or 1a*	QL
metoclopramide hcl oral tablet dispersible 5 mg	1 or 1a*	QL
<b>REGLAN ORAL TABLET</b>	3	QL
<b>*Glucagon-Like Peptide-2 (Glp-2) Analogs***</b>		
<b>GATTEX SUBCUTANEOUS KIT</b>	3	PA; LD; SP
<b>*Hepatotropics - Thyroid Hormone Receptor-Beta Agonists***</b>		
<b>REZDIFRA ORAL TABLET</b>	3	PA; QL; LD; SP

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Drug Name	Tier	Notes
*Ibs Agent - Guanylate Cyclase-C (Gc-C) Agonists***		
LINZESS ORAL CAPSULE	2	QL
*Ibs Agent - Mu-Opioid Receptor Agonists***		
VIBERZI ORAL TABLET	3	QL
*Ibs Agent - Selective 5-HT3 Receptor Antagonists***		
alosetron hcl oral tablet	1 or 1b*	PA; QL
*Ileal Bile Acid Transporter (Ibat) Inhibitors***		
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	3	PA; QL; LD
BYLVAY ORAL CAPSULE	3	PA; QL; LD
LIVMARLI ORAL SOLUTION	3	PA; QL; LD
*Inflammatory Bowel Agents***		
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	ST; QL
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	3	QL
AZULFIDINE ORAL TABLET	3	QL
balsalazide disodium oral capsule	1 or 1b*	QL
CANASA RECTAL SUPPOSITORY	3	QL
DELZICOL ORAL CAPSULE DELAYED RELEASE	3	ST; QL
DIPENTUM ORAL CAPSULE	3	ST; QL
mesalamine er oral capsule extended release 24 hour	1 or 1b*	QL
mesalamine oral capsule delayed release	1 or 1b*	QL
mesalamine oral tablet delayed release	1 or 1b*	QL
mesalamine rectal enema	1 or 1b*	QL
mesalamine rectal suppository	1 or 1b*	QL

Drug Name	Tier	Notes
mesalamine-cleanser rectal kit	1 or 1b*	QL
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	QL
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	3	ST; QL
ROWASA RECTAL KIT	3	QL
SFROWASA RECTAL ENEMA	3	QL
sulfasalazine oral tablet	1 or 1b*	QL
sulfasalazine oral tablet delayed release	1 or 1b*	QL
*Integrin Receptor Antagonists***		
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP
*Interleukin Antagonists***		
SKYRIZI INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL; LD; SP
TREMFYA INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
TREMFYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	3	PA; QL; LD; SP
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	3	PA; QL; LD; SP
*Intestinal Acidifiers***		
enulose oral solution	1 or 1b*	
generlac oral solution	1 or 1b*	
lactulose encephalopathy oral solution 10 gm/15ml	1 or 1b*	
*Live Fecal Microbiota (Human)**		
REBYOTA RECTAL SUSPENSION	3	PA; QL; LD
VOWST ORAL CAPSULE	3	PA; QL; LD

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
<b>*Peripheral Opioid Receptor Antagonists***</b>		
alvimopan oral capsule	1 or 1b*	
<b>MOVANTIK ORAL TABLET</b>	2	QL
<b>RELISTOR ORAL TABLET</b>	3	ST; QL
<b>RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML</b>	3	ST; QL
<b>SYMPROIC ORAL TABLET</b>	3	ST; QL
<b>*Phosphate Binder Agents***</b>		
<b>AURYXIA ORAL TABLET</b>	3	ST; QL
calcium acetate (phos binder) oral capsule	1 or 1b*	QL
calcium acetate oral tablet 667 mg	1 or 1b*	QL
<b>FOSRENOL ORAL PACKET</b>	3	ST; QL
lanthanum carbonate oral tablet chewable	1 or 1b*	QL
sevelamer carbonate oral packet	1 or 1b*	QL
sevelamer carbonate oral tablet	1 or 1b*	QL
sevelamer hcl oral tablet	1 or 1b*	QL
<b>VELPHORO ORAL TABLET CHEWABLE</b>	2	QL
<b>*Tryptophan Hydroxylase Inhibitors***</b>		
<b>XERMELO ORAL TABLET</b>	3	PA; QL; LD
<b>*Tumor Necrosis Factor Alpha Blockers***</b>		
<b>AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>INFliximab INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>REMICADE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP

Drug Name	Tier	Notes
<b>*General Anesthetics*</b>		
<b>*Anesthetics - Misc.***</b>		
<b>AMIDATE INTRAVENOUS SOLUTION</b>	3	
<b>ANESTHESIA S/I-40A INTRAVENOUS KIT</b>	3	
<b>ANESTHESIA S/I-40H INTRAVENOUS KIT</b>	3	
<b>ANESTHESIA S/I-40S INTRAVENOUS KIT</b>	3	
<b>DIPRIVAN INTRAVENOUS EMULSION 100 MG/10ML, 1000 MG/100ML, 200 MG/20ML, 500 MG/50ML</b>	3	
etomidate intravenous solution	1 or 1b*	
fresenius propoven intravenous emulsion 1000 mg/100ml, 200 mg/20ml, 500 mg/50ml	1 or 1b*	
<b>KETALAR INJECTION SOLUTION</b>	3	
ketamine hcl injection solution 100 mg/ml, 50 mg/ml	1 or 1b*	
propofol intravenous emulsion 1000 mg/100ml, 200 mg/20ml, 500 mg/50ml	1 or 1b*	
<b>*Barbiturate Anesthetics***</b>		
<b>BREVITAL SODIUM INJECTION SOLUTION RECONSTITUTED 500 MG</b>	3	
methohexitol sodium injection solution reconstituted	1 or 1b*	
<b>*Volatile Anesthetics***</b>		
desflurane inhalation solution	1 or 1b*	
<b>FORANE INHALATION SOLUTION</b>	3	
isoflurane inhalation solution	1 or 1b*	
sevoflurane inhalation solution	1 or 1b*	
<b>SUPRANE INHALATION SOLUTION</b>	3	
terrell inhalation solution	1 or 1b*	

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Drug Name	Tier	Notes
ULTANE INHALATION SOLUTION	3	
<b>*Genitourinary Agents - Miscellaneous*</b>		
<b>*5-Alpha Reductase Inhibitors***</b>		
dutasteride oral capsule	1 or 1b*	QL
finasteride oral tablet 5 mg	1 or 1b*	QL
PROSCAR ORAL TABLET	3	QL
<b>*Alpha 1-Adrenoceptor Antagonists***</b>		
alfuzosin hcl er oral tablet extended release 24 hour	1 or 1b*	QL
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	3	QL
silodosin oral capsule	1 or 1b*	QL
tamsulosin hcl oral capsule	1 or 1b*	QL
<b>*Anti-Infective Genitourinary Irrigants***</b>		
neomycin-polymyxin b gu irrigation solution	1 or 1b*	
<b>*Citrates***</b>		
potassium citrate er oral tablet extended release	1 or 1b*	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	3	
<b>*Cystinosis Agents***</b>		
CYSTAGON ORAL CAPSULE	3	PA; LD; SP
PROCYSBI ORAL CAPSULE DELAYED RELEASE	3	PA; LD
PROCYSBI ORAL PACKET	3	PA; LD
<b>*Genitourinary Irrigants***</b>		
acetic acid irrigation solution	1 or 1b*	
argyle sterile saline irrigation solution	1 or 1b*	
curity sterile saline irrigation solution	1 or 1b*	
glycine irrigation solution	1 or 1b*	

Drug Name	Tier	Notes
glycine urologic irrigation solution	1 or 1b*	
RENACIDIN IRRIGATION SOLUTION	3	
sodium chloride irrigation solution 0.9 %	1 or 1b*	
SORBITOL IRRIGATION SOLUTION 3 %	3	
SORBITOL-MANNITOL IRRIGATION SOLUTION	3	
<b>*Igan Agents - Endothelin &amp; Angiotensin II Receptor Antag***</b>		
FILSPARI ORAL TABLET	3	PA; QL; LD; SP
<b>*Interstitial Cystitis Agents***</b>		
ELMIRON ORAL CAPSULE	3	QL
RIMSO-50 INTRAVESICAL SOLUTION	3	
<b>*Phosphates***</b>		
K-PHOS NO 2 ORAL TABLET	3	
<b>*Prostatic Hypertrophy Agent Combinations***</b>		
dutasteride-tamsulosin hcl oral capsule	1 or 1b*	QL
<b>*Small Interfering Ribonucleic Acid Agents (Sirna)***</b>		
OXLUMO SUBCUTANEOUS SOLUTION	3	PA; LD
RIVFLOZA SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Urinary Stone Agents***</b>		
LITHOSTAT ORAL TABLET	3	
tiopronin oral tablet	1 or 1b*	PA; QL; LD
tiopronin oral tablet delayed release	1 or 1b*	PA; QL; LD

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Drug Name	Tier	Notes
VENXXIVA ORAL TABLET DELAYED RELEASE	1 or 1b*	PA; QL; LD
<b>*Gout Agents*</b>		
<b>*Gout Agent Combinations***</b>		
colchicine-probenecid oral tablet	1 or 1b*	
<b>*Gout Agents***</b>		
allopurinol oral tablet 100 mg, 300 mg	1 or 1a*	QL
allopurinol sodium intravenous solution reconstituted	1 or 1b*	
<b>ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
colchicine oral tablet	1 or 1b*	QL
febuxostat oral tablet	1 or 1b*	ST; QL
<b>GLOPERBA ORAL SOLUTION</b>	3	QL
<b>KRYSTEXXA INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP
<b>*Uricosurics***</b>		
probenecid oral tablet	1 or 1b*	
<b>*Hematological Agents - Misc.*</b>		
<b>*Agents For Congenital Thrombotic Thrombocytopenic Purpura*</b>		
adzynma intravenous kit	3	PA; LD
<b>*Aminolevulinate Synthase 1-Directed Sirna***</b>		
<b>GIVLAARI SUBCUTANEOUS SOLUTION</b>	3	PA; LD
<b>*Antihemophilic Products - Monoclonal Antibodies***</b>		
<b>HEMLIBRA SUBCUTANEOUS SOLUTION</b>	3	PA; LD; SP
<b>*Antihemophilic Products***</b>		
<b>ADVATE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP

Drug Name	Tier	Notes
<b>ADYNNOVATE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>AFSTYLA INTRAVENOUS KIT</b>	3	PA; LD; SP
<b>ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT</b>	3	PA; LD; SP
<b>ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>ALTUVIPIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT</b>	3	PA; LD; SP
<b>BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>BENEFIX INTRAVENOUS KIT</b>	3	PA; LD; SP
<b>COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>CORIFACT INTRAVENOUS KIT</b>	3	PA; LD; SP
<b>ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
<b>ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT</b>	3	PA; LD; SP

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT	3	PA; LD; SP	NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	3	PA; LD; SP	NUWIQ INTRAVENOUS KIT	3	PA; LD; SP
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	3	PA; LD; SP	NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	obizur intravenous solution reconstituted	3	PA; LD; SP
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT	3	PA; LD; SP	REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
JIVI INTRAVENOUS SOLUTION RECONSTITUTED 4000 UNIT	3	PA	RECOMBIMATE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
KCENTRA INTRAVENOUS KIT	3		RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
KOATE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	3	PA; LD; SP	SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 5 MG	3	PA; LD; SP
KOGENATE FS INTRAVENOUS KIT	3	PA; LD; SP	TRETEN INTRAVENOUS SOLUTION RECONSTITUTED 2500 UNIT	3	PA; LD; SP
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP	VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
			WILATE INTRAVENOUS KIT	3	PA; LD; SP

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	3	PA; LD; SP	ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML	3	PA; QL; LD; SP
XYNTHA SOLOFUSE INTRAVENOUS KIT	3	PA; LD; SP	VEOPOZ INJECTION SOLUTION	3	PA; QL; LD
*Anti-Von Willebrand Factor Agents***			ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD
CABLIVI INJECTION KIT	3	PA; LD	*Complement C5a Inhibitors***		
*Bradykinin B2 Receptor Antagonists***			gohibic intravenous solution	3	
icatibant acetate subcutaneous solution prefilled syringe	3	PA; QL; LD; SP	*Complement C5a Receptor Inhibitors***		
sajazir subcutaneous solution prefilled syringe	3	PA; QL; LD	TAVNEOS ORAL CAPSULE	3	PA; QL; LD
*C1 Esterase Inhibitors***			*Complement Factor B Inhibitors***		
BERINERT INTRAVENOUS KIT	3	PA; QL; LD; SP	FABHALTA ORAL CAPSULE	3	PA; QL; LD
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP	*Complement Factor D Inhibitors***		
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP	VOYDEYA ORAL TABLET	3	PA; QL; LD
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; QL; LD; SP	VOYDEYA ORAL TABLET THERAPY PACK	3	PA; QL; LD
*Complement C1 Inhibitors***			*Direct-Acting P2y12 Inhibitors***		
ENJAYMO INTRAVENOUS SOLUTION	3	PA; QL; LD; SP	BRILINTA ORAL TABLET	2	QL
*Complement C3 Inhibitors***			KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED	3	
EMPAVELI SUBCUTANEOUS SOLUTION	3	PA; QL; LD	*Glycoprotein Iib/Iiia Receptor Inhibitors***		
*Complement C5 Inhibitors***			AGGRASTAT INTRAVENOUS CONCENTRATE	3	
PIASKY INJECTION SOLUTION	3	PA; QL; LD; SP	AGGRASTAT INTRAVENOUS SOLUTION 12.5-0.9 MG/250ML-%, 5-0.9 MG/100ML-%	3	
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML	3	PA; QL; LD; SP	eptifibatide intravenous solution 20 mg/10ml, 200 mg/100ml, 75 mg/100ml	1 or 1b*	
			tirofiban hcl in nacl intravenous solution	1 or 1b*	

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Drug Name	Tier	Notes
<b>*Hematorheologic Agents***</b>		
pentoxifylline er oral tablet extended release	1 or 1b*	
<b>*Hemin***</b>		
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG	3	LD
<b>*Human Protein C***</b>		
CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
<b>*Phosphodiesterase Iii Inhibitors***</b>		
cilostazol oral tablet	1 or 1b*	
<b>*Plasma Expanders***</b>		
hetastarch-nacl intravenous solution	1 or 1b*	
HEXTEND INTRAVENOUS SOLUTION	3	
lmd in d5w intravenous solution	1 or 1b*	
lmd in nacl intravenous solution	1 or 1b*	
<b>*Plasma Kallikrein Inhibitors - Monoclonal Antibodies***</b>		
TAKHZYRO SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Plasma Kallikrein Inhibitors***</b>		
KALBITOR SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
ORLADEYO ORAL CAPSULE	3	PA; QL; LD
<b>*Plasma Proteins***</b>		
ALBUKED 25 INTRAVENOUS SOLUTION	3	

Drug Name	Tier	Notes
ALBUKED 5 INTRAVENOUS SOLUTION	3	
ALBUMIN HUMAN INTRAVENOUS SOLUTION	3	
ALBUMINEX INTRAVENOUS SOLUTION	3	
ALBUMIN-ZLB INTRAVENOUS SOLUTION	3	
ALBURX INTRAVENOUS SOLUTION	3	
ALBUTEIN INTRAVENOUS SOLUTION	3	
FLEXBUMIN INTRAVENOUS SOLUTION	3	
KEDBUMIN INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION	3	
OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION	3	
RYPLAZIM INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT	3	
<b>*Platelet Aggregation Inhibitor Combinations***</b>		
aspirin-dipyridamole er oral capsule extended release 12 hour	1 or 1b*	QL

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Drug Name	Tier	Notes
YOSPRALA ORAL TABLET DELAYED RELEASE	3	PA; QL
<b>*Platelet Aggregation Inhibitors***</b>		
dipyridamole oral tablet	1 or 1b*	
<b>*Protamine***</b>		
protamine sulfate intravenous solution	1 or 1b*	
<b>*Protease-Activated Receptor-1 (Par-1) Antagonists***</b>		
ZONTIVITY ORAL TABLET	3	PA; QL
<b>*Pyruvate Kinase Activators***</b>		
PYRUKYND ORAL TABLET	3	PA; QL; LD
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	3	PA; QL; LD
<b>*Quinazoline Agents***</b>		
AGRYLIN ORAL CAPSULE	3	QL
anagrelide hcl oral capsule	1 or 1b*	QL
<b>*Spleen Tyrosine Kinase (Syk) Inhibitors***</b>		
TAVALISSE ORAL TABLET	3	PA; QL; LD
<b>*Thienopyridine Derivatives***</b>		
clopidogrel bisulfate oral tablet	1 or 1b*	QL
prasugrel hcl oral tablet	1 or 1b*	QL
<b>*Thrombolytic Agent - Misc***</b>		
DEFITELIO INTRAVENOUS SOLUTION	3	LD
<b>*Tissue Plasminogen Activators***</b>		
ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED	3	
CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED	3	

Drug Name	Tier	Notes
TNKASE INTRAVENOUS KIT	3	
<b>*Hematopoietic Agents*</b>		
<b>*Agents For Gaucher Disease***</b>		
CERDELGA ORAL CAPSULE	2	PA; QL; LD; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	2	PA; LD; SP
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
miglustat oral capsule	2	PA; QL; LD; SP
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
YARGESA ORAL CAPSULE	2	PA; QL; LD; SP
<b>*Amino Acids***</b>		
l-glutamine oral packet	3	PA; LD; SP
<b>*Cobalamins***</b>		
cyanocobalamin injection solution 1000 mcg/ml	1 or 1a*	
hydroxocobalamin acetate intramuscular solution	1 or 1b*	
<b>*Cxcr4 Receptor Antagonist***</b>		
APHEXDA SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; LD
MOZOBIL SUBCUTANEOUS SOLUTION	3	PA; LD; SP
plerixafor subcutaneous solution	3	PA; LD; SP
XOLREMDI ORAL CAPSULE	3	PA; QL; LD
<b>*Cytotoxic Agents***</b>		
DROXIA ORAL CAPSULE	2	
SIKLOS ORAL TABLET	3	PA; LD; SP

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
<b>*Erythroid Maturation Agents***</b>					
<b>REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED</b>	3	PA; LD; SP	<b>NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>*Erythropoiesis- Stimulating Agents (Esas)***</b>					
<b>ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML</b>	3	PA; QL; LD; SP	<b>ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP	<b>UDENYCA ONBODY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML</b>	3	PA; QL; LD; SP	<b>UDENYCA SUBCUTANEOUS SOLUTION AUTO- INJECTOR</b>	3	PA; QL; LD; SP
<b>MIRCERA INJECTION SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD	<b>UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; QL; LD; SP
<b>PROCRIT INJECTION SOLUTION</b>	3	PA; QL; LD; SP	<b>ZARXIO INJECTION SOLUTION PREFILLED SYRINGE</b>	3	PA; LD; SP
<b>RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML</b>	3	PA; QL; LD; SP	<b>*Granulocyte/Macrophage Colony-Stimulating Factor(Gm-Csf)***</b>		
<b>*Folic Acid/Folates***</b>					
folic acid injection solution	1 or 1a*		<b>LEUKINE INJECTION SOLUTION RECONSTITUTED</b>	3	PA; LD; SP
folic acid oral tablet 1 mg	1 or 1a*		<b>*Iron Combinations***</b>		
<b>*Granulocyte Colony- Stimulating Factors (G- Csf)***</b>			<b>NIFEREX ORAL TABLET</b>	3	
<b>GRANIX SUBCUTANEOUS SOLUTION</b>	3	PA; LD; SP	<b>*Iron***</b>		
<b>GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	3	PA; LD; SP	<b>FERAHEME INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP
<b>NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT</b>	3	PA; QL; LD; SP	<b>FERRLECIT INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP
			ferumoxytol intravenous solution	3	PA; QL; LD; SP
			<b>INFED INJECTION SOLUTION</b>	3	PA; LD; SP
			na ferric gluc cplx in sucrose intravenous solution	3	PA; QL; LD; SP
			<b>VENOFER INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP

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Drug Name	Tier	Notes
<b>*Selectin Blockers***</b>		
ADAKVEO INTRAVENOUS SOLUTION	3	PA; LD; SP
<b>*Thrombopoietin (Tpo) Receptor Agonists***</b>		
DOPTELET ORAL TABLET 20 MG	3	PA; QL; LD; SP
MULPLETA ORAL TABLET	3	PA; QL; LD; SP
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
PROMACTA ORAL PACKET 12.5 MG	3	PA; DO; LD; SP
PROMACTA ORAL PACKET 25 MG	3	PA; QL; LD; SP
PROMACTA ORAL TABLET 12.5 MG, 25 MG	3	PA; DO; LD; SP
PROMACTA ORAL TABLET 50 MG, 75 MG	3	PA; QL; LD; SP
<b>*Hemostatics*</b>		
<b>*Hemostatic Combinations - Topical***</b>		
ARTISS EXTERNAL KIT	3	
ARTISS EXTERNAL SOLUTION	3	
THROMBI-GEL 10 EXTERNAL PAD	3	
THROMBI-GEL 100 EXTERNAL PAD	3	
THROMBI-GEL 40 EXTERNAL PAD	3	
THROMBI-PAD EXTERNAL PAD	3	
TISSEEL EXTERNAL KIT	3	
TISSEEL EXTERNAL SOLUTION	3	
<b>*Hemostatics - Systemic***</b>		
aminocaproic acid intravenous solution	1 or 1b*	
aminocaproic acid oral solution	1 or 1b*	QL
aminocaproic acid oral tablet 1000 mg	1 or 1b*	
aminocaproic acid oral tablet 500 mg	1 or 1b*	QL

Drug Name	Tier	Notes
CYKLOKAPRON INTRAVENOUS SOLUTION 1000 MG/10ML	3	
tranexamic acid intravenous solution 1000 mg/10ml	1 or 1b*	
tranexamic acid oral tablet	1 or 1b*	QL
TRANEXAMIC ACID- NACL INTRAVENOUS SOLUTION	3	
<b>*Hemostatics - Topical***</b>		
ACTIFOAM COLLAGEN SPONGE EXTERNAL	3	
AVITENE EXTERNAL PAD	3	
AVITENE FLOUR EXTERNAL POWDER	3	
ENDO AVITENE EXTERNAL	3	
GELFILM EXTERNAL FILM	3	
GEL-FLOW NT EXTERNAL PREFILLED SYRINGE	3	
GELFOAM COMPRESSED SIZE 100 EXTERNAL	3	
GELFOAM DENTAL PACK SIZE 4 EXTERNAL	3	
GELFOAM MOUTH/THROAT POWDER	3	
GELFOAM SPONGE EXTERNAL	3	
GELFOAM SPONGE SIZE 100 EXTERNAL	3	
GELFOAM SPONGE SIZE 200 EXTERNAL	3	
GELFOAM SPONGE SIZE 50 EXTERNAL	3	
INSTAT EXTERNAL PAD	3	
INTERCEED (TC7) EXTERNAL PAD	3	
INTERCEED EXTERNAL PAD	3	
RECOOTHROM EXTERNAL SOLUTION RECONSTITUTED	3	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
RECOETHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED	3	
SURGICEL FIBRILLAR EXTERNAL PAD	3	
SURGICEL NU-KNIT EXTERNAL PAD	3	
SURGICEL SNOW 1"X2" EXTERNAL PAD	3	
SURGICEL SNOW 2"X4" EXTERNAL PAD	3	
SURGICEL SNOW 4"X4" EXTERNAL PAD	3	
SYRINGE AVITENE EXTERNAL	3	
THROMBIN-JMI EPISTAXIS EXTERNAL KIT	3	
THROMBIN-JMI EXTERNAL KIT	3	
THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED	3	
THROMBOGEN EXTERNAL KIT	3	
THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED	3	
ULTRAFOAM SPONGE 2X6.25X7CM EXTERNAL	3	
ULTRAFOAM SPONGE 8X12.5X1CM EXTERNAL	3	
ULTRAFOAM SPONGE 8X12.5X3CM EXTERNAL	3	
ULTRAFOAM SPONGE 8X25X1CM EXTERNAL	3	
ULTRAFOAM SPONGE 8X6.25X1CM EXTERNAL	3	
*Hypnotics/Sedatives/Sleep Disorder Agents*		
*Barbiturate Hypnotics***		
pentobarbital sodium injection solution	1 or 1b*	
phenobarbital oral elixir	1 or 1b*	QL
phenobarbital oral tablet 100 mg, 60 mg, 64.8 mg, 97.2 mg	1 or 1b*	QL
phenobarbital oral tablet 15 mg, 16.2 mg, 30 mg, 32.4 mg	1 or 1b*	DO

Drug Name	Tier	Notes
phenobarbital sodium injection solution	1 or 1b*	
SEZABY INTRAVENOUS SOLUTION RECONSTITUTED	3	
*Benzodiazepine Hypnotics***		
BYFAVO INTRAVENOUS SOLUTION RECONSTITUTED	3	LD
estazolam oral tablet	1 or 1b*	QL
flurazepam hcl oral capsule	1 or 1b*	QL
HALCION ORAL TABLET	3	ST; QL
midazolam hcl (pf) injection solution	1 or 1b*	
midazolam hcl injection solution 10 mg/10ml, 10 mg/2ml, 2 mg/2ml, 25 mg/5ml, 5 mg/5ml, 5 mg/ml, 50 mg/10ml	1 or 1b*	
midazolam hcl oral syrup	1 or 1b*	QL
MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.8 MG/100ML-%, 50-0.8 MG/50ML-%	3	
midazolam-sodium chloride (pf) intravenous solution	3	
quazepam oral tablet	1 or 1b*	QL
RESTORIL ORAL CAPSULE	3	ST; QL
temazepam oral capsule	1 or 1b*	QL
triazolam oral tablet	1 or 1b*	QL
*Hypnotics - Tricyclic Agents***		
doxepin hcl oral tablet	1 or 1b*	ST; QL
*Non-Benzodiazepine - Gaba-Receptor Modulators***		
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	3	ST; QL
eszopiclone oral tablet	1 or 1b*	QL
zaleplon oral capsule	1 or 1b*	QL
zolpidem tartrate er oral tablet extended release	1 or 1b*	QL
zolpidem tartrate oral tablet	1 or 1b*	QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
zolpidem tartrate sublingual tablet sublingual	1 or 1b*	ST; QL
<b>*Orexin Receptor Antagonists***</b>		
QUVIVIQ ORAL TABLET	3	ST; QL
<b>*Selective Alpha2-Adrenoreceptor Agonist Sedatives***</b>		
dexmedetomidine hcl in nacl intravenous solution 200 mcg/50ml, 400 mcg/100ml, 80 mcg/20ml	1 or 1b*	
<b>DEXMEDETOMIDINE HCL INTRAVENOUS SOLUTION 1000 MCG/10ML, 400 MCG/4ML</b>	3	
dexmedetomidine hcl intravenous solution 200 mcg/2ml	1 or 1b*	
<b>DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION</b>	3	
<b>IGALMI SUBLINGUAL FILM</b>	3	PA; QL
<b>PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML</b>	3	
<b>*Selective Melatonin Receptor Agonists***</b>		
<b>HETLIOZ LQ ORAL SUSPENSION</b>	3	PA; QL; LD
ramelteon oral tablet	1 or 1b*	QL
tasimelteon oral capsule	3	PA; QL; LD
<b>*Laxatives*</b>		
<b>*Bowel Evacuant Combinations***</b>		
<b>GAVILYTE-C ORAL SOLUTION RECONSTITUTED</b>	1 or 1a*	\$0; QL
gavilyte-g oral solution reconstituted	1 or 1a*	\$0; QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>GAVILYTE-N WITH FLAVOR PACK ORAL SOLUTION RECONSTITUTED</b>	1 or 1a*	\$0; QL
na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml	1 or 1b*	\$0; QL
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	1 or 1a*	\$0; QL
peg-3350/electrolytes oral solution reconstituted	1 or 1a*	\$0; QL
peg-3350/electrolytes/ascorbat oral solution reconstituted	1 or 1b*	\$0; QL
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	1 or 1b*	\$0; QL
<b>PEG-PREP ORAL KIT</b>	3	QL
<b>*Laxatives - Miscellaneous***</b>		
constulose oral solution	1 or 1b*	
<b>KRISTALOSE ORAL PACKET</b>	3	ST; QL
<b>LACTULOSE ORAL PACKET 10 GM</b>	3	ST; QL
lactulose oral solution	1 or 1b*	
polyethylene glycol 3350 oral powder	1 or 1b*	\$0
<b>*Lubricant Laxatives***</b>		
mineral oil heavy oral oil	1 or 1b*	
<b>*Stimulant Laxatives***</b>		
bisacodyl ec oral tablet delayed release	1 or 1a*	\$0
<b>*Local Anesthetics- Parenteral*</b>		
<b>*Local Anesthetic &amp; Sympathomimetic***</b>		
articadent dental injection solution cartridge 4 % - 1:100000	3	
bupivacaine-epinephrine (pf) injection solution 0.25% - 1:200000, 0.5% -1:200000	1 or 1b*	
bupivacaine-epinephrine injection solution 0.25% - 1:200000, 0.5% -1:200000	1 or 1b*	
lidocaine-epinephrine (pf) injection solution 1.5 % - 1:200000	1 or 1b*	

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Drug Name	Tier	Notes
lidocaine-epinephrine injection solution 0.5 % - 1:200000, 2 %-1:100000	1 or 1b*	
<b>MARCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.25-1:200000 %, 0.5% -1:200000</b>	3	
<b>MARCAINE/EPINEPHRINE PF INJECTION SOLUTION</b>	3	
<b>ORABLOC INJECTION SOLUTION CARTRIDGE</b>	3	
sensorcaine/epinephrine injection solution	1 or 1b*	
sensorcaine-mpf/epinephrine injection solution 0.25% - 1:200000	1 or 1b*	
sensorcaine-mpf/epinephrine injection solution 0.5% - 1:200000	3	
<b>SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.75-1:200000 %</b>	3	
<b>XYLOCAINE/EPINEPHRINE INJECTION SOLUTION</b>	3	
<b>XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION</b>	3	
<b>*Local Anesthetics - Amides***</b>		
<b>BUPIVACAINE FISIOPHARMA INJECTION SOLUTION</b>	3	
bupivacaine hcl (pf) injection solution	1 or 1b*	
lidocaine hcl (pf) injection solution	1 or 1b*	
lidocaine hcl injection solution 0.5 %	1 or 1b*	
<b>MARCAINE INJECTION SOLUTION</b>	3	
<b>MARCAINE PRESERVATIVE FREE INJECTION SOLUTION</b>	3	
<b>MONOJECT BONE MARROW BIOPSY INJECTION KIT</b>	3	

Drug Name	Tier	Notes
<b>NAROPIN INJECTION SOLUTION</b>	3	
polocaine injection solution	1 or 1b*	
polocaine-mpf injection solution	1 or 1b*	
<b>POSIMIR INJECTION SOLUTION</b>	3	
ropivacaine hcl injection solution 10 mg/ml, 5 mg/ml, 7.5 mg/ml	1 or 1b*	
sensorcaine injection solution	1 or 1b*	
sensorcaine-mpf injection solution	1 or 1b*	
<b>XARACOLL IMPLANT IMPLANT</b>	3	
<b>XYLOCAINE INJECTION SOLUTION</b>	3	
<b>XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 %</b>	3	
<b>*Local Anesthetics - Esters***</b>		
chlorprocaine hcl (pf) injection solution	1 or 1b*	
<b>NESACAINE INJECTION SOLUTION</b>	3	
<b>NESACAINE-MPF INJECTION SOLUTION</b>	3	
<b>*Macrolides*</b>		
<b>*Azithromycin***</b>		
azithromycin intravenous solution reconstituted 500 mg	1 or 1b*	
azithromycin oral suspension reconstituted	1 or 1b*	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	1 or 1b*	
<b>ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>ZITHROMAX ORAL PACKET</b>	3	
<b>ZITHROMAX ORAL SUSPENSION RECONSTITUTED</b>	3	
<b>ZITHROMAX ORAL TABLET 250 MG, 500 MG</b>	3	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
ZITHROMAX TRI-PAK ORAL TABLET	3	
ZITHROMAX Z-PAK ORAL TABLET	3	
<b>*Clarithromycin***</b>		
clarithromycin er oral tablet extended release 24 hour	1 or 1b*	
clarithromycin oral suspension reconstituted	1 or 1b*	
clarithromycin oral tablet	1 or 1b*	
<b>*Erythromycins***</b>		
e.e.s. 400 oral tablet	1 or 1b*	
ery-tab oral tablet delayed release	1 or 1b*	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	3	
erythromycin base oral capsule delayed release particles	1 or 1b*	
erythromycin base oral tablet	1 or 1b*	
erythromycin base oral tablet delayed release	1 or 1b*	
erythromycin ethylsuccinate oral suspension reconstituted	1 or 1b*	
erythromycin ethylsuccinate oral tablet	1 or 1b*	
erythromycin lactobionate intravenous solution reconstituted	1 or 1b*	
erythromycin oral tablet delayed release	1 or 1b*	
<b>*Fidaxomicin***</b>		
DIFICID ORAL SUSPENSION RECONSTITUTED	3	QL
DIFICID ORAL TABLET	3	QL
<b>*Medical Devices And Supplies*</b>		
<b>*Cervical Caps***</b>		
FEMCAP VAGINAL DEVICE	2	\$0
<b>*Dental Desensitizing Products***</b>		
REMESENSE DENTAL	3	

Drug Name	Tier	Notes
<b>*Dentifrices***</b>		
MI PASTE DENTAL PASTE	3	
MI PASTE PLUS DENTAL PASTE	3	
<b>*Diaphragms***</b>		
CAYA VAGINAL DIAPHRAGM	2	\$0
OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM	3	\$0
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM	2	\$0
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM	2	\$0
<b>*Glucose Monitoring Test Supplies***</b>		
BD MICROTAINER LANCETS	2	QL
DEXCOM G6 RECEIVER DEVICE	2	PA; QL
DEXCOM G6 SENSOR	2	PA; QL
DEXCOM G6 TRANSMITTER	2	PA; QL
DEXCOM G7 RECEIVER DEVICE	2	PA; QL
DEXCOM G7 SENSOR	2	PA; QL
ENLITE GLUCOSE SENSOR	3	PA; QL

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
EVERSENSE 365 SENSOR/HOLDER	3	QL	BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML	2	QL
EVERSENSE 365 SMART TRANSMIT	3	PA; QL	BD INSULIN SYRINGE U-500	2	QL
EVERSENSE SENSOR/HOLDER	3	PA	BD PEN NEEDLE NANO U/F	2	QL
EVERSENSE SMART TRANSMITTER	3	PA; QL	BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML	2	QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA; QL	BD VEO INSULIN SYRINGE U/F	2	QL
GUARDIAN 4 TRANSMITTER	3	PA; QL	DROPSAFE SAFETY SYRINGE/NEEDLE	3	ST; QL
GUARDIAN CONNECT TRANSMITTER	3	PA; QL	insulin syringe-needle u-100 27g x 1/2" 0.5 ml, 27g x 1/2" 1 ml, 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 30g x 1/2" 1 ml	3	ST; QL
GUARDIAN LINK 3 TRANSMITTER	3	PA; QL	INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	3	ST; QL
GUARDIAN REAL-TIME REPLACE PED DEVICE	3	PA; QL	MAGELLAN INSULIN SAFETY SYR	3	ST; QL
GUARDIAN SENSOR (3)	3	PA; QL	MARATHON MEDICAL PENTIPS	3	ST; QL
GUARDIAN SENSOR 3	3	PA; QL	MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, U-100 1 ML	3	ST; QL
MINILINK REAL-TIME TRANSMITTER	3	PA	MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML	3	ST; QL
MINIMED 630G GUARDIAN PRESS	3	PA	PEN NEEDLES 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	3	ST; QL
PARADIGM REAL-TIME TRANSMITTER	3	PA	PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	3	ST; QL
*Insulin Administration Supplies***			PRO COMFORT PEN NEEDLES 32G X 4 MM , 32G X 5 MM	3	ST; QL
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	2	PA; QL	sure comfort pen needles 31g x 6 mm	3	ST; QL
OMNIPOD 5 DEXG7G6 PODS GEN 5	2	PA; QL			
OMNIPOD 5 LIBRE2 PLUS G6 KIT	2	PA; QL			
OMNIPOD 5 LIBRE2 PLUS G6 PODS	2	PA; QL			
OMNIPOD DASH INTRO (GEN 4) KIT	2	PA; QL			
OMNIPOD DASH PDM (GEN 4) KIT	2	PA; QL			
OMNIPOD DASH PODS (GEN 4)	2	PA; QL			
*Needles & Syringes***					
aq insulin syringe	3	ST; QL			
aqinject pen needle	3	ST; QL			
BD INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	2	QL			

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
SURE COMFORT PEN NEEDLES 32G X 4 MM	3	ST; QL
ULTICARE INSULIN SAFETY SYR	3	ST; QL
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML	3	ST; QL
ULTICARE PEN NEEDLES 29G X 12.7MM	3	ST; QL
ULTICARE SHORT PEN NEEDLES 31G X 8 MM	3	ST; QL
<b>*Migraine Products*</b>		
<b>*Calcitonin Gene-Related Peptide Receptor Antag (Cgrp)***</b>		
NURTEC ORAL TABLET DISPERSIBLE	2	QL
QULIPTA ORAL TABLET	2	QL
UBRELVY ORAL TABLET	2	QL
<b>*Cgrp Receptor Antagonists - Monocolonal Antibodies***</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Ergot Combinations***</b>		
ergotamine-caffeine oral tablet	1 or 1b*	
migergot rectal suppository	1 or 1b*	
<b>*Migraine Products***</b>		
dihydroergotamine mesylate injection solution	1 or 1b*	PA; QL
<b>*Selective Serotonin Agonists 5-HT(1)***</b>		
almotriptan malate oral tablet	1 or 1b*	QL
eletriptan hydrobromide oral tablet	1 or 1b*	QL
frovatriptan succinate oral tablet	1 or 1b*	ST; QL
naratriptan hcl oral tablet	1 or 1b*	QL
rizatriptan benzoate oral tablet	1 or 1b*	QL
rizatriptan benzoate oral tablet dispersible	1 or 1b*	QL
sumatriptan nasal solution	1 or 1b*	QL
sumatriptan succinate oral tablet	1 or 1b*	QL
sumatriptan succinate refill subcutaneous solution cartridge	1 or 1b*	QL
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	1 or 1b*	QL
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	1 or 1b*	QL
zolmitriptan nasal solution	1 or 1b*	ST; QL
zolmitriptan oral tablet	1 or 1b*	QL
zolmitriptan oral tablet dispersible	1 or 1b*	QL
<b>*Minerals &amp; Electrolytes*</b>		
<b>*Bicarbonates***</b>		
SODIUM ACETATE INTRAVENOUS SOLUTION 2 MEQ/ML	3	
sodium acetate intravenous solution 4 meq/ml	1 or 1b*	
sodium bicarbonate intravenous solution 4.2 %, 7.5 %	1 or 1b*	
THAM INTRAVENOUS SOLUTION	3	

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Drug Name	Tier	Notes
<b>*Calcium Combinations***</b>		
CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION 1-0.675 GM/50ML-%, 1-0.8 GM/100ML-%, 2-0.675 GM/100ML-%	3	
<b>*Calcium***</b>		
CALCIUM GLUCONATE INTRAVENOUS SOLUTION	3	
<b>*Electrolytes &amp; Dextrose***</b>		
DEXTROSE 5%/ELECTROLYTE #48 INTRAVENOUS SOLUTION	3	
dextrose in lactated ringers intravenous solution	1 or 1b*	
dextrose-nacl intravenous solution 5-0.9 %	3	
DEXTROSE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 10-0.2 %, 5-0.225 %, 5-0.3 %	3	
dextrose-sodium chloride intravenous solution 10-0.45 %, 5-0.2 %, 5-0.33 %, 5-0.45 %, 5-0.9 %	1 or 1b*	
dextrose-sodium chloride intravenous solution 2.5-0.45 %	3	
IONOSOL-MB IN D5W INTRAVENOUS SOLUTION	3	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	3	
kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%	1 or 1b*	
KCL IN DEXTROSE-NACL INTRAVENOUS SOLUTION 20-5-0.225 MEQ/L-%-%, 40-5-0.9 MEQ/L-%-%	3	

Drug Name	Tier	Notes
KCL-LACTATED RINGERS-D5W INTRAVENOUS SOLUTION	3	
NORMOSOL-M IN D5W INTRAVENOUS SOLUTION	3	
NORMOSOL-R IN D5W INTRAVENOUS SOLUTION	3	
potassium cl in dextrose 5% intravenous solution 10 meq/l, 20 meq/l	1 or 1b*	
<b>*Electrolytes Parenteral***</b>		
ISOLYTE-S INTRAVENOUS SOLUTION	3	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	3	
kcl (0.149%) in nacl intravenous solution	1 or 1b*	
kcl (0.298%) in nacl intravenous solution	1 or 1b*	
lactated ringers intravenous solution	1 or 1b*	
multiple electro type 1 ph 5.5 intravenous solution	1 or 1b*	
multiple electro type 1 ph 7.4 intravenous solution	1 or 1b*	
NORMOSOL-R INTRAVENOUS SOLUTION	3	
NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION	3	
PLASMA-LYTE A INTRAVENOUS SOLUTION	3	
POTASSIUM CHLORIDE IN NACL INTRAVENOUS SOLUTION 20-0.45 MEQ/L-%, 40-0.9 MEQ/L-%	3	
potassium chloride in nacl intravenous solution 20-0.9 meq/l-%	3	
ringers intravenous solution	1 or 1b*	
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	3	

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Drug Name	Tier	Notes
<b>*Fluoride Combinations***</b>		
FLORIVA ORAL LIQUID	3	ST
<b>*Fluoride***</b>		
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	1 or 1a*	\$0
sodium fluoride oral tablet	1 or 1a*	\$0
sodium fluoride oral tablet chewable	1 or 1a*	\$0
<b>*Magnesium***</b>		
MAGNESIUM SULFATE IN D5W INTRAVENOUS SOLUTION 1-5 GM/100ML-%	3	
MAGNESIUM SULFATE INJECTION SOLUTION 50 %	1 or 1b*	
MAGNESIUM SULFATE INTRAVENOUS SOLUTION 2 GM/50ML, 20 GM/500ML, 4 GM/100ML, 4 GM/50ML, 40 GM/1000ML	3	
<b>*Manganese***</b>		
manganese chloride intravenous solution	1 or 1b*	
<b>*Phosphate***</b>		
GLYCOPHOS INTRAVENOUS SOLUTION	3	
K-PHOS ORAL TABLET	2	
K-PHOS-NEUTRAL ORAL TABLET	3	
phospha 250 neutral oral tablet	1 or 1b*	
phosphorous oral tablet	1 or 1b*	
phospho-trin 250 neutral oral tablet	1 or 1b*	
phospho-trin k500 oral tablet	1 or 1b*	
POTASSIUM PHOSPHATES INTRAVENOUS SOLUTION 15 MMOLE/5ML, 150 MMOLE/50ML	3	
potassium phosphates intravenous solution 45 mmole/15ml	1 or 1b*	
potassium phosphates(66 meq k) intravenous solution	3	

Drug Name	Tier	Notes
POTASSIUM PHOSPHATES(71 MEQ K) INTRAVENOUS SOLUTION	3	
potassium phosphates-nacl intravenous solution 30 mmol/500ml	3	
sodium phosphates intravenous solution	1 or 1b*	
wes-phos 250 neutral oral tablet	1 or 1b*	
<b>*Potassium***</b>		
klor-con 10 oral tablet extended release	1 or 1b*	
klor-con m10 oral tablet extended release	1 or 1a*	
klor-con m15 oral tablet extended release	1 or 1a*	
klor-con m20 oral tablet extended release	1 or 1a*	
klor-con oral packet 20 meq	1 or 1b*	
klor-con oral tablet extended release	1 or 1b*	
POTASSIUM ACETATE INTRAVENOUS SOLUTION 2 MEQ/ML	3	
potassium chloride crys er oral tablet extended release	1 or 1a*	
potassium chloride er oral capsule extended release	1 or 1b*	
potassium chloride er oral tablet extended release	1 or 1b*	
POTASSIUM CHLORIDE INTRAVENOUS SOLUTION 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/100ML, 20 MEQ/50ML, 40 MEQ/100ML	3	
potassium chloride intravenous solution 2 meq/ml	1 or 1b*	
potassium chloride oral packet	1 or 1b*	
potassium chloride oral solution 10 %, 20 meq/15ml (10%), 40 meq/15ml (20%)	1 or 1b*	
<b>*Sodium***</b>		
aquastat intravenous solution	1 or 1b*	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
AQUASTAT SFR INTRAVENOUS SOLUTION	1 or 1b*	
bd posiflush intravenous solution	1 or 1b*	
BD POSIFLUSH SAFESCRUB INTRAVENOUS SOLUTION	1 or 1b*	
monoject flush syringe intravenous solution	1 or 1b*	
monoject sodium chloride flush intravenous solution	1 or 1b*	
normal saline flush intravenous solution	1 or 1b*	
saline flush intravenous solution	1 or 1b*	
sodium chloride (pf) injection solution	1 or 1b*	
sodium chloride injection solution 2.5 meq/ml	1 or 1b*	
sodium chloride intravenous solution 0.45 %, 3 %, 5 %	1 or 1b*	
<b>*Trace Mineral Combinations***</b>		
MULTITRACE-4 PEDIATRIC INTRAVENOUS SOLUTION	3	
MULTRY'S INTRAVENOUS SOLUTION	3	
THE LIQUILIFT TRACE INTRAVENOUS KIT	3	
TRALEMENT INTRAVENOUS SOLUTION	3	
<b>*Trace Minerals***</b>		
chromic chloride intravenous solution	1 or 1b*	
cupric chloride intravenous solution	3	
SELENIOUS ACID INTRAVENOUS SOLUTION 12 MCG/2ML, 60 MCG/ML	3	
SELENIOUS ACID INTRAVENOUS SOLUTION 40 MCG/ML	1 or 1b*	

Drug Name	Tier	Notes
<b>*Zinc***</b>		
GALZIN ORAL CAPSULE	3	
zinc chloride intravenous solution	3	
zinc sulfate intravenous solution	1 or 1b*	
<b>*Miscellaneous Therapeutic Classes*</b>		
<b>*Activated Phosphoinositide 3-Kinase Delta Syndrome Agent***</b>		
JOENJA ORAL TABLET	3	PA; QL; LD
<b>*Antileprotics***</b>		
THALOMID ORAL CAPSULE 100 MG, 50 MG	2	PA; QL; LD; SP
<b>*B-Lymphocyte Stimulator (Blys)-Specific Inhibitors***</b>		
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Chelating Agents***</b>		
DEPEN TITRATABS ORAL TABLET	3	PA; QL; LD; SP
penicillamine oral tablet	1 or 1b*	PA; QL; LD; SP
trientine hcl oral capsule 250 mg	1 or 1b*	PA; QL; LD; SP
<b>*Continuous Renal Replacement Therapy (Crrt) Solutions***</b>		
PHOXILLUM B22K4/0 EXTRACORPOREAL SOLUTION	3	
PHOXILLUM BK4/2.5 EXTRACORPOREAL SOLUTION	3	
PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION	3	

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION	3		*Immunomodulators - Combinations***		
PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION	3		VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION	3		*Immunomodulators For Myelodysplastic Syndromes***		
PRISMASOL BGK 4/0/1.2 EXTRACORPOREAL SOLUTION	3		lenalidomide oral capsule	1 or 1b*	PA; QL; LD; SP
PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION	3		REVLIMID ORAL CAPSULE	2	PA; QL; LD; SP
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION	3		*Inosine Monophosphate Dehydrogenase Inhibitors***		
<b>*Cyclosporine Analogs***</b>			CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP
cyclosporine modified oral capsule	1 or 1b*	LD	CELLCEPT ORAL CAPSULE	3	ST; LD
cyclosporine modified oral solution	1 or 1b*	LD	CELLCEPT ORAL SUSPENSION RECONSTITUTED	3	ST; LD
cyclosporine oral capsule	1 or 1b*	LD	CELLCEPT ORAL TABLET	3	ST; LD
gengraf oral capsule 100 mg, 25 mg	1 or 1b*	LD	mycophenolate mofetil hcl intravenous solution reconstituted	1 or 1b*	LD; SP
gengraf oral solution	1 or 1b*	LD	mycophenolate mofetil intravenous solution reconstituted	1 or 1b*	LD; SP
LUPKYNIS ORAL CAPSULE	3	PA; QL; LD	mycophenolate mofetil oral capsule	1 or 1b*	LD
<b>*Enzymes***</b>			mycophenolate mofetil oral suspension reconstituted	1 or 1b*	LD
AMPHADASE INJECTION SOLUTION	3		mycophenolate mofetil oral tablet	1 or 1b*	LD
HYLENEX INJECTION SOLUTION	3		mycophenolate sodium oral tablet delayed release	1 or 1b*	LD
XIAFLEX INJECTION SOLUTION RECONSTITUTED	3	PA; LD; SP	mycophenolic acid oral tablet delayed release 180 mg, 360 mg	1 or 1b*	LD
<b>*Farnesyltransferase Inhibitors***</b>			MYHIBBIN ORAL SUSPENSION	3	ST; LD
ZOKINVY ORAL CAPSULE	3	PA; QL; LD	<b>*Interleukin-6 (IL-6) Antagonists***</b>		
<b>*Immune Globulin Immunosuppressants***</b>			SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
ATGAM INTRAVENOUS SOLUTION	3	LD; SP			
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	3	LD; SP			

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>*Irrigation Solutions***</b>		
argyle sterile water irrigation solution	1 or 1b*	
lactated ringers irrigation solution	1 or 1b*	
physiolyte irrigation solution	1 or 1b*	
physiosol irrigation irrigation solution	1 or 1b*	
ringers irrigation irrigation solution	1 or 1b*	
sterile water for irrigation irrigation solution	1 or 1b*	
tis-u-sol irrigation solution	1 or 1b*	
water for irrigation, sterile irrigation solution	1 or 1b*	
<b>*Macrolide Immunosuppressants***</b>		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	LD
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	LD
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1 or 1b*	LD
PROGRAF INTRAVENOUS SOLUTION	2	LD; SP
PROGRAF ORAL PACKET	3	LD
sirolimus oral solution	1 or 1b*	LD
sirolimus oral tablet	1 or 1b*	LD
tacrolimus oral capsule	1 or 1b*	LD
ZORTRESS ORAL TABLET	3	LD
<b>*Monoclonal Antibodies***</b>		
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
GAMIFANT INTRAVENOUS SOLUTION	3	PA; LD; SP
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED	3	LD

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
UPLIZNA INTRAVENOUS SOLUTION	3	PA; QL; LD
<b>*Neonatal Fc Receptor (Fc<sub>rn</sub>) Antagonists***</b>		
RYSTIGGO SUBCUTANEOUS SOLUTION	3	PA; QL; LD; SP
VYVGART INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
<b>*Pik3ca-Related Overgrowth Spectrum Agents - Pi3k Inhib***</b>		
VIJOICE ORAL PACKET	3	PA; QL; LD; SP
VIJOICE ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
<b>*Potassium Removing Agents***</b>		
LOKELMA ORAL PACKET	3	QL
sodium polystyrene sulfonate oral powder	1 or 1b*	
sps (sodium polystyrene sulf) rectal suspension	1 or 1b*	
VELTASSA ORAL PACKET	3	QL
<b>*Purine Analogs***</b>		
azasan oral tablet	1 or 1b*	LD
azathioprine oral tablet	1 or 1b*	LD
AZATHIOPRINE SODIUM INJECTION SOLUTION RECONSTITUTED	3	LD
IMURAN ORAL TABLET	3	LD
<b>*Rock Inhibitors***</b>		
REZUROCK ORAL TABLET	3	PA; QL; LD
<b>*Sclerosing Agents***</b>		
ASCLERA INTRAVENOUS SOLUTION	3	
ETHAMOLIN INTRAVENOUS SOLUTION	3	
sodium tetradecyl sulfate intravenous solution	1 or 1b*	

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Drug Name	Tier	Notes
<b>SOTRADECOL INTRAVENOUS SOLUTION 1 %</b>	1 or 1b*	
sotradecol intravenous solution 3 %	1 or 1b*	
<b>VARITHENA INTRAVENOUS FOAM</b>	3	
<b>*Selective T-Cell Costimulation Blockers***</b>		
<b>NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	PA; LD
<b>*Type I Interferon (Ifn) Receptor Antagonists***</b>		
<b>SAPHNELO INTRAVENOUS SOLUTION</b>	3	PA; QL; LD; SP
<b>*Uremic Pruritus Agents***</b>		
<b>KORSUVA INTRAVENOUS SOLUTION</b>	3	PA
<b>*Mouth/Throat/Dental Agents*</b>		
<b>*Anesthetics Topical Oral***</b>		
lidocaine hcl mouth/throat solution	1 or 1a*	QL
lidocaine viscous hcl mouth/throat solution	1 or 1a*	QL
<b>*Anti-Infectives - Throat***</b>		
clotrimazole mouth/throat troche	1 or 1b*	QL
nystatin mouth/throat suspension	3	QL
<b>ORAVIG BUCCAL TABLET</b>	3	
<b>*Antiseptics - Mouth/Throat***</b>		
chlorhexidine gluconate mouth/throat solution	1 or 1a*	QL
<b>PERIDEX MOUTH/THROAT SOLUTION</b>	3	QL
periogard mouth/throat solution	1 or 1a*	QL

Drug Name	Tier	Notes
<b>*Dental Products - Combinations***</b>		
sodium fluoride 5000 enamel dental gel	1 or 1b*	
sodium fluoride 5000 sensitive dental gel	1 or 1b*	
<b>*Fluoride Dental Products***</b>		
clinpro 5000 dental paste	1 or 1b*	QL
denta 5000 plus dental cream	1 or 1b*	QL
dentagel dental gel	1 or 1a*	QL
easygel dental gel	1 or 1b*	
fluoridex daily renewal mouth/throat concentrate	1 or 1b*	
fluoridex dental paste	1 or 1b*	QL
fluoridex enhanced whitening dental paste	1 or 1b*	QL
fraiche 5000 dental dental gel	1 or 1b*	QL
sf 5000 plus dental cream	1 or 1b*	QL
sf dental gel	1 or 1a*	QL
sodium fluoride 5000 plus dental cream	1 or 1b*	QL
sodium fluoride 5000 ppm dental cream	1 or 1b*	QL
sodium fluoride 5000 ppm dental gel	1 or 1b*	QL
sodium fluoride 5000 ppm dental paste	1 or 1b*	QL
sodium fluoride dental cream	1 or 1b*	QL
sodium fluoride mouth/throat solution	1 or 1a*	
<b>*Saliva Stimulants***</b>		
cevimeline hcl oral capsule	1 or 1b*	
<b>EVOXAC ORAL CAPSULE</b>	3	
pilocarpine hcl oral tablet	1 or 1b*	QL
<b>SALAGEN ORAL TABLET</b>	3	QL
<b>*Steroids - Mouth/Throat/Dental***</b>		
<b>KOURZEQ MOUTH/THROAT PASTE</b>	1 or 1b*	
oralone mouth/throat paste	1 or 1b*	
triamcinolone acetonide mouth/throat paste	1 or 1b*	

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Drug Name	Tier	Notes
<b>*Multivitamins*</b>		
<b>*Multiple Vitamins W/ Minerals &amp; Calcium-Folic Acid***</b>		
FOLGARD OS ORAL TABLET	3	
<b>*Multiple Vitamins W/ Minerals &amp; Fluoride-Iron- Folic Acid***</b>		
QUFLORA FE ORAL TABLET CHEWABLE	3	ST
<b>*Multiple Vitamins W/ Minerals***</b>		
FLORRAXYL ORAL TABLET	3	
<b>*Multivitamins***</b>		
INFUVITE ADULT INTRAVENOUS SOLUTION	3	
mincora oral tablet	3	
novite oral capsule	1 or 1b*	
VITLIPID N ADULT INTRAVENOUS EMULSION	3	
<b>*Ped Multi Vitamins W/Fl &amp; Fe***</b>		
multi-vitamin/fluoride/iron oral solution	1 or 1b*	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE	3	ST
QUFLORA FE PEDIATRIC ORAL LIQUID	3	ST
<b>*Ped Mv W/ Fluoride***</b>		
DAVIMET-FLUORIDE ORAL TABLET CHEWABLE	3	ST
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE	3	ST
FLORIVA PLUS ORAL SOLUTION	3	ST
multivitamin w/fluoride oral tablet chewable	1 or 1b*	\$0
multi-vitamin/fluoride oral solution	1 or 1b*	\$0
multivitamin/fluoride oral tablet chewable 0.25 mg, 1 mg	2	\$0

Drug Name	Tier	Notes
multivitamin/fluoride oral tablet chewable 0.5 mg	2	
MULTI-VIT-FLOR ORAL TABLET CHEWABLE	3	ST
POLY-VI-FLOR ORAL SUSPENSION	3	ST
POLY-VI-FLOR ORAL TABLET CHEWABLE	3	ST
QUFLORA PEDIATRIC ORAL SOLUTION	3	ST
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE	3	ST
<b>*Ped Vitamins Acd &amp; Fa W/ Fluoride***</b>		
TRI-VI-FLOR ORAL SUSPENSION 0.25 MG/ML	3	ST
TRI-VI-FLORO ORAL SUSPENSION	3	ST
<b>*Ped Vitamins Acd W/ Fluoride***</b>		
tri-vite/fluoride oral solution	1 or 1b*	\$0
<b>*Pediatric Multiple Vitamins &amp; Minerals W/ Fluoride***</b>		
FLORIVA ORAL TABLET CHEWABLE	3	ST
<b>*Pediatric Multiple Vitamins***</b>		
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	3	
VITALIPID N INFANT INTRAVENOUS EMULSION	3	
VITALIPID N INFANT INTRAVENOUS EMULSION	3	
<b>*Prenatal Mv &amp; Min W/Fe- Fa***</b>		
ATABEX EC ORAL TABLET DELAYED RELEASE	2	QL
ATABEX OB ORAL TABLET	2	QL
AZESCO ORAL TABLET	3	ST; QL
CITRANATAL B-CALM ORAL	2	QL

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Drug Name	Tier	Notes
C-NATE DHA ORAL CAPSULE	2	QL
COMPLETENATE ORAL TABLET CHEWABLE	2	QL
CO-NATAL FA ORAL TABLET	2	QL
CONCEPT DHA ORAL CAPSULE	2	QL
CONCEPT OB ORAL CAPSULE	2	QL
elite-ob oral tablet	1 or 1b*	QL
ENBRACE HR ORAL CAPSULE	3	ST; QL
FOLIVANE-OB ORAL CAPSULE 85-1 MG	2	QL
inatal gt oral tablet	1 or 1b*	QL
JENLIVA PRENATAL/POSTNATAL ORAL CAPSULE	3	ST; QL
KOSHER PRENATAL PLUS IRON ORAL TABLET	3	ST; QL
MATERNACEL ORAL TABLET	3	ST; QL
M-NATAL PLUS ORAL TABLET	2	QL
natal pnv oral tablet	3	ST; QL
NEEVO DHA ORAL CAPSULE 27-1.13 MG	3	ST; QL
NEONATAL COMPLETE ORAL TABLET 27-1 MG	3	ST; QL
NEONATAL PLUS ORAL TABLET	3	QL
NESTABS DHA ORAL	3	ST; QL
NESTABS ORAL TABLET	3	ST; QL
NIVA-PLUS ORAL TABLET	2	QL
OB COMPLETE ONE ORAL CAPSULE	3	ST; QL
OB COMPLETE ORAL TABLET	3	ST; QL
OB COMPLETE PETITE ORAL CAPSULE	3	ST; QL
OB COMPLETE PREMIER ORAL TABLET	3	ST; QL
OB COMPLETE/DHA ORAL CAPSULE	3	ST; QL

Drug Name	Tier	Notes
ONE VITE WOMENS PLUS ORAL TABLET	2	QL
pnv prenatal plus multivit+dha oral	2	QL
PNV TABS 20-1 ORAL TABLET	3	ST; QL
PNV-OMEGA ORAL CAPSULE	3	ST; QL
pnv-select oral tablet	1 or 1b*	ST; QL
PREGENNA ORAL TABLET	3	ST; QL
PRENA1 PEARL ORAL CAPSULE EXTENDED RELEASE	3	ST; QL
PRENATAL 19 ORAL TABLET 29-1 MG	2	QL
prenatal 19 oral tablet chewable	1 or 1a*	QL
PRENATAL 19 ORAL TABLET CHEWABLE 29-1 MG	2	QL
PRENATAL ORAL TABLET 27-0.8 MG	2	ST; \$0; QL
PRENATAL ORAL TABLET 27-1 MG	2	QL
PRENATAL PLUS ORAL TABLET	2	QL
PRENATAL PLUS VITAMIN/MINERAL ORAL TABLET	2	QL
PRENATAL-U ORAL CAPSULE	2	QL
PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG	3	ST; QL
PRENATRIX ORAL TABLET	3	ST; QL
PRENATRYL ORAL TABLET	3	ST; QL
PRIMACARE ORAL CAPSULE	3	ST; QL
PROVIDA OB ORAL CAPSULE	2	QL
RELNATE DHA ORAL CAPSULE	3	ST; QL
SELECT-OB ORAL TABLET CHEWABLE 29-0.6-0.4 MG	3	ST; QL
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	2	QL

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Drug Name	Tier	Notes
SE-NATAL 19 ORAL TABLET	2	QL
SE-NATAL 19 ORAL TABLET CHEWABLE	2	QL
TARON-C DHA ORAL CAPSULE 35-1 MG	2	QL
THRIVITE RX ORAL TABLET	2	ST; QL
TRINATAL RX 1 ORAL TABLET	2	QL
trinate oral tablet	1 or 1a*	QL
VINATE DHA RF ORAL CAPSULE	3	ST; QL
VITAFOL GUMMIES ORAL TABLET CHEWABLE	2	QL
VITAFOL-OB ORAL TABLET	3	ST; QL
vitalara oral tablet	3	ST; QL
VITAPEarl ORAL CAPSULE EXTENDED RELEASE	3	ST; QL
VITATHELY WITH GINGER ORAL TABLET	3	ST; QL
VIVA DHA ORAL CAPSULE	3	ST; QL
WESTAB PLUS ORAL TABLET	2	QL
ZALVIT ORAL TABLET	3	ST; QL
ZIPHEX ORAL TABLET	3	ST; QL
*Prenatal Mv & Min W/Fe-Fa-Ca-Omega 3 Fish Oil***		
COMPLETE NATAL DHA ORAL 29-1-200 & 200 MG	2	QL
wesnatal dha complete oral	2	QL
*Prenatal Mv & Min W/Fe-Fa-Dha***		
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	3	ST; QL
CITRANATAL ASSURE ORAL 35-1 & 300 MG	3	ST; QL
CITRANATAL HARMONY ORAL CAPSULE 27-1-260 MG	3	ST; QL
CITRANATAL MEDLEY ORAL CAPSULE	3	ST; QL

Drug Name	Tier	Notes
NESTABS ONE ORAL CAPSULE	3	ST; QL
pnv-dha oral capsule	1 or 1b*	QL
PNV-DHA+DOCUSATE ORAL CAPSULE	3	ST; QL
PREGEN DHA ORAL CAPSULE	3	ST; QL
prena 1 true oral	2	
PRENAISSANCE ORAL CAPSULE	3	ST; QL
PRENAISSANCE PLUS ORAL CAPSULE	3	ST; QL
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG	3	ST; QL
PRENATE ENHANCE ORAL CAPSULE	3	ST; QL
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	3	ST; QL
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG	3	ST; QL
PRENATE PIXIE ORAL CAPSULE	3	ST; QL
PRENATE RESTORE ORAL CAPSULE	3	ST; QL
SELECT-OB+DHA ORAL	3	ST; QL
TRISTART DHA ORAL CAPSULE	3	ST; QL
VITAFOL FE+ ORAL CAPSULE	3	ST; QL
VITAFOL ULTRA ORAL CAPSULE	3	ST; QL
VITAFOL-OB+DHA ORAL	3	ST; QL
VITAFOL-ONE ORAL CAPSULE	3	ST; QL
VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE	3	ST; QL
WESTGEL DHA ORAL CAPSULE	3	ST; QL
*Prenatal Mv & Minerals W/Fa Without Iron***		
PRENATE ORAL TABLET CHEWABLE	3	ST; QL

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Drug Name	Tier	Notes
<b>*Prenatal Vitamins***</b>		
<b>PREMESISRX ORAL TABLET</b>	3	ST; QL
prena1 oral tablet chewable	3	
<b>PRENATE AM ORAL TABLET</b>		
<b>*Musculoskeletal Therapy Agents*</b>		
<b>*Central Muscle Relaxants***</b>		
baclofen oral tablet 10 mg, 20 mg, 5 mg	1 or 1b*	QL
carisoprodol oral tablet	1 or 1b*	QL
chlorzoxazone oral tablet 375 mg, 750 mg	1 or 1b*	ST; QL
chlorzoxazone oral tablet 500 mg	1 or 1b*	QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1 or 1b*	QL
methocarbamol injection solution 1000 mg/10ml	1 or 1b*	
methocarbamol oral tablet 500 mg, 750 mg	1 or 1b*	QL
orphenadrine citrate er oral tablet extended release 12 hour	1 or 1b*	QL
orphenadrine citrate injection solution	1 or 1b*	
<b>ROBAXIN INJECTION SOLUTION 1000 MG/10ML</b>	3	
tizanidine hcl oral capsule 6 mg	1 or 1b*	QL
tizanidine hcl oral tablet	1 or 1b*	QL
<b>ZANAFLEX ORAL TABLET</b>	3	ST; QL
<b>*Direct Muscle Relaxants***</b>		
<b>DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>DANTRIUM ORAL CAPSULE 25 MG</b>	3	
dantrolene sodium intravenous solution reconstituted	1 or 1b*	
dantrolene sodium oral capsule	1 or 1b*	

Drug Name	Tier	Notes
revonto intravenous solution reconstituted	1 or 1b*	
<b>RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED</b>	3	
<b>*Muscle Relaxant Combinations***</b>		
norgesic oral tablet	1 or 1b*	ST; QL
<b>ORPHENADRINE-ASPIRIN-CAFFEINE ORAL TABLET 25-385-30 MG</b>	1 or 1b*	ST; QL
orphengesic forte oral tablet 50-770-60 mg	1 or 1b*	ST; QL
<b>*Retinoic Acid Receptor Gamma Selective Agonists***</b>		
<b>SOHONOS ORAL CAPSULE</b>	3	PA; QL; LD; SP
<b>*Nasal Agents - Systemic And Topical*</b>		
<b>*Antihistamine-Steroid***</b>		
azelastine-fluticasone nasal suspension	3	QL
<b>*Nasal Anesthetics***</b>		
<b>COCAINE HCL NASAL SOLUTION</b>	3	
<b>NUMBRINO NASAL SOLUTION</b>	3	
<b>*Nasal Anticholinergics***</b>		
ipratropium bromide nasal solution	1 or 1b*	QL
<b>*Nasal Antihistamines***</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1 or 1b*	QL
olopatadine hcl nasal solution	1 or 1b*	QL
<b>*Nasal Steroids***</b>		
flunisolide nasal solution 25 mcg/act (0.025%)	3	ST; QL
fluticasone propionate nasal suspension	1 or 1a*	QL; BE
mometasone furoate nasal suspension	3	ST; QL; BE
<b>PROPEL MINI NASAL IMPLANT</b>	3	
<b>PROPEL MINI SDS NASAL IMPLANT</b>	3	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

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Drug Name	Tier	Notes
PROPEL NASAL IMPLANT	3	
XHANCE NASAL EXHALER SUSPENSION	3	PA; QL
<b>*Neuromuscular Agents*</b>		
<b>*AIs Agents - Miscellaneous***</b>		
RADICAVA ORS ORAL SUSPENSION	3	PA; QL; LD; SP
RADICAVA ORS STARTER KIT ORAL SUSPENSION	3	PA; QL; LD; SP
<b>*Benzathiazoles***</b>		
riluzole oral tablet	3	PA; QL; LD; SP
TEGLUTIK ORAL SUSPENSION	3	PA; QL; LD
TIGLUTIK ORAL SUSPENSION	3	PA; QL; LD
<b>*Depolarizing Muscle Relaxants***</b>		
ANECTINE INJECTION SOLUTION	3	
QUELICIN INJECTION SOLUTION	3	
SUCCINYLCHOLINE CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE 100 MG/5ML	3	
<b>*Friedrich's Ataxia Agents - Nrf2 Pathway Activators***</b>		
SKYCLARYS ORAL CAPSULE	3	PA; QL; LD
<b>*Muscular Dystrophy - Gene Therapy Agents***</b>		
AMONDYS 45 INTRAVENOUS SOLUTION	3	PA; LD
EXONDYS 51 INTRAVENOUS SOLUTION	3	PA; LD
VILTEPSO INTRAVENOUS SOLUTION	3	PA; LD
VYONDYS 53 INTRAVENOUS SOLUTION	3	PA; LD

Drug Name	Tier	Notes
<b>*Muscular Dystrophy - Histone Deacetylase Inhibitors**</b>		
DUVYZAT ORAL SUSPENSION	3	PA; QL; LD
<b>*Neuromuscular Blocking Agent - Neurotoxins***</b>		
BOTOX INJECTION SOLUTION RECONSTITUTED	3	PA; LD
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA; LD; SP
MYOBLOC INTRAMUSCULAR SOLUTION	3	PA; LD; SP
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED	3	PA; LD; SP
<b>*Nondepolarizing Muscle Relaxants***</b>		
atracurium besylate intravenous solution 100 mg/10ml, 50 mg/5ml	1 or 1b*	
cisatracurium besylate (pf) intravenous solution	1 or 1b*	
cisatracurium besylate intravenous solution 20 mg/10ml	1 or 1b*	
rocuronium bromide intravenous solution	1 or 1b*	
vecuronium bromide intravenous solution reconstituted	1 or 1b*	
<b>*Rett Syndrome Agents - Glycine-Proline-Glutamate Analogs***</b>		
DAYBUE ORAL SOLUTION	3	PA; QL; LD
<b>*Spinal Muscular Atrophy- Smn2 Splicing Modifiers***</b>		
EVRYSDI ORAL SOLUTION RECONSTITUTED	3	PA; QL; LD

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Drug Name	Tier	Notes
<b>*Nutrients*</b>		
<b>*Amino Acid Mixtures***</b>		
<b>AMINOSYN II INTRAVENOUS SOLUTION 10 %</b>	3	
aminosyn ii intravenous solution 15 %	1 or 1b*	
<b>AMINOSYN-PF 7% INTRAVENOUS SOLUTION</b>	3	
<b>AMINOSYN-PF INTRAVENOUS SOLUTION 10 %</b>	3	
<b>CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION</b>	3	

Drug Name	Tier	Notes
<b>CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION</b>	3	
<b>CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION</b>	3	
clenisol sf intravenous solution	1 or 1b*	
plenamine intravenous solution	1 or 1b*	
<b>PREMASOL INTRAVENOUS SOLUTION 10 %</b>	3	
<b>PROSOL INTRAVENOUS SOLUTION</b>	3	
<b>TRAVASOL INTRAVENOUS SOLUTION</b>	3	
<b>TROPHAMINE INTRAVENOUS SOLUTION 10 %</b>	3	
<b>*Amino Acids-Single***</b>		
<b>ELCYS INTRAVENOUS SOLUTION</b>	3	
<b>*Carbohydrates***</b>		
dextrose intravenous solution 10 %, 5 %	1 or 1b*	
<b>DEXTROSE INTRAVENOUS SOLUTION 20 %, 30 %, 40 %</b>	3	
glucose (dextrose) intravenous solution 50 %	3	
<b>*Lipids***</b>		
<b>CLINOLIPID INTRAVENOUS EMULSION</b>	3	
<b>DOJOLVI ORAL LIQUID</b>	3	PA; QL; LD; SP
<b>INTRALIPID INTRAVENOUS EMULSION</b>	3	
<b>NUTRILIPID INTRAVENOUS EMULSION 20 %</b>	3	
<b>OMEGAVEN INTRAVENOUS EMULSION</b>	3	
<b>SMOFLIPID INTRAVENOUS EMULSION</b>	3	

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Drug Name	Tier	Notes
<b>*Protein-Carbohydrate-Lipid With Electrolyte Combinations***</b>		
KABIVEN INTRAVENOUS EMULSION 3.3-10.8-3.9 %	3	
PERIKABIVEN INTRAVENOUS EMULSION	3	
<b>*Ophthalmic Agents*</b>		
<b>*Alpha Adrenergic Agonist &amp; Carbonic Anhydrase Inhib Comb***</b>		
SIMBRINZA OPHTHALMIC SUSPENSION	2	QL
<b>*Beta-Blockers - Ophthalmic Combinations***</b>		
brimonidine tartrate-timolol ophthalmic solution	1 or 1b*	QL
dorzolamide hcl-timolol mal ophthalmic solution	1 or 1b*	QL
dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %	1 or 1b*	QL
<b>*Beta-Blockers - Ophthalmic***</b>		
betaxolol hcl ophthalmic solution	1 or 1b*	QL
BETOPTIC-S OPHTHALMIC SUSPENSION	2	QL
carteolol hcl ophthalmic solution	1 or 1a*	
levobunolol hcl ophthalmic solution 0.5 %	1 or 1b*	
timolol maleate (once-daily) ophthalmic solution	1 or 1b*	QL
timolol maleate ocudose ophthalmic solution	1 or 1b*	QL
timolol maleate ophthalmic gel forming solution	1 or 1b*	QL
timolol maleate ophthalmic solution	1 or 1b*	QL
timolol maleate pf ophthalmic solution	1 or 1b*	QL
<b>TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION</b>	3	QL

Drug Name	Tier	Notes
<b>*Cycloplegic Mydriatic Combinations***</b>		
CYCLOMYDRIL OPHTHALMIC SOLUTION	3	
MYDCOMBI OPHTHALMIC SOLUTION CARTRIDGE	3	
tropic-cyclop-pe-keto-propar ophthalmic solution prefilled syringe	3	
<b>*Cycloplegic Mydriatics***</b>		
ATROPINE SULFATE OPHTHALMIC SOLUTION 1 %	3	
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 %	3	
CYCLOGYL OPHTHALMIC SOLUTION 1 %	3	QL
cyclopentolate hcl ophthalmic solution 1 %	1 or 1b*	QL
MYDRIACYL OPHTHALMIC SOLUTION	3	
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	1 or 1b*	
tropicamide ophthalmic solution	1 or 1b*	
<b>*Lymphocyte Function-Associated Antigen-1 (Lfa-1) Antag***</b>		
XIIDRA OPHTHALMIC SOLUTION	2	QL
<b>*Miotics - Cholinesterase Inhibitors***</b>		
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	3	QL
<b>*Miotics - Direct Acting***</b>		
MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED	3	
MIOSTAT INTRAOCULAR SOLUTION	3	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>	<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>			
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1 or 1b*		moxifloxacin hcl (2x day) ophthalmic solution	1 or 1b*	QL			
<b>*Ophthalmic - Multiple Receptor Angiogenesis Inhibitors***</b>								
<b>VABYSMO INTRAVITREAL SOLUTION</b>	3	PA; LD; SP	<b>OCUFLOX OPHTHALMIC SOLUTION</b>	3	QL			
<b>VABYSMO INTRAVITREAL SOLUTION PREFILLED SYRINGE</b>	3	PA; LD; SP	ofloxacin ophthalmic solution	1 or 1a*	QL			
<b>*Ophthalmic Antiallergic***</b>								
azelastine hcl ophthalmic solution	1 or 1b*	QL	tobramycin ophthalmic solution	1 or 1a*	QL			
cromolyn sodium ophthalmic solution	1 or 1a*	QL	<b>TOBREX OPHTHALMIC OINTMENT</b>	3	QL			
epinastine hcl ophthalmic solution	1 or 1b*	QL	<b>VIGAMOX OPHTHALMIC SOLUTION</b>	3	QL			
olopatadine hcl ophthalmic solution 0.1 %	1 or 1b*	ST; QL	<b>*Ophthalmic Antifungal***</b>					
<b>*Ophthalmic Antibiotics***</b>								
<b>AZASITE OPHTHALMIC SOLUTION</b>	3	QL	<b>NATACYN OPHTHALMIC SUSPENSION</b>	3	QL			
bacitracin ophthalmic ointment	1 or 1b*	QL	<b>*Ophthalmic Anti-Infective Combinations***</b>					
<b>BESIVANCE OPHTHALMIC SUSPENSION</b>	3	QL	bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	1 or 1a*	QL			
<b>CILOXAN OPHTHALMIC OINTMENT</b>	3	QL	neomycin-bacitracin zn-polymyx ophthalmic ointment	1 or 1b*	QL			
ciprofloxacin hcl ophthalmic solution	1 or 1a*	QL	neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	1 or 1b*	QL			
erythromycin ophthalmic ointment	3	QL	neo-polycin ophthalmic ointment	1 or 1b*	QL			
gatifloxacin ophthalmic solution	1 or 1b*	QL	polycin ophthalmic ointment	1 or 1a*	QL			
gentamicin sulfate ophthalmic solution	1 or 1a*	QL	polymyxin b-trimethoprim ophthalmic solution	1 or 1a*	QL			
levofloxacin ophthalmic solution 1.5 %	1 or 1b*	QL	<b>*Ophthalmic Antiseptics***</b>					
mitomycin intraocular solution prefilled syringe 0.02 %, 0.04 %	3		<b>BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION</b>	3				
<b>MITOSOL OPHTHALMIC KIT</b>	3		<b>*Ophthalmic Antivirals***</b>					
			trifluridine ophthalmic solution	1 or 1b*	QL			
			<b>ZIRGAN OPHTHALMIC GEL</b>	3	QL			

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Drug Name	Tier	Notes
<b>*Ophthalmic Carbonic Anhydrase Inhibitors***</b>		
brinzolamide ophthalmic suspension	1 or 1b*	QL
dorzolamide hcl ophthalmic solution	1 or 1b*	QL
<b>*Ophthalmic Complement C3 Inhibitors***</b>		
SYFOVRE INTRAVITREAL SOLUTION	3	PA; LD
<b>*Ophthalmic Complement C5 Inhibitors***</b>		
IZERVAY INTRAVITREAL SOLUTION	3	PA; LD; SP
<b>*Ophthalmic Diagnostic Products***</b>		
ak-fluor intravenous solution 10 %	1 or 1b*	
ak-fluor intravenous solution 25 %	3	
altafluor benox ophthalmic solution	1 or 1b*	
fluorescein intravenous solution	1 or 1b*	
FLUORESCIN SODIUM/BENOXINATE OPHTHALMIC SOLUTION	3	
fluorescein-benoxinate ophthalmic solution	1 or 1b*	
FLUORESCITE INTRAVENOUS SOLUTION	3	
FLURA-SAFE OPHTHALMIC SOLUTION	3	
<b>*Ophthalmic Ectoparasiticide**</b>		
XDEM VY OPHTHALMIC SOLUTION	3	PA; QL
<b>*Ophthalmic Immunomodulators***</b>		
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	2	QL
RESTASIS OPHTHALMIC EMULSION	1 or 1b*	QL

Drug Name	Tier	Notes
VERKAZIA OPHTHALMIC EMULSION	3	PA; QL
<b>*Ophthalmic Irrigation Solutions***</b>		
BSS INTRAOCULAR SOLUTION	3	
BSS PLUS INTRAOCULAR SOLUTION	3	
<b>*Ophthalmic Kinase Inhibitors - Combinations***</b>		
ROCKLATAN OPHTHALMIC SOLUTION	3	QL
<b>*Ophthalmic Local Anesthetics***</b>		
AKTEN OPHTHALMIC GEL	3	
ALCAINE OPHTHALMIC SOLUTION	3	
IHEEZO OPHTHALMIC GEL	3	
proparacaine hcl ophthalmic solution	1 or 1b*	
tetracaine hcl ophthalmic solution	1 or 1b*	
<b>*Ophthalmic Nerve Growth Factors***</b>		
OXERVATE OPHTHALMIC SOLUTION	3	PA; QL; LD
<b>*Ophthalmic Nonsteroidal Anti-Inflammatory Agents***</b>		
ACULAR LS OPHTHALMIC SOLUTION	3	QL
ACULAR OPHTHALMIC SOLUTION	3	QL
ACUVAIL OPHTHALMIC SOLUTION	3	QL
bromfenac sodium (once-daily) ophthalmic solution	1 or 1b*	QL
bromfenac sodium ophthalmic solution 0.07 %, 0.075 %	1 or 1b*	QL

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>BROMSITE OPHTHALMIC SOLUTION</b>	3	QL
diclofenac sodium ophthalmic solution	1 or 1b*	QL
flurbiprofen sodium ophthalmic solution	1 or 1b*	QL
<b>ILEVRO OPHTHALMIC SUSPENSION</b>	2	QL
ketorolac tromethamine ophthalmic solution	1 or 1b*	QL
<b>NEVANAC OPHTHALMIC SUSPENSION</b>	3	QL
<b>*Ophthalmic Photodynamic Therapy Agents***</b>		
<b>VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	QL; LD; SP
<b>*Ophthalmic Photoenhancer Combinations***</b>		
<b>PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE</b>	3	
<b>*Ophthalmic Rho Kinase Inhibitors***</b>		
<b>RHOPRESSA OPHTHALMIC SOLUTION</b>	3	QL
<b>*Ophthalmic Selective Alpha Adrenergic Agonists***</b>		
apraclonidine hcl ophthalmic solution	1 or 1b*	
brimonidine tartrate ophthalmic solution	1 or 1b*	QL
<b>IOPIDINE OPHTHALMIC SOLUTION 1 %</b>	3	
<b>*Ophthalmic Steroid Combinations***</b>		
bacitra-neomycin-polymyxin-hc ophthalmic ointment	1 or 1b*	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>MAXITROL OPHTHALMIC OINTMENT</b>	3	QL
<b>MAXITROL OPHTHALMIC SUSPENSION 0.1 %</b>	3	QL
neomycin-polymyxin-dexameth ophthalmic ointment	1 or 1a*	QL
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1 or 1a*	QL
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	1 or 1b*	
neo-polycin hc ophthalmic ointment	1 or 1b*	QL
sulfacetamide-prednisolone ophthalmic solution	1 or 1a*	QL
<b>TOBRADEX OPHTHALMIC OINTMENT</b>	2	
tobramycin-dexamethasone ophthalmic suspension	1 or 1b*	QL
<b>ZYLET OPHTHALMIC SUSPENSION</b>	2	QL
<b>*Ophthalmic Steroids***</b>		
dexamethasone sodium phosphate ophthalmic solution	1 or 1b*	
<b>DEXTENZA OPHTHALMIC INSERT</b>	3	
<b>DEXYCU INTRAOCULAR SUSPENSION</b>	3	
difluprednate ophthalmic emulsion	1 or 1b*	QL
<b>DUREZOL OPHTHALMIC EMULSION</b>	3	QL
<b>FLAREX OPHTHALMIC SUSPENSION</b>	3	
fluorometholone ophthalmic suspension	1 or 1b*	
<b>FML FORTE OPHTHALMIC SUSPENSION</b>	3	
<b>FML LIQUIFILM OPHTHALMIC SUSPENSION</b>	3	

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Drug Name	Tier	Notes	Drug Name	Tier	Notes
ILUVIEN INTRAVITREAL IMPLANT	3	PA; LD; SP	*Ophthalmic Surgical Aids - Combinations***		
INVELTYS OPHTHALMIC SUSPENSION	3	QL	DISCOVISC INTRAOCULAR SOLUTION	3	
LOTEMAX OPHTHALMIC GEL	3	QL	DUOVISC INTRAOCULAR KIT 0.4- 0.35 ML, 0.55-0.5 ML	3	
LOTEMAX OPHTHALMIC OINTMENT	3	QL	OMIDRIA INTRAOCULAR SOLUTION	3	
LOTEMAX OPHTHALMIC SUSPENSION	3	QL	VISCOAT INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
LOTEMAX SM OPHTHALMIC GEL	3	QL	*Ophthalmic Surgical Aids***		
loteprednol etabonate ophthalmic gel	1 or 1b*	QL	AMVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
loteprednol etabonate ophthalmic suspension 0.5 %	1 or 1b*	QL	CELLUGEL INTRAOCULAR SOLUTION	3	
MAXIDEX OPHTHALMIC SUSPENSION	3		HEALON Duet PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
OZURDEX INTRAVITREAL IMPLANT	3	PA; LD; SP	HEALON GV PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
PRED MILD OPHTHALMIC SUSPENSION	3		HEALON PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
prednisolone acetate ophthalmic suspension	1 or 1b*	QL	HEALON5 PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION	3	QL	PROVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	LD
RETISERT INTRAVITREAL IMPLANT	3	PA; LD; SP	TISSUEBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
TRIESENCE INTRAOCULAR SUSPENSION	3		TOTALVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
XIPERE INTRAOCULAR SUSPENSION	3	PA; LD			
YUTIQ INTRAVITREAL IMPLANT	3	PA; LD; SP			
*Ophthalmic Sulfonamides***					
sulfacetamide sodium ophthalmic ointment	1 or 1b*	QL			
sulfacetamide sodium ophthalmic solution	1 or 1b*	QL			

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Drug Name	Tier	Notes
VISIONBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE	3	
<b>*Ophthalmics - Blepharoptosis Agents**</b>		
UPNEEQ OPHTHALMIC SOLUTION	3	PA; QL
<b>*Ophthalmics - Cystinosis Agents**</b>		
CYSTADROPS OPHTHALMIC SOLUTION	3	PA; QL
CYSTARAN OPHTHALMIC SOLUTION	3	PA; QL; LD
<b>*Ophthalmics Misc. - Other***</b>		
MIEBO OPHTHALMIC SOLUTION	2	QL
<b>*Prostaglandins - Ophthalmic***</b>		
bimatoprost ophthalmic solution	1 or 1b*	
DURYSTA INTRAOCULAR IMPLANT	3	PA; QL; LD; SP
latanoprost ophthalmic solution	1 or 1b*	QL
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	2	QL
tafluprost (pf) ophthalmic solution	1 or 1b*	QL
travoprost (bak free) ophthalmic solution	1 or 1b*	QL
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 %	3	QL
<b>*Vascular Endothelial Growth Factor (Vegf) Antagonists***</b>		
BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
BYOOVIZ INTRAVITREAL SOLUTION	3	PA; LD; SP
CIMERLI INTRAVITREAL SOLUTION	3	PA; LD; SP

Drug Name	Tier	Notes
EYLEA HD INTRAVITREAL SOLUTION	3	PA; LD; SP
EYLEA INTRAVITREAL SOLUTION	3	PA; LD; SP
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA; LD; SP
PAVBLU INTRAVITREAL SOLUTION	3	PA
PAVBLU INTRAVITREAL SOLUTION PREFILLED SYRINGE	3	PA
SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION	3	LD; SP
SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION	3	LD; SP
<b>*Otic Agents*</b>		
<b>*Otic Agents - Miscellaneous***</b>		
acetic acid otic solution	1 or 1b*	
<b>*Otic Analgesic Combinations***</b>		
PRAMOTIC OTIC LIQUID	3	
<b>*Otic Anti-Infectives***</b>		
CETRAXAL OTIC SOLUTION	3	QL
ciprofloxacin hcl otic solution	1 or 1b*	QL
ofloxacin otic solution	1 or 1b*	QL
<b>*Otic Steroid-Anti-Infective Combinations***</b>		
ciprofloxacin-dexamethasone otic suspension	1 or 1b*	QL
ciprofloxacin-fluocinolone pf otic solution	1 or 1b*	QL
CORTISPORIN-TC OTIC SUSPENSION	3	

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Drug Name	Tier	Notes
neomycin-polymyxin-hc otic solution	1 or 1b*	
neomycin-polymyxin-hc otic suspension	1 or 1b*	QL
<b>OTOVEL OTIC SOLUTION</b>	3	QL
<b>*Otic Steroids***</b>		
<b>DERMOTIC OTIC OIL</b>	3	
flac otic oil	1 or 1b*	
fluocinolone acetonide otic oil	1 or 1b*	
hydrocortisone-acetic acid otic solution	1 or 1b*	QL
<b>*Oxytocics*</b>		
<b>*Abortifacients/Cervical Ripening - Prostaglandins***</b>		
carboprost tromethamine intramuscular solution	1 or 1b*	
carboprost tromethamine intramuscular solution prefilled syringe	3	
<b>CERVIDIL VAGINAL INSERT</b>	3	
<b>HEMABATE INTRAMUSCULAR SOLUTION</b>	3	
<b>PREPIDIL VAGINAL GEL</b>	3	
<b>*Oxytocics***</b>		
methergine oral tablet	1 or 1b*	
methylergonovine maleate injection solution	1 or 1b*	
methylergonovine maleate oral tablet	1 or 1b*	
oxytocin injection solution	1 or 1b*	
oxytocin-lactated ringers intravenous solution 10 unit/500ml	3	
oxytocin-sodium chloride intravenous solution 40-0.9 unit/l-%	3	
<b>PITOCIN INJECTION SOLUTION</b>	3	

Drug Name	Tier	Notes
<b>*Passive Immunizing And Treatment Agents*</b>		
<b>*Antitoxins-Antivenins***</b>		
<b>ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>ANTIVENIN LATRODECTUS MACTANS INJECTION KIT</b>	3	
<b>ANTIVENIN MICRURUS FULVIUS INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>CROFAB INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>*Antiviral Monoclonal Antibodies***</b>		
<b>BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>	3	PA; \$0; QL; LD
<b>PEMGARDA INTRAVENOUS SOLUTION</b>	3	
<b>SYNAGIS INTRAMUSCULAR SOLUTION</b>	3	PA; LD; SP
<b>*Bacterial Monoclonal Antibodies***</b>		
<b>ZINPLAVA INTRAVENOUS SOLUTION</b>	3	PA
<b>*Immune Serums***</b>		
<b>BABYBIG INTRAVENOUS SOLUTION RECONSTITUTED</b>	3	
<b>CNJ-016 INTRAVENOUS SOLUTION 50000 UNIT/VIAL</b>	3	
<b>CUTAQUIG SUBCUTANEOUS SOLUTION</b>	3	PA; LD; SP

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
CYTOGAM INTRAVENOUS SOLUTION	3	LD; SP	OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML	3	PA; LD; SP
GAMASTAN INTRAMUSCULAR INJECTABLE	3	PA; LD; SP	RHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	QL; LD; SP
GAMUNEX-C INJECTION SOLUTION	3	PA; LD; SP	RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	3	QL; LD; SP
HEPAGAM B INJECTION SOLUTION 312 UNIT/ML	3	LD; SP	VARIZIG INTRAMUSCULAR SOLUTION	3	LD
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	3	PA; LD; SP	WINRHO SDF INJECTION SOLUTION	3	QL; LD; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; LD; SP	XEMBIFY SUBCUTANEOUS SOLUTION	3	PA; LD; SP
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML	3	LD; SP	<b>*Penicillins*</b>		
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 110 UNIT/0.5ML	3	LD; SP	<b>*Aminopenicillins***</b>		
HYPERRAB INJECTION SOLUTION	3	LD; SP	amoxicillin oral capsule	1 or 1a*	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	QL; LD; SP	amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml	1 or 1a*	
HYPERTET INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3		amoxicillin oral suspension reconstituted 400 mg/5ml	3	
IMOGRAB RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	3	LD; SP	amoxicillin oral tablet	1 or 1a*	
KEDRAB INJECTION SOLUTION	3	LD; SP	amoxicillin oral tablet chewable 125 mg, 250 mg	1 or 1a*	
NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML	3	LD; SP	ampicillin oral capsule 500 mg	1 or 1a*	
<b>*Natural Penicillins***</b>			ampicillin sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1 or 1b*	
			ampicillin sodium intravenous solution reconstituted	1 or 1b*	
			BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
EXTENCILLINE INTRAMUSCULAR SUSPENSION RECONSTITUTED	3		BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	3	
LENTOCILIN INTRAMUSCULAR SUSPENSION RECONSTITUTED	3		BICILLIN C-R INTRAMUSCULAR SUSPENSION	3	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION 40000 UNIT/ML, 60000 UNIT/ML	3		piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3- 0.375 gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36- 4.5) gm	1 or 1b*	
penicillin g potassium injection solution reconstituted	1 or 1b*		UNASYN INJECTION SOLUTION RECONSTITUTED 1.5 (1- 0.5) GM, 3 (2-1) GM	3	
penicillin g sodium injection solution reconstituted	1 or 1b*		UNASYN INTRAVENOUS SOLUTION RECONSTITUTED 15 (10- 5) GM	3	
penicillin v potassium oral solution reconstituted	1 or 1b*		ZOSYN INTRAVENOUS SOLUTION	3	
penicillin v potassium oral tablet	1 or 1b*		<b>*Penicillinase-Resistant Penicillins***</b>		
pfizerpen injection solution reconstituted	1 or 1b*		dicloxacillin sodium oral capsule	1 or 1b*	
<b>*Penicillin Combinations***</b>			NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 2 GM/100ML	3	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	1 or 1b*		nafcillin sodium injection solution reconstituted 1 gm, 2 gm	1 or 1b*	
amoxicillin-pot clavulanate oral suspension reconstituted	1 or 1b*		nafcillin sodium intravenous solution reconstituted 10 gm	1 or 1b*	
amoxicillin-pot clavulanate oral tablet	1 or 1b*		OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 2 GM/50ML	3	
amoxicillin-pot clavulanate oral tablet chewable 400-57 mg	1 or 1b*		oxacillin sodium injection solution reconstituted 1 gm, 2 gm	1 or 1b*	
ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm	1 or 1b*		oxacillin sodium intravenous solution reconstituted	1 or 1b*	
ampicillin-sulbactam sodium intravenous solution reconstituted	1 or 1b*		<b>*Progestins*</b>		
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	3		<b>*Progestins***</b>		
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125- 31.25 MG/5ML	2		GALLIFREY ORAL TABLET	1 or 1b*	
			medroxyprogesterone acetate oral tablet	1 or 1a*	QL

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En vigencia desde el 07012025

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
megestrol acetate oral suspension 625 mg/5ml	1 or 1b*	
norethindrone acetate oral tablet	1 or 1b*	
progesterone intramuscular oil	1 or 1b*	
progesterone oral capsule	1 or 1b*	QL
<b>PROVERA ORAL TABLET</b>	3	QL
<b>*Psychotherapeutic And Neurological Agents - Misc.*</b>		
<b>*Agents For Opioid Withdrawal***</b>		
lofexidine hcl oral tablet	1 or 1b*	QL
<b>*Alcohol Deterrents***</b>		
acamprosate calcium oral tablet delayed release	1 or 1b*	QL
disulfiram oral tablet	1 or 1b*	
<b>*Anti-Cataplectic Agents***</b>		
sodium oxybate oral solution	3	PA; QL; LD
<b>*Anti-Cataplectic Combinations***</b>		
<b>XYWAV ORAL SOLUTION</b>	3	PA; QL; LD
<b>*Antidementia Agent Combinations***</b>		
memantine hcl-donepezil hcl oral capsule extended release 24 hour 14-10 mg, 28-10 mg	1 or 1b*	QL
<b>NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7-10 MG</b>	2	QL
<b>*Antisense Oligonucleotide (Aso) Inhibitor Agents***</b>		
<b>WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL; LD
<b>*Benzodiazepines &amp; Tricyclic Agents***</b>		
chlor diazepoxide-amitriptyline oral tablet	1 or 1b*	
<b>*Cholinomimetics - Ache Inhibitors***</b>		
<b>ARICEPT ORAL TABLET 10 MG, 23 MG</b>	3	QL

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>ARICEPT ORAL TABLET 5 MG</b>	3	DO
donepezil hcl oral tablet 10 mg, 23 mg	1 or 1b*	QL
donepezil hcl oral tablet 5 mg	1 or 1b*	DO
donepezil hcl oral tablet dispersible	1 or 1b*	QL
<b>EXELON TRANSDERMAL PATCH 24 HOUR</b>	3	ST; QL
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg	1 or 1b*	QL
galantamine hydrobromide er oral capsule extended release 24 hour 8 mg	1 or 1b*	DO
galantamine hydrobromide oral solution	1 or 1b*	QL
galantamine hydrobromide oral tablet 12 mg, 8 mg	1 or 1b*	QL
galantamine hydrobromide oral tablet 4 mg	1 or 1b*	DO
rivastigmine tartrate oral capsule 1.5 mg, 3 mg	1 or 1b*	DO
rivastigmine tartrate oral capsule 4.5 mg, 6 mg	1 or 1b*	QL
rivastigmine transdermal patch 24 hour	1 or 1b*	QL
<b>*Fibromyalgia Agent - Snris***</b>		
<b>SAVELLA ORAL TABLET</b>	2	QL
<b>SAVELLA TITRATION PACK ORAL</b>	2	QL
<b>*Melanocortin Receptor Agonists***</b>		
<b>VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	3	PA; QL
<b>*Movement Disorder Drug Therapy***</b>		
<b>AUSTEDO ORAL TABLET</b>	3	PA; QL; LD; SP
<b>AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>	3	PA; QL; LD; SP

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG	3	PA; QL; LD; SP	AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	3	PA; QL; LD; SP
INGREZZA ORAL CAPSULE 40 MG	3	PA; DO; LD; SP	BETASERON SUBCUTANEOUS KIT	3	PA; QL; LD; SP
INGREZZA ORAL CAPSULE 60 MG, 80 MG	3	PA; QL; LD; SP	PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
INGREZZA ORAL CAPSULE SPRINKLE 40 MG	3	PA; DO; LD; SP	PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
INGREZZA ORAL CAPSULE SPRINKLE 60 MG, 80 MG	3	PA; QL; LD; SP	PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
INGREZZA ORAL CAPSULE THERAPY PACK	3	PA; QL; LD; SP	PLEGRIDY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
tetrabenazine oral tablet	1 or 1b*	PA; QL; LD; SP	PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
<b>*Ms Agents - Pyrimidine Synthesis Inhibitors***</b>			REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
teriflunomide oral tablet	3	PA; QL; LD; SP	REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
<b>*Multiple Sclerosis Agents - Antimetabolites***</b>			REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP	REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP	<b>*Multiple Sclerosis Agents - Monoclonal Antibodies***</b>		
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP	KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL; LD; SP
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP	LEMTRADA INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP			
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP			
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP			
<b>*Multiple Sclerosis Agents - Interferons***</b>					
AVONEX PEN INTRAMUSCULAR AUTO-Injector KIT	3	PA; QL; LD; SP			

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Drug Name	Tier	Notes
TYSABRI INTRAVENOUS CONCENTRATE	3	PA; QL; LD; SP
<b>*Multiple Sclerosis Agents</b>		
- Nrf2 Pathway Activators***		
dimethyl fumarate oral capsule delayed release	1 or 1b*	PA; QL; LD; SP
dimethyl fumarate starter pack oral capsule delayed release therapy pack	1 or 1b*	PA; QL; LD; SP
VUMERITY ORAL CAPSULE DELAYED RELEASE	3	PA; QL; LD; SP
<b>*Multiple Sclerosis Agents</b>		
- Potassium Channel Blockers***		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	3	PA; QL; LD; SP
dalfampridine er oral tablet extended release 12 hour	3	PA; QL; LD; SP
<b>*Multiple Sclerosis Agents***</b>		
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	3	PA; QL; LD; SP
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	3	PA; QL; LD; SP
glatopa subcutaneous solution prefilled syringe 20 mg/ml	3	PA; QL; LD; SP
<b>*N-Methyl-D-Aspartate (Nmda) Receptor Antagonists***</b>		
memantine hcl er oral capsule extended release 24 hour 14 mg, 7 mg	1 or 1b*	DO
memantine hcl er oral capsule extended release 24 hour 21 mg, 28 mg	1 or 1b*	QL
memantine hcl oral solution 2 mg/ml	1 or 1b*	QL
memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg	1 or 1b*	QL
memantine hcl oral tablet 5 mg	1 or 1b*	DO
NAMENDA TITRATION PAK ORAL TABLET	3	QL

Drug Name	Tier	Notes
<b>*Phenothiazines &amp; Tricyclic Agents***</b>		
perphenazine-amitriptyline oral tablet	1 or 1b*	AL
<b>*Postherpetic Neuralgia (Phn)/Neuropathic Pain Agents***</b>		
gabapentin (once-daily) oral tablet	1 or 1b*	PA; DO
GRALISE ORAL TABLET 300 MG	3	PA; DO
GRALISE ORAL TABLET 450 MG	2	PA; DO
GRALISE ORAL TABLET 600 MG	3	PA; QL
GRALISE ORAL TABLET 750 MG, 900 MG	2	PA; QL
pregabalin er oral tablet extended release 24 hour 165 mg, 82.5 mg	1 or 1b*	PA; DO
pregabalin er oral tablet extended release 24 hour 330 mg	1 or 1b*	PA; QL
<b>*Premenstrual Dysphoric Disorder (Pmdd) Agents - Sris***</b>		
fluoxetine hcl (pmdd) oral tablet 10 mg	1 or 1b*	DO
fluoxetine hcl (pmdd) oral tablet 20 mg	1 or 1b*	QL
<b>*Pseudobulbar Affect Agent Combinations***</b>		
NUEDEXTA ORAL CAPSULE	3	QL
<b>*Psychotherapeutic And Neurological Agents - Misc.***</b>		
pimozide oral tablet	1 or 1b*	QL; AL
<b>*Serotonin 1A Recept Agonist/Serotonin 2A Recept Antag***</b>		
ADDYI ORAL TABLET	3	PA; QL
<b>*Small Interfering Ribonucleic Acid (Sirna) Agents***</b>		
AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL; LD; SP

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En vigencia desde el 07012025

Drug Name	Tier	Notes
ONPATTRO INTRAVENOUS SOLUTION	3	PA; QL; LD; SP
<b>*Smoking Deterrents***</b>		
bupropion hcl er (smoking det) oral tablet extended release 12 hour	1 or 1b*	\$0; QL
<b>NICOTROL INHALATION INHALER</b>		
NICOTROL NS NASAL SOLUTION	3	\$0; QL
varenicline tartrate (starter) oral tablet therapy pack	1 or 1b*	\$0; QL
varenicline tartrate oral tablet 0.5 mg, 1 mg	1 or 1b*	\$0; QL
varenicline tartrate(continue) oral tablet	1 or 1b*	\$0; QL
<b>*Sphingosine 1-Phosphate (S1p) Receptor Modulators***</b>		
fingolimod hcl oral capsule	3	PA; QL; LD; SP
GILENYA ORAL CAPSULE 0.25 MG	3	PA; QL; LD; SP
MAYZENT ORAL TABLET	3	PA; QL; LD; SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
PONVORY ORAL TABLET	3	PA; QL; LD; SP
PONVORY STARTER PACK ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	3	PA; QL; LD; SP
ZEPOSIA ORAL CAPSULE	3	PA; QL; LD; SP
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG &0.46MG 0.92MG(21)	3	PA; QL; LD; SP
<b>*Thienbenzodiazepines &amp; Opioid Antagonists***</b>		
LYBALVI ORAL TABLET	3	ST; QL

Drug Name	Tier	Notes
<b>*Thienbenzodiazepines &amp; Ssris***</b>		
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	1 or 1b*	QL; AL
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	1 or 1b*	DO; AL
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	ST; DO
<b>*Vasomotor Symptom Agents - Ssris***</b>		
paroxetine mesylate oral capsule	1 or 1b*	
<b>*Respiratory Agents - Misc.*</b>		
<b>*Alpha-Proteinase Inhibitor (Human)***</b>		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	3	PA; LD; SP
GLASSIA INTRAVENOUS SOLUTION	3	PA; LD; SP
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA; LD
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; LD; SP
<b>*Cftr Potentiators***</b>		
KALYDECO ORAL PACKET	3	PA; QL; LD; SP
KALYDECO ORAL TABLET	3	PA; QL; LD; SP
<b>*Cystic Fibrosis Agent - Combinations***</b>		
ORKAMBI ORAL PACKET	3	PA; QL; LD; SP
ORKAMBI ORAL TABLET	3	PA; QL; LD; SP
SYMDEKO ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP
TRIKAFTA ORAL TABLET THERAPY PACK	3	PA; QL; LD; SP

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Drug Name	Tier	Notes
TRIKAFTA ORAL THERAPY PACK	3	PA; QL; LD; SP
<b>*Cystic Fibrosis Agents - Miscellaneous***</b>		
BRONCHITOL INHALATION CAPSULE	3	PA; QL; LD; SP
BRONCHITOL TOLERANCE TEST INHALATION CAPSULE	3	PA; QL; LD; SP
<b>*Hydrolytic Enzymes***</b>		
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	3	PA; QL; LD; SP
<b>*Pulmonary Fibrosis Agents - Kinase Inhibitors***</b>		
OFEV ORAL CAPSULE	3	PA; QL; LD; SP
<b>*Pulmonary Fibrosis Agents***</b>		
pirfenidone oral capsule	3	PA; QL; LD; SP
pirfenidone oral tablet 267 mg, 801 mg	3	PA; QL; LD; SP
pirfenidone oral tablet 534 mg	3	PA; QL; LD
<b>*Sulfonamides*</b>		
<b>*Sulfonamides***</b>		
sulfadiazine oral tablet	1 or 1b*	
<b>*Tetracyclines*</b>		
<b>*Aminomethylcyclines***</b>		
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	3	
NUZYRA ORAL TABLET 150 MG	3	PA; QL
<b>*Fluorocyclines***</b>		
XERAVA INTRAVENOUS SOLUTION RECONSTITUTED	3	
<b>*Glycycyclines***</b>		
TIGECYCLINE INTRAVENOUS SOLUTION RECONSTITUTED	3	
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	3	

Drug Name	Tier	Notes
<b>*Tetracyclines***</b>		
demecloxcline hcl oral tablet	1 or 1b*	
doxy 100 intravenous solution reconstituted	1 or 1b*	QL
doxycycline hyclate intravenous solution reconstituted	1 or 1b*	QL
doxycycline hyclate oral capsule	1 or 1b*	QL
doxycycline hyclate oral tablet 100 mg, 20 mg	1 or 1b*	QL
doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg	1 or 1b*	QL
doxycycline monohydrate oral capsule 150 mg	3	ST; QL
doxycycline monohydrate oral suspension reconstituted	1 or 1b*	QL
doxycycline monohydrate oral tablet	1 or 1b*	QL
MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	3	
minocycline hcl oral capsule	1 or 1b*	QL
minocycline hcl oral tablet	1 or 1b*	QL
monodoxine nl oral capsule 100 mg	1 or 1b*	QL
tetracycline hcl oral capsule	1 or 1b*	QL
<b>*Thyroid Agents*</b>		
<b>*Antithyroid Agents - Radiopharmaceuticals***</b>		
SODIUM IODIDE I-131 ORAL SOLUTION	3	
<b>*Antithyroid Agents***</b>		
methimazole oral tablet	1 or 1a*	
propylthiouracil oral tablet	1 or 1b*	
<b>*Thyroid Hormones***</b>		
euthyrox oral tablet	1 or 1b*	
levo-t oral tablet	1 or 1b*	
LEVOOTHYROXINE SODIUM INTRAVENOUS SOLUTION 100 MCG/5ML, 200 MCG/5ML, 500 MCG/5ML	3	

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
levothyroxine sodium intravenous solution 100 mcg/ml	3		QUADRACEL INTRAMUSCULAR SUSPENSION	3	\$0
<b>LEVOTHYROXINE SODIUM INTRAVENOUS SOLUTION RECONSTITUTED</b>	3		<b>QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	\$0
levothyroxine sodium oral capsule	1 or 1b*		<b>TDVAX INTRAMUSCULAR SUSPENSION</b>	3	\$0
levothyroxine sodium oral tablet	1 or 1a*		<b>TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU</b>	3	\$0
levoxyl oral tablet	1 or 1a*		<b>TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION</b>	3	\$0
liothyronine sodium intravenous solution	1 or 1b*		<b>VAXELIS INTRAMUSCULAR SUSPENSION</b>	3	
liothyronine sodium oral tablet	1 or 1b*		<b>VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	
<b>THYQUIDITY ORAL SOLUTION</b>	3		<b>*Ulcer Drugs/Antispasmodics/Anti cholinergics*</b>		
<b>TIROSINT-SOL ORAL SOLUTION</b>	3		<b>*Anticholinergic Combinations***</b>		
unithroid oral tablet	1 or 1a*		chlor diazepoxide-clidinium oral capsule	1 or 1b*	
<b>*Toxoids*</b>			<b>LIBRAX ORAL CAPSULE</b>	3	
<b>*Toxoid Combinations***</b>			<b>*Antispasmodics***</b>		
<b>ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5</b>	3	\$0	<b>BENTYL INTRAMUSCULAR SOLUTION</b>	3	
<b>BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	\$0	dicyclomine hcl intramuscular solution	1 or 1b*	
<b>DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5</b>	3	\$0	dicyclomine hcl oral capsule	1 or 1a*	
<b>INFANRIX INTRAMUSCULAR SUSPENSION</b>	3	\$0	dicyclomine hcl oral solution 10 mg/5ml	1 or 1a*	
<b>KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	\$0	dicyclomine hcl oral tablet	1 or 1a*	
<b>PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	\$0	<b>*Belladonna Alkaloids***</b>		
<b>PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>	3	\$0	<b>ATROPOINE SULFATE INJECTION SOLUTION 8 MG/20ML</b>	3	

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
ATROPINE SULFATE INJECTION SOLUTION PREFILLED SYRINGE 0.25 MG/5ML, 0.5 MG/5ML, 1 MG/10ML	3		omeprazole oral capsule delayed release	1 or 1b*	
ATROPINE SULFATE INTRAVENOUS SOLUTION	3		pantoprazole sodium intravenous solution reconstituted	1 or 1b*	
*H-2 Antagonists***			pantoprazole sodium oral tablet delayed release	1 or 1b*	
cimetidine hcl oral solution 300 mg/5ml	1 or 1b*		pantoprazole sodium-nacl intravenous solution	3	
cimetidine oral tablet 300 mg, 400 mg, 800 mg	1 or 1b*		PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED	3	
famotidine (pf) intravenous solution	1 or 1b*		rabeprazole sodium oral tablet delayed release	1 or 1b*	
famotidine intravenous solution 200 mg/20ml, 40 mg/4ml	1 or 1b*		*Quaternary Anticholinergics***		
famotidine oral suspension reconstituted	1 or 1b*		CUVPOSA ORAL SOLUTION	3	
famotidine oral tablet 40 mg	1 or 1b*		GLYCATE ORAL TABLET	3	PA
famotidine premixed intravenous solution	1 or 1b*		glycopyrrolate injection solution	1 or 1b*	
nizatidine oral capsule	1 or 1b*		glycopyrrolate oral solution	1 or 1b*	
PEPCID ORAL TABLET	3		glycopyrrolate oral tablet 1 mg, 2 mg	1 or 1b*	
*Misc. Anti-Ulcer***			GLCOPYRROLATE ORAL TABLET 1.5 MG	3	PA
CARAFATE ORAL SUSPENSION	3		GLCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.2 MG/ML, 0.4 MG/2ML	1 or 1b*	
CARAFATE ORAL TABLET	3		glycopyrrolate pf injection solution prefilled syringe 0.6 mg/3ml	3	
sucralfate oral suspension	1 or 1b*		GLYRX-PF INJECTION SOLUTION	3	
sucralfate oral tablet	1 or 1b*		GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	3	
*Proton Pump Inhibitors***			methscopolamine bromide oral tablet	1 or 1b*	
esomeprazole magnesium oral capsule delayed release	1 or 1b*		*Ulcer Anti-Infective W/ Bismuth Combinations***		
esomeprazole magnesium oral packet 10 mg, 20 mg, 40 mg	1 or 1b*		bis subcit-metronid-tetracyc oral capsule	1 or 1b*	ST; QL
esomeprazole magnesium oral packet 2.5 mg, 5 mg	1 or 1b*	ST	bismuth/metronidaz/tetracycl in oral capsule	1 or 1b*	ST; QL
esomeprazole sodium intravenous solution reconstituted 40 mg	1 or 1b*		HELDAC THERAPY ORAL	3	ST; QL
lansoprazole oral capsule delayed release 15 mg	1 or 1b*	QL; BE			
lansoprazole oral capsule delayed release 30 mg	1 or 1b*				

\* Tu plan puede incluir los niveles 1a/1b. Consulta el resumen de beneficios de farmacia para obtener más detalles.

En vigencia desde el 07012025

Drug Name	Tier	Notes
PYLERA ORAL CAPSULE	3	ST; QL
<b>*Ulcer Anti-Infective W/ Proton Pump Inhibitors***</b>		
amoxicill-clarithro-lansopraz oral therapy pack	1 or 1b*	ST; QL
OMECLAMOX-PAK ORAL	3	ST; QL
TALICIA ORAL CAPSULE DELAYED RELEASE	3	ST; QL
<b>*Ulcer Drugs - Prostaglandins***</b>		
CYTOTEC ORAL TABLET	3	
misoprostol oral tablet	1 or 1a*	
<b>*Urinary Antispasmodics*</b>		
<b>*Urinary Antispasmodic - Antimuscarinic (Anticholinergic)***</b>		
darifenacin hydrobromide er oral tablet extended release 24 hour	1 or 1b*	QL
fesoterodine fumarate er oral tablet extended release 24 hour	1 or 1b*	QL
oxybutynin chloride er oral tablet extended release 24 hour	1 or 1b*	QL
oxybutynin chloride oral solution	1 or 1b*	QL
oxybutynin chloride oral tablet	1 or 1b*	QL
solifenacin succinate oral tablet	1 or 1b*	QL
tolterodine tartrate er oral capsule extended release 24 hour	1 or 1b*	QL
tolterodine tartrate oral tablet	1 or 1b*	QL
trospium chloride er oral capsule extended release 24 hour	1 or 1b*	QL
trospium chloride oral tablet	1 or 1b*	QL
<b>*Urinary Antispasmodics - Beta-3 Adrenergic Agonists***</b>		
GEMTESA ORAL TABLET	3	QL
mirabegron er oral tablet extended release 24 hour	1 or 1b*	QL

Drug Name	Tier	Notes
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	3	PA; QL
<b>*Urinary Antispasmodics - Cholinergic Agonists***</b>		
bethanechol chloride oral tablet	1 or 1b*	
<b>*Urinary Antispasmodics - Direct Muscle Relaxants***</b>		
flavoxate hcl oral tablet	1 or 1b*	
<b>*Vaccines*</b>		
<b>*Bacterial Vaccines***</b>		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	3	\$0
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	3	\$0
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	\$0
BIOTHRAX INTRAMUSCULAR SUSPENSION	3	
CAPVAXIVE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	\$0
HIBERIX INJECTION SOLUTION RECONSTITUTED	3	\$0
MENQUADFI INTRAMUSCULAR SOLUTION	3	\$0
MENVEO INTRAMUSCULAR SOLUTION	3	\$0
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	\$0
PEDVAX HIB INTRAMUSCULAR SUSPENSION	3	\$0
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	\$0

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
PNEUMOVAX 23 INJECTION SOLUTION PREFILLED SYRINGE	2	\$0	ACAM2000 INJECTION SOLUTION RECONSTITUTED	3	\$0
PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0	AFLURIA INTRAMUSCULAR SUSPENSION	2	\$0; QL
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	\$0	AFLURIA PRESERVATIVE FREE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	3		AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	PA; \$0; QL; AL
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3		AUDENZ INTRAMUSCULAR EMULSION	2	\$0
VAXCHORA ORAL SUSPENSION RECONSTITUTED	3		AUDENZ INTRAMUSCULAR PREFILLED SYRINGE	2	\$0
VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0	COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0
VIVOTIF ORAL CAPSULE DELAYED RELEASE	2		DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	
*Viral Vaccine Combinations***			ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	3	\$0
M-M-R II INJECTION SOLUTION RECONSTITUTED	3	\$0	ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	3	\$0
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	\$0	ERVEBO INTRAMUSCULAR SUSPENSION	3	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	3	\$0	FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	\$0	FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL
*Viral Vaccines***			FLUBLOK INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	\$0; QL
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	\$0; QL	FLUCELVAX INTRAMUSCULAR SUSPENSION	2	\$0; QL

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En vigencia desde el 07012025

Drug Name	Tier	Notes	Drug Name	Tier	Notes
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL	JYNNEOS SUBCUTANEOUS SUSPENSION	3	\$0
FLULALVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL	MODERNA COVID-19 VAC 6M-11Y INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0
FLUMIST NASAL LIQUID	2	\$0; QL	MRESVIA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	\$0; QL; AL
FLUZONE HIGH-DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL	novavax covid-19 vaccine intramuscular suspension prefilled syringe	2	\$0
FLUZONE INTRAMUSCULAR SUSPENSION	2	\$0; QL	PFIZER COVID-19 VAC- TRIS 5-11Y INTRAMUSCULAR SUSPENSION 10 MCG/0.3ML	2	\$0
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0; QL	pfizer covid-19 vac-tris 6m- 4y intramuscular suspension 3 mcg/0.3ml	2	\$0
GARDASIL 9 INTRAMUSCULAR SUSPENSION	2	\$0	RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0	RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	3	\$0
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML	3	\$0	RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	3	\$0
HAVRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	\$0	ROTARIX ORAL SUSPENSION	3	\$0
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	\$0	ROTAQE ORAL SOLUTION	3	\$0
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	3		SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	3	\$0
IPOP INJECTION INJECTABLE	3	\$0	SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	\$0
IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED	3		STAMARIL INJECTION SUSPENSION RECONSTITUTED	3	
IXIARO INTRAMUSCULAR SUSPENSION	3				

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En vigencia desde el 07012025

Drug Name	Tier	Notes
<b>TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>	3	
<b>VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML</b>	3	\$0
<b>VARIVAX INJECTION SUSPENSION RECONSTITUTED</b>	3	\$0
<b>YF-VAX SUBCUTANEOUS INJECTABLE</b>	3	
<b>*Vaginal And Related Products*</b>		
<b>*Imidazole-Related Antifungals***</b>		
<b>GYNAZOLE-1 VAGINAL CREAM</b>	3	
miconazole 3 vaginal suppository	1 or 1b*	
terconazole vaginal cream	1 or 1b*	QL
terconazole vaginal suppository	1 or 1b*	QL
<b>*Miscellaneous Vaginal Products***</b>		
<b>INTRAROSA VAGINAL INSERT</b>	3	ST; QL
<b>*Vaginal Anti-Infectives***</b>		
<b>CLEOCIN VAGINAL CREAM</b>	3	
<b>CLEOCIN VAGINAL SUPPOSITORY</b>	2	
clindamycin phosphate vaginal cream	1 or 1b*	
<b>CLINDESSE VAGINAL CREAM</b>	3	
metronidazole vaginal gel	1 or 1b*	
<b>NUVESSA VAGINAL GEL</b>	3	
<b>VANDAZOLE VAGINAL GEL</b>	1 or 1b*	
<b>XACIATO VAGINAL GEL</b>	3	PA; QL
<b>*Vaginal Contraceptive Ph Modulator - Combinations***</b>		
<b>PHEXXI VAGINAL GEL</b>	3	

Drug Name	Tier	Notes
<b>*Vaginal Estrogens***</b>		
estradiol vaginal cream	1 or 1b*	QL
estradiol vaginal tablet	1 or 1b*	QL
<b>PREMARIN VAGINAL CREAM</b>	2	QL
yuvafem vaginal tablet	1 or 1b*	QL
<b>*Vaginal Progestins***</b>		
<b>CRINONE VAGINAL GEL 4 %</b>	3	LD; SP
<b>CRINONE VAGINAL GEL 8 %</b>	3	PA; QL; LD; SP
<b>ENDOMETRIN VAGINAL INSERT</b>	3	PA
<b>*Vasopressors*</b>		
<b>*Anaphylaxis Therapy Agents***</b>		
<b>AUVI-Q INJECTION SOLUTION AUTO-INJECTOR</b>	2	QL
epinephrine (anaphylaxis) injection solution 1 mg/ml	1 or 1b*	
epinephrine injection solution auto-injector	1 or 1b*	QL
<b>EPINEPHRINESNAP INJECTION KIT</b>	3	
<b>*Neurogenic Orthostatic Hypotension (Noh) - Agents***</b>		
droxidopa oral capsule	1 or 1b*	PA; QL; LD; SP
<b>*Vasopressors***</b>		
<b>ADRENALIN-NACL INTRAVENOUS SOLUTION</b>	3	
<b>AKOVAZ INTRAVENOUS SOLUTION</b>	3	
<b>AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>	3	
<b>BIORPHEN INTRAVENOUS SOLUTION</b>	3	
<b>EMERPHED INTRAVENOUS SOLUTION</b>	3	

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En vigencia desde el 07012025

Drug Name	Tier	Notes
<b>EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>	3	
<b>EPHEDRINE SULFATE (PRESSORS) INTRAVENOUS SOLUTION</b>	3	
epinephrine injection solution 10 mg/10ml	3	
<b>EPINEPHRINE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 MG/10ML</b>	3	
<b>EPINEPHRINE PF INJECTION SOLUTION</b>	3	
<b>GIAPREZA INTRAVENOUS SOLUTION</b>	3	
<b>IMMPHENITIV INTRAVENOUS SOLUTION</b>	3	
<b>LEVOPHED INTRAVENOUS SOLUTION</b>	3	
midodrine hcl oral tablet	1 or 1b*	
<b>PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION 10 MG/ML</b>	3	
<b>REZIPRES INTRAVENOUS SOLUTION 47 MG/10ML</b>	3	
<b>VAZCULEP INTRAVENOUS SOLUTION</b>	3	
<b>*Vitamins*</b>		
<b>*Vitamin A***</b>		
<b>AQUASOL A INTRAMUSCULAR SOLUTION 50000 UNIT/ML</b>	3	
<b>*Vitamin B-1***</b>		
thiamine hcl injection solution	1 or 1b*	
<b>*Vitamin C***</b>		
<b>ASCOR INTRAVENOUS SOLUTION</b>	3	
<b>*Vitamin D***</b>		
<b>DRISDOL ORAL CAPSULE</b>	3	

Drug Name	Tier	Notes
ergocalciferol oral capsule	1 or 1a*	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1 or 1a*	
<b>*Vitamin K***</b>		
phytonadione injection solution 1 mg/0.5ml, 10 mg/ml	1 or 1b*	
phytonadione oral tablet	1 or 1b*	
vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml	1 or 1b*	

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En vigencia desde el 07012025

**Para obtener información sobre tu beneficio de farmacia,  
inicia sesión en [anthem.com/ca](http://anthem.com/ca).**

Encontrarás la lista de medicamentos y los detalles más actualizados sobre tus beneficios. Si tienes alguna pregunta, estamos aquí para ayudarte.

Llámanos al número de Servicios para Afiliados que aparece en tu tarjeta de identificación.

Usuarios con problemas de habla o audición (TDD/TTY):

Llamar al 1-800-221-6915, de lunes a viernes, de 8:30 a. m. a 5 p. m., hora del Este.



Anthem Blue Cross es el nombre comercial de Blue Cross of California. Anthem Blue Cross y Anthem Blue Cross Life and Health Insurance Company son licenciatarios independientes de Blue Cross Association. ANTHEM es una marca comercial registrada de Anthem Insurance Companies, Inc.

Rev. 3/19

# Get help in your language

Curious to know what all this says? We would be too. Here's the English version:

You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

## Spanish

Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

## Chinese

您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

## Vietnamese

Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

## Korean

귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

## Tagalog

May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

## Russian

Вы имеете право получить данную информацию и помочь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

## Arabic

يمكن لك الحصول على هذه المعلومات والمساعدة بلغتك مجاناً. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة.  
(711 :TDD/TTY)

## Armenian

Դուք իրավունք ունեք Ձեր լեզվով անվճար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն։  
Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն՝ Ձեր ID քարտի վրա նշված  
համարով։ (TTY/TDD: 711)

## Farsi

شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت  
کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناسایی‌تان درج شده  
است، تماس بگیرید. (TTY/TDD: 711)

## French

Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

#### Japanese

この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY/TDD: 711)

#### Haitian

Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

#### Italian

Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiama il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

#### Polish

Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

#### Punjabi

ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਇਹ ਜਾਣਕਾਰੀ ਅਤੇ ਮਦਦ ਮੁਫਤ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ। ਮਦਦ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਉੱਤੇ ਮੈਂਬਰ ਸਰਵਿਸਿਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

#### Navajo

Bee ná ahóótí' t'áá ni nizaad k'ehjí niká a'doowoít'áá jiik'e. Naaltsoos bee atah nílinígíí bee néého'dólzingo nanitínígíí bccésh bee hane'i bikáá' áají' hodíílnih. Naaltsoos bee atah nílinígíí bee néého'dólzingo nanitínígíí bccésh bee hane'i bikáá' áají' hodíílnih. (TTY/TDD: 711)

#### **It's important we treat you fairly**

That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1- 800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.