

Drug Name	Tier	Requirements
Antihistamine Drugs		
First Generation Antihistamines		
<i>carbinoxamine maleate oral solution</i>	4	PA
<i>carbinoxamine maleate oral tablet 4 mg</i>	4	PA
<i>clemastine fumarate oral syrup</i>	5	PA
<i>clemastine fumarate oral tablet 2.68 mg</i>	4	PA
<i>cyproheptadine hcl oral syrup</i>	4	PA
<i>cyproheptadine hcl oral tablet</i>	2	PA
<i>promethazine hcl oral solution</i>	2	PA
<i>promethazine hcl oral tablet 12.5 mg, 25 mg</i>	2	PA
<i>promethazine hcl oral tablet 50 mg</i>	4	PA
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	4	PA
<i>promethazine vc oral syrup</i>	4	PA
PROMETHEGAN RECTAL SUPPOSITORY 25 MG, 50 MG	4	PA
RYCLORA ORAL SOLUTION	5	
RYVENT ORAL TABLET	4	PA
Second Generation Antihistamines		
<i>cetirizine hcl oral solution 5 mg/5ml</i>	4	
CLARINEX ORAL TABLET	4	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	4	
<i>desloratadine oral tablet</i>	3	
<i>desloratadine oral tablet dispersible</i>	4	
<i>levocetirizine dihydrochloride oral solution</i>	4	
<i>levocetirizine dihydrochloride oral tablet</i>	2	
Anti-Infective Agents		
Anthelmintics		
<i>albendazole oral tablet</i>	5	
BILTRICIDE ORAL TABLET	4	
EMVERM ORAL TABLET CHEWABLE	5	
<i>ivermectin oral tablet</i>	2	
<i>praziquantel oral tablet</i>	4	
STROMECTOL ORAL TABLET	4	
Antibacterials		
AEMCOLO ORAL TABLET DELAYED RELEASE	4	QL (12 EA per 30 days)
<i>amikacin sulfate injection solution 500 mg/2ml</i>	2	
<i>amoxicillin oral capsule</i>	2	
<i>amoxicillin oral suspension reconstituted</i>	2	
<i>amoxicillin oral tablet</i>	2	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	2	

Drug Name	Tier	Requirements
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	4	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	4	
<i>amoxicillin-pot clavulanate oral tablet</i>	2	
<i>amoxicillin-pot clavulanate oral tablet chewable 400-57 mg</i>	4	
<i>ampicillin oral capsule 500 mg</i>	2	
<i>ampicillin sodium injection solution reconstituted 1 gm, 125 mg</i>	4	
<i>ampicillin sodium intravenous solution reconstituted 10 gm</i>	4	
<i>ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm</i>	4	
<i>ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm</i>	4	
ARIKAYCE INHALATION SUSPENSION	5	PA
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED	4	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	4	
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	5	
AZACTAM INJECTION SOLUTION RECONSTITUTED 1 GM	4	
AZACTAM INJECTION SOLUTION RECONSTITUTED 2 GM	5	
<i>azithromycin intravenous solution reconstituted</i>	2	
<i>azithromycin oral packet</i>	3	
<i>azithromycin oral suspension reconstituted</i>	2	
<i>azithromycin oral tablet</i>	2	
<i>aztreonam injection solution reconstituted 1 gm</i>	4	
<i>aztreonam injection solution reconstituted 2 gm</i>	5	
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE	4	
AZULFIDINE ORAL TABLET	4	
BACTRIM DS ORAL TABLET	4	
BACTRIM ORAL TABLET	4	
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	5	
BAXDELA ORAL TABLET	5	
BETHKIS INHALATION NEBULIZATION SOLUTION	5	PA
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	2	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	2	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
CAYSTON INHALATION SOLUTION RECONSTITUTED	5	PA

Drug Name	Tier	Requirements
<i>cefaclor er oral tablet extended release 12 hour</i>	4	
<i>cefaclor oral capsule</i>	3	
<i>cefaclor oral suspension reconstituted 250 mg/5ml</i>	4	
<i>cefadroxil oral capsule</i>	2	
<i>cefadroxil oral suspension reconstituted</i>	3	
<i>cefadroxil oral tablet</i>	4	
<i>cefazolin sodium injection solution reconstituted 1 gm, 10 gm</i>	3	
<i>cefazolin sodium injection solution reconstituted 500 mg</i>	4	
<i>cefdinir oral capsule</i>	2	
<i>cefdinir oral suspension reconstituted</i>	2	
<i>cefepime hcl injection solution reconstituted 1 gm</i>	4	
<i>cefepime hcl intravenous solution reconstituted 2 gm</i>	4	
<i>cefixime oral capsule</i>	4	
<i>cefixime oral suspension reconstituted</i>	4	
<i>cefotetan disodium injection solution reconstituted 1 gm, 2 gm</i>	4	
<i>cefoxitin sodium intravenous solution reconstituted</i>	2	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	4	
<i>cefpodoxime proxetil oral tablet</i>	3	
<i>cefprozil oral suspension reconstituted</i>	4	
<i>cefprozil oral tablet</i>	2	
<i>ceftazidime injection solution reconstituted 1 gm, 6 gm</i>	2	
<i>ceftazidime intravenous solution reconstituted</i>	2	
<i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm</i>	2	
<i>ceftriaxone sodium injection solution reconstituted 250 mg, 500 mg</i>	4	
<i>ceftriaxone sodium intravenous solution reconstituted 10 gm</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cefuroxime sodium injection solution reconstituted 750 mg</i>	2	
<i>cefuroxime sodium intravenous solution reconstituted 1.5 gm</i>	2	
<i>cephalexin oral capsule</i>	2	
<i>cephalexin oral suspension reconstituted</i>	2	
<i>cephalexin oral tablet</i>	4	
CIPRO ORAL SUSPENSION RECONSTITUTED	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	2	
<i>ciprofloxacin in d5w intravenous solution 200 mg/100ml</i>	2	
<i>clarithromycin er oral tablet extended release 24 hour</i>	4	

Drug Name	Tier	Requirements
<i>clarithromycin oral suspension reconstituted</i>	4	
<i>clarithromycin oral tablet</i>	2	
CLEOCIN ORAL CAPSULE	4	
CLEOCIN ORAL SOLUTION RECONSTITUTED	4	
CLEOCIN PHOSPHATE INJECTION SOLUTION 900 MG/6ML	4	
<i>clindamycin hcl oral capsule</i>	2	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	4	
<i>clindamycin phosphate in d5w intravenous solution</i>	2	
<i>clindamycin phosphate injection solution 900 mg/6ml</i>	2	
<i>colistimethate sodium (cba) injection solution reconstituted</i>	5	
CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED	5	
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
<i>daptomycin intravenous solution reconstituted</i>	5	
<i>demeclocycline hcl oral tablet</i>	4	
<i>dicloxacillin sodium oral capsule</i>	2	
DIFICID ORAL SUSPENSION RECONSTITUTED	5	QL (408 ML per 30 days)
DIFICID ORAL TABLET	5	QL (60 EA per 30 days)
DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG	5	ST
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	2	
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet</i>	3	
<i>doxycycline hyclate oral tablet delayed release</i>	4	
<i>doxycycline monohydrate oral capsule</i>	2	
<i>doxycycline monohydrate oral suspension reconstituted</i>	4	
<i>doxycycline monohydrate oral tablet</i>	2	
E.E.S. 400 ORAL TABLET	4	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED	4	
<i>ertapenem sodium injection solution reconstituted</i>	4	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	4	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED	5	
ERY-TAB ORAL TABLET DELAYED RELEASE	4	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	
<i>erythromycin base oral capsule delayed release particles</i>	4	
<i>erythromycin base oral tablet</i>	4	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	4	

Drug Name	Tier	Requirements
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	5	
<i>erythromycin ethylsuccinate oral tablet</i>	4	
<i>erythromycin oral tablet delayed release</i>	4	
FIRVANQ ORAL SOLUTION RECONSTITUTED	4	
<i>gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%</i>	4	
<i>gentamicin sulfate injection solution 40 mg/ml</i>	3	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	2	
INVANZ INJECTION SOLUTION RECONSTITUTED	4	
KITABIS PAK INHALATION NEBULIZATION SOLUTION	5	PA
<i>levofloxacin in d5w intravenous solution 500 mg/100ml, 750 mg/150ml</i>	4	
<i>levofloxacin oral solution</i>	4	
<i>levofloxacin oral tablet</i>	2	
<i>linezolid intravenous solution 600 mg/300ml</i>	2	
<i>linezolid oral suspension reconstituted</i>	5	QL (1680 ML per 28 days)
<i>linezolid oral tablet</i>	3	QL (56 EA per 28 days)
<i>meropenem intravenous solution reconstituted 1 gm</i>	4	
<i>meropenem intravenous solution reconstituted 500 mg</i>	3	
<i>minocycline hcl er oral tablet extended release 24 hour</i>	4	
<i>minocycline hcl oral capsule</i>	2	
<i>minocycline hcl oral tablet</i>	4	
<i>moxifloxacin hcl in nacl intravenous solution</i>	2	
<i>moxifloxacin hcl oral tablet</i>	2	
<i>nafcillin sodium injection solution reconstituted 1 gm, 2 gm</i>	4	
<i>nafcillin sodium intravenous solution reconstituted 10 gm</i>	4	
<i>neomycin sulfate oral tablet</i>	2	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
NUZYRA ORAL TABLET	5	PA
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	4	
<i>oxacillin sodium in dextrose intravenous solution</i>	4	
<i>oxacillin sodium injection solution reconstituted 1 gm, 2 gm</i>	4	
<i>oxacillin sodium intravenous solution reconstituted</i>	4	
<i>penicillin g pot in dextrose intravenous solution 40000 unit/ml, 60000 unit/ml</i>	4	
<i>penicillin g potassium injection solution reconstituted 20000000 unit</i>	4	
<i>penicillin g sodium injection solution reconstituted</i>	2	
<i>penicillin v potassium oral solution reconstituted</i>	2	
<i>penicillin v potassium oral tablet</i>	2	

Drug Name	Tier	Requirements
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm</i>	4	
<i>polymyxin b sulfate injection solution reconstituted</i>	2	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED 500-500 MG	4	
SEYSARA ORAL TABLET	5	ST
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	5	PA; QL (6 EA per 30 days)
SIVEXTRO ORAL TABLET	5	PA; QL (6 EA per 30 days)
<i>streptomycin sulfate intramuscular solution reconstituted</i>	2	
<i>sulfadiazine oral tablet</i>	4	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	2	
<i>sulfasalazine oral tablet</i>	3	
<i>sulfasalazine oral tablet delayed release</i>	4	
TARGADOX ORAL TABLET	4	ST
TAZICEF INJECTION SOLUTION RECONSTITUTED 1 GM	4	
TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED 2 GM, 6 GM	4	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	5	
<i>tetracycline hcl oral capsule</i>	2	
<i>tigecycline intravenous solution reconstituted</i>	5	
TOBI INHALATION NEBULIZATION SOLUTION	5	PA
TOBI PODHALER INHALATION CAPSULE	5	PA
<i>tobramycin inhalation nebulization solution</i>	5	PA
<i>tobramycin sulfate injection solution 10 mg/ml, 80 mg/2ml</i>	2	
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	5	
UNASYN INJECTION SOLUTION RECONSTITUTED 3 (2-1) GM	4	
UNASYN INTRAVENOUS SOLUTION RECONSTITUTED 15 (10-5) GM	4	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
VANCOGIN ORAL CAPSULE	5	
<i>vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 500 mg, 750 mg</i>	4	
<i>vancomycin hcl oral capsule</i>	4	
<i>vancomycin hcl oral solution reconstituted 25 mg/ml, 250 mg/5ml</i>	4	
XIFAXAN ORAL TABLET 200 MG	4	QL (9 EA per 30 days)

Drug Name	Tier	Requirements
XIFAXAN ORAL TABLET 550 MG	5	PA
ZEMDRI INTRAVENOUS SOLUTION	5	PA
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED	4	
ZITHROMAX ORAL PACKET	4	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	
ZITHROMAX TRI-PAK ORAL TABLET	4	
ZITHROMAX Z-PAK ORAL TABLET	4	
ZOSYN INTRAVENOUS SOLUTION 2-0.25 GM/50ML	4	
ZYVOX INTRAVENOUS SOLUTION 600 MG/300ML	4	
ZYVOX ORAL SUSPENSION RECONSTITUTED	5	QL (1680 ML per 28 days)
ZYVOX ORAL TABLET	5	QL (56 EA per 28 days)
Antifungals		
ABELCET INTRAVENOUS SUSPENSION	4	PA
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	5	PA
<i>amphotericin b intravenous solution reconstituted</i>	4	PA
<i>amphotericin b liposome intravenous suspension reconstituted</i>	5	PA
ANCOBON ORAL CAPSULE	5	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED	5	
<i>caspofungin acetate intravenous solution reconstituted</i>	4	
CRESEMBA ORAL CAPSULE	5	PA
DIFLUCAN ORAL SUSPENSION RECONSTITUTED 40 MG/ML	4	
DIFLUCAN ORAL TABLET 100 MG	4	
DIFLUCAN ORAL TABLET 200 MG	5	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	5	
<i>fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%</i>	4	
<i>fluconazole oral suspension reconstituted</i>	2	
<i>fluconazole oral tablet</i>	2	
<i>flucytosine oral capsule</i>	5	
<i>griseofulvin microsize oral suspension</i>	4	
<i>griseofulvin microsize oral tablet</i>	4	
<i>griseofulvin ultramicrosize oral tablet</i>	4	
<i>itraconazole oral capsule</i>	4	
<i>itraconazole oral solution</i>	5	

Drug Name	Tier	Requirements
<i>ketoconazole oral tablet</i>	2	
<i>miconazole sodium intravenous solution reconstituted 100 mg</i>	4	
<i>miconazole sodium intravenous solution reconstituted 50 mg</i>	5	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 50 MG	5	
NOXAFIL ORAL PACKET	5	PA
NOXAFIL ORAL SUSPENSION	5	PA
NOXAFIL ORAL TABLET DELAYED RELEASE	5	PA
<i>nystatin mouth/throat suspension</i>	2	
<i>nystatin oral tablet</i>	3	
<i>posaconazole oral suspension</i>	5	PA
<i>posaconazole oral tablet delayed release</i>	5	PA
SPORANOX ORAL CAPSULE	5	
SPORANOX ORAL SOLUTION	5	
<i>terbinafine hcl oral tablet</i>	2	
<i>tolterodine oral capsule</i>	5	
VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
VFEND ORAL SUSPENSION RECONSTITUTED	5	
VFEND ORAL TABLET	4	
VIVJOA ORAL CAPSULE THERAPY PACK	4	PA
<i>voriconazole intravenous solution reconstituted</i>	5	PA
<i>voriconazole oral suspension reconstituted</i>	5	
<i>voriconazole oral tablet</i>	4	
Antimycobacterials		
<i>cycloserine oral capsule</i>	5	
<i>dapsone oral tablet</i>	2	
<i>ethambutol hcl oral tablet</i>	3	
<i>isoniazid oral syrup</i>	4	
<i>isoniazid oral tablet 100 mg</i>	4	
<i>isoniazid oral tablet 300 mg</i>	2	
MYCOBUTIN ORAL CAPSULE	5	
<i>pretomanid oral tablet</i>	4	PA
PRIFTIN ORAL TABLET	4	
<i>pyrazinamide oral tablet</i>	4	
<i>rifabutin oral capsule</i>	4	
<i>rifampin intravenous solution reconstituted</i>	2	
<i>rifampin oral capsule</i>	4	
SIRTURO ORAL TABLET	5	PA
TRECTOR ORAL TABLET	4	

Drug Name	Tier	Requirements
Antiprotozoals		
<i>atovaquone oral suspension</i>	4	
<i>atovaquone-proguanil hcl oral tablet</i>	4	
<i>chloroquine phosphate oral tablet</i>	4	
COARTEM ORAL TABLET	4	
DARAPRIM ORAL TABLET	5	
FLAGYL ORAL CAPSULE	4	
HUMATIN ORAL CAPSULE	5	
<i>hydroxychloroquine sulfate oral tablet</i>	2	
IMPAVIDO ORAL CAPSULE	5	QL (84 EA per 28 days)
KRINTAFEL ORAL TABLET	4	
LAMPIT ORAL TABLET	4	
MALARONE ORAL TABLET	4	
<i>mefloquine hcl oral tablet</i>	4	
MEPRON ORAL SUSPENSION	5	
<i>metronidazole intravenous solution 500 mg/100ml</i>	2	
<i>metronidazole oral capsule</i>	4	
<i>metronidazole oral tablet</i>	2	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	4	PA
<i>nitazoxanide oral tablet</i>	5	
PENTAM INJECTION SOLUTION RECONSTITUTED	4	
<i>pentamidine isethionate inhalation solution reconstituted</i>	4	PA
<i>pentamidine isethionate injection solution reconstituted</i>	4	
PLAQUENIL ORAL TABLET	4	
<i>primaquine phosphate oral tablet 26.3 (15 base) mg</i>	4	
<i>pyrimethamine oral tablet</i>	5	
QUALAQUIN ORAL CAPSULE	4	PA
<i>quinine sulfate oral capsule</i>	4	PA
SOLOSEC ORAL PACKET	4	
SOVUNA ORAL TABLET	4	
<i>tinidazole oral tablet</i>	4	
Antivirals		
<i>abacavir sulfate oral solution</i>	4	
<i>abacavir sulfate oral tablet</i>	4	QL (60 EA per 30 days)
<i>abacavir sulfate-lamivudine oral tablet</i>	4	QL (30 EA per 30 days)
<i>acyclovir oral capsule</i>	2	
<i>acyclovir oral suspension</i>	4	
<i>acyclovir oral tablet</i>	2	
<i>acyclovir sodium intravenous solution</i>	4	PA
<i>adefovir dipivoxil oral tablet</i>	4	QL (30 EA per 30 days)

Drug Name	Tier	Requirements
APTIVUS ORAL CAPSULE	5	QL (120 EA per 30 days)
<i>atazanavir sulfate oral capsule 150 mg, 300 mg</i>	4	QL (30 EA per 30 days)
<i>atazanavir sulfate oral capsule 200 mg</i>	4	QL (60 EA per 30 days)
BARACLUDE ORAL SOLUTION	4	QL (600 ML per 30 days)
BARACLUDE ORAL TABLET	5	QL (30 EA per 30 days)
BIKTARVY ORAL TABLET	5	QL (30 EA per 30 days)
CIMDUO ORAL TABLET	5	
COMBIVIR ORAL TABLET	5	QL (60 EA per 30 days)
COMPLERA ORAL TABLET	5	QL (30 EA per 30 days)
<i>darunavir oral tablet 600 mg</i>	5	QL (60 EA per 30 days)
<i>darunavir oral tablet 800 mg</i>	5	QL (30 EA per 30 days)
DELSTRIGO ORAL TABLET	5	
DESCOVY ORAL TABLET	5	QL (30 EA per 30 days)
DOVATO ORAL TABLET	5	
EDURANT ORAL TABLET	5	QL (30 EA per 30 days)
<i>efavirenz oral tablet</i>	4	QL (30 EA per 30 days)
<i>efavirenz-emtricitab-tenofo df oral tablet</i>	4	QL (30 EA per 30 days)
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	5	
<i>emtricitabine oral capsule</i>	4	QL (30 EA per 30 days)
<i>emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	5	QL (30 EA per 30 days)
<i>emtricitabine-tenofovir df oral tablet 200-300 mg</i>	4	QL (30 EA per 30 days)
EMTRIVA ORAL CAPSULE	4	QL (30 EA per 30 days)
EMTRIVA ORAL SOLUTION	4	
<i>entecavir oral tablet</i>	4	QL (30 EA per 30 days)
EPCLUSA ORAL PACKET 150-37.5 MG	5	PA; QL (84 EA per 365 days)
EPCLUSA ORAL PACKET 200-50 MG	5	PA; QL (168 EA per 365 days)
EPCLUSA ORAL TABLET 200-50 MG	5	PA; QL (168 EA per 365 days)
EPCLUSA ORAL TABLET 400-100 MG	5	PA; QL (84 EA per 365 days)
EPIVIR ORAL SOLUTION	4	
EPIVIR ORAL TABLET 150 MG	4	QL (60 EA per 30 days)
EPIVIR ORAL TABLET 300 MG	4	QL (30 EA per 30 days)
EPZICOM ORAL TABLET	5	QL (30 EA per 30 days)
<i>etravirine oral tablet 100 mg</i>	5	QL (120 EA per 30 days)
<i>etravirine oral tablet 200 mg</i>	5	QL (60 EA per 30 days)
EVOTAZ ORAL TABLET	5	QL (30 EA per 30 days)
<i>famciclovir oral tablet</i>	2	
<i>fosamprenavir calcium oral tablet</i>	5	QL (120 EA per 30 days)
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	5	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
GENVOYA ORAL TABLET	5	QL (30 EA per 30 days)
HARVONI ORAL PACKET 33.75-150 MG	5	PA; QL (168 EA per 365 days)
HARVONI ORAL PACKET 45-200 MG	5	PA; QL (336 EA per 365 days)
HARVONI ORAL TABLET 90-400 MG	5	PA; QL (168 EA per 365 days)
INTELENCE ORAL TABLET 100 MG	5	QL (120 EA per 30 days)
INTELENCE ORAL TABLET 200 MG	5	QL (60 EA per 30 days)
INTELENCE ORAL TABLET 25 MG	4	
ISENTRESS HD ORAL TABLET	5	
ISENTRESS ORAL PACKET	4	
ISENTRESS ORAL TABLET	5	
ISENTRESS ORAL TABLET CHEWABLE 100 MG	5	
ISENTRESS ORAL TABLET CHEWABLE 25 MG	4	
JULUCA ORAL TABLET	5	QL (30 EA per 30 days)
KALETRA ORAL SOLUTION	5	
KALETRA ORAL TABLET 100-25 MG	4	QL (240 EA per 30 days)
KALETRA ORAL TABLET 200-50 MG	5	QL (120 EA per 30 days)
<i>lamivudine oral solution</i>	2	
<i>lamivudine oral tablet 100 mg</i>	2	
<i>lamivudine oral tablet 150 mg</i>	2	QL (60 EA per 30 days)
<i>lamivudine oral tablet 300 mg</i>	2	QL (30 EA per 30 days)
<i>lamivudine-zidovudine oral tablet</i>	4	QL (60 EA per 30 days)
<i>ledipasvir-sofosbuvir oral tablet</i>	5	PA; QL (168 EA per 365 days)
LEXIVA ORAL TABLET	5	QL (120 EA per 30 days)
LIVTENCITY ORAL TABLET	5	PA; QL (360 EA per 30 days)
<i>lopinavir-ritonavir oral solution</i>	4	
<i>lopinavir-ritonavir oral tablet 100-25 mg</i>	4	QL (240 EA per 30 days)
<i>lopinavir-ritonavir oral tablet 200-50 mg</i>	4	QL (120 EA per 30 days)
<i>maraviroc oral tablet</i>	5	
MAVYRET ORAL PACKET	5	PA; QL (560 EA per 365 days)
MAVYRET ORAL TABLET	5	PA; QL (336 EA per 365 days)
<i>nevirapine er oral tablet extended release 24 hour 400 mg</i>	4	QL (30 EA per 30 days)
<i>nevirapine oral suspension</i>	4	
<i>nevirapine oral tablet</i>	2	QL (60 EA per 30 days)
NORVIR ORAL PACKET	4	
NORVIR ORAL TABLET	4	QL (360 EA per 30 days)
ODEFSEY ORAL TABLET	5	QL (30 EA per 30 days)
<i>oseltamivir phosphate oral capsule 30 mg</i>	2	QL (60 EA per 30 days)
<i>oseltamivir phosphate oral capsule 45 mg</i>	4	QL (30 EA per 30 days)
<i>oseltamivir phosphate oral capsule 75 mg</i>	2	QL (30 EA per 30 days)
<i>oseltamivir phosphate oral suspension reconstituted</i>	4	QL (540 ML per 30 days)

Drug Name	Tier	Requirements
PAXLOVID (150/100) ORAL TABLET THERAPY PACK	5	QL (20 EA per 5 days)
PAXLOVID (300/100) ORAL TABLET THERAPY PACK	5	QL (30 EA per 5 days)
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	5	
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
PIFELTRO ORAL TABLET	5	
PREVYMIS ORAL TABLET	5	
PREZCOBIX ORAL TABLET	5	QL (30 EA per 30 days)
PREZISTA ORAL SUSPENSION	5	
PREZISTA ORAL TABLET 150 MG	5	
PREZISTA ORAL TABLET 600 MG	5	QL (60 EA per 30 days)
PREZISTA ORAL TABLET 75 MG	4	
PREZISTA ORAL TABLET 800 MG	5	QL (30 EA per 30 days)
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	4	QL (60 EA per 180 days)
RETROVIR ORAL CAPSULE	4	
RETROVIR ORAL SYRUP	4	
REYATAZ ORAL CAPSULE 200 MG	5	QL (60 EA per 30 days)
REYATAZ ORAL CAPSULE 300 MG	5	QL (30 EA per 30 days)
REYATAZ ORAL PACKET	5	
<i>ribavirin oral capsule</i>	4	
<i>ribavirin oral tablet 200 mg</i>	2	
<i>rimantadine hcl oral tablet</i>	4	
<i>ritonavir oral tablet</i>	3	QL (360 EA per 30 days)
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	5	QL (60 EA per 30 days)
SELZENTRY ORAL SOLUTION	5	
SELZENTRY ORAL TABLET 150 MG, 300 MG, 75 MG	5	
SELZENTRY ORAL TABLET 25 MG	4	
<i>sofosbuvir-velpatasvir oral tablet</i>	5	PA; QL (84 EA per 365 days)
SOVALDI ORAL PACKET	5	PA
SOVALDI ORAL TABLET	5	PA
STRIBILD ORAL TABLET	5	QL (30 EA per 30 days)
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG	5	QL (4 EA per 28 days)
SUNLENCA ORAL TABLET THERAPY PACK 5 X 300 MG	5	QL (5 EA per 28 days)
SYMFI LO ORAL TABLET	5	
SYMFI ORAL TABLET	5	
SYMTUZA ORAL TABLET	5	
TAMIFLU ORAL CAPSULE 30 MG	4	QL (60 EA per 30 days)
TAMIFLU ORAL CAPSULE 45 MG, 75 MG	4	QL (30 EA per 30 days)

Drug Name	Tier	Requirements
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	4	QL (540 ML per 30 days)
<i>tenofovir disoproxil fumarate oral tablet</i>	4	QL (30 EA per 30 days)
TIVICAY ORAL TABLET 10 MG	4	QL (30 EA per 30 days)
TIVICAY ORAL TABLET 25 MG	5	QL (30 EA per 30 days)
TIVICAY ORAL TABLET 50 MG	5	QL (60 EA per 30 days)
TIVICAY PD ORAL TABLET SOLUBLE	5	QL (180 EA per 30 days)
TRIUMEQ ORAL TABLET	5	QL (30 EA per 30 days)
TRIUMEQ PD ORAL TABLET SOLUBLE	4	QL (180 EA per 30 days)
TRUVADA ORAL TABLET	5	QL (30 EA per 30 days)
<i>valacyclovir hcl oral tablet 1 gm</i>	2	QL (90 EA per 30 days)
<i>valacyclovir hcl oral tablet 500 mg</i>	2	QL (60 EA per 30 days)
VALCYTE ORAL SOLUTION RECONSTITUTED	5	
VALCYTE ORAL TABLET	5	
<i>valganciclovir hcl oral solution reconstituted</i>	5	
<i>valganciclovir hcl oral tablet</i>	3	
VALTREX ORAL TABLET 1 GM	4	QL (90 EA per 30 days)
VALTREX ORAL TABLET 500 MG	4	QL (60 EA per 30 days)
VEMLIDY ORAL TABLET	5	
VIRACEPT ORAL TABLET 250 MG	5	QL (270 EA per 30 days)
VIRACEPT ORAL TABLET 625 MG	5	QL (120 EA per 30 days)
VIREAD ORAL POWDER	5	
VIREAD ORAL TABLET	5	QL (30 EA per 30 days)
VOSEVI ORAL TABLET	5	PA
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG	4	QL (2 EA per 28 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	4	QL (1 EA per 28 days)
ZEPATIER ORAL TABLET	5	PA; QL (112 EA per 365 days)
ZIAGEN ORAL SOLUTION	4	
<i>zidovudine oral capsule</i>	4	
<i>zidovudine oral syrup</i>	4	
<i>zidovudine oral tablet</i>	4	QL (60 EA per 30 days)
Urinary Anti-Infectives		
<i>fosfomycin tromethamine oral packet</i>	4	
HIPREX ORAL TABLET	4	
MACROBID ORAL CAPSULE	4	
MACRODANTIN ORAL CAPSULE	4	
<i>methenamine hippurate oral tablet</i>	4	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	2	

Drug Name	Tier	Requirements
<i>nitrofurantoin macrocrystal oral capsule 25 mg</i>	4	
<i>nitrofurantoin monohyd macro oral capsule</i>	2	
<i>nitrofurantoin oral suspension 25 mg/5ml, 50 mg/5ml</i>	5	
<i>trimethoprim oral tablet</i>	3	
Antineoplastic Agents		
<i>Antineoplastic Agents</i>		
<i>abiraterone acetate oral tablet 250 mg</i>	4	PA
<i>abiraterone acetate oral tablet 500 mg</i>	5	PA
AFINITOR DISPERZ ORAL TABLET SOLUBLE	5	PA
AFINITOR ORAL TABLET	5	PA
AKEEGA ORAL TABLET	5	PA
ALECENSA ORAL CAPSULE	5	PA
ALUNBRIG ORAL TABLET	5	PA
ALUNBRIG ORAL TABLET THERAPY PACK	5	PA
AUGTYRO ORAL CAPSULE	5	PA
AYVAKIT ORAL TABLET	5	PA; QL (30 EA per 30 days)
BALVERSA ORAL TABLET	5	PA
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>bexarotene oral capsule</i>	5	PA
<i>bicalutamide oral tablet</i>	3	
BOSULIF ORAL CAPSULE	5	PA
BOSULIF ORAL TABLET	5	PA
BRAFTOVI ORAL CAPSULE 75 MG	5	PA; QL (180 EA per 30 days)
BRUKINSA ORAL CAPSULE	5	PA
CABOMETYX ORAL TABLET	5	PA
CALQUENCE ORAL CAPSULE	5	PA
CALQUENCE ORAL TABLET	5	PA
CAPRELSA ORAL TABLET	5	PA
CASODEX ORAL TABLET	5	
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	5	PA
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	5	PA
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	5	PA
COPIKTRA ORAL CAPSULE	5	PA
COTELLIC ORAL TABLET	5	PA
<i>cyclophosphamide oral capsule</i>	2	PA
<i>cyclophosphamide oral tablet</i>	4	PA
DAURISMO ORAL TABLET	5	PA
DROXIA ORAL CAPSULE	4	

Drug Name	Tier	Requirements
ERIVEDGE ORAL CAPSULE	5	PA
ERLEADA ORAL TABLET 240 MG	5	PA; QL (30 EA per 30 days)
ERLEADA ORAL TABLET 60 MG	5	PA; QL (120 EA per 30 days)
<i>erlotinib hcl oral tablet</i>	5	PA
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	5	PA
<i>everolimus oral tablet soluble</i>	5	PA
FOTIVDA ORAL CAPSULE	5	PA
FRUZAQLA ORAL CAPSULE	5	PA
<i>gefitinib oral tablet</i>	5	PA
GILOTRIF ORAL TABLET	5	PA
GLEEVEC ORAL TABLET	5	PA
GLEOSTINE ORAL CAPSULE 10 MG, 40 MG	4	PA
GLEOSTINE ORAL CAPSULE 100 MG	5	PA
HYDREA ORAL CAPSULE	4	
<i>hydroxyurea oral capsule</i>	4	
IBRANCE ORAL CAPSULE	5	PA
IBRANCE ORAL TABLET	5	PA
ICLUSIG ORAL TABLET	5	PA
IDHIFA ORAL TABLET	5	PA
<i>imatinib mesylate oral tablet</i>	4	PA
IMBRUVICA ORAL CAPSULE	5	PA
IMBRUVICA ORAL SUSPENSION	5	PA
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	5	PA
INLYTA ORAL TABLET	5	PA
INQOVI ORAL TABLET	5	PA
INREBIC ORAL CAPSULE	5	PA
IRESSA ORAL TABLET	5	PA
IWILFIN ORAL TABLET	5	PA
JAKAFI ORAL TABLET	5	PA
JAYPIRCA ORAL TABLET	5	PA
JYLAMVO ORAL SOLUTION	5	PA
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (63 EA per 28 days)
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (63 EA per 28 days)
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (63 EA per 28 days)
KOSELUGO ORAL CAPSULE	5	PA
KRAZATI ORAL TABLET	5	PA
<i>lapatinib ditosylate oral tablet</i>	5	PA
<i>lenalidomide oral capsule</i>	5	PA
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA

Drug Name	Tier	Requirements
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA
LONSURF ORAL TABLET	5	PA
LORBRENA ORAL TABLET	5	PA
LUMAKRAS ORAL TABLET	5	PA
LYNPARZA ORAL TABLET	5	PA
LYSODREN ORAL TABLET	5	
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
MATULANE ORAL CAPSULE	5	
MEKINIST ORAL SOLUTION RECONSTITUTED	5	PA
MEKINIST ORAL TABLET	5	PA
MEKTOVI ORAL TABLET	5	PA
<i>mercaptopurine oral tablet</i>	4	
<i>methotrexate sodium (pf) injection solution 50 mg/2ml</i>	2	
<i>methotrexate sodium injection solution 50 mg/2ml</i>	2	
<i>methotrexate sodium oral tablet</i>	3	
NERLYNX ORAL TABLET	5	PA
NEXAVAR ORAL TABLET	5	PA
NILANDRON ORAL TABLET	5	
<i>nilutamide oral tablet</i>	5	
NINLARO ORAL CAPSULE	5	PA
NUBEQA ORAL TABLET	5	PA
ODOMZO ORAL CAPSULE	5	PA
OGSIVEO ORAL TABLET	5	PA
OJEMDA ORAL SUSPENSION RECONSTITUTED	5	PA

Drug Name	Tier	Requirements
OJEMDA ORAL TABLET	5	PA
OJJAARA ORAL TABLET	5	PA
ONUREG ORAL TABLET	5	PA
ORSERDU ORAL TABLET	5	PA
<i>pazopanib hcl oral tablet</i>	5	PA
PEMAZYRE ORAL TABLET	5	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	PA
POMALYST ORAL CAPSULE	5	PA
PURIXAN ORAL SUSPENSION	5	
QINLOCK ORAL TABLET	5	PA
RETEVMO ORAL CAPSULE	5	PA
REVLIMID ORAL CAPSULE	5	PA
REZLIDHIA ORAL CAPSULE	5	PA
ROZLYTREK ORAL CAPSULE	5	PA
ROZLYTREK ORAL PACKET	5	PA
RUBRACA ORAL TABLET	5	PA
RYDAPT ORAL CAPSULE	5	PA
SCEMBLIX ORAL TABLET 100 MG	5	PA; QL (120 EA per 30 days)
SCEMBLIX ORAL TABLET 20 MG	5	PA; QL (60 EA per 30 days)
SCEMBLIX ORAL TABLET 40 MG	5	PA
SIKLOS ORAL TABLET 100 MG	4	
SIKLOS ORAL TABLET 1000 MG	5	
<i>sorafenib tosylate oral tablet</i>	5	PA
SPRYCEL ORAL TABLET	5	PA
STIVARGA ORAL TABLET	5	PA
<i>sunitinib malate oral capsule</i>	5	PA
SUTENT ORAL CAPSULE	5	PA
TABRECTA ORAL TABLET	5	PA
TAFINLAR ORAL CAPSULE	5	PA
TAFINLAR ORAL TABLET SOLUBLE	5	PA
TAGRISO ORAL TABLET	5	PA
TALZENNA ORAL CAPSULE	5	PA
TARGRETIN ORAL CAPSULE	5	PA
TASIGNA ORAL CAPSULE	5	PA
TAZVERIK ORAL TABLET	5	PA

Drug Name	Tier	Requirements
TEPMETKO ORAL TABLET	5	PA
TIBSOVO ORAL TABLET	5	PA
<i>tretinoin oral capsule</i>	5	
TREXALL ORAL TABLET	4	PA
TRUQAP ORAL TABLET	5	PA
TUKYSA ORAL TABLET	5	PA
TURALIO ORAL CAPSULE 125 MG	5	PA
TYKERB ORAL TABLET	5	PA
VANFLYTA ORAL TABLET	5	PA
VENCLEXTA ORAL TABLET 10 MG	3	PA; QL (60 EA per 30 days)
VENCLEXTA ORAL TABLET 100 MG	5	PA; QL (120 EA per 30 days)
VENCLEXTA ORAL TABLET 50 MG	5	PA; QL (30 EA per 30 days)
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	5	PA; QL (84 EA per 365 days)
VERZENIO ORAL TABLET	5	PA
VITRAKVI ORAL CAPSULE	5	PA
VITRAKVI ORAL SOLUTION	5	PA
VIZIMPRO ORAL TABLET	5	PA
VONJO ORAL CAPSULE	5	PA; QL (120 EA per 30 days)
VOTRIENT ORAL TABLET	5	PA
WELIREG ORAL TABLET	5	PA
XALKORI ORAL CAPSULE	5	PA
XALKORI ORAL CAPSULE SPRINKLE	5	PA
XATMEP ORAL SOLUTION	4	PA
XOSPATA ORAL TABLET	5	PA
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	5	PA
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5	PA
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5	PA
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	5	PA
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	5	PA
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
XTANDI ORAL CAPSULE	5	PA
XTANDI ORAL TABLET	5	PA
YONSA ORAL TABLET	5	PA

Drug Name	Tier	Requirements
ZEJULA ORAL TABLET	5	PA
ZELBORAF ORAL TABLET	5	PA
ZOLINZA ORAL CAPSULE	5	PA
ZYDELIG ORAL TABLET	5	PA
ZYKADIA ORAL TABLET	5	PA
ZYTIGA ORAL TABLET	5	PA
Antineoplastics		
<i>Antineoplastics, Other</i>		
GAVRETO ORAL CAPSULE	5	PA
Antitoxins, Immune Globulins, Toxoids, And Vaccines		
<i>Allergenic Extracts</i>		
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	4	PA
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	4	PA
<i>Antitoxins And Immune Globulins</i>		
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	5	PA
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML	5	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
GAMMAKED INJECTION SOLUTION 1 GM/10ML	5	PA
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 5 GM/50ML	5	PA
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML	5	PA
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 2 GM/20ML	5	PA
PANZYGA INTRAVENOUS SOLUTION	5	PA
PRIVIGEN INTRAVENOUS SOLUTION 20 GM/200ML	5	PA
<i>Toxoids</i>		
ADACEL INTRAMUSCULAR SUSPENSION	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	4	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	4	
INFANRIX INTRAMUSCULAR SUSPENSION	4	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
QUADRACEL INTRAMUSCULAR SUSPENSION	4	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
TDVAX INTRAMUSCULAR SUSPENSION	3	

Drug Name	Tier	Requirements
TENIVAC INTRAMUSCULAR INJECTABLE	3	
Vaccines		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED	1	
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED	1	
<i>bcg vaccine injection solution reconstituted</i>	1	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	1	PA
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	1	PA
GARDASIL 9 INTRAMUSCULAR SUSPENSION	1	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML	1	
HAVRIX INTRAMUSCULAR SUSPENSION 720 EL U/0.5ML	4	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	1	PA
HIBERIX INJECTION SOLUTION RECONSTITUTED	4	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	1	
IPOL INJECTION INJECTABLE	1	
IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED	3	
IXIARO INTRAMUSCULAR SUSPENSION	1	
JYNNEOS SUBCUTANEOUS SUSPENSION	1	
MENACTRA INTRAMUSCULAR SOLUTION	1	
MENQUADFI INTRAMUSCULAR SOLUTION	1	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	1	
M-M-R II INJECTION SOLUTION RECONSTITUTED	1	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	4	
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	
PREHEVBRIO INTRAMUSCULAR SUSPENSION	1	PA

Drug Name	Tier	Requirements
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	1	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	4	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	1	
RECOMBIVAX HB INJECTION SUSPENSION	1	PA
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	1	PA
ROTARIX ORAL SUSPENSION	4	
ROTARIX ORAL SUSPENSION RECONSTITUTED	4	
ROTATEQ ORAL SOLUTION	4	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	1	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	
TYPHIM VI INTRAMUSCULAR SOLUTION	1	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	1	
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 25 UNIT/0.5ML 0.5 ML	4	
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML, 50 UNIT/ML 1 ML	1	
VARIVAX SUBCUTANEOUS INJECTABLE	1	
YF-VAX SUBCUTANEOUS INJECTABLE	1	

Autonomic Drugs

Anticholinergic Agents

ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	3	
ATROVENT HFA INHALATION AEROSOL SOLUTION	4	QL (25.8 GM per 30 days)
BEVESPI AEROSPHERE INHALATION AEROSOL	4	QL (10.7 GM per 30 days)
<i>chlordiazepoxide-clidinium oral capsule</i>	4	PA
CUVPOSA ORAL SOLUTION	4	
<i>dicyclomine hcl oral capsule</i>	2	PA
<i>dicyclomine hcl oral solution</i>	4	PA
<i>dicyclomine hcl oral tablet</i>	2	PA
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	5	QL (2 EA per 30 days)
GLYCATE ORAL TABLET	4	

Drug Name	Tier	Requirements
<i>glycopyrrolate oral solution</i>	4	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<i>glycopyrrolate oral tablet 1.5 mg</i>	4	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	3	QL (30 EA per 30 days)
<i>ipratropium bromide inhalation solution</i>	2	PA
<i>ipratropium bromide nasal solution</i>	2	
LIBRAX ORAL CAPSULE	5	PA
<i>methscopolamine bromide oral tablet</i>	4	
ROBINUL ORAL TABLET	4	
ROBINUL-FORTE ORAL TABLET	4	
SPIRIVA HANDIHALER INHALATION CAPSULE	3	QL (30 EA per 30 days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (4 GM per 30 days)
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (4 GM per 30 days)
<i>tiotropium bromide monohydrate inhalation capsule</i>	4	ST; QL (30 EA per 30 days)
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED	4	ST
YUPELRI INHALATION SOLUTION	5	PA
Parasympathomimetic (Cholinergic) Agents		
ADLARITY TRANSDERMAL PATCH WEEKLY	4	ST
ARICEPT ORAL TABLET	4	
<i>bethanechol chloride oral tablet</i>	2	
<i>cevimeline hcl oral capsule</i>	4	
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil hcl oral tablet 23 mg</i>	4	
<i>donepezil hcl oral tablet dispersible</i>	2	
EVOXAC ORAL CAPSULE	4	
EXELON TRANSDERMAL PATCH 24 HOUR	4	
<i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg</i>	4	
<i>galantamine hydrobromide er oral capsule extended release 24 hour 8 mg</i>	3	
<i>galantamine hydrobromide oral solution</i>	4	
<i>galantamine hydrobromide oral tablet 12 mg</i>	3	
<i>galantamine hydrobromide oral tablet 4 mg, 8 mg</i>	2	
MESTINON ORAL SOLUTION	5	
MESTINON ORAL TABLET	5	
MESTINON ORAL TABLET EXTENDED RELEASE	5	
<i>pilocarpine hcl oral tablet</i>	4	
<i>pyridostigmine bromide er oral tablet extended release</i>	4	
<i>pyridostigmine bromide oral solution</i>	4	

Drug Name	Tier	Requirements
<i>pyridostigmine bromide oral tablet 30 mg</i>	4	
<i>pyridostigmine bromide oral tablet 60 mg</i>	3	
<i>rivastigmine tartrate oral capsule 1.5 mg, 4.5 mg</i>	3	
<i>rivastigmine tartrate oral capsule 3 mg, 6 mg</i>	4	
<i>rivastigmine transdermal patch 24 hour</i>	4	
SALAGEN ORAL TABLET	4	
Skeletal Muscle Relaxants		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	PA
<i>baclofen oral solution 10 mg/5ml</i>	5	ST
<i>baclofen oral suspension</i>	5	ST
<i>baclofen oral tablet</i>	2	
<i>carisoprodol oral tablet 250 mg</i>	3	PA
<i>carisoprodol oral tablet 350 mg</i>	2	PA
<i>chlorzoxazone oral tablet 250 mg</i>	5	PA
<i>chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg</i>	4	PA
<i>cyclobenzaprine hcl er oral capsule extended release 24 hour</i>	4	PA
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	2	PA
<i>cyclobenzaprine hcl oral tablet 7.5 mg</i>	4	PA
DANTRIUM ORAL CAPSULE 25 MG	4	
<i>dantrolene sodium oral capsule</i>	4	
FEXMID ORAL TABLET	4	PA
FLEQSUVY ORAL SUSPENSION	5	ST
LYVISPAH ORAL PACKET 10 MG, 5 MG	4	ST; QL (90 EA per 30 days)
LYVISPAH ORAL PACKET 20 MG	5	ST; QL (90 EA per 30 days)
<i>metaxalone oral tablet 400 mg</i>	4	PA
<i>metaxalone oral tablet 800 mg</i>	3	PA
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	2	
<i>orphenadrine citrate er oral tablet extended release 12 hour</i>	4	PA
OZOBAX DS ORAL SOLUTION	5	ST
SOMA ORAL TABLET	4	PA
<i>tizanidine hcl oral capsule</i>	2	
<i>tizanidine hcl oral tablet</i>	2	
ZANAFLEX ORAL CAPSULE	4	
ZANAFLEX ORAL TABLET	4	
Smoking Cessation Agents		
NICOTROL INHALATION INHALER	4	
NICOTROL NS NASAL SOLUTION	4	
<i>varenicline tartrate (starter) oral tablet therapy pack</i>	4	QL (504 EA per 365 days)
<i>varenicline tartrate oral tablet</i>	4	QL (504 EA per 365 days)

Drug Name	Tier	Requirements
Sympatholytic (Adrenergic Blocking) Agents		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	3	
DIBENZYLIN ORAL CAPSULE	5	
<i>dihydroergotamine mesylate nasal solution</i>	5	QL (8 ML per 28 days)
<i>ergoloid mesylates oral tablet</i>	4	
FLOMAX ORAL CAPSULE	4	
MIGRANAL NASAL SOLUTION	5	QL (8 ML per 28 days)
<i>phenoxybenzamine hcl oral capsule</i>	5	
RAPAFLO ORAL CAPSULE	4	
<i>silodosin oral capsule</i>	4	
<i>tamsulosin hcl oral capsule</i>	2	
TRUDHESA NASAL AEROSOL SOLUTION	5	QL (12 ML per 28 days)
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
Sympathomimetic (Adrenergic) Agents		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	4	QL (60 EA per 30 days)
ADVAIR HFA INHALATION AEROSOL	3	QL (12 GM per 30 days)
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
AIRSUPRA INHALATION AEROSOL	4	QL (32.1 GM per 30 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	2	QL (17 GM per 30 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020503)</i>	2	QL (13.4 GM per 30 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020983)</i>	4	ST; QL (36 GM per 30 days)
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml</i>	2	PA
<i>albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml</i>	4	PA
<i>albuterol sulfate oral syrup</i>	4	
<i>albuterol sulfate oral tablet</i>	4	
<i>arformoterol tartrate inhalation nebulization solution</i>	4	PA
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	4	
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	5	

Drug Name	Tier	Requirements
BROVANA INHALATION NEBULIZATION SOLUTION	5	PA
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (8 GM per 30 days)
<i>droxidopa oral capsule</i>	5	
<i>epinephrine injection solution 0.3 mg/0.3ml</i>	3	
<i>epinephrine injection solution auto-injector</i>	3	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	3	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	4	
<i>fluticasone-salmeterol inhalation aerosol</i>	4	PA; QL (12 GM per 30 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	4	QL (60 EA per 30 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	4	QL (1 EA per 30 days)
<i>formoterol fumarate inhalation nebulization solution</i>	4	PA
<i>ipratropium-albuterol inhalation solution</i>	2	PA
<i>levalbuterol hcl inhalation nebulization solution</i>	3	PA
<i>levalbuterol tartrate inhalation aerosol</i>	4	QL (30 GM per 30 days)
LUCEMYRA ORAL TABLET	5	QL (480 EA per 30 days)
<i>midodrine hcl oral tablet 10 mg</i>	3	
<i>midodrine hcl oral tablet 2.5 mg, 5 mg</i>	2	
NORTHERA ORAL CAPSULE	5	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	5	PA
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 30 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	3	QL (60 EA per 30 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	4	QL (4 GM per 30 days)
<i>terbutaline sulfate oral tablet</i>	4	
VENTOLIN HFA INHALATION AEROSOL SOLUTION	4	ST; QL (36 GM per 30 days)
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	4	QL (60 EA per 30 days)
XOPENEX HFA INHALATION AEROSOL	4	QL (30 GM per 30 days)
Blood Formation, Coagulation & Thrombosis Agents		
Hematopoietic Agents		
ALVAIZ ORAL TABLET 18 MG, 9 MG	5	PA; QL (30 EA per 30 days)
ALVAIZ ORAL TABLET 36 MG, 54 MG	5	PA; QL (60 EA per 30 days)
XOLREMDI ORAL CAPSULE	5	

Drug Name	Tier	Requirements
Blood Formation,Coagulation & Thrombosis		
Antihemorrhagic Agents		
<i>tranexamic acid oral tablet</i>	2	
Antithrombotic Agents		
AGRYLIN ORAL CAPSULE	4	
<i>anagrelide hcl oral capsule</i>	4	
ARIXTRA SUBCUTANEOUS SOLUTION	5	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	4	
BRILINTA ORAL TABLET	3	
CABLIVI INJECTION KIT	5	QL (30 EA per 30 days)
<i>cilostazol oral tablet</i>	4	
<i>clopidogrel bisulfate oral tablet 75 mg</i>	2	
<i>dabigatran etexilate mesylate oral capsule</i>	4	
EFFIENT ORAL TABLET	4	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	3	QL (148 EA per 365 days)
ELIQUIS ORAL TABLET 2.5 MG	3	QL (60 EA per 30 days)
ELIQUIS ORAL TABLET 5 MG	3	QL (90 EA per 30 days)
<i>enoxaparin sodium injection solution prefilled syringe</i>	4	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	5	
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	4	
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	5	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML	5	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2500 UNIT/0.2ML	4	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml</i>	4	
<i>heparin sodium (porcine) injection solution 5000 unit/ml</i>	2	
JANTOVEN ORAL TABLET	2	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	5	
PLAVIX ORAL TABLET 75 MG	4	
PRADAXA ORAL CAPSULE	4	ST
<i>prasugrel hcl oral tablet</i>	4	
SAVAYSA ORAL TABLET	4	ST
<i>warfarin sodium oral tablet</i>	2	
XARELTO ORAL SUSPENSION RECONSTITUTED	3	

Drug Name	Tier	Requirements
XARELTO ORAL TABLET 10 MG, 20 MG	3	QL (30 EA per 30 days)
XARELTO ORAL TABLET 15 MG, 2.5 MG	3	QL (60 EA per 30 days)
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	3	QL (102 EA per 365 days)
Blood Formation, Coagulation, And Thrombosis Agents, Misc.		
OXBRYTA ORAL TABLET 300 MG	5	PA; QL (240 EA per 30 days)
OXBRYTA ORAL TABLET 500 MG	5	PA; QL (150 EA per 30 days)
OXBRYTA ORAL TABLET SOLUBLE	5	PA; QL (240 EA per 30 days)
PYRUKYND ORAL TABLET	5	PA; QL (60 EA per 30 days)
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	5	PA; QL (30 EA per 30 days)
TAVALISSE ORAL TABLET	5	PA
Hematopoietic Agents		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML	5	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 25 MCG/0.42ML, 40 MCG/0.4ML	4	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML, 60 MCG/0.3ML	5	PA
DOPTELET ORAL TABLET	5	PA
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 20000 UNIT/ML	5	PA
EPOGEN INJECTION SOLUTION 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	4	PA
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (2.4 ML per 28 days)
FYLNETRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (2.4 ML per 28 days)
GRANIX SUBCUTANEOUS SOLUTION	5	
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
LEUKINE INJECTION SOLUTION RECONSTITUTED	5	
MULPLETA ORAL TABLET	5	PA
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	QL (2.4 ML per 28 days)
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	5	

Drug Name	Tier	Requirements
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	5	
NIVESTYM INJECTION SOLUTION	5	
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	5	
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	3	PA
PROCRIT INJECTION SOLUTION 20000 UNIT/ML, 40000 UNIT/ML	5	PA
PROMACTA ORAL PACKET 12.5 MG	5	PA; QL (360 EA per 30 days)
PROMACTA ORAL PACKET 25 MG	5	PA; QL (180 EA per 30 days)
PROMACTA ORAL TABLET 12.5 MG	5	PA; QL (360 EA per 30 days)
PROMACTA ORAL TABLET 25 MG	5	PA; QL (180 EA per 30 days)
PROMACTA ORAL TABLET 50 MG	5	PA; QL (90 EA per 30 days)
PROMACTA ORAL TABLET 75 MG	5	PA; QL (60 EA per 30 days)
<i>releuko subcutaneous solution prefilled syringe</i>	5	
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	3	PA
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	5	PA
STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (2.4 ML per 28 days)
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	ST; QL (2.4 ML per 28 days)
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (2.4 ML per 28 days)
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	5	
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (2.4 ML per 28 days)
Hemorrhologic Agents		
<i>pentoxifylline er oral tablet extended release</i>	4	
Blood Formation,Coagulation + Thrombosis		
Antithrombotic Agents		
PRADAXA ORAL PACKET	5	ST
Cardiovascular Drugs		
Alpha-Adrenergic Blocking Agents		
CARDURA ORAL TABLET	4	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
<i>doxazosin mesylate oral tablet</i>	2	
<i>prazosin hcl oral capsule 1 mg, 2 mg</i>	2	

Drug Name	Tier	Requirements
<i>prazosin hcl oral capsule 5 mg</i>	4	
<i>terazosin hcl oral capsule</i>	3	
Antilipemic Agents		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR	5	ST; QL (30 EA per 30 days)
ATORVALIQ ORAL SUSPENSION	4	ST; QL (600 ML per 30 days)
<i>atorvastatin calcium oral tablet</i>	1	QL (30 EA per 30 days)
<i>cholestyramine light oral packet</i>	4	
<i>cholestyramine oral packet</i>	3	
<i>colesevelam hcl oral packet</i>	4	
<i>colesevelam hcl oral tablet</i>	4	
COLESTID ORAL TABLET	4	
<i>colestipol hcl oral packet</i>	4	
<i>colestipol hcl oral tablet</i>	4	
CRESTOR ORAL TABLET	4	ST; QL (30 EA per 30 days)
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	4	ST; QL (30 EA per 30 days)
<i>ezetimibe oral tablet</i>	2	QL (30 EA per 30 days)
<i>ezetimibe-simvastatin oral tablet</i>	1	QL (30 EA per 30 days)
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	3	
<i>fenofibrate oral capsule 150 mg, 50 mg</i>	4	
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	4	
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	2	
<i>fenofibric acid oral capsule delayed release 135 mg</i>	4	
<i>fenofibric acid oral capsule delayed release 45 mg</i>	3	
FENOGLIDE ORAL TABLET 120 MG	5	
FENOGLIDE ORAL TABLET 40 MG	4	
<i>flolipid oral suspension 20 mg/5ml</i>	4	ST; QL (225 ML per 30 days)
<i>flolipid oral suspension 40 mg/5ml</i>	4	ST; QL (150 ML per 30 days)
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	1	
<i>fluvastatin sodium oral capsule</i>	1	
<i>gemfibrozil oral tablet</i>	3	
<i>icosapent ethyl oral capsule</i>	4	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	5	PA
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST
LIPITOR ORAL TABLET	4	ST; QL (30 EA per 30 days)
LIPOFEN ORAL CAPSULE	4	
LIVALO ORAL TABLET	3	
LOPID ORAL TABLET	4	

Drug Name	Tier	Requirements
<i>lovastatin oral tablet 10 mg</i>	1	QL (30 EA per 30 days)
<i>lovastatin oral tablet 20 mg, 40 mg</i>	1	QL (60 EA per 30 days)
LOVAZA ORAL CAPSULE	4	
NEXLETOL ORAL TABLET	4	PA
NEXLIZET ORAL TABLET	4	PA
<i>niacin (antihyperlipidemic) oral tablet</i>	4	
<i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg</i>	3	
<i>niacin er (antihyperlipidemic) oral tablet extended release 750 mg</i>	4	
NIACOR ORAL TABLET	4	
<i>omega-3-acid ethyl esters oral capsule</i>	4	
<i>pitavastatin calcium oral tablet</i>	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (2 ML per 28 days)
<i>pravastatin sodium oral tablet</i>	1	QL (30 EA per 30 days)
PREVALITE ORAL PACKET	4	
QUESTRAN LIGHT ORAL POWDER	4	
QUESTRAN ORAL POWDER	4	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL (3.5 ML per 28 days)
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (3 ML per 28 days)
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (3 ML per 28 days)
<i>rosuvastatin calcium oral tablet</i>	1	QL (30 EA per 30 days)
<i>simvastatin oral tablet 10 mg, 20 mg, 5 mg</i>	1	QL (45 EA per 30 days)
<i>simvastatin oral tablet 40 mg, 80 mg</i>	1	QL (30 EA per 30 days)
TRICOR ORAL TABLET	4	
TRILIPIX ORAL CAPSULE DELAYED RELEASE	4	
VASCEPA ORAL CAPSULE	4	
VYTORIN ORAL TABLET	4	QL (30 EA per 30 days)
WELCHOL ORAL PACKET	4	
WELCHOL ORAL TABLET	4	
ZETIA ORAL TABLET	4	QL (30 EA per 30 days)
ZOCOR ORAL TABLET 10 MG, 20 MG	4	ST; QL (45 EA per 30 days)
ZOCOR ORAL TABLET 40 MG	4	ST; QL (30 EA per 30 days)
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	4	ST; QL (30 EA per 30 days)
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral capsule</i>	4	
<i>atenolol oral tablet</i>	2	

Drug Name	Tier	Requirements
<i>atenolol-chlorthalidone oral tablet</i>	4	
BETAPACE AF ORAL TABLET 120 MG, 160 MG	5	
BETAPACE AF ORAL TABLET 80 MG	4	
<i>betaxolol hcl oral tablet</i>	4	
<i>bisoprolol fumarate oral tablet</i>	4	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	4	
BYSTOLIC ORAL TABLET	4	
<i>carvedilol oral tablet</i>	2	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	4	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	
<i>labetalol hcl oral tablet</i>	4	
LOPRESSOR ORAL TABLET	4	
<i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg</i>	3	
<i>metoprolol succinate er oral tablet extended release 24 hour 25 mg, 50 mg</i>	2	
<i>metoprolol tartrate oral tablet</i>	2	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	4	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	4	
<i>nebivolol hcl oral tablet</i>	4	
<i>pindolol oral tablet</i>	4	
<i>propranolol hcl er oral capsule extended release 24 hour 120 mg, 80 mg</i>	4	
<i>propranolol hcl er oral capsule extended release 24 hour 160 mg, 60 mg</i>	3	
<i>propranolol hcl oral solution</i>	4	
<i>propranolol hcl oral tablet</i>	3	
SORINE ORAL TABLET 120 MG, 160 MG	4	
<i>sotalol hcl (af) oral tablet 120 mg, 160 mg</i>	4	
<i>sotalol hcl (af) oral tablet 80 mg</i>	3	
<i>sotalol hcl oral tablet</i>	2	
SOTYLIZE ORAL SOLUTION	5	
TENORETIC 100 ORAL TABLET	4	
TENORETIC 50 ORAL TABLET	4	
TENORMIN ORAL TABLET	4	
<i>timolol maleate oral tablet</i>	4	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	

Drug Name	Tier	Requirements
Calcium-Channel Blocking Agents		
<i>amlodipine besy-benazepril hcl oral capsule</i>	1	
<i>amlodipine besylate oral tablet</i>	2	
<i>amlodipine besylate-valsartan oral tablet</i>	1	
<i>amlodipine-atorvastatin oral tablet</i>	1	
<i>amlodipine-olmesartan oral tablet</i>	1	
<i>amlodipine-valsartan-hctz oral tablet</i>	1	
AZOR ORAL TABLET	4	ST
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	4	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
CARDIZEM ORAL TABLET 120 MG, 60 MG	5	
CARDIZEM ORAL TABLET 30 MG	4	
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg</i>	4	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	4	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	4	
<i>diltiazem hcl er oral tablet extended release 24 hour</i>	4	
<i>diltiazem hcl oral tablet</i>	4	
<i>dilt-xr oral capsule extended release 24 hour</i>	4	
EXFORGE HCT ORAL TABLET	4	ST
EXFORGE ORAL TABLET	4	ST
<i>felodipine er oral tablet extended release 24 hour 10 mg</i>	3	
<i>felodipine er oral tablet extended release 24 hour 2.5 mg, 5 mg</i>	2	
<i>isradipine oral capsule</i>	4	
KATERZIA ORAL SUSPENSION	4	ST
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	4	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
<i>nicardipine hcl oral capsule</i>	4	
<i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg</i>	3	
<i>nifedipine er oral tablet extended release 24 hour 90 mg</i>	4	

Drug Name	Tier	Requirements
<i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg</i>	3	
<i>nifedipine er osmotic release oral tablet extended release 24 hour 90 mg</i>	4	
<i>nifedipine oral capsule 10 mg</i>	3	
<i>nifedipine oral capsule 20 mg</i>	4	
<i>nimodipine oral capsule</i>	4	
<i>nisoldipine er oral tablet extended release 24 hour</i>	4	
NORLIQVA ORAL SOLUTION	4	ST
NORVASC ORAL TABLET	4	ST
NYMALIZE ORAL SOLUTION 6 MG/ML	5	
<i>olmesartan-amlodipine-hctz oral tablet</i>	1	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	4	
<i>telmisartan-amlodipine oral tablet 40-10 mg</i>	4	
<i>telmisartan-amlodipine oral tablet 40-5 mg, 80-10 mg, 80-5 mg</i>	1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	1	
TRIBENZOR ORAL TABLET	4	ST
<i>verapamil hcl er oral capsule extended release 24 hour</i>	4	
<i>verapamil hcl er oral tablet extended release 120 mg</i>	3	
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	4	
<i>verapamil hcl oral tablet</i>	2	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
Cardiac Drugs		
<i>amiodarone hcl oral tablet</i>	4	
ASPRUZYO SPRINKLE ORAL PACKET	4	
CAMZYOS ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
CORLANOR ORAL SOLUTION	4	PA; QL (450 ML per 30 days)
CORLANOR ORAL TABLET	4	PA; QL (60 EA per 30 days)
<i>digoxin oral solution</i>	4	QL (150 ML per 30 days)
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	4	QL (30 EA per 30 days)

Drug Name	Tier	Requirements
<i>digoxin oral tablet 62.5 mcg</i>	4	
<i>disopyramide phosphate oral capsule</i>	4	
<i>dofetilide oral capsule 125 mcg, 500 mcg</i>	4	
<i>dofetilide oral capsule 250 mcg</i>	3	
<i>flecainide acetate oral tablet</i>	4	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	4	QL (30 EA per 30 days)
LANOXIN ORAL TABLET 62.5 MCG	4	
<i>mexiletine hcl oral capsule</i>	4	
MULTAQ ORAL TABLET	3	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	
NORPACE ORAL CAPSULE	4	
PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG	4	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	4	
<i>propafenone hcl oral tablet</i>	4	
<i>quinidine gluconate er oral tablet extended release</i>	4	
<i>quinidine sulfate oral tablet</i>	4	
<i>ranolazine er oral tablet extended release 12 hour</i>	4	
TIKOSYN ORAL CAPSULE	4	
VYNDAMAX ORAL CAPSULE	5	PA
VYNDAQEL ORAL CAPSULE	5	PA
Hypotensive Agents		
<i>clonidine hcl er oral tablet extended release 12 hour</i>	2	QL (120 EA per 30 days)
<i>clonidine hcl er oral tablet extended release 24 hour</i>	4	ST
<i>clonidine hcl oral tablet</i>	2	
<i>clonidine transdermal patch weekly</i>	4	
<i>guanfacine hcl oral tablet</i>	4	
<i>hydralazine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	2	
<i>hydralazine hcl oral tablet 100 mg</i>	3	
<i>minoxidil oral tablet</i>	2	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST
VECAMYL ORAL TABLET	5	PA
Renin-Angiotensin-Aldosterone Sys Inhib		
ALDACTONE ORAL TABLET	4	
<i>aliskiren fumarate oral tablet</i>	4	QL (30 EA per 30 days)
ALTACE ORAL CAPSULE	4	
ATACAND HCT ORAL TABLET	4	ST
ATACAND ORAL TABLET	4	ST
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	4	ST

Drug Name	Tier	Requirements
AVAPRO ORAL TABLET	4	ST
<i>benazepril hcl oral tablet</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet</i>	1	
BENICAR HCT ORAL TABLET	4	ST
BENICAR ORAL TABLET	4	ST
<i>candesartan cilexetil oral tablet</i>	1	
<i>candesartan cilexetil-hctz oral tablet</i>	1	
<i>captopril oral tablet</i>	1	
CAROSPIR ORAL SUSPENSION	4	
COZAAR ORAL TABLET 100 MG	4	ST; QL (30 EA per 30 days)
COZAAR ORAL TABLET 25 MG, 50 MG	4	ST; QL (60 EA per 30 days)
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 80-12.5 MG	4	ST; QL (60 EA per 30 days)
DIOVAN HCT ORAL TABLET 320-12.5 MG, 320-25 MG	4	ST; QL (30 EA per 30 days)
DIOVAN ORAL TABLET 160 MG, 40 MG, 80 MG	4	ST; QL (60 EA per 30 days)
DIOVAN ORAL TABLET 320 MG	4	ST; QL (30 EA per 30 days)
EDARBI ORAL TABLET	4	ST
EDARBYCLOR ORAL TABLET	4	ST
<i>enalapril maleate oral solution</i>	5	
<i>enalapril maleate oral tablet</i>	1	
<i>enalapril-hydrochlorothiazide oral tablet</i>	1	
ENTRESTO ORAL TABLET	3	QL (60 EA per 30 days)
<i>eplerenone oral tablet</i>	4	
<i>fosinopril sodium oral tablet</i>	1	
<i>fosinopril sodium-hctz oral tablet</i>	1	
HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG	4	ST; QL (30 EA per 30 days)
HYZAAR ORAL TABLET 50-12.5 MG	4	ST; QL (60 EA per 30 days)
INSPRA ORAL TABLET	4	
<i>irbesartan oral tablet</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	1	
KERENDIA ORAL TABLET	4	PA; QL (30 EA per 30 days)
<i>lisinopril oral tablet</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	1	
<i>losartan potassium oral tablet 100 mg</i>	1	QL (30 EA per 30 days)
<i>losartan potassium oral tablet 25 mg, 50 mg</i>	1	QL (60 EA per 30 days)
<i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg</i>	1	QL (30 EA per 30 days)
<i>losartan potassium-hctz oral tablet 50-12.5 mg</i>	1	QL (60 EA per 30 days)
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	
MICARDIS HCT ORAL TABLET	4	ST; QL (30 EA per 30 days)
MICARDIS ORAL TABLET	4	ST; QL (30 EA per 30 days)

Drug Name	Tier	Requirements
<i>moexipril hcl oral tablet</i>	1	
<i>olmesartan medoxomil oral tablet</i>	1	
<i>olmesartan medoxomil-hctz oral tablet</i>	1	
<i>perindopril erbumine oral tablet</i>	1	
QBRELIS ORAL SOLUTION	5	
<i>quinapril hcl oral tablet</i>	1	
<i>ramipril oral capsule</i>	1	
<i>spironolactone oral suspension</i>	4	
<i>spironolactone oral tablet</i>	2	
<i>spironolactone-hctz oral tablet</i>	3	
TEKTURNA ORAL TABLET	4	ST; QL (30 EA per 30 days)
<i>telmisartan oral tablet</i>	1	QL (30 EA per 30 days)
<i>telmisartan-hctz oral tablet</i>	1	QL (30 EA per 30 days)
<i>trandolapril oral tablet</i>	1	
<i>valsartan oral solution</i>	5	ST; QL (2400 ML per 30 days)
<i>valsartan oral tablet 160 mg, 40 mg, 80 mg</i>	1	QL (60 EA per 30 days)
<i>valsartan oral tablet 320 mg</i>	1	QL (30 EA per 30 days)
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 80-12.5 mg</i>	1	QL (60 EA per 30 days)
<i>valsartan-hydrochlorothiazide oral tablet 320-12.5 mg, 320-25 mg</i>	1	QL (30 EA per 30 days)
VASERETIC ORAL TABLET	4	
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 5 MG	4	
VASOTEC ORAL TABLET 20 MG	5	
ZESTORETIC ORAL TABLET	4	
ZESTRIL ORAL TABLET	4	
Sodium-Glucose (Sglt) Cotransportor Inhibitor		
INPEFA ORAL TABLET 400 MG	4	ST; QL (30 EA per 30 days)
Vasodilating Agents		
ADCIRCA ORAL TABLET	5	PA
ALYQ ORAL TABLET	5	PA
BIDIL ORAL TABLET	4	
CIALIS ORAL TABLET 2.5 MG, 5 MG	4	PA; QL (30 EA per 30 days)
<i>dipyridamole oral tablet</i>	3	PA
ISORDIL TITRADOSE ORAL TABLET	5	
<i>isosorb dinitrate-hydralazine oral tablet 20-37.5 mg</i>	4	
<i>isosorbide dinitrate oral tablet</i>	4	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	3	
<i>isosorbide mononitrate oral tablet 10 mg</i>	3	

Drug Name	Tier	Requirements
<i>isosorbide mononitrate oral tablet 20 mg</i>	2	
LIQREV ORAL SUSPENSION	5	PA; QL (180 ML per 30 days)
NITRO-BID TRANSDERMAL OINTMENT	4	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	4	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	5	
<i>nitroglycerin sublingual tablet sublingual</i>	2	
<i>nitroglycerin transdermal patch 24 hour</i>	3	
<i>nitroglycerin translingual solution</i>	4	
NITROLINGUAL TRANSLINGUAL SOLUTION	4	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	4	
REVATIO ORAL TABLET	5	PA; QL (360 EA per 30 days)
<i>sildenafil citrate oral suspension reconstituted</i>	4	PA; QL (180 ML per 30 days)
<i>sildenafil citrate oral tablet 20 mg</i>	3	PA; QL (360 EA per 30 days)
<i>tadalafil (pah) oral tablet</i>	5	PA; QL (60 EA per 30 days)
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	2	PA; QL (30 EA per 30 days)
TADLIQ ORAL SUSPENSION	5	PA
VERQUVO ORAL TABLET	4	

Central Nervous System Agents

Analgesics And Antipyretics

<i>acetaminophen-codeine oral solution</i>	2	QL (2700 ML per 30 days)
<i>acetaminophen-codeine oral tablet</i>	2	QL (180 EA per 30 days)
ALLZITAL ORAL TABLET	5	PA; QL (180 EA per 30 days)
<i>apap-caff-dihydrocodeine oral capsule</i>	4	QL (300 EA per 30 days)
ARTHROTEC ORAL TABLET DELAYED RELEASE	4	
ASCOMP-CODEINE ORAL CAPSULE	4	PA; QL (180 EA per 30 days)
BELBUCA BUCCAL FILM 150 MCG, 75 MCG	4	QL (60 EA per 30 days)
BELBUCA BUCCAL FILM 300 MCG, 450 MCG	4	PA; QL (60 EA per 30 days)
BELBUCA BUCCAL FILM 600 MCG, 750 MCG, 900 MCG	5	PA; QL (60 EA per 30 days)
BUPAP ORAL TABLET 50-300 MG	5	PA; QL (180 EA per 30 days)
<i>buprenorphine hcl sublingual tablet sublingual</i>	3	QL (120 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg</i>	2	QL (60 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg, 4-1 mg</i>	2	QL (120 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 8-2 mg</i>	2	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>	2	QL (120 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>	2	QL (90 EA per 30 days)
<i>buprenorphine transdermal patch weekly</i>	4	QL (4 EA per 28 days)

Drug Name	Tier	Requirements
<i>butalbital-acetaminophen oral capsule</i>	4	PA; QL (180 EA per 30 days)
<i>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</i>	4	PA; QL (180 EA per 30 days)
<i>butalbital-apap-caff-cod oral capsule</i>	4	PA; QL (180 EA per 30 days)
<i>butalbital-apap-caffeine oral capsule 50-300-40 mg</i>	3	PA; QL (180 EA per 30 days)
<i>butalbital-apap-caffeine oral capsule 50-325-40 mg</i>	4	PA; QL (180 EA per 30 days)
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	3	PA; QL (180 EA per 30 days)
<i>butalbital-asa-caff-codeine oral capsule</i>	4	PA; QL (180 EA per 30 days)
<i>butalbital-aspirin-caffeine oral capsule</i>	4	PA; QL (180 EA per 30 days)
<i>butorphanol tartrate nasal solution</i>	4	QL (7.5 ML per 30 days)
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 5 MCG/HR, 7.5 MCG/HR	4	QL (4 EA per 28 days)
BUTRANS TRANSDERMAL PATCH WEEKLY 20 MCG/HR	5	QL (4 EA per 28 days)
CAMBIA ORAL PACKET	5	ST
CELEBREX ORAL CAPSULE	4	ST
<i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>	2	QL (60 EA per 30 days)
<i>celecoxib oral capsule 400 mg</i>	2	
<i>codeine sulfate oral tablet</i>	4	QL (180 EA per 30 days)
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
DAYPRO ORAL TABLET	4	ST
DEMEROL INJECTION SOLUTION 25 MG/ML, 50 MG/ML	4	PA
<i>diclofenac epolamine external patch</i>	4	PA; QL (60 EA per 30 days)
<i>diclofenac potassium oral capsule</i>	5	ST
<i>diclofenac potassium oral tablet 25 mg</i>	5	ST
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac potassium(migraine) oral packet</i>	5	ST
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	4	
<i>diclofenac sodium oral tablet delayed release 25 mg</i>	4	
<i>diclofenac sodium oral tablet delayed release 50 mg, 75 mg</i>	2	
<i>diclofenac-misoprostol oral tablet delayed release</i>	4	
<i>diflunisal oral tablet</i>	4	
DILAUDID ORAL LIQUID	4	ST; QL (1500 ML per 30 days)
DILAUDID ORAL TABLET 2 MG	4	ST; QL (240 EA per 30 days)
DILAUDID ORAL TABLET 4 MG	4	PA; QL (240 EA per 30 days)
DILAUDID ORAL TABLET 8 MG	5	PA; QL (240 EA per 30 days)
ELYXYB ORAL SOLUTION	4	ST; QL (144 ML per 30 days)
ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	4	QL (240 EA per 30 days)
ESGIC ORAL TABLET	4	PA; QL (180 EA per 30 days)
<i>etodolac er oral tablet extended release 24 hour</i>	4	

Drug Name	Tier	Requirements
<i>etodolac oral capsule</i>	4	
<i>etodolac oral tablet</i>	3	
<i>fenoprofen calcium oral capsule 400 mg</i>	4	
<i>fenoprofen calcium oral tablet</i>	4	
<i>fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg</i>	5	PA; QL (120 EA per 30 days)
<i>fentanyl citrate buccal lozenge on a handle 200 mcg</i>	4	PA; QL (120 EA per 30 days)
<i>fentanyl citrate buccal tablet 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	5	PA; QL (120 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr</i>	4	PA; QL (15 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 12 mcg/hr</i>	4	QL (15 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 87.5 mcg/hr</i>	5	PA; QL (15 EA per 30 days)
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (120 EA per 30 days)
FIORICET ORAL CAPSULE	4	PA; QL (180 EA per 30 days)
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	4	PA; QL (180 EA per 30 days)
FLECTOR EXTERNAL PATCH	4	PA; QL (60 EA per 30 days)
<i>flurbiprofen oral tablet 100 mg</i>	4	
<i>gabapentin (once-daily) oral tablet</i>	4	PA
GRALISE ORAL TABLET	4	PA
<i>hydrocodone bitartrate er oral capsule extended release 12 hour</i>	4	PA; QL (60 EA per 30 days)
<i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 120 mg</i>	5	PA; QL (30 EA per 30 days)
<i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	4	PA; QL (30 EA per 30 days)
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>	4	QL (3600 ML per 30 days)
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	4	QL (180 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg</i>	4	QL (150 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	3	QL (150 EA per 30 days)
<i>hydromorphone hcl er oral tablet extended release 24 hour</i>	4	PA; QL (120 EA per 30 days)
<i>hydromorphone hcl oral liquid</i>	2	QL (1500 ML per 30 days)
<i>hydromorphone hcl oral tablet 2 mg</i>	2	QL (240 EA per 30 days)
<i>hydromorphone hcl oral tablet 4 mg</i>	2	PA; QL (240 EA per 30 days)
<i>hydromorphone hcl oral tablet 8 mg</i>	3	PA; QL (240 EA per 30 days)
<i>hydromorphone hcl pf injection solution 10 mg/ml, 50 mg/5ml</i>	4	PA
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG, 60 MG, 80 MG	5	PA; QL (30 EA per 30 days)

Drug Name	Tier	Requirements
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 20 MG, 30 MG, 40 MG	4	PA; QL (30 EA per 30 days)
IBU ORAL TABLET 600 MG, 800 MG	2	
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	
<i>ibuprofen-famotidine oral tablet</i>	4	PA
INDOCIN ORAL SUSPENSION	5	PA
INDOCIN RECTAL SUPPOSITORY	5	PA
<i>indomethacin er oral capsule extended release</i>	2	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	2	
<i>indomethacin oral suspension</i>	5	PA
<i>indomethacin rectal suppository 50 mg</i>	5	PA
<i>ketoprofen er oral capsule extended release 24 hour</i>	4	
<i>ketoprofen oral capsule 25 mg</i>	5	
<i>ketoprofen oral capsule 50 mg</i>	4	
<i>ketorolac tromethamine oral tablet</i>	2	PA; QL (20 EA per 30 days)
KIPROFEN ORAL CAPSULE	5	ST
<i>levorphanol tartrate oral tablet 2 mg</i>	5	QL (180 EA per 30 days)
<i>levorphanol tartrate oral tablet 3 mg</i>	5	PA; QL (120 EA per 30 days)
LICART EXTERNAL PATCH 24 HOUR	4	PA; QL (30 EA per 30 days)
LODINE ORAL TABLET	5	ST
LOFENA ORAL TABLET	5	ST
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	PA; QL (60 EA per 30 days)
<i>meclofenamate sodium oral capsule</i>	4	
<i>mefenamic acid oral capsule</i>	4	
<i>meloxicam oral capsule</i>	5	
<i>meloxicam oral tablet</i>	2	
<i>meperidine hcl injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml</i>	4	PA
<i>meperidine hcl oral solution</i>	4	PA; QL (2000 ML per 30 days)
<i>meperidine hcl oral tablet 50 mg</i>	4	PA; QL (180 EA per 30 days)
<i>methadone hcl oral solution</i>	4	PA
<i>methadone hcl oral tablet</i>	4	PA
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	2	QL (150 ML per 30 days)
<i>morphine sulfate er beads oral capsule extended release 24 hour 120 mg</i>	4	PA; QL (30 EA per 30 days)
<i>morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg</i>	4	QL (30 EA per 30 days)
<i>morphine sulfate er oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 50 mg</i>	4	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>morphine sulfate er oral capsule extended release 24 hour 100 mg, 60 mg, 80 mg</i>	4	PA; QL (60 EA per 30 days)
<i>morphine sulfate er oral tablet extended release 100 mg, 60 mg</i>	3	PA; QL (90 EA per 30 days)
<i>morphine sulfate er oral tablet extended release 15 mg, 30 mg</i>	3	QL (90 EA per 30 days)
<i>morphine sulfate er oral tablet extended release 200 mg</i>	4	PA; QL (90 EA per 30 days)
<i>morphine sulfate oral solution</i>	2	QL (1000 ML per 30 days)
<i>morphine sulfate oral tablet 15 mg</i>	3	QL (180 EA per 30 days)
<i>morphine sulfate oral tablet 30 mg</i>	4	QL (180 EA per 30 days)
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 200 MG, 60 MG	5	PA; QL (90 EA per 30 days)
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG	4	ST; QL (90 EA per 30 days)
<i>nabumetone oral tablet</i>	2	
NALFON ORAL TABLET	4	ST
<i>nalocet oral tablet</i>	5	ST; QL (240 EA per 30 days)
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	5	ST
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	4	ST
NAPROSYN ORAL SUSPENSION	5	ST
<i>naproxen dr oral tablet delayed release 500 mg</i>	2	
<i>naproxen oral suspension</i>	5	
<i>naproxen oral tablet</i>	2	
<i>naproxen oral tablet delayed release 375 mg</i>	2	
<i>naproxen sodium er oral tablet extended release 24 hour</i>	4	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	4	
<i>naproxen-esomeprazole mg oral tablet delayed release</i>	5	PA; QL (60 EA per 30 days)
<i>norgesic forte oral tablet</i>	5	PA
NORGESIC ORAL TABLET	5	PA
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 50 MG	4	PA; QL (60 EA per 30 days)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 150 MG, 200 MG, 250 MG	5	PA; QL (60 EA per 30 days)
NUCYNTA ORAL TABLET 100 MG	5	PA; QL (180 EA per 30 days)
NUCYNTA ORAL TABLET 50 MG	4	ST; QL (180 EA per 30 days)
NUCYNTA ORAL TABLET 75 MG	4	PA; QL (180 EA per 30 days)
<i>orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg</i>	5	PA
<i>oxaprozin oral tablet</i>	2	
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 20 mg</i>	4	QL (90 EA per 30 days)

Drug Name	Tier	Requirements
<i>oxycodone hcl oral capsule</i>	3	QL (180 EA per 30 days)
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	4	QL (180 ML per 30 days)
<i>oxycodone hcl oral solution</i>	2	QL (900 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 5 mg</i>	3	QL (180 EA per 30 days)
<i>oxycodone hcl oral tablet 30 mg</i>	3	PA; QL (180 EA per 30 days)
<i>oxycodone-acetaminophen oral solution 5-325 mg/5ml</i>	4	ST; QL (1800 ML per 30 days)
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 5-300 mg</i>	5	ST; QL (240 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	4	QL (240 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 7.5-300 mg</i>	5	QL (240 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG	4	PA; QL (90 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 40 MG, 60 MG, 80 MG	5	PA; QL (90 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hour 10 mg, 15 mg, 5 mg, 7.5 mg</i>	4	QL (90 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hour 20 mg, 30 mg, 40 mg</i>	4	PA; QL (90 EA per 30 days)
<i>oxymorphone hcl oral tablet 10 mg</i>	4	PA; QL (180 EA per 30 days)
<i>oxymorphone hcl oral tablet 5 mg</i>	4	QL (180 EA per 30 days)
<i>pentazocine-naloxone hcl oral tablet</i>	4	PA
PERCOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG	5	ST; QL (240 EA per 30 days)
PERCOCET ORAL TABLET 2.5-325 MG	4	ST; QL (240 EA per 30 days)
<i>piroxicam oral capsule 10 mg</i>	2	
<i>piroxicam oral capsule 20 mg</i>	4	
<i>pregabalin er oral tablet extended release 24 hour</i>	4	PA; QL (60 EA per 30 days)
PROLATE ORAL SOLUTION	5	ST; QL (900 ML per 30 days)
PROLATE ORAL TABLET	5	ST; QL (240 EA per 30 days)
QDOLO ORAL SOLUTION	5	PA; QL (2400 ML per 30 days)
RELAFEN DS ORAL TABLET	5	ST
ROXICODONE ORAL TABLET 15 MG	4	ST; QL (180 EA per 30 days)
ROXICODONE ORAL TABLET 30 MG	5	PA; QL (180 EA per 30 days)
ROXYBOND ORAL TABLET ABUSE-DETERRENT	5	PA; QL (180 EA per 30 days)
SEGLENTIS ORAL TABLET	4	ST; QL (120 EA per 30 days)
SPRIX NASAL SOLUTION	5	PA; QL (5 EA per 30 days)
SUBOXONE SUBLINGUAL FILM 12-3 MG	4	QL (60 EA per 30 days)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 4-1 MG	4	QL (120 EA per 30 days)
SUBOXONE SUBLINGUAL FILM 8-2 MG	4	QL (90 EA per 30 days)
<i>sulindac oral tablet 150 mg</i>	4	
<i>sulindac oral tablet 200 mg</i>	3	

Drug Name	Tier	Requirements
TENCON ORAL TABLET 50-325 MG	4	PA; QL (180 EA per 30 days)
TOLECTIN 600 ORAL TABLET	5	
<i>tolmetin sodium oral capsule</i>	4	
<i>tramadol hcl (er biphasic) oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg</i>	4	QL (30 EA per 30 days)
<i>tramadol hcl (er biphasic) oral tablet extended release 24 hour</i>	4	QL (30 EA per 30 days)
<i>tramadol hcl er oral tablet extended release 24 hour</i>	4	QL (30 EA per 30 days)
<i>tramadol hcl oral solution</i>	5	PA; QL (2400 ML per 30 days)
<i>tramadol hcl oral tablet 100 mg</i>	4	QL (120 EA per 30 days)
<i>tramadol hcl oral tablet 25 mg</i>	4	QL (480 EA per 30 days)
<i>tramadol hcl oral tablet 50 mg</i>	2	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet</i>	2	QL (240 EA per 30 days)
TREZIX ORAL CAPSULE 320.5-30-16 MG	4	QL (300 EA per 30 days)
VIMOVO ORAL TABLET DELAYED RELEASE	5	PA; QL (60 EA per 30 days)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	3	PA; QL (60 EA per 30 days)
ZIPSOR ORAL CAPSULE	5	ST
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 5.7-1.4 MG	4	QL (90 EA per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 2.9-0.71 MG	4	QL (120 EA per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG	4	QL (30 EA per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG	4	QL (60 EA per 30 days)
Anorexigenic Agents And Respiratory And Cns Stimulants		
ADDERALL ORAL TABLET 20 MG, 5 MG, 7.5 MG	4	ST; QL (60 EA per 30 days)
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	4	ST; QL (30 EA per 30 days)
<i>amphetamine sulfate oral tablet</i>	4	PA; QL (180 EA per 30 days)
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour</i>	2	QL (30 EA per 30 days)
<i>amphetamine-dextroamphetamine oral tablet</i>	2	QL (60 EA per 30 days)
<i>amphet-dextroamphet 3-bead er oral capsule extended release 24 hour</i>	4	QL (30 EA per 30 days)
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg</i>	4	PA; QL (30 EA per 30 days)
<i>armodafinil oral tablet 50 mg</i>	4	PA; QL (60 EA per 30 days)

Drug Name	Tier	Requirements
AZSTARYS ORAL CAPSULE	4	ST; QL (30 EA per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG	4	ST; QL (120 EA per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 27 MG, 54 MG	4	ST; QL (30 EA per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG	4	ST; QL (60 EA per 30 days)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG	4	ST; QL (90 EA per 30 days)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 25.9 MG	5	ST; QL (60 EA per 30 days)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 8.6 MG	4	ST; QL (180 EA per 30 days)
DAYTRANA TRANSDERMAL PATCH	4	ST; QL (30 EA per 30 days)
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	5	ST; QL (180 EA per 30 days)
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour</i>	4	QL (30 EA per 30 days)
<i>dexmethylphenidate hcl oral tablet</i>	4	QL (60 EA per 30 days)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg</i>	4	QL (180 EA per 30 days)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg</i>	4	QL (120 EA per 30 days)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg</i>	4	QL (90 EA per 30 days)
<i>dextroamphetamine sulfate oral solution</i>	4	QL (1800 ML per 30 days)
<i>dextroamphetamine sulfate oral tablet 10 mg</i>	3	QL (180 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 15 mg, 20 mg</i>	4	QL (90 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 30 mg</i>	4	QL (60 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 5 mg</i>	3	QL (150 EA per 30 days)
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	4	ST; QL (240 ML per 30 days)
DYANAVEL XR ORAL TABLET CHEWABLE EXTENDED RELEASE	4	ST; QL (30 EA per 30 days)
EVEKEO ORAL TABLET	4	PA; QL (180 EA per 30 days)
FOCALIN ORAL TABLET	4	ST; QL (60 EA per 30 days)
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
<i>lisdexamfetamine dimesylate oral capsule</i>	4	PA; QL (30 EA per 30 days)
<i>lisdexamfetamine dimesylate oral tablet chewable</i>	4	PA; QL (30 EA per 30 days)
METADATE CD ORAL CAPSULE EXTENDED RELEASE 10 MG, 20 MG, 30 MG	4	ST; QL (60 EA per 30 days)

Drug Name	Tier	Requirements
METADATE CD ORAL CAPSULE EXTENDED RELEASE 40 MG, 50 MG, 60 MG	4	ST; QL (30 EA per 30 days)
<i>methamphetamine hcl oral tablet</i>	5	QL (150 EA per 30 days)
METHYLIN ORAL SOLUTION 10 MG/5ML	4	ST; QL (900 ML per 30 days)
METHYLIN ORAL SOLUTION 5 MG/5ML	4	ST; QL (1800 ML per 30 days)
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg</i>	4	QL (60 EA per 30 days)
<i>methylphenidate hcl er (cd) oral capsule extended release 40 mg, 50 mg, 60 mg</i>	4	QL (30 EA per 30 days)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg</i>	4	QL (60 EA per 30 days)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 40 mg, 60 mg</i>	4	QL (30 EA per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg</i>	4	QL (120 EA per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 27 mg, 45 mg, 54 mg, 63 mg, 72 mg</i>	4	QL (30 EA per 30 days)
<i>methylphenidate hcl er (osm) oral tablet extended release 36 mg</i>	4	QL (60 EA per 30 days)
<i>methylphenidate hcl er (xr) oral capsule extended release 24 hour</i>	4	QL (30 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 10 mg</i>	4	QL (180 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 20 mg</i>	4	QL (90 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg</i>	4	QL (120 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 27 mg, 54 mg</i>	4	QL (30 EA per 30 days)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>	4	QL (60 EA per 30 days)
<i>methylphenidate hcl oral solution 10 mg/5ml</i>	4	QL (900 ML per 30 days)
<i>methylphenidate hcl oral solution 5 mg/5ml</i>	4	QL (1800 ML per 30 days)
<i>methylphenidate hcl oral tablet 10 mg</i>	2	QL (180 EA per 30 days)
<i>methylphenidate hcl oral tablet 20 mg, 5 mg</i>	2	QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet chewable</i>	4	QL (180 EA per 30 days)
<i>methylphenidate transdermal patch</i>	4	QL (30 EA per 30 days)
<i>modafinil oral tablet 100 mg</i>	2	PA; QL (30 EA per 30 days)
<i>modafinil oral tablet 200 mg</i>	2	PA; QL (60 EA per 30 days)
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG	5	PA; QL (30 EA per 30 days)
NUVIGIL ORAL TABLET 50 MG	4	PA; QL (60 EA per 30 days)
PROCENTRA ORAL SOLUTION	4	QL (1800 ML per 30 days)
PROVIGIL ORAL TABLET 100 MG	5	PA; QL (30 EA per 30 days)

Drug Name	Tier	Requirements
PROVIGIL ORAL TABLET 200 MG	5	PA; QL (60 EA per 30 days)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 30 MG	4	ST; QL (60 EA per 30 days)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 40 MG	4	ST; QL (30 EA per 30 days)
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	4	ST; QL (360 ML per 30 days)
RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG	4	ST; QL (120 EA per 30 days)
RELEXXII ORAL TABLET EXTENDED RELEASE 27 MG, 45 MG, 63 MG	4	ST; QL (30 EA per 30 days)
RELEXXII ORAL TABLET EXTENDED RELEASE 36 MG	4	ST; QL (60 EA per 30 days)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG	4	ST; QL (60 EA per 30 days)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG	4	ST; QL (30 EA per 30 days)
RITALIN ORAL TABLET 10 MG	4	ST; QL (180 EA per 30 days)
RITALIN ORAL TABLET 20 MG, 5 MG	4	ST; QL (90 EA per 30 days)
SUNOSI ORAL TABLET	4	PA; QL (30 EA per 30 days)
VYVANSE ORAL CAPSULE	4	PA; QL (30 EA per 30 days)
VYVANSE ORAL TABLET CHEWABLE	4	PA; QL (30 EA per 30 days)
WAKIX ORAL TABLET	5	PA; QL (60 EA per 30 days)
XELSTRYM TRANSDERMAL PATCH	4	ST; QL (30 EA per 30 days)
ZENZEDI ORAL TABLET 10 MG	4	ST; QL (180 EA per 30 days)
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 7.5 MG	4	ST; QL (90 EA per 30 days)
ZENZEDI ORAL TABLET 30 MG	4	ST; QL (60 EA per 30 days)
ZENZEDI ORAL TABLET 5 MG	4	ST; QL (150 EA per 30 days)
Anticonvulsants		
APTIOM ORAL TABLET	5	
BANZEL ORAL SUSPENSION	5	
BANZEL ORAL TABLET	5	
BRIVIACT ORAL SOLUTION	5	
BRIVIACT ORAL TABLET	5	QL (60 EA per 30 days)
<i>carbamazepine er oral capsule extended release 12 hour</i>	4	
<i>carbamazepine er oral tablet extended release 12 hour 100 mg</i>	3	
<i>carbamazepine er oral tablet extended release 12 hour 200 mg, 400 mg</i>	4	
<i>carbamazepine oral suspension 100 mg/5ml</i>	4	
<i>carbamazepine oral tablet</i>	3	
<i>carbamazepine oral tablet chewable</i>	3	
CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	

Drug Name	Tier	Requirements
CELONTIN ORAL CAPSULE	4	
<i>clobazam oral suspension</i>	4	QL (480 ML per 30 days)
<i>clobazam oral tablet 10 mg</i>	2	QL (60 EA per 30 days)
<i>clobazam oral tablet 20 mg</i>	3	QL (60 EA per 30 days)
<i>clonazepam oral tablet 0.5 mg, 1 mg</i>	2	QL (270 EA per 30 days)
<i>clonazepam oral tablet 2 mg</i>	2	QL (300 EA per 30 days)
<i>clonazepam oral tablet dispersible 0.125 mg, 0.5 mg</i>	3	QL (270 EA per 30 days)
<i>clonazepam oral tablet dispersible 0.25 mg, 1 mg</i>	2	QL (270 EA per 30 days)
<i>clonazepam oral tablet dispersible 2 mg</i>	2	QL (300 EA per 30 days)
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
DEPAKOTE ORAL TABLET DELAYED RELEASE	4	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	4	
DIACOMIT ORAL CAPSULE	5	PA
DIACOMIT ORAL PACKET	5	PA
<i>diazepam rectal gel</i>	4	
DILANTIN INFATABS ORAL TABLET CHEWABLE	4	
DILANTIN ORAL CAPSULE	4	
DILANTIN ORAL SUSPENSION	4	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	2	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	4	
<i>divalproex sodium oral tablet delayed release</i>	2	
EPIDIOLEX ORAL SOLUTION	5	PA
EPITOL ORAL TABLET	2	
EPRONTIA ORAL SOLUTION	4	ST
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	4	
<i>ethosuximide oral capsule</i>	3	
<i>ethosuximide oral solution</i>	4	
<i>felbamate oral suspension</i>	4	
<i>felbamate oral tablet</i>	4	
FELBATOL ORAL TABLET	5	
FINTEPLA ORAL SOLUTION	5	PA
FYCOMPA ORAL SUSPENSION	5	
FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	5	
FYCOMPA ORAL TABLET 2 MG	4	
<i>gabapentin oral capsule 100 mg, 300 mg</i>	2	QL (180 EA per 30 days)
<i>gabapentin oral capsule 400 mg</i>	2	
<i>gabapentin oral solution 250 mg/5ml</i>	4	

Drug Name	Tier	Requirements
<i>gabapentin oral tablet 600 mg</i>	2	QL (180 EA per 30 days)
<i>gabapentin oral tablet 800 mg</i>	2	
HORIZANT ORAL TABLET EXTENDED RELEASE	4	PA
KEPPRA ORAL SOLUTION	5	
KEPPRA ORAL TABLET 1000 MG, 500 MG, 750 MG	5	
KEPPRA ORAL TABLET 250 MG	4	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	5	
KLONOPIN ORAL TABLET 0.5 MG, 1 MG	4	ST; QL (270 EA per 30 days)
KLONOPIN ORAL TABLET 2 MG	4	ST; QL (300 EA per 30 days)
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide oral tablet 100 mg, 150 mg, 50 mg</i>	2	
<i>lacosamide oral tablet 200 mg</i>	3	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	5	
LAMICTAL ORAL TABLET	5	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	5	
LAMICTAL STARTER ORAL KIT 35 X 25 MG, 42 X 25 MG & 7 X 100 MG	4	
LAMICTAL STARTER ORAL KIT 84 X 25 MG & 14X100 MG	5	
LAMICTAL XR ORAL KIT	4	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 250 MG, 300 MG, 50 MG	5	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG	4	
<i>lamotrigine er oral tablet extended release 24 hour</i>	4	
<i>lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg</i>	4	
<i>lamotrigine oral tablet</i>	2	
<i>lamotrigine oral tablet chewable 25 mg</i>	2	
<i>lamotrigine oral tablet chewable 5 mg</i>	3	
<i>lamotrigine oral tablet dispersible</i>	4	
<i>lamotrigine starter kit-blue oral kit</i>	4	
<i>lamotrigine starter kit-green oral kit</i>	5	
<i>lamotrigine starter kit-orange oral kit</i>	4	
<i>levetiracetam er oral tablet extended release 24 hour</i>	4	
<i>levetiracetam oral solution 100 mg/ml</i>	2	
<i>levetiracetam oral tablet</i>	2	
LIBERVANT BUCCAL FILM	4	PA; QL (10 EA per 30 days)
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG, 75 MG	4	QL (90 EA per 30 days)

Drug Name	Tier	Requirements
LYRICA ORAL CAPSULE 225 MG, 300 MG	4	QL (60 EA per 30 days)
LYRICA ORAL SOLUTION	4	QL (900 ML per 30 days)
<i>magnesium sulfate injection solution 50 %, 50 % (10ml syringe)</i>	2	
<i>methsuximide oral capsule</i>	4	
MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	ST; QL (60 EA per 30 days)
MYSOLINE ORAL TABLET	5	
NAYZILAM NASAL SOLUTION	4	PA; QL (10 EA per 30 days)
NEURONTIN ORAL CAPSULE 100 MG, 300 MG	4	
NEURONTIN ORAL CAPSULE 400 MG	5	
NEURONTIN ORAL SOLUTION	4	
NEURONTIN ORAL TABLET	5	
ONFI ORAL SUSPENSION	5	QL (480 ML per 30 days)
ONFI ORAL TABLET 10 MG, 20 MG	5	QL (60 EA per 30 days)
<i>oxcarbazepine oral suspension</i>	4	
<i>oxcarbazepine oral tablet</i>	3	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG	4	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 600 MG	5	
PHENYTEK ORAL CAPSULE	4	
<i>phenytoin oral suspension 125 mg/5ml</i>	4	
<i>phenytoin oral tablet chewable</i>	3	
<i>phenytoin sodium extended oral capsule</i>	2	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg, 75 mg</i>	2	QL (90 EA per 30 days)
<i>pregabalin oral capsule 225 mg, 300 mg</i>	2	QL (60 EA per 30 days)
<i>pregabalin oral solution</i>	4	QL (900 ML per 30 days)
<i>primidone oral tablet</i>	2	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 25 MG, 50 MG	4	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 150 MG, 200 MG	5	
ROWEEPRA ORAL TABLET 500 MG	4	
<i>rufinamide oral suspension</i>	5	
<i>rufinamide oral tablet 200 mg</i>	4	
<i>rufinamide oral tablet 400 mg</i>	5	
SABRIL ORAL PACKET	5	
SABRIL ORAL TABLET	5	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	4	

Drug Name	Tier	Requirements
SUBVENITE ORAL TABLET	4	
SUBVENITE STARTER KIT-BLUE ORAL KIT	4	
SUBVENITE STARTER KIT-GREEN ORAL KIT	5	
SUBVENITE STARTER KIT-ORANGE ORAL KIT	4	
SYMPAZAN ORAL FILM	5	QL (60 EA per 30 days)
TEGRETOL ORAL SUSPENSION	4	
TEGRETOL ORAL TABLET	4	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR	4	
<i>tiagabine hcl oral tablet</i>	4	
TOPAMAX ORAL TABLET 100 MG, 200 MG, 50 MG	5	
TOPAMAX ORAL TABLET 25 MG	4	
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 15 MG	4	
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 25 MG	5	
<i>topiramate er oral capsule er 24 hour sprinkle</i>	4	
<i>topiramate er oral capsule extended release 24 hour 100 mg, 25 mg, 50 mg</i>	4	
<i>topiramate er oral capsule extended release 24 hour 200 mg</i>	5	
<i>topiramate oral capsule sprinkle</i>	4	
<i>topiramate oral tablet</i>	2	
TRILEPTAL ORAL SUSPENSION	5	
TRILEPTAL ORAL TABLET 150 MG	4	
TRILEPTAL ORAL TABLET 300 MG, 600 MG	5	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG	5	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 50 MG	4	
<i>valproic acid oral capsule</i>	2	
<i>valproic acid oral solution 250 mg/5ml</i>	2	
VALTOCO 10 MG DOSE NASAL LIQUID	5	PA
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	5	PA; QL (10 EA per 30 days)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	5	PA; QL (10 EA per 30 days)
VALTOCO 5 MG DOSE NASAL LIQUID	5	PA; QL (10 EA per 30 days)
<i>vigabatrin oral packet</i>	5	
<i>vigabatrin oral tablet</i>	5	
VIGADRONE ORAL PACKET	5	
VIGADRONE ORAL TABLET	5	
VIGPODER ORAL PACKET	5	
VIMPAT ORAL SOLUTION	5	
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG	5	

Drug Name	Tier	Requirements
VIMPAT ORAL TABLET 50 MG	4	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG	5	ST
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	5	ST
XCOPRI ORAL TABLET	5	ST
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	4	ST
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG	5	ST
ZARONTIN ORAL CAPSULE	4	
ZARONTIN ORAL SOLUTION	4	
ZONEGRAN ORAL CAPSULE	5	
ZONISADE ORAL SUSPENSION	4	ST
<i>zonisamide oral capsule 100 mg</i>	3	
<i>zonisamide oral capsule 25 mg, 50 mg</i>	2	
ZTALMY ORAL SUSPENSION	5	PA
Antimanic Agents		
<i>lithium carbonate er oral tablet extended release</i>	2	
<i>lithium carbonate oral capsule</i>	2	
<i>lithium carbonate oral tablet</i>	2	
<i>lithium oral solution</i>	4	
LITHOBID ORAL TABLET EXTENDED RELEASE	5	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	3	PA
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 70 MG/ML	3	PA; QL (2 ML per 30 days)
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA
<i>almotriptan malate oral tablet</i>	4	QL (8 EA per 30 days)
<i>eletriptan hydrobromide oral tablet 20 mg</i>	4	QL (6 EA per 30 days)
<i>eletriptan hydrobromide oral tablet 40 mg</i>	3	QL (6 EA per 30 days)
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (2 ML per 28 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (2 ML per 28 days)
<i>ergotamine-caffeine oral tablet</i>	2	
FROVA ORAL TABLET	5	ST; QL (12 EA per 30 days)

Drug Name	Tier	Requirements
<i>frovatriptan succinate oral tablet</i>	4	QL (12 EA per 30 days)
IMITREX ORAL TABLET	4	ST; QL (8 EA per 30 days)
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 6 MG/0.5ML	5	ST; QL (8 ML per 30 days)
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML	5	ST; QL (8 ML per 30 days)
MAXALT ORAL TABLET 10 MG	4	ST; QL (12 EA per 30 days)
MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG	4	ST; QL (12 EA per 30 days)
MIGERGOT RECTAL SUPPOSITORY	5	
<i>naratriptan hcl oral tablet</i>	2	QL (8 EA per 30 days)
NURTEC ORAL TABLET DISPERSIBLE	5	PA; QL (18 EA per 30 days)
ONZETRA XSAIL NASAL EXHALER POWDER	5	ST; QL (8 EA per 30 days)
QULIPTA ORAL TABLET	5	PA; QL (30 EA per 30 days)
RELPAX ORAL TABLET	4	ST; QL (6 EA per 30 days)
REYVOW ORAL TABLET 100 MG	4	ST; QL (8 EA per 30 days)
REYVOW ORAL TABLET 50 MG	4	ST; QL (4 EA per 30 days)
<i>rizatriptan benzoate oral tablet</i>	2	QL (12 EA per 30 days)
<i>rizatriptan benzoate oral tablet dispersible</i>	2	QL (12 EA per 30 days)
<i>sumatriptan nasal solution 20 mg/lact</i>	4	QL (8 EA per 30 days)
<i>sumatriptan nasal solution 5 mg/lact</i>	4	QL (32 EA per 30 days)
<i>sumatriptan succinate oral tablet</i>	2	QL (8 EA per 30 days)
<i>sumatriptan succinate refill subcutaneous solution cartridge 6 mg/0.5ml</i>	4	QL (8 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	4	QL (8 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution auto-injector</i>	4	QL (8 ML per 30 days)
<i>sumatriptan-naproxen sodium oral tablet</i>	4	QL (10 EA per 30 days)
TOSYMRA NASAL SOLUTION	4	ST; QL (12 EA per 30 days)
TREXIMET ORAL TABLET 85-500 MG	5	ST; QL (10 EA per 30 days)
UBRELVY ORAL TABLET	5	PA; QL (16 EA per 30 days)
ZAVZPRET NASAL SOLUTION	5	PA; QL (8 EA per 30 days)
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	ST; QL (4 ML per 30 days)
<i>zolmitriptan nasal solution 5 mg</i>	4	ST; QL (8 EA per 30 days)
<i>zolmitriptan oral tablet</i>	2	QL (6 EA per 30 days)
<i>zolmitriptan oral tablet dispersible 2.5 mg</i>	4	QL (6 EA per 30 days)
<i>zolmitriptan oral tablet dispersible 5 mg</i>	3	QL (6 EA per 30 days)
ZOMIG NASAL SOLUTION 5 MG	4	ST; QL (8 EA per 30 days)
Antiparkinsonian Agents		
<i>amantadine hcl oral capsule</i>	3	
<i>amantadine hcl oral solution</i>	2	
<i>amantadine hcl oral tablet</i>	3	

Drug Name	Tier	Requirements
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
<i>apomorphine hcl subcutaneous solution cartridge</i>	5	PA
AZILECT ORAL TABLET	5	
<i>benztropine mesylate oral tablet</i>	2	PA
<i>bromocriptine mesylate oral capsule</i>	4	
<i>bromocriptine mesylate oral tablet</i>	4	
<i>cabergoline oral tablet</i>	2	
<i>carbidopa oral tablet</i>	4	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg</i>	4	
<i>carbidopa-levodopa er oral tablet extended release 50-200 mg</i>	3	
<i>carbidopa-levodopa oral tablet</i>	4	
<i>carbidopa-levodopa oral tablet dispersible</i>	4	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	4	
<i>carbidopa-levodopa-entacapone oral tablet 18.75-75-200 mg</i>	2	
COMTAN ORAL TABLET	4	
DHIVY ORAL TABLET 25-100 MG	4	
DUOPA ENTERAL SUSPENSION	5	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR	5	PA; QL (30 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR 6 MG/24HR, 9 MG/24HR	5	PA
<i>entacapone oral tablet</i>	4	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	5	PA
INBRIJA INHALATION CAPSULE	5	PA
LODOSYN ORAL TABLET	5	
NEUPRO TRANSDERMAL PATCH 24 HOUR	4	
ONGENTYS ORAL CAPSULE	4	PA
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG	4	PA
PARLODEL ORAL CAPSULE	4	
PARLODEL ORAL TABLET	4	
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour</i>	4	
<i>pramipexole dihydrochloride oral tablet</i>	2	
<i>rasagiline mesylate oral tablet</i>	4	
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	4	
<i>ropinirole hcl oral tablet 0.25 mg, 2 mg, 3 mg, 4 mg</i>	2	

Drug Name	Tier	Requirements
<i>ropinirole hcl oral tablet 0.5 mg, 1 mg, 5 mg</i>	3	
RYTARY ORAL CAPSULE EXTENDED RELEASE	4	
<i>selegiline hcl oral capsule</i>	2	
<i>selegiline hcl oral tablet</i>	2	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	
STALEVO 100 ORAL TABLET	5	
STALEVO 125 ORAL TABLET	5	
STALEVO 150 ORAL TABLET	5	
STALEVO 200 ORAL TABLET	5	
STALEVO 50 ORAL TABLET	4	
STALEVO 75 ORAL TABLET	4	
TASMAR ORAL TABLET 100 MG	5	
<i>tolcapone oral tablet</i>	5	
<i>trihexyphenidyl hcl oral solution</i>	4	PA
<i>trihexyphenidyl hcl oral tablet</i>	2	PA
ZELAPAR ORAL TABLET DISPERSIBLE	5	
Anxiolytics, Sedatives, And Hypnotics		
<i>alprazolam er oral tablet extended release 24 hour</i>	4	QL (30 EA per 30 days)
ALPRAZOLAM INTENSOL ORAL CONCENTRATE	4	QL (300 ML per 30 days)
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg</i>	2	QL (90 EA per 30 days)
<i>alprazolam oral tablet 2 mg</i>	2	QL (150 EA per 30 days)
<i>alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg</i>	4	QL (90 EA per 30 days)
<i>alprazolam oral tablet dispersible 2 mg</i>	4	QL (150 EA per 30 days)
AMBIEN CR ORAL TABLET EXTENDED RELEASE 12.5 MG	4	PA; QL (30 EA per 30 days)
AMBIEN CR ORAL TABLET EXTENDED RELEASE 6.25 MG	4	QL (30 EA per 30 days)
AMBIEN ORAL TABLET 10 MG	4	PA; QL (30 EA per 30 days)
AMBIEN ORAL TABLET 5 MG	4	QL (30 EA per 30 days)
ATIVAN ORAL TABLET 0.5 MG, 1 MG	5	ST; QL (90 EA per 30 days)
ATIVAN ORAL TABLET 2 MG	5	ST; QL (150 EA per 30 days)
BELSOMRA ORAL TABLET	3	QL (30 EA per 30 days)
<i>bupirone hcl oral tablet</i>	2	
<i>chlordiazepoxide hcl oral capsule</i>	4	QL (120 EA per 30 days)
<i>clorazepate dipotassium oral tablet 15 mg</i>	4	QL (180 EA per 30 days)
<i>clorazepate dipotassium oral tablet 3.75 mg, 7.5 mg</i>	4	QL (90 EA per 30 days)
DAYVIGO ORAL TABLET	4	PA; QL (30 EA per 30 days)
DIAZEPAM INTENSOL ORAL CONCENTRATE	4	QL (240 ML per 30 days)
<i>diazepam oral solution 5 mg/5ml</i>	4	QL (1200 ML per 30 days)
<i>diazepam oral tablet</i>	2	QL (120 EA per 30 days)

Drug Name	Tier	Requirements
EDLUAR SUBLINGUAL TABLET SUBLINGUAL 10 MG	4	PA; QL (30 EA per 30 days)
EDLUAR SUBLINGUAL TABLET SUBLINGUAL 5 MG	4	QL (30 EA per 30 days)
<i>estazolam oral tablet</i>	4	QL (30 EA per 30 days)
<i>eszopiclone oral tablet 1 mg, 2 mg</i>	2	QL (30 EA per 30 days)
<i>eszopiclone oral tablet 3 mg</i>	2	PA; QL (30 EA per 30 days)
<i>flurazepam hcl oral capsule</i>	4	QL (30 EA per 30 days)
HALCION ORAL TABLET	4	QL (10 EA per 30 days)
HETLIOZ LQ ORAL SUSPENSION	5	PA
HETLIOZ ORAL CAPSULE	5	PA
<i>hydroxyzine hcl oral syrup</i>	4	PA
<i>hydroxyzine hcl oral tablet</i>	2	PA
<i>hydroxyzine pamoate oral capsule</i>	4	PA
LORAZEPAM INTENSOL ORAL CONCENTRATE	2	QL (150 ML per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg</i>	2	QL (90 EA per 30 days)
<i>lorazepam oral tablet 2 mg</i>	2	QL (150 EA per 30 days)
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1 MG	4	ST; QL (30 EA per 30 days)
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1.5 MG, 2 MG	4	ST; QL (150 EA per 30 days)
LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 3 MG	4	ST; QL (90 EA per 30 days)
<i>meprobamate oral tablet</i>	4	PA; QL (90 EA per 30 days)
<i>oxazepam oral capsule</i>	4	QL (120 EA per 30 days)
<i>phenobarbital oral elixir</i>	4	QL (1500 ML per 30 days)
<i>phenobarbital oral tablet 100 mg</i>	4	QL (90 EA per 30 days)
<i>phenobarbital oral tablet 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	QL (90 EA per 30 days)
QUVIVIQ ORAL TABLET	4	PA; QL (30 EA per 30 days)
<i>ramelteon oral tablet</i>	4	QL (30 EA per 30 days)
RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG	5	ST; QL (30 EA per 30 days)
RESTORIL ORAL CAPSULE 7.5 MG	5	ST; QL (60 EA per 30 days)
ROZEREM ORAL TABLET	4	
<i>tasimelteon oral capsule</i>	5	PA
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg</i>	4	QL (30 EA per 30 days)
<i>temazepam oral capsule 7.5 mg</i>	4	QL (60 EA per 30 days)
<i>triazolam oral tablet</i>	2	QL (10 EA per 30 days)
VISTARIL ORAL CAPSULE 25 MG	4	PA
XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG	4	ST; QL (90 EA per 30 days)
XANAX ORAL TABLET 2 MG	5	ST; QL (150 EA per 30 days)
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG	4	ST; QL (30 EA per 30 days)

Drug Name	Tier	Requirements
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG	5	ST; QL (30 EA per 30 days)
<i>zaleplon oral capsule</i>	2	QL (30 EA per 30 days)
<i>zolpidem tartrate er oral tablet extended release 12.5 mg</i>	2	PA; QL (30 EA per 30 days)
<i>zolpidem tartrate er oral tablet extended release 6.25 mg</i>	2	QL (30 EA per 30 days)
<i>zolpidem tartrate oral capsule</i>	4	PA; QL (30 EA per 30 days)
<i>zolpidem tartrate oral tablet 10 mg</i>	2	PA; QL (30 EA per 30 days)
<i>zolpidem tartrate oral tablet 5 mg</i>	2	QL (30 EA per 30 days)
<i>zolpidem tartrate sublingual tablet sublingual 1.75 mg</i>	4	QL (30 EA per 30 days)
<i>zolpidem tartrate sublingual tablet sublingual 3.5 mg</i>	4	PA; QL (30 EA per 30 days)
Central Nervous System Agents, Misc		
<i>acamprosate calcium oral tablet delayed release</i>	4	
<i>atomoxetine hcl oral capsule</i>	4	QL (30 EA per 30 days)
DAYBUE ORAL SOLUTION	5	PA; QL (3600 ML per 30 days)
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	2	QL (30 EA per 30 days)
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR	4	QL (30 EA per 30 days)
LUMRYZ ORAL PACKET	5	PA; QL (30 EA per 30 days)
<i>memantine hcl er oral capsule extended release 24 hour</i>	4	
<i>memantine hcl oral solution 2 mg/ml</i>	4	
<i>memantine hcl oral tablet</i>	2	
NAMENDA TITRATION PAK ORAL TABLET	4	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	3	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
NOURIANZ ORAL TABLET	5	PA
NUEDEXTA ORAL CAPSULE	3	PA; QL (60 EA per 30 days)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG	4	ST; QL (30 EA per 30 days)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 200 MG	4	ST; QL (60 EA per 30 days)
RADICAVA ORS STARTER KIT ORAL SUSPENSION	5	PA
<i>riluzole oral tablet</i>	4	
<i>sodium oxybate oral solution</i>	5	PA; QL (540 ML per 30 days)
STRATTERA ORAL CAPSULE	4	QL (30 EA per 30 days)
TEGLUTIK ORAL SUSPENSION	5	
VEOZAH ORAL TABLET	4	PA; QL (30 EA per 30 days)
XYREM ORAL SOLUTION	5	PA; QL (540 ML per 30 days)
XYWAV ORAL SOLUTION	5	PA; QL (540 ML per 30 days)
Fibromyalgia Agents		
SAVELLA ORAL TABLET 100 MG	4	ST

Drug Name	Tier	Requirements
SAVELLA ORAL TABLET 12.5 MG, 25 MG, 50 MG	4	ST; QL (60 EA per 30 days)
SAVELLA TITRATION PACK ORAL	4	ST; QL (110 EA per 365 days)
Opiate Antagonists		
KLOXXADO NASAL LIQUID	4	
<i>naloxone hcl injection solution 0.4 mg/ml</i>	2	
<i>naloxone hcl injection solution cartridge</i>	4	
<i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i>	4	
<i>naloxone hcl nasal liquid</i>	2	
<i>naltrexone hcl oral tablet</i>	2	
OPVEE NASAL SOLUTION	4	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	5	
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE	4	
Psychotherapeutic Agents		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE	5	PA
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	5	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	5	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 15 MG, 20 MG, 30 MG	5	PA; QL (30 EA per 30 days)
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 2 MG, 5 MG	5	PA; QL (60 EA per 30 days)
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 10 MG	5	PA; QL (30 EA per 30 days)
ABILIFY ORAL TABLET	4	ST
<i>amitriptyline hcl oral tablet</i>	3	
<i>amoxapine oral tablet</i>	3	
ANAFRANIL ORAL CAPSULE	5	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	5	ST
<i>aripiprazole oral solution</i>	4	
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 5 mg</i>	2	QL (30 EA per 30 days)
<i>aripiprazole oral tablet 30 mg</i>	2	
<i>aripiprazole oral tablet dispersible 10 mg</i>	5	
<i>aripiprazole oral tablet dispersible 15 mg</i>	4	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	5	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	5	
<i>asenapine maleate sublingual tablet sublingual</i>	4	
AUVELITY ORAL TABLET EXTENDED RELEASE	5	PA; QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	3	QL (60 EA per 30 days)
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	2	QL (60 EA per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg</i>	2	QL (90 EA per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg</i>	2	QL (30 EA per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg</i>	4	
<i>bupropion hcl oral tablet</i>	2	
CAPLYTA ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
CELEXA ORAL TABLET	4	ST
<i>chlordiazepoxide-amitriptyline oral tablet</i>	4	PA
<i>chlorpromazine hcl oral concentrate</i>	4	PA
<i>chlorpromazine hcl oral tablet</i>	4	PA
<i>citalopram hydrobromide oral capsule</i>	4	ST
<i>citalopram hydrobromide oral solution</i>	4	
<i>citalopram hydrobromide oral tablet</i>	2	
<i>clomipramine hcl oral capsule 25 mg, 50 mg</i>	2	
<i>clomipramine hcl oral capsule 75 mg</i>	4	
<i>clozapine oral tablet</i>	2	PA
<i>clozapine oral tablet dispersible</i>	4	
CLOZARIL ORAL TABLET 100 MG	5	PA
CLOZARIL ORAL TABLET 200 MG, 25 MG, 50 MG	4	PA
COMPRO RECTAL SUPPOSITORY	4	
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES	4	ST
<i>desipramine hcl oral tablet</i>	4	
<i>desvenlafaxine er oral tablet extended release 24 hour 100 mg</i>	4	
<i>desvenlafaxine er oral tablet extended release 24 hour 50 mg</i>	4	QL (30 EA per 30 days)
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg</i>	4	
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg</i>	4	QL (30 EA per 30 days)
<i>doxepin hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	2	
<i>doxepin hcl oral capsule 100 mg, 150 mg</i>	3	
<i>doxepin hcl oral concentrate</i>	2	
<i>doxepin hcl oral tablet</i>	4	PA; QL (30 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 40 mg, 60 mg</i>	2	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>duloxetine hcl oral capsule delayed release particles 30 mg</i>	2	QL (90 EA per 30 days)
EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST
<i>escitalopram oxalate oral solution</i>	4	
<i>escitalopram oxalate oral tablet</i>	2	
FANAPT ORAL TABLET	5	ST
FANAPT TITRATION PACK ORAL TABLET	4	ST
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	ST
<i>fluoxetine hcl (pddd) oral tablet</i>	4	
<i>fluoxetine hcl oral capsule</i>	2	
<i>fluoxetine hcl oral capsule delayed release</i>	4	QL (4 EA per 28 days)
<i>fluoxetine hcl oral solution</i>	4	
<i>fluoxetine hcl oral tablet 10 mg, 20 mg</i>	3	
<i>fluoxetine hcl oral tablet 60 mg</i>	4	
<i>fluphenazine decanoate injection solution</i>	4	
<i>fluphenazine hcl injection solution</i>	4	
<i>fluphenazine hcl oral concentrate</i>	4	
<i>fluphenazine hcl oral elixir</i>	4	
<i>fluphenazine hcl oral tablet</i>	4	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	4	
<i>fluvoxamine maleate oral tablet</i>	3	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
GEODON ORAL CAPSULE	5	ST
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML	4	
<i>haloperidol decanoate intramuscular solution</i>	2	
<i>haloperidol lactate injection solution</i>	4	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	2	
<i>haloperidol oral tablet</i>	2	
<i>imipramine hcl oral tablet 10 mg</i>	3	
<i>imipramine hcl oral tablet 25 mg, 50 mg</i>	2	
<i>imipramine pamoate oral capsule</i>	4	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML	5	QL (3.5 ML per 180 days)
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1560 MG/5ML	5	QL (5 ML per 180 days)

Drug Name	Tier	Requirements
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG	5	ST; QL (30 EA per 30 days)
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	5	ST; QL (60 EA per 30 days)
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG	4	ST; QL (30 EA per 30 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	5	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	4	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML	5	QL (1 ML per 84 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	5	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	5	QL (30 EA per 30 days)
LATUDA ORAL TABLET 80 MG	5	QL (60 EA per 30 days)
LEXAPRO ORAL TABLET	4	ST
<i>loxapine succinate oral capsule</i>	4	
<i>lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg</i>	4	QL (30 EA per 30 days)
<i>lurasidone hcl oral tablet 80 mg</i>	4	QL (60 EA per 30 days)
LYBALVI ORAL TABLET	5	PA; QL (30 EA per 30 days)
MARPLAN ORAL TABLET	4	
<i>mirtazapine oral tablet</i>	2	
<i>mirtazapine oral tablet dispersible 15 mg, 45 mg</i>	3	
<i>mirtazapine oral tablet dispersible 30 mg</i>	4	
<i>molindone hcl oral tablet</i>	4	
NARDIL ORAL TABLET	4	
<i>nefazodone hcl oral tablet</i>	4	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	4	
<i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg</i>	2	
<i>nortriptyline hcl oral capsule 75 mg</i>	4	
<i>nortriptyline hcl oral solution</i>	4	
NUPLAZID ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
NUPLAZID ORAL TABLET 10 MG	5	PA; QL (30 EA per 30 days)
<i>olanzapine intramuscular solution reconstituted</i>	4	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 5 mg, 7.5 mg</i>	2	PA; QL (30 EA per 30 days)
<i>olanzapine oral tablet 20 mg</i>	2	PA
<i>olanzapine oral tablet dispersible</i>	2	PA
<i>olanzapine-fluoxetine hcl oral capsule</i>	4	PA

Drug Name	Tier	Requirements
<i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg</i>	4	QL (30 EA per 30 days)
<i>paliperidone er oral tablet extended release 24 hour 6 mg</i>	4	QL (60 EA per 30 days)
PAMELOR ORAL CAPSULE	5	
PARNATE ORAL TABLET	4	
<i>paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg</i>	4	
<i>paroxetine hcl er oral tablet extended release 24 hour 37.5 mg</i>	3	
<i>paroxetine hcl oral suspension</i>	4	
<i>paroxetine hcl oral tablet</i>	2	PA
<i>paroxetine mesylate oral capsule</i>	4	PA
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
PAXIL ORAL SUSPENSION	4	PA
PAXIL ORAL TABLET	4	PA
<i>perphenazine oral tablet</i>	4	PA
<i>perphenazine-amitriptyline oral tablet</i>	4	PA
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	5	
<i>phenelzine sulfate oral tablet</i>	4	
<i>pimozide oral tablet</i>	4	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST
<i>prochlorperazine maleate oral tablet</i>	2	
<i>prochlorperazine rectal suppository</i>	4	
<i>protriptyline hcl oral tablet</i>	4	
PROZAC ORAL CAPSULE 10 MG	4	ST
PROZAC ORAL CAPSULE 20 MG, 40 MG	5	ST
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	2	
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	2	
<i>quetiapine fumarate oral tablet 150 mg</i>	3	
<i>quetiapine fumarate oral tablet 25 mg</i>	2	QL (90 EA per 30 days)
REMERON ORAL TABLET 15 MG, 30 MG	4	
REMERON SOLTAB ORAL TABLET DISPERSIBLE	4	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG	5	ST; QL (30 EA per 30 days)
REXULTI ORAL TABLET 4 MG	5	ST
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG	4	QL (2 EA per 28 days)
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 37.5 MG, 50 MG	5	
RISPERDAL ORAL SOLUTION	5	ST

Drug Name	Tier	Requirements
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 4 MG	4	ST
RISPERDAL ORAL TABLET 2 MG, 3 MG	5	ST
<i>risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg</i>	4	QL (2 EA per 28 days)
<i>risperidone microspheres er intramuscular suspension reconstituted er 37.5 mg, 50 mg</i>	5	
<i>risperidone oral solution</i>	2	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	QL (60 EA per 30 days)
<i>risperidone oral tablet 4 mg</i>	2	
<i>risperidone oral tablet dispersible</i>	4	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL	4	ST
SECUADO TRANSDERMAL PATCH 24 HOUR	5	ST
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 400 MG, 50 MG	4	ST
SEROQUEL ORAL TABLET 300 MG	5	ST
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 50 MG	4	ST
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG	5	ST
<i>sertraline hcl oral capsule</i>	4	ST
<i>sertraline hcl oral concentrate</i>	4	
<i>sertraline hcl oral tablet</i>	2	
SILENOR ORAL TABLET	4	PA; QL (30 EA per 30 days)
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	4	PA
<i>thioridazine hcl oral tablet</i>	4	
<i>thiothixene oral capsule</i>	4	
<i>tranylcypromine sulfate oral tablet</i>	2	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>	2	
<i>trazodone hcl oral tablet 300 mg</i>	3	
<i>trifluoperazine hcl oral tablet</i>	4	
<i>trimipramine maleate oral capsule</i>	4	
TRINTELLIX ORAL TABLET	4	QL (30 EA per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML	5	ST; QL (0.28 ML per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 125 MG/0.35ML	5	ST; QL (0.35 ML per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 150 MG/0.42ML	5	ST; QL (0.42 ML per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 200 MG/0.56ML	5	ST; QL (0.56 ML per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 250 MG/0.7ML	5	ST; QL (0.7 ML per 30 days)

Drug Name	Tier	Requirements
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 50 MG/0.14ML	5	ST; QL (0.14 ML per 30 days)
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 75 MG/0.21ML	5	ST; QL (0.21 ML per 30 days)
<i>venlafaxine besylate er oral tablet extended release 24 hour</i>	4	ST; QL (30 EA per 30 days)
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	3	
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	4	
<i>venlafaxine hcl oral tablet</i>	2	
VERSACLOZ ORAL SUSPENSION	5	
VIIBRYD ORAL TABLET	4	ST; QL (30 EA per 30 days)
<i>vilazodone hcl oral tablet</i>	4	QL (30 EA per 30 days)
VRAYLAR ORAL CAPSULE	5	ST; QL (30 EA per 30 days)
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR	4	ST
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR	5	ST
<i>ziprasidone hcl oral capsule</i>	2	QL (60 EA per 30 days)
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	4	
ZOLOFT ORAL CONCENTRATE	4	ST
ZOLOFT ORAL TABLET	4	ST
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	5	PA; QL (60 EA per 30 days)
ZURZUVAE ORAL CAPSULE 30 MG	5	PA; QL (30 EA per 30 days)
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	4	
ZYPREXA ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	4	PA
ZYPREXA ORAL TABLET 15 MG, 20 MG	5	PA
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	4	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 5 MG	4	PA
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 15 MG, 20 MG	5	PA
<i>Vesicular Monoamine Transporter 2 (Vmat2) Inhibitors</i>		
AUSTEDO ORAL TABLET 12 MG, 9 MG	5	PA; QL (120 EA per 30 days)
AUSTEDO ORAL TABLET 6 MG	5	PA; QL (60 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG	5	PA; QL (60 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG	5	PA; QL (30 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	5	PA; QL (210 EA per 30 days)
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG	5	PA; QL (84 EA per 365 days)

Drug Name	Tier	Requirements
INGREZZA ORAL CAPSULE 40 MG	5	PA; QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE 60 MG, 80 MG	5	PA; QL (30 EA per 30 days)
INGREZZA ORAL CAPSULE SPRINKLE 40 MG	5	PA; QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE SPRINKLE 60 MG, 80 MG	5	PA; QL (30 EA per 30 days)
INGREZZA ORAL CAPSULE THERAPY PACK	5	PA; QL (56 EA per 365 days)
<i>tetrabenazine oral tablet 12.5 mg</i>	4	PA
<i>tetrabenazine oral tablet 25 mg</i>	5	PA
XENAZINE ORAL TABLET	5	PA
Contraceptives		
Contraceptives		
PHEXXI VAGINAL GEL	4	
Devices		
Devices		
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	3	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	3	
<i>cvs gauze sterile pad 2"x2"</i>	3	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	3	
<i>global alcohol prep ease pad</i>	3	
<i>preferred plus insulin syringe 28g x 1/2" 0.5 ml</i>	3	
RELI-ON INSULIN SYRINGE 29G 0.3 ML	3	
Electrolytic, Caloric, And Water Balance		
Alkalinizing Agents		
<i>potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg)</i>	4	
<i>potassium citrate er oral tablet extended release 5 meq (540 mg)</i>	3	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	4	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	4	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	4	
Ammonia Detoxicants		
BUPHENYL ORAL POWDER 3 GM/TSP	5	
BUPHENYL ORAL TABLET	5	
CARBAGLU ORAL TABLET SOLUBLE	5	PA
<i>carglumic acid oral tablet soluble</i>	5	PA
<i>constulose oral solution</i>	2	
<i>enulose oral solution</i>	2	
<i>generlac oral solution</i>	4	
KRISTALOSE ORAL PACKET	4	
<i>lactulose oral packet</i>	4	
<i>lactulose oral solution 10 gm/15ml</i>	2	

Drug Name	Tier	Requirements
LITHOSTAT ORAL TABLET	4	
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK	5	ST; QL (300 EA per 30 days)
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK	5	ST; QL (210 EA per 30 days)
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK	5	ST; QL (150 EA per 30 days)
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK	5	ST; QL (120 EA per 30 days)
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK	5	ST; QL (90 EA per 30 days)
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK	5	ST; QL (90 EA per 30 days)
PHEBURANE ORAL PELLETT	5	QL (600 GM per 30 days)
RAVICTI ORAL LIQUID	5	PA
<i>sodium phenylbutyrate oral powder 3 gm/tsp</i>	5	
<i>sodium phenylbutyrate oral tablet</i>	5	
Caloric Agents		
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	4	PA
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	PA
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	PA
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	PA
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	PA
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	4	PA
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	4	PA
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	4	PA
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	4	PA
CLINISOL SF INTRAVENOUS SOLUTION	4	PA
<i>dextrose intravenous solution 10 %</i>	4	
<i>dextrose intravenous solution 5 %</i>	2	
DOJOLVI ORAL LIQUID	5	PA
INTRALIPID INTRAVENOUS EMULSION	4	PA
NUTRILIPID INTRAVENOUS EMULSION	4	PA
PLENAMINE INTRAVENOUS SOLUTION	4	PA
PREMASOL INTRAVENOUS SOLUTION 10 %	4	PA
PROSOL INTRAVENOUS SOLUTION	4	PA
TRAVASOL INTRAVENOUS SOLUTION	4	PA
TROPHAMINE INTRAVENOUS SOLUTION 10 %	4	PA
Diuretics		
<i>amiloride hcl oral tablet</i>	2	

Drug Name	Tier	Requirements
<i>amiloride-hydrochlorothiazide oral tablet</i>	2	
<i>bumetanide injection solution</i>	3	
<i>bumetanide oral tablet</i>	3	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	2	
DIURIL ORAL SUSPENSION	4	
DYRENIUM ORAL CAPSULE	4	
EDECIN ORAL TABLET	5	
<i>ethacrynic acid oral tablet</i>	4	
FUROSCIX SUBCUTANEOUS CARTRIDGE KIT	5	
<i>furosemide injection solution</i>	2	
<i>furosemide oral solution 10 mg/ml</i>	2	
<i>furosemide oral solution 8 mg/ml</i>	4	
<i>furosemide oral tablet</i>	2	
<i>hydrochlorothiazide oral capsule</i>	2	
<i>hydrochlorothiazide oral tablet</i>	2	
<i>indapamide oral tablet</i>	2	
JYNARQUE ORAL TABLET	5	PA
JYNARQUE ORAL TABLET THERAPY PACK	5	PA
LASIX ORAL TABLET	4	
<i>metolazone oral tablet</i>	2	
SAMSCA ORAL TABLET	5	PA
SOANZ ORAL TABLET	4	ST
THALITONE ORAL TABLET	4	
<i>tolvaptan oral tablet</i>	5	PA
<i>toremide oral tablet 10 mg, 100 mg, 5 mg</i>	2	
<i>toremide oral tablet 20 mg</i>	3	
<i>triamterene oral capsule</i>	4	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	2	
<i>triamterene-hctz oral tablet</i>	2	
Ion-Removing Agents		
KIONEX ORAL SUSPENSION	4	
LOKELMA ORAL PACKET	4	
<i>sodium polystyrene sulfonate oral powder</i>	2	
SPS ORAL SUSPENSION	4	
VELTASSA ORAL PACKET	5	
Irrigating Solutions		
<i>sodium chloride irrigation solution 0.9 %</i>	2	
Replacement Preparations		
<i>dextrose-sodium chloride intravenous solution 10-0.2 %, 10-0.45 %, 2.5-0.45 %, 5-0.2 %</i>	4	

Drug Name	Tier	Requirements
<i>dextrose-sodium chloride intravenous solution 5-0.45 %, 5-0.9 %</i>	2	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	4	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	4	
<i>kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%, 20-5-0.2 meq/l-%, 20-5-0.45 meq/l-%, 20-5-0.9 meq/l-%, 30-5-0.45 meq/l-%, 40-5-0.45 meq/l-%, 40-5-0.9 meq/l-%</i>	4	
<i>kcl-lactated ringers-d5w intravenous solution</i>	4	
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE	2	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	3	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	3	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE	3	
KLOR-CON ORAL PACKET 20 MEQ	4	
KLOR-CON ORAL TABLET EXTENDED RELEASE	2	
<i>multiple electro type 1 ph 5.5 intravenous solution</i>	4	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	4	
PLASMA-LYTE A INTRAVENOUS SOLUTION	4	
<i>potassium chloride crys er oral tablet extended release</i>	2	
<i>potassium chloride er oral capsule extended release</i>	4	
<i>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</i>	2	
<i>potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%</i>	4	
<i>potassium chloride intravenous solution 10 meq/100ml, 20 meq/100ml, 40 meq/100ml</i>	4	
<i>potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)</i>	3	
<i>potassium chloride oral packet</i>	4	
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	4	
<i>potassium cl in dextrose 5% intravenous solution 20 meq/l</i>	4	
<i>sodium chloride intravenous solution 0.45 %, 0.9 %</i>	2	
<i>sodium chloride intravenous solution 3 %, 5 %</i>	4	
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	4	
Uricosuric Agents		
<i>colchicine-probenecid oral tablet</i>	4	
<i>probenecid oral tablet</i>	4	
Enzymes		
Enzymes		
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA

Drug Name	Tier	Requirements
REVCovi INTRAMUSCULAR SOLUTION	5	PA
SUCRAID ORAL SOLUTION	5	
Eye, Ear, Nose & Throat Preparations		
Antiallergic Agents		
ALOMIDE OPHTHALMIC SOLUTION	4	
<i>azelastine hcl nasal solution 0.1 %</i>	2	
<i>azelastine hcl ophthalmic solution</i>	2	
<i>azelastine-fluticasone nasal suspension</i>	4	ST
<i>bepotastine besilate ophthalmic solution</i>	4	ST
BEPREVE OPHTHALMIC SOLUTION	4	ST
<i>cromolyn sodium ophthalmic solution</i>	2	
DYMISTA NASAL SUSPENSION	4	ST
<i>epinastine hcl ophthalmic solution</i>	4	
<i>olopatadine hcl nasal solution</i>	3	
RYALTRIS NASAL SUSPENSION	4	ST; QL (29 GM per 30 days)
Antiglaucoma Agents		
<i>acetazolamide er oral capsule extended release 12 hour</i>	2	
<i>acetazolamide oral tablet</i>	2	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	3	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	
AZOPT OPHTHALMIC SUSPENSION	4	
<i>betaxolol hcl ophthalmic solution</i>	4	
BETIMOL OPHTHALMIC SOLUTION	4	
BETOPTIC-S OPHTHALMIC SUSPENSION	4	
<i>bimatoprost ophthalmic solution</i>	4	
<i>brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %</i>	4	
<i>brimonidine tartrate ophthalmic solution 0.2 %</i>	2	
<i>brimonidine tartrate-timolol ophthalmic solution</i>	4	
<i>brinzolamide ophthalmic suspension</i>	4	
<i>carteolol hcl ophthalmic solution</i>	2	
COMBIGAN OPHTHALMIC SOLUTION	4	
COSOPT OPHTHALMIC SOLUTION	4	
COSOPT PF OPHTHALMIC SOLUTION 2-0.5 %	4	
<i>dorzolamide hcl ophthalmic solution</i>	2	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	2	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %</i>	4	
ISTALOL OPHTHALMIC SOLUTION	4	
IYUZEH OPHTHALMIC SOLUTION	4	ST
<i>latanoprost ophthalmic solution</i>	2	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	2	

Drug Name	Tier	Requirements
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	3	
<i>methazolamide oral tablet</i>	4	
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	4	
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	4	
ROCKLATAN OPHTHALMIC SOLUTION	3	
SIMBRINZA OPHTHALMIC SUSPENSION	3	
<i>tafluprost (pf) ophthalmic solution</i>	4	
<i>timolol maleate (once-daily) ophthalmic solution</i>	4	
<i>timolol maleate ophthalmic gel forming solution</i>	4	
<i>timolol maleate ophthalmic solution</i>	2	
<i>timolol maleate pf ophthalmic solution</i>	4	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	4	
TRAVATAN Z OPHTHALMIC SOLUTION	4	ST
<i>travoprost (bak free) ophthalmic solution</i>	4	
VUITY OPHTHALMIC SOLUTION	4	PA
VYZULTA OPHTHALMIC SOLUTION	4	
XALATAN OPHTHALMIC SOLUTION	4	ST
XELPROS OPHTHALMIC EMULSION	4	ST
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 %	4	
Anti-Infectives		
AZASITE OPHTHALMIC SOLUTION	4	
<i>bacitracin ophthalmic ointment</i>	4	
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	2	
BESIVANCE OPHTHALMIC SUSPENSION	4	
<i>chlorhexidine gluconate mouth/throat solution</i>	2	
CILOXAN OPHTHALMIC OINTMENT	4	
<i>ciprofloxacin hcl ophthalmic solution</i>	2	
<i>erythromycin ophthalmic ointment</i>	2	
<i>gatifloxacin ophthalmic solution</i>	3	
<i>gentamicin sulfate ophthalmic solution</i>	2	
<i>levofloxacin ophthalmic solution 0.5 %</i>	4	
<i>moxifloxacin hcl ophthalmic solution</i>	2	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	3	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	3	
NEO-POLYCIN OPHTHALMIC OINTMENT	4	
OCUFLOX OPHTHALMIC SOLUTION	4	
<i>ofloxacin ophthalmic solution</i>	2	

Drug Name	Tier	Requirements
<i>ofloxacin otic solution</i>	2	
PERIOGARD MOUTH/THROAT SOLUTION	4	
POLYCIN OPHTHALMIC OINTMENT	2	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	2	
<i>sulfacetamide sodium ophthalmic ointment</i>	4	
<i>sulfacetamide sodium ophthalmic solution</i>	3	
<i>tobramycin ophthalmic solution</i>	2	
TOBEX OPHTHALMIC OINTMENT	4	
<i>trifluridine ophthalmic solution</i>	4	
VIGAMOX OPHTHALMIC SOLUTION	4	
XDEMVIY OPHTHALMIC SOLUTION	5	PA; QL (10 ML per 30 days)
ZIRGAN OPHTHALMIC GEL	4	
Anti-Inflammatory Agents		
ACULAR LS OPHTHALMIC SOLUTION	4	
ACULAR OPHTHALMIC SOLUTION	4	
ACUVAIL OPHTHALMIC SOLUTION	4	
ALREX OPHTHALMIC SUSPENSION	4	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	3	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	4	
<i>bromfenac sodium ophthalmic solution 0.07 %, 0.075 %</i>	4	
BROMSITE OPHTHALMIC SOLUTION	4	
CEQUA OPHTHALMIC SOLUTION	4	ST; QL (60 EA per 30 days)
CIPRO HC OTIC SUSPENSION	4	
<i>ciprofloxacin-dexamethasone otic suspension</i>	4	
<i>cyclosporine ophthalmic emulsion</i>	4	QL (60 EA per 30 days)
DERMOTIC OTIC OIL	4	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	3	
<i>diclofenac sodium ophthalmic solution</i>	2	
<i>difluprednate ophthalmic emulsion</i>	4	
DUREZOL OPHTHALMIC EMULSION	4	
EYSUVIS OPHTHALMIC SUSPENSION	4	PA
FLAC OTIC OIL	4	
FLAREX OPHTHALMIC SUSPENSION	4	
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	4	
<i>fluocinolone acetonide otic oil</i>	3	
<i>fluorometholone ophthalmic suspension</i>	4	
<i>flurbiprofen sodium ophthalmic solution</i>	3	
<i>fluticasone propionate nasal suspension</i>	2	
FML FORTE OPHTHALMIC SUSPENSION	4	
FML LIQUIFILM OPHTHALMIC SUSPENSION	4	

Drug Name	Tier	Requirements
<i>hydrocortisone-acetic acid otic solution</i>	4	
ILEVRO OPHTHALMIC SUSPENSION	4	
INVELTYS OPHTHALMIC SUSPENSION	4	
<i>ketorolac tromethamine ophthalmic solution</i>	4	
LOTEMAX OPHTHALMIC GEL	4	
LOTEMAX OPHTHALMIC OINTMENT	4	
LOTEMAX OPHTHALMIC SUSPENSION	4	
LOTEMAX SM OPHTHALMIC GEL	4	
<i>loteprednol etabonate ophthalmic gel</i>	4	
<i>loteprednol etabonate ophthalmic suspension</i>	4	
MAXIDEX OPHTHALMIC SUSPENSION	4	
MAXITROL OPHTHALMIC OINTMENT	4	
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	4	
<i>mometasone furoate nasal suspension</i>	3	QL (34 GM per 30 days)
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	2	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	2	
<i>neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1</i>	4	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	4	
<i>neomycin-polymyxin-hc otic suspension</i>	4	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	4	
NEVANAC OPHTHALMIC SUSPENSION	4	
OMNARIS NASAL SUSPENSION	4	ST
PRED FORTE OPHTHALMIC SUSPENSION	4	
PRED MILD OPHTHALMIC SUSPENSION	4	
<i>prednisolone acetate ophthalmic suspension</i>	3	
<i>prednisolone sodium phosphate ophthalmic solution</i>	4	
PROLENSA OPHTHALMIC SOLUTION	4	
QNASL CHILDRENS NASAL AEROSOL SOLUTION	4	ST
QNASL NASAL AEROSOL SOLUTION	4	ST
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	3	QL (60 ML per 30 days)
RESTASIS OPHTHALMIC EMULSION	3	QL (60 EA per 30 days)
<i>sulfacetamide-prednisolone ophthalmic solution</i>	4	
TOBRADEX OPHTHALMIC OINTMENT	4	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	2	
VEVYE OPHTHALMIC SOLUTION	5	ST; QL (6 ML per 30 days)
XHANCE NASAL EXHALER SUSPENSION	4	ST
XIIDRA OPHTHALMIC SOLUTION	4	QL (60 EA per 30 days)
ZYLET OPHTHALMIC SUSPENSION	4	

Drug Name	Tier	Requirements
Eent Drugs, Miscellaneous		
<i>acetic acid otic solution</i>	2	
<i>apraclonidine hcl ophthalmic solution</i>	4	
CYSTADROPS OPHTHALMIC SOLUTION	5	PA; QL (20 ML per 28 days)
CYSTARAN OPHTHALMIC SOLUTION	5	PA; QL (60 ML per 28 days)
IOPIDINE OPHTHALMIC SOLUTION 1 %	4	
MIEBO OPHTHALMIC SOLUTION	5	ST; QL (12 ML per 30 days)
OXERVATE OPHTHALMIC SOLUTION	5	PA
RHOPRESSA OPHTHALMIC SOLUTION	3	
TYRVAYA NASAL SOLUTION	4	QL (8.4 ML per 30 days)
Local Anesthetics		
<i>lidocaine viscous hcl mouth/throat solution</i>	2	
Mydriatics		
<i>atropine sulfate ophthalmic solution 1 %</i>	3	
Gastrointestinal Drugs		
Antidiarrhea Agents		
<i>diphenoxylate-atropine oral liquid</i>	4	PA
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	2	PA
LOMOTIL ORAL TABLET	4	PA
<i>loperamide hcl oral capsule</i>	2	
MYTESI ORAL TABLET DELAYED RELEASE	5	PA
XERMELO ORAL TABLET	5	PA
Antiemetics		
ANTIVERT ORAL TABLET 50 MG	4	
ANTIVERT ORAL TABLET CHEWABLE	4	
ANZEMET ORAL TABLET 50 MG	4	QL (6 EA per 30 days)
<i>aprepitant oral capsule 125 mg</i>	4	PA; QL (4 EA per 30 days)
<i>aprepitant oral capsule 40 mg, 80 mg</i>	4	PA; QL (8 EA per 30 days)
<i>aprepitant oral capsule 80 & 125 mg</i>	4	PA; QL (12 EA per 30 days)
BONJESTA ORAL TABLET EXTENDED RELEASE	4	
DICLEGIS ORAL TABLET DELAYED RELEASE	4	
<i>doxylamine-pyridoxine oral tablet delayed release</i>	4	
<i>dronabinol oral capsule 10 mg</i>	4	PA
<i>dronabinol oral capsule 2.5 mg, 5 mg</i>	4	PA; QL (60 EA per 30 days)
EMEND ORAL CAPSULE 80 MG	4	PA; QL (8 EA per 30 days)
EMEND ORAL SUSPENSION RECONSTITUTED	4	PA; QL (6 EA per 30 days)
EMEND TRI-PACK ORAL CAPSULE	4	PA; QL (12 EA per 30 days)
<i>granisetron hcl oral tablet</i>	2	PA; QL (60 EA per 30 days)
MARINOL ORAL CAPSULE 2.5 MG	4	PA
<i>meclizine hcl oral tablet 12.5 mg, 25 mg</i>	2	

Drug Name	Tier	Requirements
<i>ondansetron hcl oral solution</i>	2	PA
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	PA; QL (45 EA per 30 days)
<i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>	2	PA; QL (45 EA per 30 days)
<i>scopolamine transdermal patch 72 hour</i>	4	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	4	
<i>trimethobenzamide hcl oral capsule</i>	4	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	4	PA
Anti-Inflammatory Agents		
<i>alosectron hcl oral tablet 0.5 mg</i>	4	
<i>alosectron hcl oral tablet 1 mg</i>	5	
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
<i>balsalazide disodium oral capsule</i>	4	
CANASA RECTAL SUPPOSITORY	5	
COLAZAL ORAL CAPSULE	5	
DELZICOL ORAL CAPSULE DELAYED RELEASE	4	
DIPENTUM ORAL CAPSULE	5	
LIALDA ORAL TABLET DELAYED RELEASE	5	
LOTRONEX ORAL TABLET	5	
<i>mesalamine er oral capsule extended release</i>	4	
<i>mesalamine er oral capsule extended release 24 hour</i>	4	
<i>mesalamine oral capsule delayed release</i>	4	
<i>mesalamine oral tablet delayed release</i>	4	
<i>mesalamine rectal enema</i>	4	
<i>mesalamine rectal suppository</i>	4	
PENTASA ORAL CAPSULE EXTENDED RELEASE	4	
ROWASA RECTAL KIT	5	
Antulcer Agents And Acid Suppressants		
<i>amoxicill-clarithro-lansopraz oral therapy pack</i>	4	QL (112 EA per 180 days)
<i>bismuth/metronidaz/tetracyclin oral capsule</i>	4	
CARAFATE ORAL SUSPENSION	4	
CARAFATE ORAL TABLET	4	
<i>cimetidine oral tablet 200 mg</i>	3	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	4	
CYTOTEC ORAL TABLET	4	
DEXILANT ORAL CAPSULE DELAYED RELEASE	4	ST; QL (30 EA per 30 days)
<i>dexlansoprazole oral capsule delayed release</i>	4	QL (30 EA per 30 days)
<i>esomeprazole magnesium oral capsule delayed release 20 mg</i>	3	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>esomeprazole magnesium oral capsule delayed release 40 mg</i>	2	QL (60 EA per 30 days)
<i>esomeprazole magnesium oral packet</i>	4	QL (30 EA per 30 days)
<i>famotidine oral suspension reconstituted</i>	4	
<i>famotidine oral tablet 20 mg, 40 mg</i>	2	
HELIDAC THERAPY ORAL	5	
KONVOMEF ORAL SUSPENSION RECONSTITUTED	4	ST; QL (600 ML per 30 days)
<i>lansoprazole oral capsule delayed release</i>	2	QL (60 EA per 30 days)
<i>lansoprazole oral tablet delayed release dispersible</i>	4	QL (60 EA per 30 days)
<i>misoprostol oral tablet</i>	2	
NEXIUM ORAL CAPSULE DELAYED RELEASE	4	ST; QL (60 EA per 30 days)
NEXIUM ORAL PACKET	4	ST; QL (30 EA per 30 days)
<i>nizatidine oral capsule</i>	4	
<i>omeprazole oral capsule delayed release</i>	2	QL (60 EA per 30 days)
<i>omeprazole-sodium bicarbonate oral capsule</i>	5	ST; QL (30 EA per 30 days)
<i>omeprazole-sodium bicarbonate oral packet</i>	5	ST; QL (30 EA per 30 days)
<i>pantoprazole sodium oral packet</i>	4	QL (60 EA per 30 days)
<i>pantoprazole sodium oral tablet delayed release</i>	2	QL (60 EA per 30 days)
PEPCID ORAL TABLET 20 MG	4	
PEPCID ORAL TABLET 40 MG	5	
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG	4	ST; QL (60 EA per 30 days)
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	4	ST; QL (60 EA per 30 days)
PRILOSEC ORAL PACKET	4	ST; QL (60 EA per 30 days)
PROTONIX ORAL PACKET	4	ST; QL (60 EA per 30 days)
PROTONIX ORAL TABLET DELAYED RELEASE	4	ST; QL (60 EA per 30 days)
PYLERA ORAL CAPSULE	5	
<i>rabeprazole sodium oral tablet delayed release</i>	2	ST; QL (30 EA per 30 days)
<i>sucralfate oral suspension</i>	4	
<i>sucralfate oral tablet</i>	2	
TALICIA ORAL CAPSULE DELAYED RELEASE	4	QL (168 EA per 180 days)
VOQUEZNA DUAL PAK ORAL THERAPY PACK	4	PA; QL (112 EA per 180 days)
VOQUEZNA ORAL TABLET 10 MG	4	PA; QL (30 EA per 30 days)
VOQUEZNA ORAL TABLET 20 MG	4	PA; QL (60 EA per 30 days)
VOQUEZNA TRIPLE PAK ORAL THERAPY PACK	4	PA; QL (112 EA per 180 days)
ZEGERID ORAL CAPSULE	5	ST; QL (30 EA per 30 days)
Cathartics And Laxatives		
CLENPIQ ORAL SOLUTION	3	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	2	
GAVILYTE-G ORAL SOLUTION RECONSTITUTED	2	

Drug Name	Tier	Requirements
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	4	
MOVIPREP ORAL SOLUTION RECONSTITUTED	4	
<i>na sulfate-k sulfate-mg sulf oral solution</i>	4	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	2	
<i>peg-3350/electrolytes oral solution reconstituted</i>	2	
<i>peg-3350/electrolytes/ascorbat oral solution reconstituted</i>	4	
PLENVU ORAL SOLUTION RECONSTITUTED	4	
SUFLAVE ORAL SOLUTION RECONSTITUTED	4	
SUPREP BOWEL PREP KIT ORAL SOLUTION	4	
SUTAB ORAL TABLET	3	
Cholelitholytic Agents		
CHENODAL ORAL TABLET	5	
RELTONE ORAL CAPSULE	5	ST
URSO 250 ORAL TABLET	4	
URSO FORTE ORAL TABLET	4	
<i>ursodiol oral capsule 200 mg, 400 mg</i>	5	
<i>ursodiol oral capsule 300 mg</i>	3	
<i>ursodiol oral tablet</i>	4	
Digestants		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	3	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 2600-8800 UNIT, 4200-14200 UNIT	4	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 21000-54700 UNIT, 37000-97300 UNIT	5	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000-57500 UNIT, 24000-86250 UNIT	5	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 4000-14375 UNIT, 8000-28750 UNIT	4	
VIOKACE ORAL TABLET 10440-39150 UNIT	4	
VIOKACE ORAL TABLET 20880-78300 UNIT	5	
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	3	
Gi Drugs, Miscellaneous		
AMITIZA ORAL CAPSULE	4	QL (60 EA per 30 days)
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	5	PA
BYLVAY ORAL CAPSULE	5	PA
CHOLBAM ORAL CAPSULE	5	PA

Drug Name	Tier	Requirements
ENTYVIO SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (1.36 ML per 28 days)
GATTEX SUBCUTANEOUS KIT	5	PA
IBSRELA ORAL TABLET	5	ST; QL (60 EA per 30 days)
LINZESS ORAL CAPSULE	3	QL (30 EA per 30 days)
LIVMARLI ORAL SOLUTION 9.5 MG/ML	5	PA; QL (90 ML per 30 days)
<i>lubiprostone oral capsule</i>	4	QL (60 EA per 30 days)
MOTEGRITY ORAL TABLET	4	ST
MOVANTIK ORAL TABLET	4	
OICALIVA ORAL TABLET	5	PA
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
RELISTOR ORAL TABLET	5	ST
RELISTOR SUBCUTANEOUS SOLUTION	5	ST
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
SYMPROIC ORAL TABLET	4	ST
TRULANCE ORAL TABLET	4	ST
VIBERZI ORAL TABLET	5	QL (60 EA per 30 days)
Immunomodulatory Agents		
OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
Prokinetic Agents		
GIMOTI NASAL SOLUTION	5	ST
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	4	
<i>metoclopramide hcl oral tablet</i>	2	
<i>metoclopramide hcl oral tablet dispersible 5 mg</i>	4	
REGLAN ORAL TABLET	4	
Gold Compounds		
Gold Compounds		
RIDAURA ORAL CAPSULE	5	
Heavy Metal Antagonists		
Heavy Metal Antagonists		
CHEMET ORAL CAPSULE	5	
CUPRIMINE ORAL CAPSULE 250 MG	5	ST
CUVRIOR ORAL TABLET	5	PA
<i>deferasirox granules oral packet</i>	5	PA
<i>deferasirox oral tablet 180 mg, 360 mg</i>	4	PA
<i>deferasirox oral tablet 90 mg</i>	3	PA
<i>deferasirox oral tablet soluble 125 mg</i>	4	PA
<i>deferasirox oral tablet soluble 250 mg, 500 mg</i>	5	PA
<i>deferiprone oral tablet</i>	5	PA
DEPEN TITRATABS ORAL TABLET	5	

Drug Name	Tier	Requirements
EXJADE ORAL TABLET SOLUBLE	5	PA
FERRIPROX ORAL SOLUTION	5	PA
FERRIPROX ORAL TABLET	5	PA
FERRIPROX TWICE-A-DAY ORAL TABLET	5	PA
JADENU ORAL TABLET	5	PA
JADENU SPRINKLE ORAL PACKET	5	PA
<i>penicillamine oral capsule</i>	5	
<i>penicillamine oral tablet</i>	5	
SYPRINE ORAL CAPSULE	5	
<i>trientine hcl oral capsule 250 mg</i>	5	
<i>trientine hcl oral capsule 500 mg</i>	5	PA

Hormones And Synthetic Substitutes

Adrenals

AGAMREE ORAL SUSPENSION	5	PA; QL (225 ML per 30 days)
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE 0.5 MG	4	
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE 1 MG, 2 MG, 5 MG	5	
ALVESCO INHALATION AEROSOL SOLUTION	4	ST
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 50 MCG/ACT	3	QL (30 EA per 30 days)
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200 MCG/ACT	3	
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	4	ST
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT	4	ST
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	4	ST
ASMANEX HFA INHALATION AEROSOL	4	ST
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	3	QL (60 EA per 30 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH	3	
BREYNA INHALATION AEROSOL	4	QL (10.3 GM per 30 days)
BREZTRI AEROSPHERE INHALATION AEROSOL	3	QL (23.6 GM per 28 days)
<i>budesonide er oral tablet extended release 24 hour</i>	5	
<i>budesonide inhalation suspension</i>	4	PA; QL (120 ML per 30 days)
<i>budesonide oral capsule delayed release particles</i>	4	
<i>budesonide-formoterol fumarate inhalation aerosol</i>	4	QL (13.8 GM per 30 days)

Drug Name	Tier	Requirements
CORTEF ORAL TABLET	4	
<i>deflazacort oral suspension</i>	5	PA
<i>deflazacort oral tablet</i>	5	PA
<i>dexabliss oral tablet therapy pack</i>	4	
<i>dexamethasone oral solution</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone oral tablet therapy pack</i>	4	
DULERA INHALATION AEROSOL	4	QL (13 GM per 30 days)
EMFLAZA ORAL SUSPENSION	5	PA
EMFLAZA ORAL TABLET	5	PA
<i>fludrocortisone acetate oral tablet</i>	3	
<i>fluticasone furoate-vilanterol inhalation aerosol powder breath activated 100-25 mcg/act, 200-25 mcg/act</i>	4	PA
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 100 mcg/act, 50 mcg/act</i>	4	ST; QL (120 EA per 30 days)
<i>fluticasone propionate diskus inhalation aerosol powder breath activated 250 mcg/act</i>	4	ST; QL (240 EA per 30 days)
<i>fluticasone propionate hfa inhalation aerosol 110 mcg/act</i>	4	ST; QL (12 GM per 30 days)
<i>fluticasone propionate hfa inhalation aerosol 220 mcg/act</i>	4	ST; QL (24 GM per 30 days)
<i>fluticasone propionate hfa inhalation aerosol 44 mcg/act</i>	4	ST; QL (10.6 GM per 30 days)
HEMADY ORAL TABLET	4	
<i>hydrocortisone oral tablet 10 mg, 5 mg</i>	3	
<i>hydrocortisone oral tablet 20 mg</i>	4	
INTRAROSA VAGINAL INSERT	4	PA
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	4	PA
MEDROL ORAL TABLET THERAPY PACK	4	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg</i>	2	PA
<i>methylprednisolone oral tablet 8 mg</i>	3	PA
<i>methylprednisolone oral tablet therapy pack</i>	2	
ORAPRED ODT ORAL TABLET DISPERSIBLE	4	
<i>prednisolone oral solution</i>	2	
<i>prednisolone oral tablet</i>	4	PA
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	4	
<i>prednisolone sodium phosphate oral tablet dispersible</i>	4	
PREDNISON INTENSOL ORAL CONCENTRATE	4	PA
<i>prednisone oral solution</i>	4	PA
<i>prednisone oral tablet</i>	2	PA
<i>prednisone oral tablet therapy pack</i>	2	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	ST

Drug Name	Tier	Requirements
PULMICORT INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML	4	PA; QL (120 ML per 30 days)
PULMICORT INHALATION SUSPENSION 1 MG/2ML	5	PA; QL (120 ML per 30 days)
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	4	ST
RAYOS ORAL TABLET DELAYED RELEASE	5	PA
SYMBICORT INHALATION AEROSOL	3	QL (13.8 GM per 30 days)
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK	4	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	4	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27)	4	
TARPEYO ORAL CAPSULE DELAYED RELEASE	5	PA; QL (120 EA per 30 days)
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	3	QL (60 EA per 30 days)
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR	5	ST
Androgens		
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	5	ST
AVEED INTRAMUSCULAR SOLUTION	5	PA
<i>danazol oral capsule</i>	4	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	4	PA
JATENZO ORAL CAPSULE 158 MG, 198 MG	4	PA
JATENZO ORAL CAPSULE 237 MG	5	PA
<i>methitest oral tablet</i>	5	
<i>methyltestosterone oral capsule</i>	5	
TESTIM TRANSDERMAL GEL	5	ST
<i>testosterone cypionate intramuscular solution 100 mg/ml</i>	3	PA
<i>testosterone cypionate intramuscular solution 200 mg/ml, 200 mg/ml (1 ml)</i>	2	PA
<i>testosterone enanthate intramuscular solution</i>	4	PA
<i>testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</i>	4	PA
<i>testosterone transdermal gel 20.25 mg/act (1.62%)</i>	3	PA
<i>testosterone transdermal solution</i>	4	PA
TLANDO ORAL CAPSULE	4	PA
VOGELXO PUMP TRANSDERMAL GEL	4	ST
VOGELXO TRANSDERMAL GEL	4	ST
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA

Drug Name	Tier	Requirements
Antidiabetic Agents		
<i>acarbose oral tablet</i>	1	QL (90 EA per 30 days)
ACTOPLUS MET ORAL TABLET 15-850 MG	4	QL (90 EA per 30 days)
ACTOS ORAL TABLET	4	QL (30 EA per 30 days)
ADMELOG INJECTION SOLUTION	4	ST
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
AFREZZA INHALATION POWDER 12 UNIT, 60X4 & 60X8 & 60X12 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT	5	PA
AFREZZA INHALATION POWDER 4 UNIT, 8 UNIT	4	PA
<i>alogliptin benzoate oral tablet</i>	1	QL (30 EA per 30 days)
<i>alogliptin-metformin hcl oral tablet</i>	1	QL (60 EA per 30 days)
<i>alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg</i>	1	QL (30 EA per 30 days)
APIDRA INJECTION SOLUTION	4	ST
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	4	PA; QL (3.4 ML per 28 days)
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (2.4 ML per 30 days)
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (1.2 ML per 30 days)
CYCLOSET ORAL TABLET	4	QL (180 EA per 30 days)
<i>dapagliflozin pro-metformin er oral tablet extended release 24 hour 10-1000 mg</i>	4	PA; QL (30 EA per 30 days)
<i>dapagliflozin pro-metformin er oral tablet extended release 24 hour 5-1000 mg</i>	4	PA; QL (60 EA per 30 days)
<i>dapagliflozin propanediol oral tablet</i>	4	PA; QL (30 EA per 30 days)
DUETACT ORAL TABLET	4	QL (30 EA per 30 days)
FARXIGA ORAL TABLET	3	QL (30 EA per 30 days)
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
FIASP INJECTION SOLUTION	4	ST
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	4	ST
<i>glimepiride oral tablet 1 mg, 2 mg</i>	1	QL (120 EA per 30 days)
<i>glimepiride oral tablet 4 mg</i>	1	QL (60 EA per 30 days)
<i>glipizide er oral tablet extended release 24 hour 10 mg</i>	1	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>glipizide er oral tablet extended release 24 hour 2.5 mg, 5 mg</i>	1	QL (120 EA per 30 days)
<i>glipizide oral tablet 10 mg</i>	1	QL (120 EA per 30 days)
<i>glipizide oral tablet 2.5 mg</i>	4	QL (480 EA per 30 days)
<i>glipizide oral tablet 5 mg</i>	1	QL (240 EA per 30 days)
<i>glipizide-metformin hcl oral tablet 2.5-250 mg</i>	1	QL (180 EA per 30 days)
<i>glipizide-metformin hcl oral tablet 2.5-500 mg, 5-500 mg</i>	1	QL (120 EA per 30 days)
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG	4	QL (60 EA per 30 days)
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	4	QL (120 EA per 30 days)
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG	5	PA; QL (60 EA per 30 days)
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG	5	PA; QL (120 EA per 30 days)
<i>glyburide micronized oral tablet 1.5 mg</i>	1	QL (240 EA per 30 days)
<i>glyburide micronized oral tablet 3 mg</i>	1	QL (120 EA per 30 days)
<i>glyburide micronized oral tablet 6 mg</i>	1	QL (60 EA per 30 days)
<i>glyburide oral tablet 1.25 mg, 2.5 mg</i>	1	QL (240 EA per 30 days)
<i>glyburide oral tablet 5 mg</i>	1	QL (120 EA per 30 days)
<i>glyburide-metformin oral tablet</i>	1	QL (120 EA per 30 days)
GLYXAMBI ORAL TABLET	3	QL (30 EA per 30 days)
HUMALOG INJECTION SOLUTION	3	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	3	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	3	
HUMALOG TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	3	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMULIN N SUBCUTANEOUS SUSPENSION	3	
HUMULIN R INJECTION SOLUTION	3	

Drug Name	Tier	Requirements
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	3	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INPEFA ORAL TABLET 200 MG	4	ST; QL (60 EA per 30 days)
<i>insulin asp prot & asp flexpen subcutaneous suspension pen-injector</i>	4	ST
<i>insulin aspart flexpen subcutaneous solution pen-injector</i>	4	ST
<i>insulin aspart injection solution</i>	4	ST
<i>insulin aspart penfill subcutaneous solution cartridge</i>	4	ST
<i>insulin aspart prot & aspart subcutaneous suspension</i>	4	ST
<i>insulin degludec flextouch subcutaneous solution pen-injector</i>	4	ST
<i>insulin degludec subcutaneous solution</i>	4	ST
<i>insulin glargine max solostar subcutaneous solution pen-injector</i>	4	PA
<i>insulin glargine solostar subcutaneous solution pen-injector 300 unit/ml</i>	4	PA
<i>insulin glargine-yfgn subcutaneous solution</i>	4	ST
<i>insulin glargine-yfgn subcutaneous solution pen-injector</i>	4	ST
<i>insulin lispro (1 unit dial) subcutaneous solution pen-injector</i>	3	
<i>insulin lispro injection solution</i>	3	
<i>insulin lispro junior kwikpen subcutaneous solution pen-injector</i>	3	
<i>insulin lispro prot & lispro subcutaneous suspension pen-injector</i>	3	
INVOKAMET ORAL TABLET	4	ST; QL (60 EA per 30 days)
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST; QL (60 EA per 30 days)
INVOKANA ORAL TABLET	4	ST; QL (30 EA per 30 days)
JANUMET ORAL TABLET	3	QL (60 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-500 MG	3	QL (30 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG	3	QL (60 EA per 30 days)
JANUVIA ORAL TABLET	3	QL (30 EA per 30 days)
JARDIANCE ORAL TABLET	3	QL (30 EA per 30 days)
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG	4	ST; QL (60 EA per 30 days)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
KAZANO ORAL TABLET	4	ST; QL (60 EA per 30 days)
KORLYM ORAL TABLET	5	PA

Drug Name	Tier	Requirements
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
LANTUS SUBCUTANEOUS SOLUTION	3	
LYUMJEV INJECTION SOLUTION	4	ST
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
LYUMJEV TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
<i>metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg</i>	4	PA; QL (60 EA per 30 days)
<i>metformin hcl er (mod) oral tablet extended release 24 hour 500 mg</i>	4	PA; QL (120 EA per 30 days)
<i>metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg</i>	4	ST; QL (60 EA per 30 days)
<i>metformin hcl er (osm) oral tablet extended release 24 hour 500 mg</i>	4	ST; QL (120 EA per 30 days)
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>	1	QL (120 EA per 30 days)
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>	1	QL (60 EA per 30 days)
<i>metformin hcl oral solution</i>	2	QL (765 ML per 30 days)
<i>metformin hcl oral tablet 1000 mg</i>	1	QL (60 EA per 30 days)
<i>metformin hcl oral tablet 500 mg</i>	1	QL (150 EA per 30 days)
<i>metformin hcl oral tablet 625 mg</i>	5	PA; QL (120 EA per 30 days)
<i>metformin hcl oral tablet 850 mg</i>	1	QL (90 EA per 30 days)
<i>mifepristone oral tablet 300 mg</i>	5	PA
<i>miglitol oral tablet</i>	1	QL (90 EA per 30 days)
MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (2 ML per 28 days)
<i>nateglinide oral tablet 120 mg</i>	1	QL (90 EA per 30 days)
<i>nateglinide oral tablet 60 mg</i>	1	QL (180 EA per 30 days)
NESINA ORAL TABLET	4	ST; QL (30 EA per 30 days)
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION	3	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
NOVOLIN N SUBCUTANEOUS SUSPENSION	3	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR	3	
NOVOLIN R INJECTION SOLUTION	3	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	

Drug Name	Tier	Requirements
NOVOLOG INJECTION SOLUTION	3	
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION	3	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	4	ST; QL (30 EA per 30 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	3	PA; QL (3 ML per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	3	PA; QL (3 ML per 28 days)
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (3 ML per 28 days)
<i>pioglitazone hcl oral tablet</i>	1	QL (30 EA per 30 days)
<i>pioglitazone hcl-glimepiride oral tablet 30-2 mg</i>	4	QL (30 EA per 30 days)
<i>pioglitazone hcl-glimepiride oral tablet 30-4 mg</i>	1	QL (30 EA per 30 days)
<i>pioglitazone hcl-metformin hcl oral tablet</i>	1	QL (90 EA per 30 days)
QTERN ORAL TABLET	4	ST; QL (30 EA per 30 days)
<i>repaglinide oral tablet 0.5 mg</i>	1	QL (360 EA per 30 days)
<i>repaglinide oral tablet 1 mg</i>	1	QL (480 EA per 30 days)
<i>repaglinide oral tablet 2 mg</i>	1	QL (240 EA per 30 days)
REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
RYBELSUS ORAL TABLET	3	PA; QL (30 EA per 30 days)
<i>saxagliptin hcl oral tablet</i>	4	ST; QL (30 EA per 30 days)
<i>saxagliptin-metformin er oral tablet extended release 24 hour 2.5-1000 mg</i>	4	ST; QL (60 EA per 30 days)
<i>saxagliptin-metformin er oral tablet extended release 24 hour 5-1000 mg, 5-500 mg</i>	4	ST; QL (30 EA per 30 days)
SEGLUROMET ORAL TABLET	4	ST
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION	4	ST
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	ST
<i>sitagliptin base-metformin hcl oral tablet</i>	4	ST; QL (60 EA per 30 days)
<i>sitagliptin oral tablet</i>	4	ST; QL (30 EA per 30 days)
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	4	PA; QL (18 ML per 28 days)
STEGLATRO ORAL TABLET	4	ST
STEGLUJAN ORAL TABLET	4	ST
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (10.8 ML per 30 days)
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (6 ML per 30 days)

Drug Name	Tier	Requirements
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG	3	QL (60 EA per 30 days)
SYNJARDY ORAL TABLET 5-500 MG	3	QL (120 EA per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 25-1000 MG	3	QL (30 EA per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-1000 MG, 5-1000 MG	3	QL (60 EA per 30 days)
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
TRADJENTA ORAL TABLET	4	ST; QL (30 EA per 30 days)
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
TRESIBA SUBCUTANEOUS SOLUTION	3	
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (2 ML per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA; QL (9 ML per 30 days)
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-500 MG	3	QL (30 EA per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG	3	QL (60 EA per 30 days)
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (15 ML per 30 days)
ZITUVIO ORAL TABLET	4	ST; QL (30 EA per 30 days)
Antihypoglycemic Agents		
BAQSIMI ONE PACK NASAL POWDER	3	
<i>diazoxide oral suspension</i>	5	
<i>glucagon emergency injection kit</i>	4	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
GVOKE KIT SUBCUTANEOUS SOLUTION	3	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	3	
PROGLYCEM ORAL SUSPENSION	4	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	ST
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	ST

Drug Name	Tier	Requirements
Contraceptives		
ALTAVERA ORAL TABLET	4	
<i>alyacen 1/35 oral tablet</i>	4	
AMETHIA ORAL TABLET	4	
ANNOVERA VAGINAL RING	4	QL (1 EA per 365 days)
APRI ORAL TABLET	3	
ARANELLE ORAL TABLET	4	
ASHLYNA ORAL TABLET	4	
AUBRA EQ ORAL TABLET	4	
AVIANE ORAL TABLET	4	
BALCOLTRA ORAL TABLET	4	
BALZIVA ORAL TABLET	4	
BEYAZ ORAL TABLET	4	
BLISOVI 24 FE ORAL TABLET	4	
BLISOVI FE 1.5/30 ORAL TABLET	4	
<i>briellyn oral tablet</i>	4	
CAMILA ORAL TABLET	4	
CAMRESE LO ORAL TABLET	4	
CRYSELLE-28 ORAL TABLET	4	
CYRED EQ ORAL TABLET	4	
DEBLITANE ORAL TABLET	4	
<i>desogestrel-ethinyl estradiol oral tablet</i>	4	
DOLISHALE ORAL TABLET	4	
<i>drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg</i>	4	
<i>drospirenone-ethinyl estradiol oral tablet</i>	4	
ELURYNG VAGINAL RING	4	
ENILLORING VAGINAL RING	4	
ENPRESSE-28 ORAL TABLET	4	
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	4	
ERRIN ORAL TABLET	4	
ESTARYLLA ORAL TABLET	4	
<i>ethynodiol diac-eth estradiol oral tablet</i>	4	
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	4	
FALMINA ORAL TABLET	4	
FINZALA ORAL TABLET CHEWABLE	4	
GEMMILY ORAL CAPSULE	4	
HAILEY 24 FE ORAL TABLET	4	
HALOETTE VAGINAL RING	2	
HEATHER ORAL TABLET	4	
ICLEVIA ORAL TABLET	4	

Drug Name	Tier	Requirements
INCASSIA ORAL TABLET	2	
INTROVALE ORAL TABLET	4	
ISIBLOOM ORAL TABLET	4	
JASMIEL ORAL TABLET	4	
JOYEAUX ORAL TABLET	4	
JULEBER ORAL TABLET	4	
JUNEL 1.5/30 ORAL TABLET	4	
JUNEL 1/20 ORAL TABLET	4	
JUNEL FE 1.5/30 ORAL TABLET	4	
JUNEL FE 1/20 ORAL TABLET	4	
JUNEL FE 24 ORAL TABLET	4	
KAITLIB FE ORAL TABLET CHEWABLE	4	
KARIVA ORAL TABLET	4	
KELNOR 1/35 ORAL TABLET	4	
KELNOR 1/50 ORAL TABLET	4	
KURVELO ORAL TABLET	4	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	4	
LARIN 1.5/30 ORAL TABLET	4	
LARIN 1/20 ORAL TABLET	4	
LARIN FE 1.5/30 ORAL TABLET	4	
LARIN FE 1/20 ORAL TABLET	4	
LAYOLIS FE ORAL TABLET CHEWABLE	4	
LEENA ORAL TABLET	4	
LESSINA ORAL TABLET	2	
LEVONEST ORAL TABLET	4	
<i>levonorgest-eth est & eth est oral tablet</i>	4	
<i>levonorgest-eth estrad 91-day oral tablet</i>	4	
<i>levonorgestrel-ethinyl estrad oral tablet</i>	4	
<i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg</i>	4	
LEVORA 0.15/30 (28) ORAL TABLET	4	
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY	3	
LO LOESTRIN FE ORAL TABLET	4	
LOESTRIN 1.5/30 (21) ORAL TABLET	4	
LOESTRIN 1/20 (21) ORAL TABLET	4	
LOESTRIN FE 1.5/30 ORAL TABLET	4	
LOESTRIN FE 1/20 ORAL TABLET	4	
LORYNA ORAL TABLET	4	
LOW-OGESTREL ORAL TABLET	4	

Drug Name	Tier	Requirements
LUTERA ORAL TABLET	4	
LYLEQ ORAL TABLET	4	
LYZA ORAL TABLET	4	
<i>marlissa oral tablet</i>	2	
MERZEE ORAL CAPSULE	4	
MIBELAS 24 FE ORAL TABLET CHEWABLE	4	
MICROGESTIN 1.5/30 ORAL TABLET	4	
MICROGESTIN 1/20 ORAL TABLET	4	
MICROGESTIN 24 FE ORAL TABLET	4	
MICROGESTIN FE 1.5/30 ORAL TABLET	4	
MICROGESTIN FE 1/20 ORAL TABLET	4	
MILI ORAL TABLET	2	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY	4	
NATAZIA ORAL TABLET	4	
NECON 0.5/35 (28) ORAL TABLET	4	
NEXPLANON SUBCUTANEOUS IMPLANT	3	
NEXTSTELLIS ORAL TABLET	4	
NIKKI ORAL TABLET	4	
NORA-BE ORAL TABLET	4	
<i>norelgestromin-eth estradiol transdermal patch weekly</i>	4	
<i>norethin ace-eth estrad-fe oral capsule</i>	4	
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>	4	
<i>norethin ace-eth estrad-fe oral tablet chewable</i>	4	
<i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg</i>	2	
<i>norethindrone oral tablet</i>	2	
<i>norethindron-ethinyl estrad-fe oral tablet</i>	4	
<i>norethin-eth estradiol-fe oral tablet chewable</i>	4	
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	4	
<i>norgestim-eth estrad triphasic oral tablet</i>	4	
NORTREL 0.5/35 (28) ORAL TABLET	4	
NORTREL 1/35 (21) ORAL TABLET	4	
NORTREL 1/35 (28) ORAL TABLET	4	
NORTREL 7/7/7 ORAL TABLET	4	
NUVARING VAGINAL RING	4	
NYLIA 1/35 ORAL TABLET	4	
NYLIA 7/7/7 ORAL TABLET	4	
NYMYO ORAL TABLET	4	
OCELLA ORAL TABLET	4	
PIMTREA ORAL TABLET	4	

Drug Name	Tier	Requirements
PORTIA-28 ORAL TABLET	2	
QUARTETTE ORAL TABLET	4	
RECLIPSEN ORAL TABLET	4	
RIVELSA ORAL TABLET	4	
SAFYRAL ORAL TABLET	4	
SETLAKIN ORAL TABLET	4	
SHAROBEL ORAL TABLET	4	
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	4	
SPRINTEC 28 ORAL TABLET	4	
SRONYX ORAL TABLET	4	
SYEDA ORAL TABLET	4	
TARINA 24 FE ORAL TABLET	4	
TARINA FE 1/20 EQ ORAL TABLET	4	
TILIA FE ORAL TABLET	4	
TRI-ESTARYLLA ORAL TABLET	4	
TRI-LEGEST FE ORAL TABLET	4	
TRI-LO-ESTARYLLA ORAL TABLET	4	
TRI-LO-SPRINTEC ORAL TABLET	4	
TRI-MILI ORAL TABLET	4	
TRI-NYMYO ORAL TABLET	4	
TRI-SPRINTEC ORAL TABLET	4	
TRIVORA (28) ORAL TABLET	4	
TRI-VYLIBRA LO ORAL TABLET	4	
TRI-VYLIBRA ORAL TABLET	4	
TURQOZ ORAL TABLET	4	
TYDEMY ORAL TABLET	4	
VELIVET ORAL TABLET	4	
VESTURA ORAL TABLET	4	
VIENVA ORAL TABLET	4	
VYFEMLA ORAL TABLET	4	
VYLIBRA ORAL TABLET	4	
WYMZYA FE ORAL TABLET CHEWABLE	4	
XULANE TRANSDERMAL PATCH WEEKLY	4	
YASMIN 28 ORAL TABLET	4	
YAZ ORAL TABLET	4	
ZAFEMY TRANSDERMAL PATCH WEEKLY	3	
ZOVIA 1/35 (28) ORAL TABLET	4	
Estrogens And Antiestrogens		
ACTIVELLA ORAL TABLET 1-0.5 MG	4	PA
<i>anastrozole oral tablet</i>	3	

Drug Name	Tier	Requirements
ANGELIQ ORAL TABLET	4	PA
ARIMIDEX ORAL TABLET	5	
AROMASIN ORAL TABLET	5	
BIJUVA ORAL CAPSULE 1-100 MG	4	PA
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	4	PA
CLIMARA TRANSDERMAL PATCH WEEKLY	4	PA
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	4	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML	4	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	4	
DIVIGEL TRANSDERMAL GEL	4	PA
DOTTI TRANSDERMAL PATCH TWICE WEEKLY	4	PA
DUAVEE ORAL TABLET	4	
ELESTRIN TRANSDERMAL GEL	4	PA
ESTRACE ORAL TABLET	4	PA
ESTRACE VAGINAL CREAM	4	
<i>estradiol oral tablet</i>	2	
<i>estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm</i>	4	PA
<i>estradiol transdermal patch twice weekly</i>	4	PA
<i>estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr</i>	2	PA
<i>estradiol transdermal patch weekly 0.1 mg/24hr</i>	4	PA
<i>estradiol vaginal cream</i>	2	
<i>estradiol vaginal tablet</i>	4	
<i>estradiol valerate intramuscular oil</i>	4	
<i>estradiol-norethindrone acet oral tablet</i>	4	PA
ESTRING VAGINAL RING 7.5 MCG/24HR	4	
EVAMIST TRANSDERMAL SOLUTION	4	PA
EVISTA ORAL TABLET	4	
<i>exemestane oral tablet</i>	4	
FARESTON ORAL TABLET	5	
FEMARA ORAL TABLET	4	
FEMRING VAGINAL RING	4	
FYAVOLV ORAL TABLET	4	PA
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	4	PA
IMVEXXY STARTER PACK VAGINAL INSERT	4	PA
JINTELI ORAL TABLET	3	PA
KISQALI FEMARA (200 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (91 EA per 28 days)

Drug Name	Tier	Requirements
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (91 EA per 28 days)
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	5	PA; QL (91 EA per 28 days)
<i>letrozole oral tablet</i>	3	
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY	4	PA
MENEST ORAL TABLET	4	
MENOSTAR TRANSDERMAL PATCH WEEKLY	4	PA
MIMVEY ORAL TABLET	4	PA
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY	4	PA
<i>norethindrone-eth estradiol oral tablet</i>	4	PA
OSPHENA ORAL TABLET	4	PA
PREMARIN ORAL TABLET	3	PA
PREMARIN VAGINAL CREAM	3	
PREMPHASE ORAL TABLET	3	
PREMPRO ORAL TABLET	3	
<i>raloxifene hcl oral tablet</i>	2	
SOLTAMOX ORAL SOLUTION	5	
<i>tamoxifen citrate oral tablet</i>	2	
<i>toremifene citrate oral tablet</i>	5	
VAGIFEM VAGINAL TABLET 10 MCG	4	
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY	4	PA
YUVAFEM VAGINAL TABLET	4	
Estrogens, Antiestrogens & Estrogen Agonist-Antagonists		
<i>estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)</i>	4	PA
Estrogens, Antiestrogens + Estrogen Agonist-Antagonists		
BIJUVA ORAL CAPSULE 0.5-100 MG	4	PA
Gonadotropins And Antigonadotropins		
ELIGARD SUBCUTANEOUS KIT	4	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	5	
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	4	
<i>leuprolide acetate (3 month) intramuscular injectable</i>	4	
<i>leuprolide acetate injection kit</i>	4	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	5	
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	5	
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	5	
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	5	

Drug Name	Tier	Requirements
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	5	
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	5	
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT	5	
MYFEMBREE ORAL TABLET	5	PA; QL (30 EA per 30 days)
ORGOVYX ORAL TABLET	5	PA
ORIAHNN ORAL CAPSULE THERAPY PACK	5	PA
ORILISSA ORAL TABLET 150 MG	5	PA; QL (30 EA per 30 days)
ORILISSA ORAL TABLET 200 MG	5	PA; QL (60 EA per 30 days)
SYNAREL NASAL SOLUTION	5	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	4	PA
Leptins		
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
Parathyroid And Antiparathyroid Agents		
<i>calcitonin (salmon) nasal solution</i>	4	
<i>cinacalcet hcl oral tablet 30 mg, 60 mg</i>	3	
<i>cinacalcet hcl oral tablet 90 mg</i>	5	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	5	PA; QL (2.4 ML per 28 days)
SENSIPAR ORAL TABLET	5	
<i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>	5	PA; QL (2.48 ML per 28 days)
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
Pituitary		
ACTHAR INJECTION GEL	5	PA
CORTROPHIN INJECTION GEL	5	PA
DDAVP ORAL TABLET 0.1 MG	5	
DDAVP ORAL TABLET 0.2 MG	4	
<i>desmopressin ace spray refrig nasal solution</i>	4	
<i>desmopressin acetate oral tablet</i>	2	
NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
SKYTROFA SUBCUTANEOUS CARTRIDGE	5	PA
SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
Progestins		
CRINONE VAGINAL GEL	4	PA
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	

Drug Name	Tier	Requirements
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	3	
<i>medroxyprogesterone acetate intramuscular suspension</i>	3	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	4	
<i>medroxyprogesterone acetate oral tablet</i>	2	
<i>megestrol acetate oral suspension 40 mg/ml</i>	3	
<i>megestrol acetate oral suspension 625 mg/5ml</i>	4	
<i>megestrol acetate oral tablet</i>	2	
<i>norethindrone acetate oral tablet</i>	2	
<i>progesterone oral capsule</i>	4	
PROMETRIUM ORAL CAPSULE	4	
PROVERA ORAL TABLET	4	
Somatostatin Agonists And Antagonists		
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	5	PA
<i>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</i>	4	
<i>octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml</i>	5	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA; QL (60 ML per 30 days)
Somatotropin Agonists And Antagonists		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	5	PA
GENOTROPIN SUBCUTANEOUS CARTRIDGE	5	PA
HUMATROPE INJECTION CARTRIDGE	5	PA
INCRELEX SUBCUTANEOUS SOLUTION	5	PA
NORDITROPIN FLEXPPO SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA

Drug Name	Tier	Requirements
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	5	PA
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG	5	PA
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG	4	PA
Thyroid And Antithyroid Agents		
CYTOMEL ORAL TABLET	4	
ERMEZA ORAL SOLUTION	4	
EUTHYROX ORAL TABLET 100 MCG, 125 MCG, 175 MCG, 50 MCG, 75 MCG, 88 MCG	2	
EUTHYROX ORAL TABLET 112 MCG, 137 MCG, 150 MCG, 200 MCG, 25 MCG	4	
<i>levothyroxine sodium oral capsule</i>	4	
<i>levothyroxine sodium oral tablet</i>	2	
LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 75 MCG, 88 MCG	2	
LEVOXYL ORAL TABLET 137 MCG, 50 MCG	4	
<i>liothyronine sodium oral tablet</i>	4	
<i>methimazole oral tablet</i>	2	
<i>propylthiouracil oral tablet</i>	4	
REZDIFFRA ORAL TABLET	5	PA; QL (30 EA per 30 days)
SYNTHROID ORAL TABLET	4	
THYQUIDITY ORAL SOLUTION	4	
TIROSINT ORAL CAPSULE	4	
TIROSINT-SOL ORAL SOLUTION	4	
UNITHROID ORAL TABLET 100 MCG, 125 MCG, 137 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	2	
UNITHROID ORAL TABLET 112 MCG, 150 MCG, 175 MCG, 200 MCG, 300 MCG	4	
Miscellaneous Therapeutic Agents		
5-Alpha-Reductase Inhibitors		
<i>dutasteride oral capsule</i>	3	
<i>dutasteride-tamsulosin hcl oral capsule</i>	4	
ENTADFI ORAL CAPSULE	4	PA; QL (30 EA per 30 days)
<i>finasteride oral tablet 5 mg</i>	2	
PROSCAR ORAL TABLET	4	
Alcohol Deterrents		
<i>disulfiram oral tablet</i>	4	

Drug Name	Tier	Requirements
Antidotes		
<i>acetylcysteine inhalation solution 10 %</i>	4	PA
<i>acetylcysteine inhalation solution 20 %</i>	2	PA
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg</i>	4	
<i>leucovorin calcium oral tablet 5 mg</i>	2	
Antigout Agents		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	2	
<i>allopurinol oral tablet 200 mg</i>	4	ST
<i>colchicine oral capsule</i>	4	
<i>colchicine oral tablet</i>	2	
COLCRYS ORAL TABLET	4	
<i>febuxostat oral tablet</i>	4	ST
GLOPERBA ORAL SOLUTION	4	ST
MITIGARE ORAL CAPSULE	4	
ULORIC ORAL TABLET	4	ST
Antisense Oligonucleotides		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL (0.8 ML per 28 days)
Bone Resorption Inhibitors		
ACTONEL ORAL TABLET 150 MG	4	ST; QL (1 EA per 30 days)
ACTONEL ORAL TABLET 35 MG	4	ST; QL (4 EA per 28 days)
<i>alendronate sodium oral solution</i>	2	QL (300 ML per 28 days)
<i>alendronate sodium oral tablet 10 mg</i>	2	QL (30 EA per 30 days)
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	2	QL (4 EA per 28 days)
ATELVIA ORAL TABLET DELAYED RELEASE	4	ST; QL (4 EA per 28 days)
BINOSTO ORAL TABLET EFFERVESCENT	4	ST; QL (4 EA per 28 days)
FOSAMAX ORAL TABLET 70 MG	4	ST; QL (4 EA per 28 days)
FOSAMAX PLUS D ORAL TABLET	4	ST; QL (4 EA per 28 days)
<i>ibandronate sodium oral tablet</i>	3	QL (1 EA per 30 days)
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL (2 ML per 365 days)
<i>risedronate sodium oral tablet 150 mg</i>	4	QL (1 EA per 30 days)
<i>risedronate sodium oral tablet 30 mg</i>	4	QL (120 EA per 365 days)
<i>risedronate sodium oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)</i>	4	QL (4 EA per 28 days)
<i>risedronate sodium oral tablet 5 mg</i>	4	QL (30 EA per 30 days)
<i>risedronate sodium oral tablet delayed release</i>	4	QL (4 EA per 28 days)
XGEVA SUBCUTANEOUS SOLUTION	5	PA

Drug Name	Tier	Requirements
Carbonic Anhydrase Inhibitors		
KEVEYIS ORAL TABLET	5	PA
ORMALVI ORAL TABLET	5	PA
Cariostatic Agents		
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	4	
Complement Inhibitors		
BERINERT INTRAVENOUS KIT	5	PA
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (27 ML per 30 days)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
<i>icatibant acetate subcutaneous solution prefilled syringe</i>	5	PA; QL (27 ML per 30 days)
ORLADEYO ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (27 ML per 30 days)
TAVNEOS ORAL CAPSULE	5	PA; QL (180 EA per 30 days)
Disease-Modifying Antirheumatic Drugs		
ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
ABRILADA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>adalimumab-aacf (2 pen) subcutaneous auto-injector kit</i>	5	PA
<i>adalimumab-aaty (1 pen) subcutaneous auto-injector kit 80 mg/0.8ml</i>	5	PA
<i>adalimumab-aaty (2 pen) subcutaneous auto-injector kit</i>	5	PA
<i>adalimumab-aaty (2 syringe) subcutaneous prefilled syringe kit</i>	5	PA
<i>adalimumab-adaz subcutaneous solution auto-injector</i>	5	PA
<i>adalimumab-adaz subcutaneous solution prefilled syringe</i>	5	PA
<i>adalimumab-adbm (2 pen) subcutaneous auto-injector kit</i>	5	PA
<i>adalimumab-adbm (2 syringe) subcutaneous prefilled syringe kit</i>	5	PA
<i>adalimumab-adbm(cd/uc/hs strt) subcutaneous auto-injector kit</i>	5	PA
<i>adalimumab-adbm(ps/uv starter) subcutaneous auto-injector kit</i>	5	PA

Drug Name	Tier	Requirements
<i>adalimumab-fkjp (2 pen) subcutaneous auto-injector kit</i>	5	PA
<i>adalimumab-fkjp (2 syringe) subcutaneous prefilled syringe kit</i>	5	PA
<i>adalimumab-ryvk (2 pen) subcutaneous auto-injector kit</i>	5	PA
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
ARAVA ORAL TABLET	5	
CIBINQO ORAL TABLET	5	PA; QL (30 EA per 30 days)
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	5	PA
COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	5	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	5	PA; QL (4.08 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	5	PA; QL (8 ML per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL (8 ML per 28 days)
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
HULIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
HULIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT	5	PA

Drug Name	Tier	Requirements
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	5	PA
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	5	PA; QL (6 EA per 365 days)
HUMIRA-PED \geq 40KG UC STARTER SUBCUTANEOUS PEN-INJECTOR KIT	5	PA; QL (8 EA per 365 days)
HUMIRA-PSORIASIS/UEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	5	PA; QL (6 EA per 365 days)
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
HYRIMOZ-PED<40KG CROHN STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
HYRIMOZ-PED \geq 40KG CROHN START SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
HYRIMOZ-PLAQ PSOR/UEIT START SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
IDACIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
IDACIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
IDACIO-CROHNS/UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
IDACIO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>leflunomide oral tablet</i>	4	
OLUMIANT ORAL TABLET	5	PA
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
OTEZLA ORAL TABLET 30 MG	5	PA
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG	5	PA

Drug Name	Tier	Requirements
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	4	PA
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	4	PA
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	5	PA
SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
XELJANZ ORAL SOLUTION	5	PA
XELJANZ ORAL TABLET	5	PA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	5	PA
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
YUFLYMA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
YUFLYMA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA
YUSIMRY SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
ZYMFENTRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT	5	PA; QL (2 EA per 28 days)
ZYMFENTRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA; QL (2 EA per 28 days)
Immunomodulatory Agents		
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	
AUBAGIO ORAL TABLET	5	ST; QL (30 EA per 30 days)
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	5	QL (4 EA per 28 days)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	5	QL (1 EA per 28 days)
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	5	ST; QL (120 EA per 30 days)
BETASERON SUBCUTANEOUS KIT	5	QL (15 EA per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	5	ST; QL (30 ML per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	5	ST; QL (12 ML per 28 days)
<i>dimethyl fumarate oral capsule delayed release 120 mg</i>	5	QL (14 EA per 365 days)
<i>dimethyl fumarate oral capsule delayed release 240 mg</i>	5	QL (60 EA per 30 days)

Drug Name	Tier	Requirements
<i>dimethyl fumarate starter pack oral capsule delayed release therapy pack</i>	5	QL (120 EA per 365 days)
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i> fingolimod hcl oral capsule</i>	5	QL (30 EA per 30 days)
GILENYA ORAL CAPSULE	5	QL (30 EA per 30 days)
<i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml</i>	5	QL (30 ML per 30 days)
<i>glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml</i>	5	QL (12 ML per 28 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	5	QL (30 ML per 30 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	5	QL (12 ML per 28 days)
JOENJA ORAL TABLET	5	PA; QL (60 EA per 30 days)
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	ST; QL (6 ML per 365 days)
MAYZENT ORAL TABLET 0.25 MG	5	ST; QL (120 EA per 30 days)
MAYZENT ORAL TABLET 1 MG, 2 MG	5	ST; QL (30 EA per 30 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	5	ST; QL (24 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	4	ST; QL (14 EA per 365 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	ST; QL (1 ML per 28 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (1 ML per 28 days)
PONVORY ORAL TABLET	5	ST; QL (30 EA per 30 days)
PONVORY STARTER PACK ORAL TABLET THERAPY PACK	5	ST; QL (28 EA per 365 days)
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	ST; QL (6 ML per 28 days)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	ST; QL (8.4 ML per 365 days)
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (6 ML per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	ST; QL (8.4 ML per 365 days)
TASCENSO ODT ORAL TABLET DISPERSIBLE	5	ST; QL (30 EA per 30 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG	5	QL (14 EA per 365 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE 240 MG	5	QL (60 EA per 30 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK	5	QL (120 EA per 365 days)

Drug Name	Tier	Requirements
<i>teriflunomide oral tablet</i>	5	QL (30 EA per 30 days)
THALOMID ORAL CAPSULE	5	PA
VELSIPITY ORAL TABLET	5	PA; QL (30 EA per 30 days)
VUMERITY ORAL CAPSULE DELAYED RELEASE	5	ST
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	5	PA; QL (14 EA per 365 days)
ZEPOSIA ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21)	5	PA; QL (56 EA per 365 days)
Immunosuppressive Agents		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA
AZASAN ORAL TABLET	4	PA
<i>azathioprine oral tablet</i>	4	PA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
CELLCEPT ORAL CAPSULE	5	PA
CELLCEPT ORAL SUSPENSION RECONSTITUTED	5	PA
CELLCEPT ORAL TABLET	5	PA
<i>cyclosporine modified oral capsule</i>	4	PA
<i>cyclosporine modified oral solution</i>	4	PA
<i>cyclosporine oral capsule</i>	4	PA
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG	4	PA
ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG	5	PA
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	5	PA
GENGRAF ORAL CAPSULE 100 MG, 25 MG	4	PA
GENGRAF ORAL SOLUTION	4	PA
IMURAN ORAL TABLET	4	PA
LUPKYNIS ORAL CAPSULE	5	
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	5	ST
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	5	ST
<i>mycophenolate mofetil oral capsule</i>	2	PA

Drug Name	Tier	Requirements
<i>mycophenolate mofetil oral suspension reconstituted</i>	5	PA
<i>mycophenolate mofetil oral tablet</i>	4	PA
<i>mycophenolate sodium oral tablet delayed release</i>	4	PA
MYFORTIC ORAL TABLET DELAYED RELEASE	5	PA
MYHIBBIN ORAL SUSPENSION	5	PA
NEORAL ORAL CAPSULE	4	PA
NEORAL ORAL SOLUTION	4	PA
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG	4	PA
PROGRAF ORAL CAPSULE 5 MG	5	PA
PROGRAF ORAL PACKET	4	PA
RAPAMUNE ORAL SOLUTION	5	PA
RAPAMUNE ORAL TABLET 1 MG, 2 MG	5	PA
SANDIMMUNE ORAL CAPSULE	4	PA
<i>sirolimus oral solution</i>	5	PA
<i>sirolimus oral tablet</i>	4	PA
<i>tacrolimus oral capsule</i>	4	PA
ZORTRESS ORAL TABLET	5	PA
Kallikrein-Kinin System Inhibitors		
FABHALTA ORAL CAPSULE	5	PA; QL (60 EA per 30 days)
TAKHZYRO SUBCUTANEOUS SOLUTION	5	PA
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
Other Miscellaneous Therapeutic Agents		
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR	5	PA; QL (60 EA per 30 days)
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	5	
<i>betaine oral powder</i>	5	
CARNITOR ORAL SOLUTION	4	
CARNITOR ORAL TABLET	4	
CERDELGA ORAL CAPSULE	5	PA
CYSTADANE ORAL POWDER	5	
CYSTAGON ORAL CAPSULE	4	
<i>dalfampridine er oral tablet extended release 12 hour</i>	2	PA; QL (60 EA per 30 days)
DEMSEER ORAL CAPSULE	5	
ELMIRON ORAL CAPSULE	5	
ENDARI ORAL PACKET	5	PA
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (2.34 ML per 28 days)
EVRYSDI ORAL SOLUTION RECONSTITUTED	5	PA

Drug Name	Tier	Requirements
FILSPARI ORAL TABLET	5	PA; QL (30 EA per 30 days)
FIRDAPSE ORAL TABLET	5	PA
GALAFOLD ORAL CAPSULE	5	PA; QL (14 EA per 28 days)
ISTURISA ORAL TABLET 1 MG	5	PA; QL (240 EA per 30 days)
ISTURISA ORAL TABLET 5 MG	5	PA; QL (60 EA per 30 days)
JAVYGTOR ORAL PACKET	5	
JAVYGTOR ORAL TABLET	5	
KUVAN ORAL PACKET	5	
KUVAN ORAL TABLET	5	
<i>levocarnitine oral solution</i>	4	
<i>levocarnitine oral tablet</i>	4	
LODOCO ORAL TABLET	4	PA; QL (30 EA per 30 days)
<i>metyrosine oral capsule</i>	5	
<i>miglustat oral capsule</i>	5	PA
<i>nitisinone oral capsule</i>	5	
NITYR ORAL TABLET	5	
ORFADIN ORAL CAPSULE 10 MG, 20 MG, 5 MG	5	
ORFADIN ORAL CAPSULE 2 MG	4	
ORFADIN ORAL SUSPENSION	5	
PROCYSBI ORAL PACKET	5	PA
RECORLEV ORAL TABLET	5	PA; QL (240 EA per 30 days)
REZUROCK ORAL TABLET	5	PA; QL (30 EA per 30 days)
RIVFLOZA SUBCUTANEOUS SOLUTION	5	PA; QL (1 ML per 28 days)
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML	5	PA; QL (0.8 ML per 28 days)
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	5	PA; QL (1 ML per 28 days)
<i>sapropterin dihydrochloride oral packet</i>	5	
<i>sapropterin dihydrochloride oral tablet</i>	5	
SKYCLARYS ORAL CAPSULE	5	PA; QL (90 EA per 30 days)
SOHONOS ORAL CAPSULE	5	PA
THIOLA EC ORAL TABLET DELAYED RELEASE	5	
THIOLA ORAL TABLET	5	
<i>tiopronin oral tablet</i>	5	
TYBOST ORAL TABLET	3	QL (30 EA per 30 days)
VIJOICE ORAL PACKET	5	PA; QL (30 EA per 30 days)
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	5	PA; QL (30 EA per 30 days)
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	5	PA; QL (60 EA per 30 days)
VOWST ORAL CAPSULE	5	PA

Drug Name	Tier	Requirements
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
YARGESA ORAL CAPSULE	5	PA
ZAVESCA ORAL CAPSULE	5	PA
Protective Agents		
MESNEX ORAL TABLET	5	
Respiratory Tract Agents		
Antifibrotic Agents		
ESBRIET ORAL CAPSULE	5	PA
ESBRIET ORAL TABLET	5	PA
OFEV ORAL CAPSULE	5	PA
<i>pirfenidone oral capsule</i>	5	PA
<i>pirfenidone oral tablet</i>	5	PA
Anti-Inflammatory Agents		
<i>cromolyn sodium inhalation nebulization solution</i>	3	PA
<i>cromolyn sodium oral concentrate</i>	4	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML, 200 MG/1.14ML	5	PA
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	4	PA
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	5	PA
GASTROCROM ORAL CONCENTRATE	5	
<i>montelukast sodium oral packet</i>	4	QL (30 EA per 30 days)
<i>montelukast sodium oral tablet</i>	2	QL (30 EA per 30 days)
<i>montelukast sodium oral tablet chewable</i>	2	QL (30 EA per 30 days)
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
SINGULAIR ORAL PACKET	4	QL (30 EA per 30 days)
SINGULAIR ORAL TABLET	4	QL (30 EA per 30 days)
SINGULAIR ORAL TABLET CHEWABLE	4	QL (30 EA per 30 days)
<i>zafirlukast oral tablet 10 mg</i>	3	QL (60 EA per 30 days)
<i>zafirlukast oral tablet 20 mg</i>	4	QL (60 EA per 30 days)
<i>zileuton er oral tablet extended release 12 hour</i>	5	QL (120 EA per 30 days)
ZYFLO ORAL TABLET	5	QL (120 EA per 30 days)

Drug Name	Tier	Requirements
Cystic Fibrosis Transmembrane Conductance Regulator Modulators		
KALYDECO ORAL PACKET	5	PA
KALYDECO ORAL TABLET	5	PA
ORKAMBI ORAL PACKET	5	PA; QL (56 EA per 28 days)
ORKAMBI ORAL TABLET	5	PA; QL (120 EA per 30 days)
SYMDEKO ORAL TABLET THERAPY PACK	5	PA
TRIKAFTA ORAL TABLET THERAPY PACK	5	PA
TRIKAFTA ORAL THERAPY PACK	5	PA
Mucolytic Agents		
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	5	PA
Phosphodiesterase Type 4 Inhibitors		
DALIRESP ORAL TABLET	4	
<i>roflumilast oral tablet</i>	4	
Respiratory Tract Agents, Miscellaneous		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5	PA
BRONCHITOL INHALATION CAPSULE	5	
GLASSIA INTRAVENOUS SOLUTION	5	PA
PROLASTIN-C INTRAVENOUS SOLUTION	5	PA
WINREVAIR SUBCUTANEOUS KIT	5	PA
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5	PA
Vasodilating Agents		
ADEMPAS ORAL TABLET	5	PA
<i>ambrisentan oral tablet</i>	5	PA
<i>bosentan oral tablet</i>	5	PA
LETAIRIS ORAL TABLET	5	PA
OPSUMIT ORAL TABLET	5	PA
OPSYNVI ORAL TABLET	5	
ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK	5	PA
ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK	5	PA
ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK	5	PA
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG	4	PA

Drug Name	Tier	Requirements
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG, 1 MG, 2.5 MG, 5 MG	5	PA
TRACLEER ORAL TABLET	5	PA
TRACLEER ORAL TABLET SOLUBLE	5	PA
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X48MCG	5	PA; QL (224 EA per 28 days)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG	5	PA; QL (112 EA per 28 days)
TYVASO DPI TITRATION KIT INHALATION POWDER 16 & 32 & 48 MCG	5	PA; QL (504 EA per 365 days)
UPTRAVI ORAL TABLET 1000 MCG, 400 MCG, 800 MCG	5	PA
UPTRAVI ORAL TABLET 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 600 MCG	5	PA; QL (60 EA per 30 days)
UPTRAVI TITRATION ORAL TABLET THERAPY PACK	5	PA
Skin And Mucous Membrane Agents		
Anti-Infectives		
CABTREO EXTERNAL GEL	4	PA
<i>clindamycin phos-benzoyl perox external gel 1.2-3.75 %</i>	4	
<i>clindamycin phosphate external gel 1 % (twice daily)</i>	2	
Anti-Inflammatory Agents		
KOURZEQ MOUTH/THROAT PASTE	4	
SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	
Antipruritics And Local Anesthetics		
LIDOCAN EXTERNAL PATCH	4	PA; QL (90 EA per 30 days)
Cell Stimulants And Proliferants		
ALTRENO EXTERNAL LOTION	4	PA
ATRALIN EXTERNAL GEL	4	PA
RETIN-A EXTERNAL CREAM	4	PA
RETIN-A EXTERNAL GEL	4	PA
RETIN-A MICRO EXTERNAL GEL	5	PA
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	4	PA
<i>tretinoin external cream</i>	3	PA
<i>tretinoin external gel</i>	4	PA
<i>tretinoin microsphere external gel 0.04 %, 0.1 %</i>	4	PA
<i>tretinoin microsphere pump external gel 0.08 %</i>	4	PA
TWYNEO EXTERNAL CREAM	4	PA
Skin And Mucous Membrane Agents, Misc		
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA

Drug Name	Tier	Requirements
FILSUEVZ EXTERNAL GEL	5	PA
LITFULO ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
<i>nitroglycerin rectal ointment</i>	4	
<i>podofilox external gel</i>	4	
ZORYVE EXTERNAL FOAM	4	PA
Skin And Mucous Membrane Preparations		
Anti-Infectives		
ACANYA EXTERNAL GEL	4	
<i>acyclovir external cream</i>	4	QL (5 GM per 30 days)
<i>acyclovir external ointment</i>	2	QL (30 GM per 30 days)
ALTABAX EXTERNAL OINTMENT	4	ST
BENZAMYCIN EXTERNAL GEL	4	
<i>benzoyl peroxide-erythromycin external gel</i>	3	
<i>ciclopirox external gel</i>	2	
<i>ciclopirox external shampoo</i>	2	
<i>ciclopirox external solution</i>	2	
<i>ciclopirox olamine external cream</i>	2	
<i>ciclopirox olamine external suspension</i>	3	
CLEOCIN VAGINAL CREAM	4	
CLEOCIN VAGINAL SUPPOSITORY	4	
CLEOCIN-T EXTERNAL LOTION	4	
CLINDACIN ETZ EXTERNAL SWAB	4	
CLINDACIN EXTERNAL FOAM	4	
CLINDAGEL EXTERNAL GEL	5	
<i>clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-5 %</i>	4	
<i>clindamycin phos-benzoyl perox external gel 1-5 %</i>	3	
<i>clindamycin phosphate external foam</i>	4	
<i>clindamycin phosphate external gel 1 %</i>	2	
<i>clindamycin phosphate external lotion</i>	2	QL (75 ML per 30 days)
<i>clindamycin phosphate external solution</i>	2	
<i>clindamycin phosphate external swab</i>	2	
<i>clindamycin phosphate vaginal cream</i>	4	
CLINDESSE VAGINAL CREAM	4	
<i>clotrimazole external cream</i>	2	
<i>clotrimazole external solution</i>	2	
<i>clotrimazole mouth/throat troche</i>	2	
<i>clotrimazole-betamethasone external cream</i>	2	
<i>clotrimazole-betamethasone external lotion</i>	4	
CROTAN EXTERNAL LOTION	4	

Drug Name	Tier	Requirements
DENAVIR EXTERNAL CREAM	4	QL (5 GM per 30 days)
<i>econazole nitrate external cream</i>	2	
EPSOLAY EXTERNAL CREAM	4	PA
ERTACZO EXTERNAL CREAM	5	
<i>ery external pad</i>	4	
ERYGEL EXTERNAL GEL	4	
<i>erythromycin external gel</i>	2	
<i>erythromycin external solution</i>	4	
<i>gentamicin sulfate external cream</i>	2	
<i>gentamicin sulfate external ointment</i>	2	
GYNAZOLE-1 VAGINAL CREAM	4	
<i>ivermectin external cream</i>	4	QL (45 GM per 30 days)
JUBLIA EXTERNAL SOLUTION	5	PA
<i>ketoconazole external cream</i>	2	QL (90 GM per 30 days)
<i>ketoconazole external foam</i>	4	
<i>ketoconazole external shampoo 2 %</i>	2	
KETODAN EXTERNAL FOAM	4	
KLARON EXTERNAL LOTION	4	
LOPROX EXTERNAL SHAMPOO	4	
<i>luliconazole external cream</i>	4	
LUZU EXTERNAL CREAM	4	
<i>mafenide acetate external packet</i>	4	
<i>malathion external lotion</i>	4	
METROCREAM EXTERNAL CREAM	4	
METROGEL EXTERNAL GEL	4	
METROLOTION EXTERNAL LOTION	5	
<i>metronidazole external cream</i>	2	
<i>metronidazole external gel</i>	4	
<i>metronidazole external lotion</i>	4	
<i>metronidazole vaginal gel</i>	3	
<i>miconazole 3 vaginal suppository</i>	4	
<i>mupirocin calcium external cream</i>	3	
<i>mupirocin external ointment</i>	2	QL (110 GM per 30 days)
<i>naftifine hcl external cream</i>	4	
<i>naftifine hcl external gel 2 %</i>	4	
NAFTIN EXTERNAL GEL	4	
NATROBA EXTERNAL SUSPENSION	4	
NEUAC EXTERNAL GEL	4	
NORITATE EXTERNAL CREAM	5	
NYAMYC EXTERNAL POWDER	2	QL (120 GM per 30 days)

Drug Name	Tier	Requirements
<i>nystatin external cream</i>	2	
<i>nystatin external ointment</i>	2	
<i>nystatin external powder</i>	2	QL (120 GM per 30 days)
NYSTOP EXTERNAL POWDER	2	QL (120 GM per 30 days)
ONEXTON EXTERNAL GEL	4	
OVIDE EXTERNAL LOTION	4	
<i>oxiconazole nitrate external cream</i>	4	
OXISTAT EXTERNAL LOTION	4	
<i>penciclovir external cream</i>	4	QL (5 GM per 30 days)
<i>permethrin external cream</i>	2	
<i>selenium sulfide external lotion</i>	2	
SILVADENE EXTERNAL CREAM	4	
<i>silver sulfadiazine external cream</i>	2	
SOOLANTRA EXTERNAL CREAM	4	QL (45 GM per 30 days)
<i>spinosad external suspension</i>	4	
SSD EXTERNAL CREAM	2	
<i>sulfacetamide sodium (acne) external lotion</i>	4	
SULFAMYLON EXTERNAL CREAM	4	
<i>tavaborole external solution</i>	4	PA
<i>terconazole vaginal cream 0.4 %</i>	2	
<i>terconazole vaginal cream 0.8 %</i>	3	
<i>terconazole vaginal suppository</i>	4	
VANDAZOLE VAGINAL GEL	4	
XACIATO VAGINAL GEL	4	
XERESE EXTERNAL CREAM	5	
ZOVIRAX EXTERNAL CREAM	4	QL (5 GM per 30 days)
ZOVIRAX EXTERNAL OINTMENT	4	QL (30 GM per 30 days)
Anti-Inflammatory Agents		
ALA SCALP EXTERNAL LOTION	4	
<i>ala-cort external cream 1 %</i>	4	
<i>alclometasone dipropionate external cream</i>	2	
<i>alclometasone dipropionate external ointment</i>	2	
<i>amcinonide external cream</i>	4	
<i>amcinonide external ointment</i>	4	
ANUSOL-HC EXTERNAL CREAM	4	
APEXICON E EXTERNAL CREAM	5	
<i>betamethasone dipropionate aug external cream</i>	2	
<i>betamethasone dipropionate aug external gel</i>	4	
<i>betamethasone dipropionate aug external lotion</i>	2	
<i>betamethasone dipropionate aug external ointment</i>	2	

Drug Name	Tier	Requirements
<i>betamethasone dipropionate external cream</i>	2	
<i>betamethasone dipropionate external lotion</i>	3	
<i>betamethasone dipropionate external ointment</i>	3	
<i>betamethasone valerate external cream</i>	2	
<i>betamethasone valerate external foam</i>	4	
<i>betamethasone valerate external lotion</i>	3	
<i>betamethasone valerate external ointment</i>	2	
BRYHALI EXTERNAL LOTION	4	
<i>budesonide rectal foam 2 mg</i>	4	
<i>calcipotriene-betameth diprop external ointment</i>	4	
<i>calcipotriene-betameth diprop external suspension</i>	4	
<i>clobetasol propionate e external cream</i>	4	
<i>clobetasol propionate emulsion external foam</i>	4	
<i>clobetasol propionate external cream</i>	2	
<i>clobetasol propionate external foam</i>	3	
<i>clobetasol propionate external gel</i>	2	
<i>clobetasol propionate external liquid</i>	3	
<i>clobetasol propionate external lotion</i>	4	
<i>clobetasol propionate external ointment</i>	2	
<i>clobetasol propionate external shampoo</i>	2	
<i>clobetasol propionate external solution</i>	3	
CLOBEX EXTERNAL LOTION	5	
CLOBEX EXTERNAL SHAMPOO	5	
CLOBEX SPRAY EXTERNAL LIQUID	4	
<i>clocortolone pivalate external cream</i>	4	
CLODAN EXTERNAL SHAMPOO	4	
CORDRAN EXTERNAL CREAM 0.05 %	5	
CORDRAN EXTERNAL LOTION	5	
CORDRAN EXTERNAL TAPE	5	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL	4	
<i>desonide external cream</i>	2	
<i>desonide external gel</i>	4	
<i>desonide external lotion</i>	4	
<i>desonide external ointment</i>	2	
DESOWEN EXTERNAL CREAM	4	
<i>desoximetasone external cream</i>	4	
<i>desoximetasone external gel</i>	4	
<i>desoximetasone external liquid</i>	4	
<i>desoximetasone external ointment</i>	4	
<i>diclofenac sodium external gel 3 %</i>	2	PA

Drug Name	Tier	Requirements
<i>diclofenac sodium external solution 1.5 %</i>	2	
<i>diclofenac sodium external solution 2 %</i>	5	
<i>diflorasone diacetate external cream</i>	4	
<i>diflorasone diacetate external ointment</i>	4	
DIPROLENE EXTERNAL OINTMENT	4	
DUOBRII EXTERNAL LOTION	5	
ENSTILAR EXTERNAL FOAM	5	
EUCRISA EXTERNAL OINTMENT	4	PA
<i>fluocinolone acetonide external cream</i>	4	
<i>fluocinolone acetonide external ointment</i>	3	
<i>fluocinolone acetonide external solution</i>	2	
<i>fluocinolone acetonide scalp external oil</i>	2	
<i>fluocinonide emulsified base external cream</i>	3	
<i>fluocinonide external cream</i>	3	
<i>fluocinonide external gel</i>	2	
<i>fluocinonide external ointment</i>	2	
<i>fluocinonide external solution</i>	2	
<i>flurandrenolide external cream</i>	4	
<i>flurandrenolide external lotion</i>	4	
<i>fluticasone propionate external cream</i>	2	
<i>fluticasone propionate external lotion</i>	4	
<i>fluticasone propionate external ointment</i>	4	
<i>halcinonide external cream</i>	4	
<i>halobetasol propionate external cream</i>	2	
<i>halobetasol propionate external foam</i>	4	
<i>halobetasol propionate external ointment</i>	3	
HALOG EXTERNAL CREAM	5	
HALOG EXTERNAL OINTMENT	4	
HALOG EXTERNAL SOLUTION	4	
<i>hydrocortisone (perianal) external cream 2.5 %</i>	2	
<i>hydrocortisone butyrate external cream</i>	4	
<i>hydrocortisone butyrate external lotion</i>	4	
<i>hydrocortisone butyrate external ointment</i>	4	
<i>hydrocortisone butyrate external solution</i>	4	
<i>hydrocortisone external cream 1 %</i>	2	
<i>hydrocortisone external lotion 2.5 %</i>	2	
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	2	
<i>hydrocortisone rectal enema</i>	4	
<i>hydrocortisone valerate external cream</i>	2	
<i>hydrocortisone valerate external ointment</i>	4	

Drug Name	Tier	Requirements
KENALOG EXTERNAL AEROSOL SOLUTION	5	
LEXETTE EXTERNAL FOAM	5	
LOCOID EXTERNAL LOTION	5	
LOCOID LIPOCREAM EXTERNAL CREAM	4	
<i>mometasone furoate external cream</i>	2	
<i>mometasone furoate external ointment</i>	2	
<i>mometasone furoate external solution</i>	2	
NEO-SYNALAR EXTERNAL CREAM	5	
<i>nystatin-triamcinolone external cream</i>	2	
<i>nystatin-triamcinolone external ointment</i>	2	
PANDEL EXTERNAL CREAM	5	
PENNSAID EXTERNAL SOLUTION	5	
PROCTO-MED HC EXTERNAL CREAM	2	
PROCTOSOL HC EXTERNAL CREAM	2	
PROCTOZONE-HC EXTERNAL CREAM	2	
SYNALAR EXTERNAL CREAM	4	
SYNALAR EXTERNAL OINTMENT	4	
TACLONEX EXTERNAL SUSPENSION	5	
TEXACORT EXTERNAL SOLUTION	4	
TOPICORT EXTERNAL CREAM	4	
TOPICORT EXTERNAL GEL	4	
TOPICORT EXTERNAL OINTMENT 0.05 %	4	
TOPICORT SPRAY EXTERNAL LIQUID	4	
TOVET EXTERNAL FOAM	4	
<i>triamcinolone acetonide external cream</i>	2	
<i>triamcinolone acetonide external lotion</i>	2	
<i>triamcinolone acetonide external ointment</i>	2	
<i>triamcinolone acetonide mouth/throat paste</i>	2	
TRIDERM EXTERNAL CREAM 0.5 %	4	
UCERIS RECTAL FOAM	4	
ULTRAVATE EXTERNAL LOTION	4	
VANOS EXTERNAL CREAM	5	
VERDESO EXTERNAL FOAM	5	
Antipruritics And Local Anesthetics		
<i>doxepin hcl external cream</i>	4	
<i>hydrocortisone ace-pramoxine external cream 1-1 %</i>	4	
<i>lidocaine external ointment 5 %</i>	2	QL (150 GM per 30 days)
<i>lidocaine external patch 5 %</i>	4	PA; QL (90 EA per 30 days)
<i>lidocaine hcl external solution</i>	2	
<i>lidocaine-prilocaine external cream</i>	2	QL (30 GM per 30 days)

Drug Name	Tier	Requirements
LIDODERM EXTERNAL PATCH	5	PA; QL (90 EA per 30 days)
PLIAGLIS EXTERNAL CREAM	4	
PROCTOFOAM HC EXTERNAL FOAM	4	
PRUDOXIN EXTERNAL CREAM	5	
ZONALON EXTERNAL CREAM	5	
ZTLIDO EXTERNAL PATCH	4	PA; QL (90 EA per 30 days)
Depigmenting And Pigmenting Agents		
<i>methoxsalen rapid oral capsule</i>	5	
Emollients, Demulcents, And Protectants		
<i>ammonium lactate external cream</i>	2	
<i>ammonium lactate external lotion</i>	2	
Skin And Mucous Membrane Agents, Misc		
ABSORICA LD ORAL CAPSULE	5	
ABSORICA ORAL CAPSULE	5	
ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 40 MG	4	
<i>acitretin oral capsule</i>	4	
ACZONE EXTERNAL GEL 5 %	5	
ACZONE EXTERNAL GEL 7.5 %	4	
<i>adapalene external cream</i>	4	PA
<i>adapalene external gel 0.3 %</i>	4	PA
<i>adapalene external pad</i>	5	PA
<i>adapalene-benzoyl peroxide external gel</i>	4	PA
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
AKLIEF EXTERNAL CREAM	4	PA
AMNESTEEM ORAL CAPSULE	4	
ARAZLO EXTERNAL LOTION	4	
<i>azelaic acid external gel</i>	4	
AZELEX EXTERNAL CREAM	4	
<i>bexarotene external gel</i>	5	PA
<i>brimonidine tartrate external gel</i>	4	
<i>calcipotriene external cream</i>	4	QL (120 GM per 30 days)
<i>calcipotriene external foam</i>	5	
<i>calcipotriene external ointment</i>	4	
<i>calcipotriene external solution</i>	3	
<i>calcitriol external ointment</i>	4	
CARAC EXTERNAL CREAM	5	
CLARAVIS ORAL CAPSULE	4	
<i>clindamycin-tretinoin external gel</i>	4	PA
CONDYLOX EXTERNAL GEL	4	

Drug Name	Tier	Requirements
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	5	PA
<i>dapsone external gel</i>	4	
DIFFERIN EXTERNAL CREAM	4	PA
DIFFERIN EXTERNAL GEL 0.3 %	4	PA
DIFFERIN EXTERNAL LOTION	4	PA
<i>doxycycline oral capsule delayed release</i>	4	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA
EFUDEX EXTERNAL CREAM	4	
ELIDEL EXTERNAL CREAM	4	
EPIDUO EXTERNAL GEL	4	PA
EPIDUO FORTE EXTERNAL GEL	4	PA
FABIOR EXTERNAL FOAM	4	
FINACEA EXTERNAL FOAM	4	
FINACEA EXTERNAL GEL	4	
<i>fluorouracil external cream 5 %</i>	2	
<i>fluorouracil external solution</i>	4	
HYFTOR EXTERNAL GEL	5	PA
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>imiquimod external cream 5 %</i>	2	
<i>imiquimod pump external cream</i>	2	
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	4	
<i>isotretinoin oral capsule 25 mg, 35 mg</i>	5	
KLISYRI EXTERNAL OINTMENT	5	
MIRVASO EXTERNAL GEL	4	
OPZELURA EXTERNAL CREAM	5	PA; QL (240 GM per 28 days)
ORACEA ORAL CAPSULE DELAYED RELEASE	4	ST
PANRETIN EXTERNAL GEL	5	
<i>pimecrolimus external cream</i>	4	
<i>podofilox external solution</i>	4	
RECTIV RECTAL OINTMENT	4	
REGRANEX EXTERNAL GEL	5	
SANTYL EXTERNAL OINTMENT	4	

Drug Name	Tier	Requirements
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
SORILUX EXTERNAL FOAM	5	
SOTYKTU ORAL TABLET	5	PA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	5	PA
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
<i>tacrolimus external ointment</i>	4	
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	5	PA
TARGRETIN EXTERNAL GEL	5	PA
<i>tazarotene external cream</i>	4	
<i>tazarotene external foam</i>	4	
<i>tazarotene external gel</i>	4	
TAZORAC EXTERNAL CREAM	4	
TAZORAC EXTERNAL GEL	4	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
VALCHLOR EXTERNAL GEL	5	PA
VECTICAL EXTERNAL OINTMENT	5	
VELTIN EXTERNAL GEL	4	PA
VEREGEN EXTERNAL OINTMENT	5	
VTAMA EXTERNAL CREAM	5	PA
WINLEVI EXTERNAL CREAM	4	
ZENATANE ORAL CAPSULE	4	
ZIANA EXTERNAL GEL	4	PA
ZORYVE EXTERNAL CREAM 0.3 %	4	PA
ZYCLARA PUMP EXTERNAL CREAM	5	
Smooth Muscle Relaxants		
<i>Genitourinary Smooth Muscle Relaxants</i>		
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	4	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	PA
DETROL ORAL TABLET	4	PA

Drug Name	Tier	Requirements
<i>fesoterodine fumarate er oral tablet extended release 24 hour 4 mg</i>	3	
<i>fesoterodine fumarate er oral tablet extended release 24 hour 8 mg</i>	4	
<i>flavoxate hcl oral tablet</i>	4	PA
GEMTESA ORAL TABLET	4	
<i>mirabegron er oral tablet extended release 24 hour</i>	4	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	3	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	2	PA
<i>oxybutynin chloride oral solution</i>	4	PA
<i>oxybutynin chloride oral tablet 5 mg</i>	2	PA
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	4	PA
<i>solifenacin succinate oral tablet</i>	3	PA
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	4	PA
<i>tolterodine tartrate oral tablet</i>	4	PA
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
<i>tropium chloride er oral capsule extended release 24 hour</i>	4	PA
<i>tropium chloride oral tablet</i>	3	PA
VESICARE LS ORAL SUSPENSION	4	PA
VESICARE ORAL TABLET	4	PA
Respiratory Smooth Muscle Relaxants		
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	
<i>theophylline er oral tablet extended release 12 hour</i>	4	
<i>theophylline er oral tablet extended release 24 hour 400 mg</i>	3	
<i>theophylline er oral tablet extended release 24 hour 600 mg</i>	4	
<i>theophylline oral solution</i>	4	
Vitamins		
Multivitamin Preparations		
<i>prenatal oral tablet 27-1 mg</i>	2	
Vitamin D		
<i>calcitriol oral capsule</i>	2	
<i>calcitriol oral solution</i>	4	
<i>doxercalciferol oral capsule</i>	4	
<i>paricalcitol oral capsule</i>	4	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	5	
ROCALTROL ORAL CAPSULE	4	
ROCALTROL ORAL SOLUTION	4	
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KETODAN.....	113	<i>lansoprazole</i>	79	LEVOXYL.....	99
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KLARON.....	113	LENVIMA (12 MG DAILY DOSE).....	21	<i>liothyronine sodium</i>	99
KLISYRI.....	119	LENVIMA (14 MG DAILY DOSE).....	21	LIPITOR.....	34
KLONOPIN.....	53	LENVIMA (18 MG DAILY DOSE).....	21	LIPOFEN.....	34
KLOR-CON.....	72	LENVIMA (20 MG DAILY DOSE).....	21	LIQREV.....	42
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KLOR-CON M10.....	72	LENVIMA (4 MG DAILY DOSE).....	21	<i>lisinopril</i>	40
KLOR-CON M15.....	72	LENVIMA (8 MG DAILY DOSE).....	21	<i>lisinopril-hydrochlorothiazide</i>	40
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LOESTRIN FE 1/20.....	92	LYTGOBI (12 MG DAILY DOSE).....	21	<i>meprobamate</i>	60
LOFENA.....	45	LYTGOBI (16 MG DAILY DOSE).....	21	MEPRON.....	14
LOKELMA.....	71	LYTGOBI (20 MG DAILY DOSE).....	21	<i>mercaptapurine</i>	21
LOMOTIL.....	77	LYUMJEV.....	88	<i>meropenem</i>	10
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<i>losartan potassium-hctz</i>	40	<i>marlissa</i>	93	<i>methamphetamine hcl</i>	50
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<i>loteprednol etabonate</i>	76	MAVENCLAD (10 TABS).....	106	<i>methitest</i>	84
LOTREL.....	37	MAVENCLAD (4 TABS).....	106	<i>methocarbamol</i>	28
<i>lovastatin</i>	35	MAVENCLAD (5 TABS).....	106	<i>methotrexate sodium</i>	21
LOVAZA.....	35	MAVENCLAD (6 TABS).....	106	<i>methotrexate sodium (pf)</i>	21
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<i>lubiprostone</i>	81	MAVYRET.....	16	METHYLIN.....	50
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<i>luliconazole</i>	113	MAXALT-MLT.....	57	<i>methylphenidate hcl</i>	50
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LUMRYZ.....	61	MAYZENT.....	105	<i>methylphenidate hcl er (la)</i>	50
LUPKYNIS.....	106	<i>meclizine hcl</i>	77	<i>methylphenidate hcl er (osm)</i>	50
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