

Administered by



**Providence**  
Health Plan

**2026**

**Prescription Drug  
5-Tier Formulary**

**Formulary B: Preventive  
Formulary B: Harrison**

This Prescription Drug Formulary is accurate as of the last update date and is subject to change. This is not a guarantee of coverage or benefits. Please check your member handbook to verify coverage or call Providence Health Plan Customer Service at 503-574-7500 or 1-800-878-4445 (TTY: 711). Service is available five days a week, Monday through Friday, between 8 a.m. and 6 p.m.

# The Providence formulary

## What is a formulary?

Your prescription drug plan provides coverage for drugs listed on the Providence formulary (list of covered drugs). The formulary includes drugs that are dispensed by a pharmacy and self-administered. Developed in collaboration with Providence Health Plan, physicians, nurses, and pharmacists, the formulary includes FDA-approved prescription generic, brand-name and specialty drugs that are considered effective and safe for use for a variety of conditions.

- Generic drugs, which are available only after the brand-name patent expires:
  - Have the same active ingredient formula as the brand-name drug and
  - Are tested by the Food and Drug Administration (FDA) to be as safe and effective as the brand-name drug.
- Brand-name drugs are those that are sold under a specific name or trademark by the company that originally got FDA approval. These drugs are protected by patents and typically cost more than generic drugs
- Specialty drugs are those that require special delivery, handling, administration, and monitoring by a pharmacist.
  - These drugs are listed in the Providence formulary with a status of “Specialty Drug,” and are available typically through our preferred specialty pharmacy Credena Health
  - These drugs are typically limited to a 30-day supply

## How do I find drugs on the formulary?

You and your healthcare provider can search the formulary to find effective, quality drugs that minimize your out-of-pocket expenses.

There are two ways to search this formulary document:

1. By medical condition category (for example: drugs used to treat heart conditions are listed under the category, *Cardiovascular Agents*).
2. By index (provides an alphabetical listing of drugs included in the formulary and the page number they are listed on).

You can also search for your drugs on the “Drug Search” online tool for your formulary found at: <https://www.providencehealthplan.com/members/pharmacy-resources>

## What if my drug is not on the formulary?

Providence Health Plan strives to provide a comprehensive formulary of safe, effective, and affordable drugs. There may be times that you require a drug that is not on the formulary. If you currently take a prescription drug that is not on the formulary, or your provider would like to start you on a drug that is not listed on the formulary, you may contact customer service to confirm coverage for that drug. If the prescription drug is not covered, your doctor may request a formulary exception.

There are some drugs that are excluded from coverage under your prescription drug benefit. Refer to your plan documents for a full list of benefit exclusions. Some examples include, but are not limited to:

- Drugs that are not approved by the Food & Drug Administration (FDA)
- Drugs that are available without a prescription (known as over-the-counter drugs), unless they are required to be covered by the government (see ACA Preventive Drugs below)

## What does the formulary tell me about the coverage of my drugs?

This formulary provides you with information about what tier the drug is on and any restrictions or limitations that may be on the drug.

The first column of the chart lists the “Drug Name”

- Brand-name drugs are CAPITALIZED (for example, JARDIANCE®)
- Generic drugs are listed in lower-case italics (for example, *rosuvastatin*)

The second column of the chart lists the “Tier”

- This lets you know the tier that the drug will be covered at. Drugs on lower tiers usually have lower costs associated with them.
- Refer to your member contract, handbook and/or benefit summary to determine what amount you will pay at the pharmacy for drugs on that tier. This may vary depending on whether you have met your deductible, if applicable.

The third column of the chart lists the “Notes”

- This lets you know if there are any restrictions, limitations, or special requirements for coverage of your drug.
- Some examples of restrictions are prior authorizations and step therapy.

See the sections below for explanations regarding tiers and restrictions/limitations.

## Formulary updates

The formulary may be updated every month. Providence Health Plan’s Pharmacy and Therapeutics (P&T) Committee (comprised of various clinical providers and pharmacists who practice in the communities we serve) continuously reviews the latest evidence to identify opportunities to promote safe, effective, and affordable drug therapy.

Generally, the formulary status of a drug covered by your prescription drug coverage will not change during the year unless:

- The drug becomes available in generic form;
- There are safety or effectiveness concerns raised about the prescription drug; or
- The P&T Committee determines that changes to the formulary would be in the best overall interest of members.

## Drug Tiers

Tiers represent the cost you may pay for a drug. The specific cost for the tier will be outlined in your benefit summary. The tier levels for this formulary are outlined below:

Tier Name	Tier Value	Definition
<b>ACA Preventive</b>	<b>0</b>	Covered in full, zero cost share
<b>Preferred Generic</b>	<b>1</b>	Generic drugs with high value
<b>Non-Preferred Generic</b>	<b>2</b>	All other generic drugs
<b>Preferred Brand</b>	<b>3</b>	High-value brand-name drugs
<b>Non-Preferred Brand</b>	<b>4</b>	All other non-specialty brand-name drugs
<b>Specialty</b>	<b>5</b>	Specialty drugs (brand-name and generic)*

\*Specialty drugs may be found on other tiers and will be designated as a "S" on the formulary list in the Notes column

## Restrictions/Limitations

The following abbreviations may be found within the formulary list:

Abbreviation	Description	Explanation
<b>PA</b>	Prior Authorization Required	You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, Providence Health Plan may not cover this drug.
<b>QL</b>	Quantity Limit Applies	There are limits to the amount of this drug that is covered per prescription or within a specific time frame.
<b>ST</b>	Step Therapy Required	This means that you must first try another drug to treat your medical condition. This drug may only be covered if the other drug does not work for you.
<b>S</b>	Specialty Drug: Requires use of Specialty Pharmacy	This drug may only be filled at a contracted Specialty pharmacy, such as Credena Health. Prescriptions may be limited to a 30-day supply.
<b>LA</b>	Limited Access Drug	This drug may only be filled at certain pharmacies per the drug manufacturer. Credena Health may not be able to provide some of these drugs since they are limited to only a few pharmacies.  Contact Customer Service at 877-216-3644 (TTY: 711), Monday – Friday, 8 a.m. to 6 p.m. (Pacific Time). for more information

Prior authorization is a process to review a prescription drug for coverage before it is dispensed to you.

- Many factors (including the potential for side effects, what conditions the drug is approved for use in by the FDA, and the clinical value of the drug) are considered before making the decision to require prior authorization of a prescription drug.
- A limited number of drugs require prior authorization review; any drugs requiring prior authorization are indicated as such in the formulary.
- Keep in mind, the formulary may contain other suitable options:
  - You and your provider may wish to discuss the possibility of changing your prescription to an effective formulary alternative.
  - Otherwise, your doctor may submit a prior authorization request on your behalf.

Quantity Limits are a restriction to the amount of drug you can get from your pharmacy at a time. These are typically put in place to make sure that you the drug you are taking is done so in a safe and effective way.

- For example, sumatriptan tablets (used for migraine headaches) are limited to nine (9) tablets every 30 days. This is because using too much of this drug can cause more frequent and more severe headaches.

Step therapy is a form of prior authorization. Its purpose is to confirm if drugs generally considered "first-line" therapy based on clinical evidence have already been tried.

- If they have been tried, the drug requiring step therapy will automatically be approved.
- In the event these drugs are not tried first, cannot be tried first, or your prescription drug history is not available (for example, if you are a new patient for Providence Health Plan), prior authorization is required.

## Preventive Drugs

### **Affordable Care Act (ACA) Preventive Drugs**

Your plan, in accordance with The Patient Protection and Affordable Care Act, provides coverage for drugs without imposing a copayment, coinsurance, or deductible. Coverage is provided for a variety of drug categories, including routine vaccinations recommended by the Advisory Committee on Immunization Practices (ACIP).

These drugs will be listed on the ACA Preventive tier of your formulary or will be indicated as "ACA eligible" if there are limitations to coverage (such as age restrictions or need for qualifying conditions).

Please note: If a generic equivalent becomes available for a brand-name ACA Preventive Drug, the brand-name drug may no longer be covered in full. The brand-name version may be subject to your applicable brand name cost share and, depending on your benefit, the difference in cost between brand and generic.

### ***Core Preventive Drugs (applies to Formulary B: Preventive only)***

The Core Preventive drug list is made up of drugs that are considered “first-line” to prevent the onset of a disease or condition. These drugs are important tools to maintain good health and well-being.

These drugs are indicated with “PV” on the formulary. These drugs are available to you at no cost (\$0) and will not be subject to your deductible. Any restrictions/limitations will still apply (such as prior authorization or quantity limits).

## **For More Information**

Learn more about your prescription drug coverage by reviewing the pharmacy resource site at: <https://www.providencehealthplan.com/members/pharmacy-resources>

## **Know more, Save more**

Providence Health Plan wants to help you to make the most of your prescription drug coverage. That’s why we strive to provide you with the information you need to make smart decisions about drugs and your health.

We encourage you to be knowledgeable about your prescription drug benefits. Information is available on your benefit summary, in your member contract/handbook, on the [Providence Health Plan](#) website, and on [myProvidence](#) (a portal for specific information related to your plan and benefits).

## **Tips for maximizing your benefit**

### **Get a 90-day Supply of your Maintenance Drugs**

- Maintenance drugs are those typically prescribed to treat long-term or chronic conditions, such as diabetes, high blood pressure and high cholesterol.
- A 90-day supply of maintenance drug is available through participating mail-order pharmacies, as well as through preferred retail pharmacies.
- Your 90-day supply copay or coinsurance applies and will often save you money over time.

### **Use Preferred or Mail-Order Pharmacies**

- You have access to an expansive network of participating pharmacies nationwide at discounted rates.
- A preferred retail pharmacy can provide up to a 90-day supply of prescription drugs.
- A mail-order pharmacy can provide up to a 90-day supply of maintenance drugs and specializes in direct delivery to your home.

Search your [pharmacy directory](#) for a pharmacy near you.

## Try Generic Alternatives

- Making the switch from brand to generic drug can save you money.
- There are two types of generic drugs:
  - *Generic equivalent* - A generic equivalent is a generic drug that has the same active ingredient, dosage form and strength as its brand-name counterpart. Generic equivalents are an important option to brand-name prescription drugs because they cost less.
    - Example: Crestor<sup>®</sup>, a brand-name drug commonly used to treat high cholesterol, is now available in generic form under the name rosuvastatin. Crestor<sup>®</sup> and rosuvastatin are identical drugs – the only difference is that one costs more than the other.
  - *Generic alternative* - A generic alternative is a generic drug used to treat the same condition as a brand-name drug. It is not, however, the exact same drug as the brand-name drug. According to clinical evidence, a generic alternative can be expected to treat the same condition as well as the brand-name option. Generic alternatives are an important option for prescription drugs for which there is no generic available.
    - Example: duloxetine, the generic form of Cymbalta<sup>®</sup>, may be prescribed instead of brand-name Fetzima<sup>®</sup> for the treatment of depression.

Remember, even if a generic equivalent is not yet available for your drug, safe and effective generic alternatives may be available to treat most common conditions. Using these options can provide cost savings.

Coverage of brand name drugs may change when a generic equivalent becomes available. The tier placement of the brand-name drug may change, it may require a formulary exception (a form of Prior Authorization), or the brand-name drug may no longer be covered. The formulary document may not immediately reflect this change upon the release of the generic formulation to the market.

Depending on your benefit, if you request a brand-name drug, or if your provider prescribes a brand-name drug when a generic is available, you may be responsible for the difference in cost between the brand-name and generic drug, in addition to the brand-name drug Copayment or Coinsurance indicated on the Benefit Summary. Your total cost, however, will never exceed the actual cost of the drug. The difference in cost between the brand-name and generic drug will not be applied toward your Calendar Year Deductible and Out-of-Pocket Maximum, and you will continue to be responsible for the difference in cost after your Calendar Year Deductible and Out-of-Pocket Maximum is met.

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Drug Name	Tier	Notes
<b>ANALGESIC, ANTI-INFLAMMATORY OR ANTIPYRETIC</b>		
<b>Analgesic Opioid Agonists</b>		
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	2	PA; QL (15 EA per 30 days); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</i>	2	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydromorphone oral liquid 1 mg/ml</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg</i>	2	PA; QL (1 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydromorphone rectal suppository 3 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
METHADONE INTENSOL ORAL CONCENTRATE 10 MG/ML	2	QL (4 ML per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>methadone oral concentrate 10 mg/ml</i>	2	QL (4 ML per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>methadone oral solution 10 mg/5 ml</i>	2	QL (20 ML per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>methadone oral solution 5 mg/5 ml</i>	2	QL (40 ML per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)

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Drug Name	Tier	Notes
<i>methadone oral tablet 10 mg, 5 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>methadone oral tablet, soluble 40 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
METHADOSE ORAL TABLET, SOLUBLE 40 MG	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>morphine oral tablet 15 mg, 30 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	4	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone oral capsule 5 mg</i>	2	QL (10 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone oral concentrate 20 mg/ml</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone oral solution 5 mg/5 ml</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)

Drug Name	Tier	Notes
<i>oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	2	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>tramadol oral tablet 50 mg</i>	2	PA; QL (8 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>tramadol oral tablet extended release 24 hr 100 mg</i>	2	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>tramadol oral tablet extended release 24 hr 200 mg, 300 mg</i>	2	PA; QL (1 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>tramadol oral tablet, er multiphase 24 hr 100 mg</i>	2	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day PA age <18)
<i>tramadol oral tablet, er multiphase 24 hr 200 mg</i>	2	PA; QL (1 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day PA age <18)
XTAMPZA ER ORAL CAP,SPRINKL,ER12HR(DONT CRUSH) 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG	4	PA; QL (2 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)

### Analgesic Opioid Codeine Combinations

<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>acetaminophen-codeine oral tablet 300-15 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day PA age <18)
<i>acetaminophen-codeine oral tablet 300-30 mg, 300-60 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)

Drug Name	Tier	Notes
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Hydrocodone And Non-Salicylate Combinations</b>		
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml</i>	2	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Hydrocodone And Nsaid Combinations</b>		
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Hydrocodone Combinations</b>		
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml</i>	2	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<b>Analgesic Opioid Oxycodone And Non-Salicylate Combinations</b>		
<i>oxycodone-acetaminophen oral tablet 10-325 mg</i>	2	QL (8 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Oxycodone Combinations</b>		
<i>oxycodone-acetaminophen oral tablet 10-325 mg</i>	2	QL (8 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Partial-Mixed Agonists</b>		
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	2	PA; QL (4 EA per 28 days); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<i>butorphanol nasal spray, non-aerosol 10 mg/ml</i>	2	QL (5 ML per 30 days); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Tramadol And Non-Salicylate Combinations</b>		
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	2	PA; QL (10 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Opioid Tramadol Combinations</b>		
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	2	PA; QL (10 EA per 1 day); QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Analgesic Or Antipyretic Non-Opioid/Sedative Combinations</b>		
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	2	
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg, 50-325-40 mg</i>	2	

Drug Name	Tier	Notes
<i>butalbital-acetaminophen-caff oral solution 50-325-40 mg/15 ml</i>	2	PA; QL (PA age <18)
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	2	
FIORICET ORAL CAPSULE 50-300-40 MG	2	
TENCON ORAL TABLET 50-325 MG	2	
<b>Anti-Inflammatory - Antimitotics</b>		
LODOCO ORAL TABLET 0.5 MG	4	PA
<b>Anti-Inflammatory - Complement (C5) Receptor Inhibitors</b>		
TAVNEOS ORAL CAPSULE 10 MG	5	PA; QL (6 EA per 1 day); LA; S
<b>Anti-Inflammatory Tumor Necrosis Factor Inhibiting Agnts, Non-Selective</b>		
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	5	PA; QL (4 ML per 28 days); S
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
<b>Anti-Inflammatory Tumor Necrosis Factor Inhibiting Agnts, Tnf-Alpha Sel</b>		
<i>adalimumab-aaty subcutaneous auto-injector, kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S
<i>adalimumab-aaty subcutaneous auto-injector, kit 80 mg/0.8 ml</i>	5	PA; QL (1 EA per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 20 mg/0.2 ml</i>	5	PA; QL (2 SYR per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S
ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (3 EA per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 80 mg/0.8 ml</i>	5	PA; QL (1.6 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 10 mg/0.1 ml</i>	5	PA; QL (0.2 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 20 mg/0.2 ml</i>	5	PA; QL (0.4 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S

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Drug Name	Tier	Notes
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
CIMZIA SUBCUTANEOUS SYRINGE KIT 200 MG/ML	5	PA; QL (1 mL per 28 days); S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (2 mL per 28 days); S
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; QL (1 ML per 28 days); S
SIMPONI SUBCUTANEOUS PEN INJECTOR 50 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 28 days); S
SIMPONI SUBCUTANEOUS SYRINGE 50 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML	5	PA; QL (2 mL per 28 days); LA; S
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML	5	PA; QL (2 mL per 28 days); LA; S
<b>Dmard - Anti-Inflammatory Tumor Necrosis Factor Inhibiting Agents</b>		
<i>adalimumab-aaty subcutaneous auto-injector, kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S
<i>adalimumab-aaty subcutaneous auto-injector, kit 80 mg/0.8 ml</i>	5	PA; QL (1 EA per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 20 mg/0.2 ml</i>	5	PA; QL (2 SYR per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S

Drug Name	Tier	Notes
ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (3 EA per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 80 mg/0.8 ml</i>	5	PA; QL (1.6 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 10 mg/0.1 ml</i>	5	PA; QL (0.2 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 20 mg/0.2 ml</i>	5	PA; QL (0.4 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
CIMZIA SUBCUTANEOUS SYRINGE KIT 200 MG/ML	5	PA; QL (1 mL per 28 days); S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	5	PA; QL (4 ML per 28 days); S
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	5	PA; QL (4 ML per 28 days); S
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (2 mL per 28 days); S
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; QL (1 ML per 28 days); S
SIMPONI SUBCUTANEOUS PEN INJECTOR 50 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S

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Drug Name	Tier	Notes
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 28 days); S
SIMPONI SUBCUTANEOUS SYRINGE 50 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
<b>Dmard - Antimalarials</b>		
<i>hydroxychloroquine oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	2	
<b>Dmard - Antimetabolites</b>		
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium oral tablet 2.5 mg</i>	2	
<b>Dmard - Antinflammatory, Select. Costimulation Modulator, T-Cell Inhib.</b>		
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	5	PA; QL (4 ML per 28 days); S
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML	5	PA; QL (4 ML per 28 days); S
ORENCIA SUBCUTANEOUS SYRINGE 50 MG/0.4 ML	5	PA; QL (1.6 ML per 28 days); S
ORENCIA SUBCUTANEOUS SYRINGE 87.5 MG/0.7 ML	5	PA; QL (2.8 ML per 28 days); S
<b>Dmard - Immunosuppressives</b>		
<i>azathioprine oral tablet 50 mg</i>	2	
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	2	
<i>cyclophosphamide oral tablet 50 mg</i>	2	
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	2	
<i>cyclosporine modified oral solution 100 mg/ml</i>	2	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	2	
GENGRAF ORAL CAPSULE 100 MG, 25 MG	2	
GENGRAF ORAL SOLUTION 100 MG/ML	2	
<i>mycophenolate mofetil oral capsule 250 mg</i>	2	
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	2	
<i>mycophenolate mofetil oral tablet 500 mg</i>	2	
<b>Dmard - Interleukin-1 Receptor Antagonist (IL-1Ra)</b>		
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	5	PA; QL (0.67 ML per 1 day); S
<b>Dmard - Interleukin-6 (IL-6) Receptor Inhibitors, Monoclonal Antibody</b>		
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	5	PA; QL (3.6 ML per 28 days); S

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Drug Name	Tier	Notes
TYENNE SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	5	PA; QL (3.6 ML per 28 days); S
<b>Dmard - Janus Kinase (Jak) Inhibitors</b>		
RINVOQ LQ ORAL SOLUTION 1 MG/ML	5	PA; QL (12 ML per 1 day); S
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	5	PA; QL (1 EA per 1 day); S
XELJANZ ORAL SOLUTION 1 MG/ML	5	PA; QL (10 ML per 1 day); S
XELJANZ ORAL TABLET 5 MG	5	PA; QL (2 EA per 1 day); S
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG	5	PA; QL (1 EA per 1 day); S
<b>Dmard - Other</b>		
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	2	
<i>penicillamine oral capsule 250 mg</i>	4	S
<i>sulfasalazine oral tablet 500 mg</i>	2	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i>	2	
<b>Dmard - Phosphodiesterase-4 (Pde4) Inhibitors</b>		
OTEZLA ORAL TABLET 20 MG, 30 MG	5	PA; QL (2 EA per 1 day); S
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; QL (1 clm per 365 days); S
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)-20 MG (4)-30 MG (19)	5	PA; QL (1 clm per 365 days)
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK 10-20-30-75 MG	5	PA; QL (41 EA per 28 days); S
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG	5	PA; QL (1 EA per 1 day); S
<b>Dmard - Pyrimidine Synthesis Inhibitors</b>		
<i>leflunomide oral tablet 10 mg, 20 mg</i>	2	
<b>Immunomodulator - Rho Kinase Inhibitor</b>		
REZUROCK ORAL TABLET 200 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Immunomodulator B-Lymphocyte Stimulator (Blys)-Specific Inhibitor Mcab</b>		
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	5	PA; QL (4 ML per 28 days); S
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	5	PA; QL (4 ML per 28 days); S
<b>Nsaid Analgesic And Prostaglandin Analog Combinations</b>		
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 50-200 mg-mcg, 75-200 mg-mcg</i>	2	

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Drug Name	Tier	Notes
<b>Nsaid Analgesic, Cyclooxygenase-2 (Cox-2) Selective Inhibitors</b>		
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	2	
<b>Nsaid Analgesics (Cox Non-Specific) - Anthranilic Acid Derivatives</b>		
<i>meclofenamate oral capsule 100 mg, 50 mg</i>	2	
<i>mefenamic acid oral capsule 250 mg</i>	2	
<b>Nsaid Analgesics (Cox Non-Specific) - Other</b>		
<i>ketorolac injection solution 15 mg/ml, 30 mg/ml (1 ml)</i>	2	QL (20 ML per 28 days)
<i>ketorolac injection syringe 15 mg/ml, 30 mg/ml</i>	2	QL (20 ML per 28 days)
<i>ketorolac intramuscular solution 60 mg/2 ml</i>	2	QL (10 ML per 28 days)
<i>ketorolac intramuscular syringe 60 mg/2 ml</i>	2	QL (10 ML per 28 days)
<i>ketorolac oral tablet 10 mg</i>	2	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	2	
<i>sulindac oral tablet 150 mg, 200 mg</i>	2	
<b>Nsaid Analgesics (Cox Non-Specific) - Oxicam Derivatives</b>		
<i>meloxicam oral suspension 7.5 mg/5 ml</i>	1	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	1	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	2	
<b>Nsaid Analgesics (Cox Non-Specific) - Phenylacetic Acid Derivatives</b>		
<i>diclofenac potassium oral powder in packet 50 mg</i>	2	PA; QL (9 EA per 30 days)
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac sodium oral tablet, delayed release (drlec) 25 mg, 50 mg, 75 mg</i>	2	
<b>Nsaid Analgesics (Cox Non-Specific) - Propionic Acid Derivatives</b>		
<i>flurbiprofen oral tablet 100 mg</i>	2	
IBU ORAL TABLET 400 MG, 600 MG, 800 MG	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ketoprofen oral capsule 50 mg</i>	2	
LURBIRO ORAL TABLET 100 MG	2	
<i>naproxen oral suspension 125 mg/5 ml</i>	2	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>oxaprozin oral tablet 600 mg</i>	2	

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Drug Name	Tier	Notes
<b>Nsaid Analgesics (Cyclooxygenase Inhibitors-Non-Selective)</b>		
<i>diclofenac potassium oral powder in packet 50 mg</i>	2	PA; QL (9 EA per 30 days)
<b>Nsaid Analgesics, (Cox Non-Specific) - Indole Acetic Acid Derivatives</b>		
<i>etodolac oral capsule 200 mg, 300 mg</i>	2	
<i>etodolac oral tablet 400 mg, 500 mg</i>	2	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	1	
<i>indomethacin oral capsule, extended release 75 mg</i>	1	
<b>Salicylate Analgesic And Sedative Combinations</b>		
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	2	
<b>Salicylate Analgesics</b>		
<i>diflunisal oral tablet 500 mg</i>	2	
<b>ANESTHETICS</b>		
<b>General Anesthetic - Parenteral, Benzodiazepines</b>		
<i>midazolam (pf) injection solution 1 mg/ml, 5 mg/ml</i>	2	
<i>midazolam (pf) injection syringe 2 mg/2 ml (1 mg/ml), 5 mg/ml</i>	2	
<i>midazolam injection solution 1 mg/ml, 5 mg/ml</i>	2	
<i>midazolam intravenous syringe 150 mg/30 ml (5 mg/ml)</i>	2	
<b>Local Anesthetic - Amides</b>		
<i>lidocaine hcl laryngotracheal solution 4 %</i>	2	
<b>ANORECTAL PREPARATIONS</b>		
<b>Anal Fissure Pain/Treatment Agents - Nitrates</b>		
<i>nitroglycerin rectal ointment 0.4 % (w/w)</i>	2	
<b>Anorectal - Glucocorticoids</b>		
ANUSOL-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	2	
PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
PROCTOSOL HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	

Drug Name	Tier	Notes
<b>Anorectal - Hemorrhoidal Rectal Glucocorticoid-Local Anesthetic Comb</b>		
PROCTOFOAM HC RECTAL FOAM 1-1 %	4	
<b>ANTIDOTES AND OTHER REVERSAL AGENTS</b>		
<b>Antidote - Acetaminophen Poisoning</b>		
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	2	
<b>Chelating Agents - Copper</b>		
<i>penicillamine oral capsule 250 mg</i>	4	S
<i>trientine oral capsule 250 mg</i>	5	PA; LA; S
<b>Chelating Agents - Iron</b>		
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	5	S
<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	5	S
<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	5	S
<i>deferiprone oral tablet 1,000 mg, 500 mg</i>	5	LA; S
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE 1,000 MG	5	LA; S
FERRIPROX ORAL SOLUTION 100 MG/ML	5	LA; S
<b>Chelating Agents - Lead Poisoning</b>		
CHEMET ORAL CAPSULE 100 MG	4	
<b>Mu-Opioid Receptor Antagonists, Peripherally-Acting</b>		
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	4	PA; QL (1 EA per 1 day)
SYMPROIC ORAL TABLET 0.2 MG	4	PA; QL (1 EA per 1 day)
<b>Opioid Reversal Agents - Opioid Antagonists</b>		
KLOXXADO NASAL SPRAY, NON-AEROSOL 8 MG/ACTUATION	4	
<i>naloxone injection solution 0.4 mg/ml</i>	2	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	2	
<i>naloxone nasal spray, non-aerosol 4 mg/actuation</i>	2	
OPVEE NASAL SPRAY, NON-AEROSOL 2.7 MG/ACTUATION	3	
ZIMHI INJECTION SYRINGE 5 MG/0.5 ML	4	
ZURNAI INJECTION AUTO-INJECTOR 1.5 MG/0.5 ML	4	

Drug Name	Tier	Notes
<b>ANTI-INFECTIVE AGENTS</b>		
<b>Aminoglycoside Antibiotic</b>		
<i>neomycin oral tablet 500 mg</i>	1	
<b>Aminopenicillin Antibiotic - Beta-Lactamase Inhibitor Combinations</b>		
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	2	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg</i>	2	
<i>amoxicillin-pot clavulanate oral tablet 500-125 mg, 875-125 mg</i>	1	
<b>Aminopenicillin Antibiotic</b>		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	1	
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	1	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR 775 MG	4	
PIVYA ORAL TABLET 185 MG	4	ST; QL (3 EA per 1 day)
<b>Anthelmintic Agents - Benzimidazole Derivatives</b>		
<i>albendazole oral tablet 200 mg</i>	2	PA
EMVERM ORAL TABLET, CHEWABLE 100 MG	4	PA; QL (12 EA per 30 days)
<b>Anthelmintic Agents - Macrocyclic Lactones</b>		
<i>ivermectin oral tablet 3 mg</i>	2	
<b>Anthelmintic Agents Other</b>		
<i>praziquantel oral tablet 600 mg</i>	2	QL (12 EA per 30 days)
<b>Antibacterial Folate Antagonist - Other Combinations</b>		
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml</i>	2	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	1	
<b>Antibacterial Folate Antagonist Others</b>		
PRIMSOL ORAL SOLUTION 50 MG/5 ML	4	
<i>trimethoprim oral tablet 100 mg</i>	2	

Drug Name	Tier	Notes
<b>Antibacterial Nitrofurans Derivatives</b>		
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	2	
<i>nitrofurantoin monohydr/m-cryst oral capsule 100 mg</i>	2	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	2	
<b>Antibacterial Other</b>		
<i>fosfomycin tromethamine oral packet 3 gram</i>	2	
<b>Antifungal - Allylamines</b>		
<i>terbinafine hcl oral tablet 250 mg</i>	1	
<b>Antifungal - Amphoteric Polyene Macrolides</b>		
<i>nystatin oral tablet 500,000 unit</i>	2	
<b>Antifungal - Fluorinated Pyrimidine-Type Agents</b>		
<i>flucytosine oral capsule 250 mg, 500 mg</i>	2	
<b>Antifungal - Imidazoles</b>		
<i>ketoconazole oral tablet 200 mg</i>	2	
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET 50 MG	4	
<b>Antifungal - Triazoles</b>		
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	5	PA; S
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	1	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1	
<i>itraconazole oral capsule 100 mg</i>	2	
<i>itraconazole oral solution 10 mg/ml</i>	2	
<i>posaconazole oral suspension 200 mg/5 ml (40 mg/ml)</i>	2	PA
<i>posaconazole oral tablet, delayed release (dr/ec) 100 mg</i>	2	PA
<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	2	PA
<i>voriconazole oral tablet 200 mg, 50 mg</i>	2	PA
<b>Antifungal Other</b>		
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	2	
<i>griseofulvin microsize oral tablet 500 mg</i>	2	
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	2	
<b>Anti-Infective Immunologic Adjuvants - Interferons</b>		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	5	PA; S

Drug Name	Tier	Notes
<b>Antileprotic - Immunomodulators</b>		
THALOMID ORAL CAPSULE 100 MG, 50 MG	5	LA; S
<b>Antileprotic - Sulfone Agents</b>		
<i>dapsone oral tablet 100 mg, 25 mg</i>	2	
<b>Antimalarial Combinations</b>		
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	2	
COARTEM ORAL TABLET 20-120 MG	4	
<b>Antimalarials</b>		
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	2	
<i>hydroxychloroquine oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	2	
<i>mefloquine oral tablet 250 mg</i>	2	
<i>primaquine oral tablet 26.3 mg (15 mg base)</i>	2	
<i>pyrimethamine oral tablet 25 mg</i>	2	
<i>quinine sulfate oral capsule 324 mg</i>	2	
<b>Antiprotozoal Agents - Nitroimidazole Derivatives</b>		
<i>benznidazole oral tablet 100 mg, 12.5 mg</i>	5	QL (2 to 12 years old (60 EA per 365 days)); S
<b>Antiprotozoal Agents - Other</b>		
<i>atovaquone oral suspension 750 mg/5 ml</i>	2	
<b>Antiprotozoal Agents (Antiparasitic) - 5-Nitrothiazolyl Derivatives</b>		
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	4	PA; QL (180 ML per 30 days)
<i>nitazoxanide oral tablet 500 mg</i>	2	PA; QL (6 EA per 30 days)
<b>Antiprotozoal-Antibacterial 1St Generation 2-Methyl-5-Nitroimidazole</b>		
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
<b>Antiprotozoal-Antibacterial 2Nd Generation 2-Methyl-5-Nitroimidazole</b>		
<i>tinidazole oral tablet 250 mg, 500 mg</i>	2	
<b>Antiretroviral - Capsid Inhibitors</b>		
SUNLENCA ORAL TABLET 300 MG	5	LA; S

Drug Name	Tier	Notes
YEZTUGO ORAL TABLET 300 MG	5	QL (4 EA per 28 days); Note (COVERED IN FULL WITH SPECIFIC DIAGNOSIS - FOR MEMBERS NOT INFECTED WITH HIV AND ARE AT HIGHER RISK OF HIV INFECTION); LA; S
<b>Antiretroviral - Ccr5 Co-Receptor Antagonist</b>		
<i>maraviroc oral tablet 150 mg</i>	2	QL (2 EA per 1 day)
<i>maraviroc oral tablet 300 mg</i>	2	
SELZENTRY ORAL SOLUTION 20 MG/ML	4	
<b>Antiretroviral - Cd4 Attachment Inhibitors</b>		
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	5	S
<b>Antiretroviral - Hiv-1 Integrase Strand Transfer Inhibitors</b>		
ISENTRESS HD ORAL TABLET 600 MG	4	
ISENTRESS ORAL POWDER IN PACKET 100 MG	4	
ISENTRESS ORAL TABLET 400 MG	4	
ISENTRESS ORAL TABLET,CHEWABLE 100 MG, 25 MG	4	
TIVICAY ORAL TABLET 50 MG	4	
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	4	QL (6 EA per 1 day)
<b>Antiretroviral - Integrase Inhibitor And Nnrti Combinations</b>		
JULUCA ORAL TABLET 50-25 MG	3	
<b>Antiretroviral - Integrase Inhibitor And Nrti Combinations</b>		
DOVATO ORAL TABLET 50-300 MG	3	
<b>Antiretroviral - Non-Nucleoside Reverse Transcriptase Inhib (Nnrti)</b>		
EDURANT ORAL TABLET 25 MG	4	
EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG	4	QL (6 EA per 1 day)
<i>efavirenz oral tablet 600 mg</i>	2	
<i>etravirine oral tablet 100 mg, 200 mg</i>	2	
INTELENCE ORAL TABLET 25 MG	4	
<i>nevirapine oral suspension 50 mg/5 ml</i>	2	
<i>nevirapine oral tablet 200 mg</i>	2	

Drug Name	Tier	Notes
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	2	
PIFELTRO ORAL TABLET 100 MG	4	
<i>rilpivirine hcl oral tablet 25 mg</i>	2	
<b>Antiretroviral - Nucleoside And Nucleotide Analog Rtis Combinations</b>		
CIMDUO ORAL TABLET 300-300 MG	4	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	Note (COVERED IN FULL WITH SPECIFIC DIAGNOSIS - FOR MEMBERS NOT INFECTED WITH HIV AND ARE AT HIGHER RISK OF HIV INFECTION)
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	2	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	2	Note (COVERED IN FULL WITH SPECIFIC DIAGNOSIS - FOR MEMBERS NOT INFECTED WITH HIV AND ARE AT HIGHER RISK OF HIV INFECTION)
<b>Antiretroviral - Nucleoside Reverse Transcriptase Inhibitors (Nrti)</b>		
<i>abacavir oral solution 20 mg/ml</i>	2	
<i>abacavir oral tablet 300 mg</i>	2	
<i>emtricitabine oral capsule 200 mg</i>	2	
EMTRIVA ORAL SOLUTION 10 MG/ML	4	
<i>lamivudine oral solution 10 mg/ml</i>	2	
<i>lamivudine oral tablet 150 mg, 300 mg</i>	2	
<b>Antiretroviral - Nucleotide Analog Reverse Transcriptase Inhibitors</b>		
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	2	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	4	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	4	
<b>Antiretroviral - Pre-Exposure Prophylaxis (Prep)</b>		
YEZTUGO ORAL TABLET 300 MG	5	QL (4 EA per 28 days); Note (COVERED IN FULL WITH SPECIFIC DIAGNOSIS - FOR MEMBERS NOT INFECTED WITH HIV AND ARE AT HIGHER RISK OF HIV INFECTION); LA; S

Drug Name	Tier	Notes
<b>Antiretroviral Combinations - Protease Inhibitors</b>		
EVOTAZ ORAL TABLET 300-150 MG	4	
KALETRA ORAL SOLUTION 400-100 MG/5 ML	4	
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	2	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG-MG	4	
<b>Antiretroviral- Nucleoside And Nucleotide Analogs, Protease Inhibitors</b>		
SYMTUZA ORAL TABLET 800-150-200-10 MG	5	S
<b>Antiretroviral-Integrase Inhibitor, Nucleoside And Nucleotide Rti Comb</b>		
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	3	
GENVOYA ORAL TABLET 150-150-200-10 MG	3	
STRIBILD ORAL TABLET 150-150-200-300 MG	4	
<b>Antiretroviral-Nucleoside Analogs And Integrase Inhibitor Combinations</b>		
TRIUMEQ ORAL TABLET 600-50-300 MG	3	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	3	
<b>Antiretroviral-Nucleoside Reverse Transcriptase Inhibitors (Nrti) Comb</b>		
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	2	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	2	
<b>Antiretroviral-Nucleoside, Nucleotide Analogs And Non-Nucleoside Rti</b>		
DELSTRIGO ORAL TABLET 100-300-300 MG	4	
<i>efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg</i>	2	
<i>efavirenz-lamivu-tenofov disop oral tablet 400-300-300 mg, 600-300-300 mg</i>	2	
<i>emtricitita-rilpivirine-tenof df oral tablet 200-25-300 mg</i>	2	
ODEFSEY ORAL TABLET 200-25-25 MG	3	
<b>Antitubercular - D-Alanine Analogs</b>		
<i>cycloserine oral capsule 250 mg</i>	2	
<b>Antitubercular - Diarylquinoline Antibiotics</b>		
SIRTURO ORAL TABLET 100 MG, 20 MG	5	LA; S
<b>Antitubercular - Isonicotinic Acid Derivatives</b>		
<i>isoniazid oral solution 50 mg/5 ml</i>	1	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1	
<b>Antitubercular - Niacinamide Derivatives</b>		
<i>pyrazinamide oral tablet 500 mg</i>	2	
<b>Antitubercular - Rifamycin And Derivatives</b>		
PRIFTIN ORAL TABLET 150 MG	4	
<i>rifabutin oral capsule 150 mg</i>	2	
<i>rifampin oral capsule 150 mg, 300 mg</i>	2	
<b>Antitubercular Agents Other</b>		
<i>ethambutol oral tablet 100 mg, 400 mg</i>	2	
<b>Cephalosporin Antibiotics - 1St Generation</b>		
<i>cefadroxil oral capsule 500 mg</i>	2	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	2	
<i>cefadroxil oral tablet 1 gram</i>	2	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	1	
<i>cephalexin oral capsule 750 mg</i>	2	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<b>Cephalosporin Antibiotics - 2Nd Generation</b>		
<i>cefaclor oral capsule 250 mg, 500 mg</i>	2	
<i>cefaclor oral suspension for reconstitution 250 mg/5 ml</i>	2	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	2	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	2	
<b>Cephalosporin Antibiotics - 3Rd Generation</b>		
<i>cefdinir oral capsule 300 mg</i>	2	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>cefixime oral capsule 400 mg</i>	2	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	2	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	2	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	2	
<b>Cmv Antiviral Agent - Nucleoside Analogs</b>		
<i>valganciclovir oral recon soln 50 mg/ml</i>	5	QL (36 ML per 1 day); S
<i>valganciclovir oral tablet 450 mg</i>	5	QL (4 EA per 1 day); S

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Drug Name	Tier	Notes
<b>Cmv Antiviral Agent - Terminase Complex Inhibitors</b>		
PREVYMIS ORAL PELLETS IN PACKET 120 MG, 20 MG	5	PA; QL (4 EA per 1 day); S
PREVYMIS ORAL TABLET 240 MG	5	PA; QL (2 EA per 1 day); S
PREVYMIS ORAL TABLET 480 MG	5	PA; QL (1 EA per 1 day); S
<b>Fluoroquinolone Antibiotics</b>		
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	1	
<i>levofloxacin oral solution 250 mg/10 ml</i>	2	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>moxifloxacin oral tablet 400 mg</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
<b>Glycopeptide Antibiotics</b>		
<i>vancomycin oral capsule 125 mg, 250 mg</i>	2	
<i>vancomycin oral recon soln 25 mg/ml, 50 mg/ml</i>	2	
<b>Hepatitis B Treatment- Nucleoside Analogs (Antiviral)</b>		
BARACLUDE ORAL SOLUTION 0.05 MG/ML	5	S
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	2	S
<i>lamivudine oral tablet 100 mg</i>	2	
<b>Hepatitis B Treatment- Nucleotide Analogs (Antiviral)</b>		
<i>adefovir oral tablet 10 mg</i>	2	QL (1 EA per 1 day)
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	2	
VEMLIDY ORAL TABLET 25 MG	3	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	4	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	4	
<b>Hepatitis C - Interferons</b>		
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	5	S
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	5	S
<b>Hepatitis C - Ns5a Inhibitor And Ns3/4A Protease Inhibitor Combination</b>		
MAVYRET ORAL PELLETS IN PACKET 50-20 MG	5	PA; S
MAVYRET ORAL TABLET 100-40 MG	5	PA; S

Drug Name	Tier	Notes
<b>Hepatitis C - Ns5a, Ns3/4A Protease, Nucleo.Ns5b Polymerase Inhib Comb</b>		
VOSEVI ORAL TABLET 400-100-100 MG	5	PA; S
<b>Hepatitis C - Ns5b Polymerase And Ns5a Inhibitor Combinations</b>		
<i>ledipasvir-sofosbuvir oral tablet 90-400 mg</i>	5	PA; S
<i>sofosbuvir-velpatasvir oral tablet 400-100 mg</i>	5	PA; S
<b>Hepatitis C - Nucleoside Analogs</b>		
<i>ribavirin oral capsule 200 mg</i>	2	
<i>ribavirin oral tablet 200 mg</i>	2	
<b>Herpes Antiviral Agent - Purine Analogs</b>		
<i>acyclovir oral capsule 200 mg</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	2	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	1	
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	1	
<b>Herpes Antiviral Agent - Thymidine Analogs</b>		
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	2	
<b>Influenza Antiviral Agents - Neuraminidase Inhibitors</b>		
<i>oseltamivir oral capsule 30 mg, 45 mg, 75 mg</i>	2	
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	2	
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	3	
<b>Influenza-A Antiviral Agents</b>		
<i>rimantadine oral tablet 100 mg</i>	2	
<b>Lincosamide Antibiotics</b>		
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	1	
<i>clindamycin palmitate hcl oral recon soln 75 mg/5 ml</i>	2	
CLINDAMYCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	2	
<b>Macrolide Antibiotics</b>		
<i>azithromycin oral packet 1 gram</i>	2	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	2	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	1	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	2	

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Drug Name	Tier	Notes
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	2	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	4	QL (136 ML per 30 days)
<i>fidaxomicin oral tablet 200 mg</i>	2	QL (20 EA per 30 days)
<b>Misc Anti-Infective</b>		
<i>methenamine hippurate oral tablet 1 gram</i>	2	
<i>pentamidine inhalation recon soln 300 mg</i>	5	LA; S
<b>Oxazolidinone Antibiotics</b>		
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	2	
<i>linezolid oral tablet 600 mg</i>	2	
SIVEXTRO ORAL TABLET 200 MG	5	QL (6 EA per 30 days); S
<b>Penicillin Antibiotic - Natural</b>		
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	
<b>Penicillin Antibiotic - Penicillinase-Resistant</b>		
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	2	
<b>Protease Inhibitors (Non-Peptidic) Antiretroviral</b>		
APTIVUS ORAL CAPSULE 250 MG	4	
<i>darunavir oral tablet 600 mg, 800 mg</i>	2	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG-MG	4	
PREZISTA ORAL SUSPENSION 100 MG/ML	4	
PREZISTA ORAL TABLET 150 MG, 75 MG	4	
<b>Protease Inhibitors (Peptidic) Antiretroviral</b>		
<i>atazanavir oral capsule 150 mg, 200 mg, 300 mg</i>	2	
EVOTAZ ORAL TABLET 300-150 MG	4	
<i>fosamprenavir oral tablet 700 mg</i>	2	
NORVIR ORAL POWDER IN PACKET 100 MG	4	
REYATAZ ORAL POWDER IN PACKET 50 MG	4	
<i>ritonavir oral tablet 100 mg</i>	2	
VIRACEPT ORAL TABLET 250 MG, 625 MG	4	
<b>Rifamycins And Related Derivative Antibiotics</b>		
PRIFTIN ORAL TABLET 150 MG	4	
<i>rifabutin oral capsule 150 mg</i>	2	
<i>rifampin oral capsule 150 mg, 300 mg</i>	2	

Drug Name	Tier	Notes
XIFAXAN ORAL TABLET 200 MG, 550 MG	4	PA; QL (3 EA per 1 day)
<b>Sars-Cov-2 Antiviral Agent - Main Protease (Mpro) Inhibitors</b>		
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10), 150 MG (6)- 100 MG (5), 300 MG (150 MG X 2)-100 MG	3	
<b>Sulfonamide Antibiotic</b>		
<i>sulfadiazine oral tablet 500 mg</i>	2	
<b>Tetracycline Antibiotics</b>		
AVIDOXY ORAL TABLET 100 MG	2	
<i>demeclocycline oral tablet 150 mg, 300 mg</i>	2	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 150 mg</i>	2	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	2	
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	2	
<i>doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	2	
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	2	
MONDOXYNE NL ORAL CAPSULE 100 MG	2	
<i>tetracycline oral capsule 250 mg, 500 mg</i>	2	
<b>ANTINEOPLASTICS</b>		
<b>Antineoplastic-Epiderm.Growth Factor-Egfr (ErbB1),Her-2 (ErbB2)R.Inhib</b>		
<i>lapatinib oral tablet 250 mg</i>	5	PA; QL (6 EA per 1 day); S
<b>Antineoplastic - Cyp17 (17 Alpha-Hydroxylase/C17,20-Lyase) Inhibitor</b>		
<i>abiraterone oral tablet 250 mg</i>	5	PA; QL (4 EA per 1 day); S
ABIRTEGA ORAL TABLET 250 MG	5	PA; QL (4 EA per 1 day); S
<b>Antineoplastic - 1St Generation Egfr Tyrosine Kinase Inhibitor</b>		
<i>erlotinib oral tablet 100 mg, 150 mg</i>	5	PA; QL (1 EA per 1 day); S
<i>erlotinib oral tablet 25 mg</i>	5	PA; QL (3 EA per 1 day); S
<i>gefitinib oral tablet 250 mg</i>	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - 2Nd Generation Egfr Tyrosine Kinase Inhibitor</b>		
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	5	PA; QL (1 EA per 1 day); LA; S
NERLYNX ORAL TABLET 40 MG	5	PA; QL (6 EA per 1 day); LA; S

Drug Name	Tier	Notes
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - 3Rd Generation Egfr Tyrosine Kinase Inhibitor</b>		
TAGRISSE ORAL TABLET 40 MG, 80 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - Akt (Protein Kinase B (Pkb)) Inhibitor</b>		
TRUQAP ORAL TABLET 160 MG, 200 MG	5	PA; QL (64 EA per 28 days); LA; S
<b>Antineoplastic - Alkylating Agent - Methylhydrazines</b>		
MATULANE ORAL CAPSULE 50 MG	5	LA; S
<b>Antineoplastic - Alkylating Agent - Nitrogen Mustards</b>		
ALKERAN ORAL TABLET 2 MG	4	PA
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	2	
<i>cyclophosphamide oral tablet 50 mg</i>	2	
LEUKERAN ORAL TABLET 2 MG	3	
<b>Antineoplastic - Alkylating Agent - Nitrosoureas</b>		
<i>lomustine oral capsule 10 mg, 100 mg, 40 mg</i>	2	S
<b>Antineoplastic - Alkylating Agent - Triazenes</b>		
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	5	PA; S
<b>Antineoplastic - Anaplastic Lymphoma Kinase (Alk) Inhibitors</b>		
ALECENSA ORAL CAPSULE 150 MG	5	PA; QL (8 EA per 1 day); LA; S
ALUNBRIG ORAL TABLET 180 MG, 90 MG	5	PA; QL (1 EA per 1 day); LA; S
ALUNBRIG ORAL TABLET 30 MG	5	PA; QL (4 EA per 1 day); LA; S
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)-180 MG (23)	5	PA; QL (1 EA per 1 day); LA; S
ENSACOVE ORAL CAPSULE 100 MG	5	PA; QL (2 EA per 1 day); LA; S
ENSACOVE ORAL CAPSULE 25 MG	5	PA; QL (1 EA per 1 day); LA; S
LORBRENA ORAL TABLET 100 MG	5	PA; QL (1 EA per 1 day); LA; S
LORBRENA ORAL TABLET 25 MG	5	PA; QL (3 EA per 1 day); LA; S
XALKORI ORAL CAPSULE 200 MG, 250 MG	5	PA; QL (4 EA per 1 day); LA; S
XALKORI ORAL PELLETT 150 MG	5	PA; QL (6 EA per 1 day); LA; S
XALKORI ORAL PELLETT 20 MG, 50 MG	5	PA; QL (4 EA per 1 day); LA; S
ZYKADIA ORAL TABLET 150 MG	5	PA; QL (3 EA per 1 day); LA; S
<b>Antineoplastic - Antiadrenals</b>		
LYSODREN ORAL TABLET 500 MG	5	PA; LA; S

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Drug Name	Tier	Notes
<b>Antineoplastic - Antiandrogens</b>		
<i>abiraterone oral tablet 250 mg</i>	5	PA; QL (4 EA per 1 day); S
ABIRTEGA ORAL TABLET 250 MG	5	PA; QL (4 EA per 1 day); S
<i>bicalutamide oral tablet 50 mg</i>	2	
ERLEADA ORAL TABLET 240 MG	5	PA; QL (1 EA per 1 day); LA; S
ERLEADA ORAL TABLET 60 MG	5	PA; QL (4 EA per 1 day); LA; S
EULEXIN ORAL CAPSULE 125 MG	4	
<i>nilutamide oral tablet 150 mg</i>	5	S
NUBEQA ORAL TABLET 300 MG	5	PA; QL (4 EA per 1 day); LA; S
XTANDI ORAL CAPSULE 40 MG	5	PA; LA; S
XTANDI ORAL TABLET 40 MG, 80 MG	5	PA; LA; S
<b>Antineoplastic - Antimetabolite - Folic Acid Analogs</b>		
<i>methotrexate sodium (pf) injection recon soln 1 gram</i>	2	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium oral tablet 2.5 mg</i>	2	
<b>Antineoplastic - Antimetabolite - Purine Analogs</b>		
<i>mercaptopurine oral suspension 20 mg/ml</i>	2	S
<i>mercaptopurine oral tablet 50 mg</i>	2	
TABLOID ORAL TABLET 40 MG	4	
<b>Antineoplastic - Antimetabolite - Pyrimidine Analogs</b>		
<i>capecitabine oral tablet 150 mg, 500 mg</i>	5	S
ONUREG ORAL TABLET 200 MG, 300 MG	5	PA; QL (14 EA per 28 days); S
<b>Antineoplastic - Antimetabolite - Urea Derivatives</b>		
<i>hydroxyurea oral capsule 500 mg</i>	2	
<b>Antineoplastic - Antimetabolites - Pyrimidine Analog Combinations</b>		
LONSURF ORAL TABLET 15-6.14 MG	5	PA; LA; S
LONSURF ORAL TABLET 20-8.19 MG	5	PA; QL (8 EA per 1 day); LA; S
<b>Antineoplastic - Aromatase Inhibitors</b>		
<i>anastrozole oral tablet 1 mg</i>	2	Note (ACA ELIGIBLE - FOR FEMALES AT HIGH RISK FOR BREAST CANCER AGED 35+)
<i>exemestane oral tablet 25 mg</i>	2	

Drug Name	Tier	Notes
<i>letrozole oral tablet 2.5 mg</i>	2	Note (ACA ELIGIBLE - FOR FEMALES AT HIGH RISK FOR BREAST CANCER AGED 35+)
<b>Antineoplastic - B-Cell Lymphoma-2 (Bcl-2) Inhibitors</b>		
VENCLEXTA ORAL TABLET 10 MG	5	PA; QL (2 EA per 1 day); LA; S
VENCLEXTA ORAL TABLET 100 MG	5	PA; QL (6 EA per 1 day); LA; S
VENCLEXTA ORAL TABLET 50 MG	5	PA; QL (1 EA per 1 day); LA; S
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	5	PA; QL (42 EA per 28 days); LA; S
<b>Antineoplastic - Braf Kinase Inhibitors</b>		
BRAFTOVI ORAL CAPSULE 75 MG	5	PA; QL (6 EA per 1 day); LA; S
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML	5	PA; QL (96 ML per 28 days); S
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4), 500 MG/WEEK (100 MG X 5), 600 MG/WEEK (100 MG X 6)	5	PA; QL (1 BOX per 28 days); S
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	5	PA; QL (4 EA per 1 day); LA; S
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	5	PA; QL (30 EA per 1 day); LA; S
ZELBORAF ORAL TABLET 240 MG	5	PA; LA; S
<b>Antineoplastic - Bruton's Tyrosine Kinase (Btk) Inhibitor</b>		
BRUKINSA ORAL TABLET 160 MG	5	PA; QL (2 EA per 1 day); S
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	5	PA; QL (2 EA per 1 day); LA; S
IMBRUVICA ORAL CAPSULE 140 MG	5	PA; QL (2 EA per 1 day); LA; S
IMBRUVICA ORAL CAPSULE 70 MG	5	PA; QL (3 EA per 1 day); LA; S
IMBRUVICA ORAL SUSPENSION 70 MG/ML	5	PA; QL (6 ML per 1 day); LA; S
IMBRUVICA ORAL TABLET 420 MG	5	PA; QL (1 EA per 1 day); LA; S
JAYPIRCA ORAL TABLET 100 MG	5	PA; QL (3 EA per 1 day); LA; S
JAYPIRCA ORAL TABLET 50 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - Caseinolytic Protease P (Clpp) Activators</b>		
MODEYSO ORAL CAPSULE 125 MG	5	PA; QL (20 EA per 28 days); LA; S
<b>Antineoplastic - Cyclin-Dependent Kinase (Cdk) 4/6 Inhibitors</b>		
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	5	PA; QL (21 EA per 28 days); LA; S
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	5	PA; QL (21 EA per 28 days); LA; S
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	5	PA; QL (21 EA per 28 days); S

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Drug Name	Tier	Notes
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	5	PA; QL (42 EA per 28 days); S
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	5	PA; QL (63 EA per 28 days); S
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Epidermal Growth Factor Receptor-2 (Her2) Inhibitor</b>		
HERNEXEOS ORAL TABLET 60 MG	5	PA; QL (3 EA per 1 day); LA; S
TUKYSA ORAL TABLET 150 MG	5	PA; QL (4 EA per 1 day); LA; S
TUKYSA ORAL TABLET 50 MG	5	PA; QL (10 EA per 1 day); LA; S
<b>Antineoplastic - Epipodophyllotoxins</b>		
<i>etoposide oral capsule 50 mg</i>	5	S
<b>Antineoplastic - Exportin-1 (Xpo1) Inhibitors</b>		
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40MG TWICE WEEK (40 MG X 2), 80 MG/WEEK (40 MG X 2)	5	PA; QL (8 EA per 28 days); LA; S
XPOVIO ORAL TABLET 40 MG/WEEK (10 MG X 4), 60 MG/WEEK (60 MG X 1), 80 MG/WEEK (80 MG X 1)	5	PA; QL (4 EA per 28 days); LA; S
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK)	5	PA; QL (24 EA per 28 days); LA; S
XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK)	5	PA; QL (32 EA per 28 days); LA; S
<b>Antineoplastic - Ezh2 Histone Methyltransferase (Hmt) Inhibitor</b>		
TAZVERIK ORAL TABLET 200 MG	5	PA; QL (8 EA per 1 day); LA; S
<b>Antineoplastic - Fibroblast Growth Factor Receptor (Fgfr) Kinase Inhib</b>		
BALVERSA ORAL TABLET 3 MG	5	PA; QL (3 EA per 1 day); LA; S
BALVERSA ORAL TABLET 4 MG	5	PA; QL (2 EA per 1 day); LA; S
BALVERSA ORAL TABLET 5 MG	5	PA; QL (1 EA per 1 day); LA; S
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3)	5	PA; QL (3 EA per 1 day); LA; S
LYTGOBI ORAL TABLET 16 MG/DAY (4 MG X 4)	5	PA; QL (4 EA per 1 day); LA; S
LYTGOBI ORAL TABLET 20 MG/DAY (4 MG X 5)	5	PA; QL (5 EA per 1 day); LA; S
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	5	PA; QL (14 EA per 21 days); LA; S
<b>Antineoplastic - Fms-Like Tyrosine Kinase 3 (Flt3) Inhibitors</b>		
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	5	PA; QL (2 EA per 1 day); LA; S
XOSPATA ORAL TABLET 40 MG	5	PA; QL (3 EA per 1 day); LA; S

Drug Name	Tier	Notes
<b>Antineoplastic - Gamma-Secretase Inhibitor (Gsi)</b>		
OGSIVEO ORAL TABLET 100 MG, 150 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Hedgehog Pathway Inhibitor</b>		
DAURISMO ORAL TABLET 100 MG	5	PA; QL (1 EA per 1 day); LA; S
DAURISMO ORAL TABLET 25 MG	5	PA; QL (2 EA per 1 day); LA; S
ERIVEDGE ORAL CAPSULE 150 MG	5	PA; QL (1 EA per 1 day); S
ODOMZO ORAL CAPSULE 200 MG	5	PA; QL (1 EA per 1 day); S
<b>Antineoplastic - Histone Deacetylase (Hdac) Inhibitors</b>		
FARYDAK ORAL CAPSULE 10 MG, 15 MG, 20 MG	5	PA; QL (6 EA per 21 days); S
ZOLINZA ORAL CAPSULE 100 MG	5	PA; QL (4 EA per 1 day); LA; S
<b>Antineoplastic - Hypoxia Inducible Factor (Hif) Inhibitors</b>		
WELIREG ORAL TABLET 40 MG	5	PA; QL (3 EA per 1 day); LA; S
<b>Antineoplastic - Interferons</b>		
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	5	PA; QL (2 ML per 28 days); LA; S
<b>Antineoplastic - Janus Kinase (Jak) Inhibitors</b>		
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Janus Kinase (Jak), Acvr1/Alk2 Inhibitors</b>		
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	5	PA; QL (1 EA per 1 day); S
<b>Antineoplastic - Janus Kinase(Jak),Fms-Like Tyrosine Kinase(Flt) Inhib</b>		
INREBIC ORAL CAPSULE 100 MG	5	PA; QL (4 EA per 1 day); S
VONJO ORAL CAPSULE 100 MG	5	PA; QL (4 EA per 1 day); LA; S
<b>Antineoplastic - Kirsten Rat Sarcoma (Kras) Protein Inhibitor</b>		
KRAZATI ORAL TABLET 200 MG	5	PA; QL (6 EA per 1 day); LA; S
LUMAKRAS ORAL TABLET 120 MG	5	PA; QL (8 EA per 1 day); LA; S
LUMAKRAS ORAL TABLET 240 MG	5	PA; LA; S
LUMAKRAS ORAL TABLET 320 MG	5	PA; QL (3 EA per 1 day); LA; S
<b>Antineoplastic - Lhrh (Gnrh) Agonist Analog Pituitary Suppressants</b>		
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	2	PA
<b>Antineoplastic - Lhrh (Gnrh) Antagonist Pituitary Suppressants</b>		
ORGOVYX ORAL TABLET 120 MG	5	PA; QL (32 EA per 30 days); LA; S

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Drug Name	Tier	Notes
<b>Antineoplastic - Mast Cell Stabilizers</b>		
<i>cromolyn oral concentrate 100 mg/5 ml</i>	2	
<b>Antineoplastic - Mek Kinase Inhibitors</b>		
COTELLIC ORAL TABLET 20 MG	5	PA; QL (63 EA per 28 days); S
GOMEKLI ORAL CAPSULE 1 MG	5	PA; QL (8 EA per 1 day); LA; S
GOMEKLI ORAL CAPSULE 2 MG	5	PA; QL (4 EA per 1 day); LA; S
GOMEKLI ORAL TABLET FOR SUSPENSION 1 MG	5	PA; QL (8 EA per 1 day); LA; S
KOSELUGO ORAL CAPSULE 10 MG	5	PA; QL (8 EA per 1 day); LA; S
KOSELUGO ORAL CAPSULE 25 MG	5	PA; QL (4 EA per 1 day); LA; S
KOSELUGO ORAL CAPSULE, SPRINKLE 5 MG	5	PA; QL (20 EA per 1 day); LA; S
KOSELUGO ORAL CAPSULE, SPRINKLE 7.5 MG	5	PA; QL (12 EA per 1 day); LA; S
MEKINIST ORAL RECON SOLN 0.05 MG/ML	5	PA; QL (40 ML per 1 day); S
MEKINIST ORAL TABLET 0.5 MG	5	PA; QL (3 EA per 1 day); S
MEKINIST ORAL TABLET 2 MG	5	PA; QL (1 EA per 1 day); S
MEKTOVI ORAL TABLET 15 MG	5	PA; QL (6 EA per 1 day); LA; S
<b>Antineoplastic - Menin Inhibitors</b>		
REVUFORJ ORAL TABLET 110 MG, 160 MG, 25 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Mtor Kinase Inhibitors</b>		
<i>everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	5	PA; QL (1 EA per 1 day); S
TORPENZ ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - Multikinase Inhibitors</b>		
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	5	PA; QL (1 EA per 1 day); LA; S
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	5	PA; QL (2 EA per 1 day); LA; S
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	5	PA; QL (4 EA per 1 day); LA; S
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	5	PA; QL (3 EA per 1 day); LA; S
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	5	PA; QL (1 EA per 1 day); LA; S
<i>sorafenib oral tablet 200 mg</i>	5	PA; QL (4 EA per 1 day); LA; S
STIVARGA ORAL TABLET 40 MG	5	PA; QL (84 EA per 28 days); LA; S
<b>Antineoplastic - Mutant Isocitrate Dehydrogenase 1 (Mdh1) Inhibitors</b>		
REZLIDHIA ORAL CAPSULE 150 MG	5	PA; QL (2 EA per 1 day); LA; S
TIBSOVO ORAL TABLET 250 MG	5	PA; QL (2 EA per 1 day); LA; S

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Drug Name	Tier	Notes
<b>Antineoplastic - Mutant Isocitrate Dehydrogenase 2 (Mdh2) Inhibitors</b>		
IDHIFA ORAL TABLET 100 MG, 50 MG	5	PA; QL (1 EA per 1 day); S
<b>Antineoplastic - Ornithine Decarboxylase (Odc) Inhibitors</b>		
IWILFIN ORAL TABLET 192 MG	5	PA; QL (8 EA per 1 day); S
<b>Antineoplastic - Parp Inhibitor And Antiandrogen Combinations</b>		
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Phosphatidylinositol 3-Kinase (Pi3k) Inhibitors</b>		
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	5	PA; QL (2 EA per 1 day); S
ZYDELIG ORAL TABLET 100 MG, 150 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Pi3k-Alpha Inhibitors</b>		
ITOVEBI ORAL TABLET 3 MG	5	PA; QL (2 EA per 1 day); LA; S
ITOVEBI ORAL TABLET 9 MG	5	PA; QL (1 EA per 1 day); LA; S
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	5	PA; QL (1 EA per 1 day); LA; S
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Pi3k-Delta And Gamma Inhibitors</b>		
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	5	PA; QL (2 EA per 1 day); S
<b>Antineoplastic - Pi3k-Delta Inhibitors</b>		
ZYDELIG ORAL TABLET 100 MG, 150 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Antineoplastic - Poly (Adp-Ribose) Polymerase (Parp) Inhibitors</b>		
LYNPARZA ORAL TABLET 100 MG, 150 MG	5	PA; QL (4 EA per 1 day); LA; S
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	5	PA; QL (4 EA per 1 day); S
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	5	PA; QL (1 EA per 1 day); LA; S
TALZENNA ORAL CAPSULE 0.25 MG	5	PA; QL (3 EA per 1 day); LA; S
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Antineoplastic - Progestins</b>		
<i>megestrol oral tablet 20 mg, 40 mg</i>	2	
<b>Antineoplastic - Proteasome Enzyme Inhibitors</b>		
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	5	PA; QL (3 EA per 28 days); LA; S
<b>Antineoplastic - Protein-Tyrosine Kinase Inhibitors</b>		
AUGTYRO ORAL CAPSULE 160 MG	5	PA; QL (2 EA per 1 day); S
AUGTYRO ORAL CAPSULE 40 MG	5	PA; QL (8 EA per 1 day); S

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Drug Name	Tier	Notes
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	5	PA; QL (1 EA per 1 day); LA; S
BOSULIF ORAL CAPSULE 100 MG	5	PA; QL (6 EA per 1 day)
BOSULIF ORAL CAPSULE 50 MG	5	PA; QL (1 EA per 1 day); S
BOSULIF ORAL TABLET 100 MG	5	PA; QL (4 EA per 1 day); LA; S
BOSULIF ORAL TABLET 400 MG, 500 MG	5	PA; QL (1 EA per 1 day); LA; S
BRUKINSA ORAL TABLET 160 MG	5	PA; QL (2 EA per 1 day); S
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	5	PA; QL (2 EA per 1 day); LA; S
CAPRELSA ORAL TABLET 100 MG	5	PA; QL (2 EA per 1 day); LA; S
CAPRELSA ORAL TABLET 300 MG	5	PA; QL (1 EA per 1 day); LA; S
DANZITEN ORAL TABLET 71 MG, 95 MG	5	PA; LA; S
<i>dasatinib oral tablet 100 mg, 140 mg, 50 mg, 70 mg, 80 mg</i>	5	PA; QL (1 EA per 1 day); S
<i>dasatinib oral tablet 20 mg</i>	5	PA; QL (3 EA per 1 day); S
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	5	PA; QL (21 EA per 28 days); LA; S
FRUZAQLA ORAL CAPSULE 1 MG	5	PA; QL (105 EA per 28 days); LA; S
FRUZAQLA ORAL CAPSULE 5 MG	5	PA; QL (21 EA per 28 days); LA; S
IBTROZI ORAL CAPSULE 200 MG	5	PA; QL (3 EA per 1 day); LA; S
<i>imatinib oral tablet 100 mg, 400 mg</i>	5	PA; S
IMBRUVICA ORAL CAPSULE 140 MG	5	PA; QL (2 EA per 1 day); LA; S
IMBRUVICA ORAL CAPSULE 70 MG	5	PA; QL (3 EA per 1 day); LA; S
IMBRUVICA ORAL SUSPENSION 70 MG/ML	5	PA; QL (6 ML per 1 day); LA; S
IMBRUVICA ORAL TABLET 420 MG	5	PA; QL (1 EA per 1 day); LA; S
INLYTA ORAL TABLET 1 MG	5	PA; LA; S
INLYTA ORAL TABLET 5 MG	5	PA; QL (4 EA per 1 day); LA; S
JAYPIRCA ORAL TABLET 100 MG	5	PA; QL (3 EA per 1 day); LA; S
JAYPIRCA ORAL TABLET 50 MG	5	PA; QL (1 EA per 1 day); LA; S
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	5	PA; QL (1 EA per 1 day); LA; S
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	5	PA; QL (3 EA per 1 day); LA; S
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	5	PA; QL (2 EA per 1 day); LA; S
<i>nilotinib hcl oral capsule 150 mg, 200 mg, 50 mg</i>	5	PA; QL (4 EA per 1 day); S
OFEV ORAL CAPSULE 100 MG	5	PA; LA; S

Drug Name	Tier	Notes
OFEV ORAL CAPSULE 150 MG	5	PA; S
<i>pazopanib oral tablet 200 mg</i>	5	PA; QL (4 EA per 1 day); S
QINLOCK ORAL TABLET 50 MG	5	PA; QL (3 EA per 1 day); LA; S
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG	5	PA; QL (8 EA per 28 days); LA; S
ROZLYTREK ORAL CAPSULE 100 MG	5	PA; QL (5 EA per 1 day); LA; S
ROZLYTREK ORAL CAPSULE 200 MG	5	PA; QL (3 EA per 1 day); LA; S
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	5	PA; QL (12 EA per 1 day); LA; S
RYDAPT ORAL CAPSULE 25 MG	5	PA; QL (8 EA per 1 day); S
SCEMBLIX ORAL TABLET 100 MG	5	PA; QL (4 EA per 1 day); LA; S
SCEMBLIX ORAL TABLET 20 MG, 40 MG	5	PA; QL (2 EA per 1 day); LA; S
<i>sunitinib malate oral capsule 12.5 mg</i>	5	PA; QL (3 EA per 1 day); LA; S
<i>sunitinib malate oral capsule 25 mg, 37.5 mg, 50 mg</i>	5	PA; QL (1 EA per 1 day); LA; S
TABRECTA ORAL TABLET 150 MG, 200 MG	5	PA; QL (4 EA per 1 day); S
TEPMETKO ORAL TABLET 225 MG	5	PA; QL (2 EA per 1 day); LA; S
TURALIO ORAL CAPSULE 125 MG	5	PA; QL (4 EA per 1 day); LA; S
<b>Antineoplastic - Retinoids</b>		
<i>tretinoin (antineoplastic) oral capsule 10 mg</i>	5	PA; LA; S
<b>Antineoplastic - Selective Estrogen Receptor Degradars (Serds)</b>		
INLURIYO ORAL TABLET 200 MG	5	PA; QL (2 EA per 1 day); LA; S
ORSERDU ORAL TABLET 345 MG	5	PA; QL (1 EA per 1 day); LA; S
ORSERDU ORAL TABLET 86 MG	5	PA; QL (3 EA per 1 day); LA; S
<b>Antineoplastic - Selective Estrogen Receptor Modulators (Serms)</b>		
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	4	
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	2	Note (ACA ELIGIBLE - FOR FEMALES AT HIGH RISK FOR BREAST CANCER AGED 35+)
<i>toremifene oral tablet 60 mg</i>	5	LA; S
<b>Antineoplastic - Selective Inhibitors Of Nuclear Export (Sine)</b>		
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40MG TWICE WEEK (40 MG X 2), 80 MG/WEEK (40 MG X 2)	5	PA; QL (8 EA per 28 days); LA; S
XPOVIO ORAL TABLET 40 MG/WEEK (10 MG X 4), 60 MG/WEEK (60 MG X 1), 80 MG/WEEK (80 MG X 1)	5	PA; QL (4 EA per 28 days); LA; S
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK)	5	PA; QL (24 EA per 28 days); LA; S

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Drug Name	Tier	Notes
XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK)	5	PA; QL (32 EA per 28 days); LA; S
<b>Antineoplastic - Selective Ret Kinase Inhibitor</b>		
GAVRETO ORAL CAPSULE 100 MG	5	PA; QL (4 EA per 1 day); LA; S
RETEVMO ORAL TABLET 120 MG, 160 MG	5	PA; QL (2 EA per 1 day); LA; S
RETEVMO ORAL TABLET 40 MG	5	PA; QL (6 EA per 1 day); LA; S
RETEVMO ORAL TABLET 80 MG	5	PA; QL (4 EA per 1 day); LA; S
<b>Antineoplastic - Selective Retinoid X Receptor Agonists</b>		
<i>bexarotene oral capsule 75 mg</i>	5	PA; QL (10 EA per 1 day); S
<b>Antineoplastic - Systemic Enzyme Inhibitors Combinations</b>		
AVMAPKI-FAKZYNJA ORAL COMBO PACK 0.8-200 MG	5	PA; QL (1 pack per 28 days); LA; S
<b>Antineoplastic - Thalidomide Analogs</b>		
<i>lenalidomide oral capsule 10 mg, 2.5 mg, 5 mg</i>	5	PA; QL (1 EA per 1 day); LA; S
<i>lenalidomide oral capsule 15 mg, 20 mg, 25 mg</i>	5	PA; QL (21 EA per 28 days); LA; S
THALOMID ORAL CAPSULE 100 MG, 50 MG	5	LA; S
<b>Antineoplastic - Topoisomerase I Inhibitors</b>		
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	5	S
<b>Antineoplastic - Tropomyosin Receptor Kinase (Trk) Inhibitor</b>		
VITRAKVI ORAL CAPSULE 100 MG	5	PA; QL (2 EA per 1 day); LA; S
VITRAKVI ORAL CAPSULE 25 MG	5	PA; QL (6 EA per 1 day); LA; S
VITRAKVI ORAL SOLUTION 20 MG/ML	5	PA; QL (10 ML per 1 day); LA; S
<b>Antineoplastic-Isocitrate Dehydrogenase-1 And -2 (Idh1 And Idh2) Inhib</b>		
VORANIGO ORAL TABLET 10 MG	5	PA; QL (60 EA per 30 days); LA; S
VORANIGO ORAL TABLET 40 MG	5	PA; QL (30 EA per 30 days); LA; S
<b>Antineoplastic-Pyrimidine Analog And Cytidine Deaminase Inhibitor Comb</b>		
INQOVI ORAL TABLET 35-100 MG	5	PA; QL (5 EA per 28 days); LA; S
<b>Methotrexate Rescue Agents - Folic Acid Antagonist Type</b>		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	2	ST; QL (3 EA per 1 day)
<b>Methotrexate Rescue Agents</b>		
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	2	ST; QL (3 EA per 1 day)

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Drug Name	Tier	Notes
<b>BIOLOGICALS</b>		
<b>Allergenic Extracts - Grass Pollen</b>		
GRASTEK SUBLINGUAL TABLET 2,800 BAU	4	
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	4	
<b>Allergenic Extracts - Mite Extracts</b>		
ODACTRA SUBLINGUAL TABLET 12 SQ-HDM	4	
<b>Allergenic Extracts - Weed Pollen</b>		
RAGWITEK SUBLINGUAL TABLET 12 AMB A 1 UNIT	4	
<b>Hepatitis A And Hepatitis B Vaccine Combinations</b>		
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	0	QL (1 DOSE (1 ML) per 1 day; 5 DOSES (5ML) per lifetime)
<b>Hepatitis A Vaccine - Single Agents</b>		
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML	0	QL (1 DOSE (1 ML) per 1 day; 2 DOSES (2 ML) per lifetime)
HAVRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
VAQTA (PF) INTRAMUSCULAR SUSPENSION 50 UNIT/ML	0	QL (1 DOSE (1 ML) per 1 day; 2 DOSES (2 ML) per lifetime)
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
VAQTA (PF) INTRAMUSCULAR SYRINGE 50 UNIT/ML	0	QL (1 DOSE (1 ML) per 1 day; 2 DOSES (2 ML) per lifetime)
<b>Hepatitis B Vaccine Combinations</b>		
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
<b>Hepatitis B Vaccines - Single Agents</b>		
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	0	QL (1 DOSE (1 ML) per 1 day; 3 DOSES (3 ML) per lifetime)
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	0	QL (1 DOSE (1 ML) per 1 day; 3 DOSES (3 ML) per lifetime)
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)

Drug Name	Tier	Notes
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML	0	QL (1 DOSE (1 ML) per 1 day; 3 DOSES (3 ML) per lifetime)
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 5 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML	0	QL (1 DOSE (1 ML) per 1 day; 3 DOSES (3 ML) per lifetime)
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 5 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
<b>Immune Globulin - Gamma Globulin (Igg), Human</b>		
CUTAQUIG SUBCUTANEOUS SOLUTION 16.5 %	5	PA; LA; S
GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	5	PA
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %)	5	PA
HIZENTRA SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	5	PA; S
HIZENTRA SUBCUTANEOUS SYRINGE 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	5	PA; S
HYQVIA SUBCUTANEOUS SOLUTION 10 GRAM /100 ML (10 %), 2.5 GRAM /25 ML (10 %), 20 GRAM /200 ML (10 %), 30 GRAM /300 ML (10 %), 5 GRAM /50 ML (10 %)	5	PA; S
XEMBIFY SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	5	PA
<b>Live Vaccine And Live Virus Formulations</b>		
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	0	
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	0	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	0	
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)

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Drug Name	Tier	Notes
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	0	QL (1mL per day; 2mL per lifetime)
ROTATEQ VACCINE ORAL SOLUTION 2 ML	0	QL (1 DOSE (2 ML) per 1 day; 3 DOSES (6 ML) per lifetime)
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>Toxoid Vaccine Combinations</b>		
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 1 DOSE (0.5 ML) PER 10 YEARS)
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 1 DOSE (0.5 ML) PER 10 YEARS)
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	0	QL (1 DOSE (0.5 ML) per 1 day; 1 DOSE (0.5 ML) PER 10 YEARS)
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	0	QL (1 DOSE (0.5 ML) per 1 day; 5 DOSES (2.5ML) per lifetime)
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	0	QL (1 DOSE (0.5 ML) per 1 day; 5 DOSES (2.5ML) per lifetime)
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 1 DOSE (0.5 ML) per lifetime)
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	0	QL (1 DOSE (0.5 ML) per 1 day; 4 DOSES (2 ML) per lifetime)
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	0	QL (1 DOSE (1 ML) per 10 years)
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	0	QL (1 DOSE (1 ML) per 10 years)
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
<b>Vaccine Bacterial - Gram Negative Bacilli (Non-Enteric)</b>		
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	0	QL (1 DOSE (1 VIAL) per 1 day; 4 DOSES (4 VIALS) per lifetime)

Drug Name	Tier	Notes
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	0	QL (1 DOSE (1 VIAL) per 1 day; 4 DOSES (4 VIALS) per lifetime)
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	0	QL (1 DOSE (1 VIAL) per 1 day; 4 DOSES (4 VIALS) per lifetime)
PENTACEL ACTHIB COMPONENT (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	0	QL (1 DOSE (1 KIT) per 1 day; 4 DOSES (4 KITS) per lifetime)
<b>Vaccine Bacterial - Gram Negative Cocci</b>		
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 2 DOSES (1 ML) per lifetime)
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	0	
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML	0	
<b>Vaccine Bacterial - Gram Positive Cocci</b>		
CAPVAXIVE INTRAMUSCULAR SYRINGE 0.5 ML	0	QL (0.5 ML per 1 Lifetime)
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	0	QL (0.5 ML per 1 Lifetime); QL (1 DOSE (0.5 ML) per lifetime)
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	0	QL (0.5 ML per 1 Lifetime); QL (1 DOSE (0.5 ML) per lifetime)
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	0	QL (0.5 ML per 1 Lifetime); QL (1 DOSE (0.5 ML) per lifetime)
<b>Vaccine Bacterial - Meningococcal Group B Vaccines</b>		
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	0	QL (2 DOSES (1 ML) per lifetime)
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
<b>Vaccine Mixed Combinations (Bacterial And Viral)</b>		
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
<b>Vaccine Viral - Human Papillomavirus (Hpv) Vaccines</b>		
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 3 DOSES (1.5 ML) per lifetime)

Drug Name	Tier	Notes
<b>Vaccine Viral - Measles</b>		
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	0	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	0	
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>Vaccine Viral - Mpox</b>		
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	0	
<b>Vaccine Viral - Mumps And Related</b>		
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	0	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	0	
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>Vaccine Viral - Poliomyelitis</b>		
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	0	QL (1 DOSE (0.5 ML) per 1 day; 4 DOSES (2 ML) per lifetime)
<b>Vaccine Viral - Respiratory Syncytial Virus (Rsv)</b>		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	0	
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	0	
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	0	
<b>Vaccine Viral - Rotavirus</b>		
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	0	QL (1mL per day; 2mL per lifetime)
ROTATEQ VACCINE ORAL SOLUTION 2 ML	0	QL (1 DOSE (2 ML) per 1 day; 3 DOSES (6 ML) per lifetime)
<b>Vaccine Viral - Rubella</b>		
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	0	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	0	

Drug Name	Tier	Notes
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>Vaccine Viral - Smallpox</b>		
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	0	
<b>Vaccine Viral - Varicella</b>		
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	0	QL (1 DOSE (1 KIT) per 1 day; 2 DOSES (2 KITS) per lifetime)
SHINGRIX (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	0	QL (1 DOSE (1 KIT) per 1 day; 2 DOSES (2 KITS) per lifetime)
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>Vaccine Viral Combinations</b>		
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	0	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML	0	
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	0	QL (1 DOSE (1 VIAL) per 1 day; 2 DOSES (2 VIALS) per lifetime)
<b>CARDIOVASCULAR THERAPY AGENTS</b>		
<b>Ace Inhibitor And Calcium Channel Blocker Combinations</b>		
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1	PV (Preventive)
<b>Ace Inhibitor And Diuretic Combinations</b>		
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	2	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	2	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	PV (Preventive)
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	2	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	2	
<b>Ace Inhibitors</b>		
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	PV (Preventive)
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	2	
<i>enalapril maleate oral solution 1 mg/ml</i>	2	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	PV (Preventive)
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	PV (Preventive)
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	2	
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	2	
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	PV (Preventive)
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	PV (Preventive)
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	2	
<b>Aldosterone Receptor Antagonists</b>		
<i>eplerenone oral tablet 25 mg, 50 mg</i>	2	
KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG	4	PA; QL (1 EA per 1 day)
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<b>Alpha-Beta Blockers</b>		
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	PV (Preventive)
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg</i>	2	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1	
<b>Angiotensin II Receptor Blocker (Arb)-Calcium Channel Blocker Comb.</b>		
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	2	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	2	
<b>Angiotensin II Receptor Blocker (Arb)-Calcium Channel Blocker-Diuretic</b>		
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg</i>	2	

Drug Name	Tier	Notes
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	2	
<b>Angiotensin II Receptor Blocker (Arb)-Diuretic Combinations</b>		
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	2	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1	PV (Preventive)
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	PV (Preventive)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1	PV (Preventive)
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg</i>	2	QL (1 EA per 1 day)
<i>telmisartan-hydrochlorothiazid oral tablet 80-12.5 mg, 80-25 mg</i>	2	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1	PV (Preventive)
<b>Angiotensin II Receptor Blocker-Nepriylisin Inhibitor Comb. (Arni)</b>		
<i>sacubitril-valsartan oral tablet 24-26 mg, 49-51 mg, 97-103 mg</i>	2	
<b>Angiotensin II Receptor Blockers (Arbs)</b>		
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	2	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1	PV (Preventive)
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1	PV (Preventive)
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	2	
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1	PV (Preventive)
<b>Antianginal - Coronary Vasodilators (Nitrates)</b>		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	1	PV (Preventive)
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1	PV (Preventive)
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1	PV (Preventive)
<b>NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR</b>	3	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	2	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	2	

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Drug Name	Tier	Notes
<i>nitroglycerin translingual spray,non-aerosol 400 mcg/spray</i>	2	
NITROMIST TRANSLINGUAL AEROSOL,SPRAY 400 MCG/SPRAY	4	
NITRO-TIME ORAL CAPSULE, EXTENDED RELEASE 2.5 MG, 6.5 MG, 9 MG	2	
<b>Antianginal And Anti-Ischemic Agents, Non-Hemodynamic</b>		
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	2	
<b>Antiarrhythmic - Class Ia</b>		
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	2	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	3	
<i>quinidine gluconate oral tablet extended release 324 mg</i>	2	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	2	
<b>Antiarrhythmic - Class Ib</b>		
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	2	
<b>Antiarrhythmic - Class Ic</b>		
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	2	
<i>propafenone oral capsule,extended release 12 hr 225 mg, 325 mg, 425 mg</i>	2	
<i>propafenone oral tablet 150 mg, 225 mg</i>	1	PV (Preventive)
<i>propafenone oral tablet 300 mg</i>	2	
<b>Antiarrhythmic - Class Ii</b>		
SOTALOL AF ORAL TABLET 120 MG, 160 MG, 80 MG	1	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
<b>Antiarrhythmic - Class Iii</b>		
<i>amiodarone oral tablet 100 mg, 400 mg</i>	2	
<i>amiodarone oral tablet 200 mg</i>	1	PV (Preventive)
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	2	
MULTAQ ORAL TABLET 400 MG	3	
PACERONE ORAL TABLET 200 MG	1	
<b>Antiarrhythmic - Class Iv</b>		
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<b>Antihyperlipidemic - Atp-Citrate Lyase (Acly) Inhibitor</b>		
NEXLETOL ORAL TABLET 180 MG	4	PA
<b>Antihyperlipidemic - Bile Acid Sequestrants</b>		
CHOLESTYRAMINE LIGHT ORAL POWDER 4 GRAM	2	
CHOLESTYRAMINE LIGHT ORAL POWDER IN PACKET 4 GRAM	2	
<i>cholestyramine oral powder 4 gram</i>	2	
<i>cholestyramine oral powder in packet 4 gram</i>	2	
<i>colesevelam oral tablet 625 mg</i>	2	
<i>colestipol oral granules 5 gram</i>	2	
<i>colestipol oral packet 5 gram</i>	2	
<i>colestipol oral tablet 1 gram</i>	2	
PREVALITE ORAL POWDER 4 GRAM	2	
PREVALITE ORAL POWDER IN PACKET 4 GRAM	2	
<b>Antihyperlipidemic - Fibric Acid Derivatives</b>		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	1	PV (Preventive)
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1	PV (Preventive)
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	PV (Preventive)
<i>fenofibric acid (choline) oral capsule, delayed release(drlec) 135 mg, 45 mg</i>	2	
<i>gemfibrozil oral tablet 600 mg</i>	1	PV (Preventive)
<b>Antihyperlipidemic - Hmg Coa Reductase Inhibitors (Statins)</b>		
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	Note (ACA ELIGIBLE - FOR AGES 40 TO 75 YEARS); PV (Preventive)
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	1	Note (ACA ELIGIBLE - FOR AGES 40 TO 75 YEARS); PV (Preventive)
<i>pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg</i>	2	QL (1 EA per 1 day)
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	Note (ACA ELIGIBLE - FOR AGES 40 TO 75 YEARS); PV (Preventive)
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	Note (ACA ELIGIBLE - FOR AGES 40 TO 75 YEARS); PV (Preventive)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	1	Note (ACA ELIGIBLE - FOR AGES 40 TO 75 YEARS); PV (Preventive)
<b>Antihyperlipidemic - Nicotinic Acid Derivatives</b>		
<i>niacin oral tablet 500 mg</i>	2	

Drug Name	Tier	Notes
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	2	
<b>Antihyperlipidemic - Omega-3 Fatty Acid Type</b>		
<i>icosapent ethyl oral capsule 0.5 gram, 1 gram</i>	2	PA
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	2	
<b>Antihyperlipidemic - Pcsk9 Inhibitor, Monoclonal Antibody (Mab)</b>		
PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML	5	PA; QL (2 ML per 28 days); S
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	3	PA; QL (2 ML per 28 days)
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	3	PA; QL (2 ML per 28 days)
<b>Antihyperlipidemic - Pcsk9 Inhibitors</b>		
PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML	5	PA; QL (2 ML per 28 days); S
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	3	PA; QL (2 ML per 28 days)
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	3	PA; QL (2 ML per 28 days)
<b>Antihyperlipidemic - Selective Cholesterol Absorption Inhibitor</b>		
<i>ezetimibe oral tablet 10 mg</i>	1	PV (Preventive)
<b>Antihyperlipidemic Agents - Dietary Source</b>		
ALGAL OMEGA-3 DHA ORAL CAPSULE 200 MG	0	
DHA FROM ALGAE ORAL CAPSULE 200 MG	0	
PRENATAL DHA ORAL CAPSULE 200 MG	0	
<b>Antihyperlipidemic- Atp-Citrate Lyase And Cholesterol Absorption Inhib</b>		
NEXLIZET ORAL TABLET 180-10 MG	4	PA
<b>Antihyperlipidemic Hmg Coa Reduct Inhib And Calcium Channel Blocker</b>		
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	2	
<b>Antihyperlipidemic-Hmg Coa Reduct Inhib And Cholesterol Absorp Inhibit</b>		
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	3	

Drug Name	Tier	Notes
<b>Antihyperlipidemic-Microsomal Triglyceride Transfer Protein (Mtp)Inhib</b>		
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	5	PA; LA; S
<b>Beta Blockers Cardiac Selective, Intrinsic Sympathomimetic Activity</b>		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	2	
<b>Beta Blockers Cardiac Selective</b>		
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>betaxolol oral tablet 10 mg, 20 mg</i>	2	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1	PV (Preventive)
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	1	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	2	
<b>Beta Blockers Non-Cardiac Select., Intrinsic Sympathomimetic Activity</b>		
<i>pindolol oral tablet 10 mg, 5 mg</i>	2	
<b>Beta Blockers Non-Cardiac Selective</b>		
HEMANGEOL ORAL SOLUTION 4.28 MG/ML	3	LA; S
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	2	
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	2	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	2	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	PV (Preventive)
SOTALOL AF ORAL TABLET 120 MG, 160 MG, 80 MG	1	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	2	
<b>Bradykinin B2 Receptor Antagonists</b>		
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	5	PA; QL (18 ML per 30 days); LA; S
SAJAZIR SUBCUTANEOUS SYRINGE 30 MG/3 ML	5	PA; QL (18 ML per 30 days); LA; S
<b>Calcium Channel Blockers - Benzothiazepines</b>		
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	PV (Preventive)

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	PV (Preventive)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	2	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	PV (Preventive)
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	1	PV (Preventive)
<i>diltiazem hcl oral capsule,extended release 24hr 360 mg</i>	2	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1	PV (Preventive)
<i>diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	2	
<b>DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG</b>	1	PV (Preventive)
<b>MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>	2	
<b>TIADYLT ER ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>	1	PV (Preventive)
<b>Calcium Channel Blockers - Dihydropyridines - Cerebrovascular Specific</b>		
<i>nimodipine oral capsule 30 mg</i>	2	
<b>Calcium Channel Blockers - Dihydropyridines</b>		
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	PV (Preventive)
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1	PV (Preventive)
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	2	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	2	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	2	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1	PV (Preventive)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1	PV (Preventive)
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	2	
<b>Calcium Channel Blockers - Phenylalkylamines</b>		
<i>verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg</i>	2	

Drug Name	Tier	Notes
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	2	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	PV (Preventive)
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	1	PV (Preventive)
<b>Cardiac Myosin Inhibitor</b>		
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Cardiac Selective Beta Blocker-Thiazide Diuretic And Related Comb.</b>		
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1	PV (Preventive)
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	PV (Preventive)
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	2	
<b>Cardiovascular Sympathomimetic - Anaphylaxis Therapy Single Agents</b>		
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML	4	QL (2 PENS per 30 days)
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	QL (2 PENS per 30 days)
<b>Cardiovascular Sympathomimetics</b>		
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	
<b>Central Alpha-2 Receptor Agonists</b>		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	PV (Preventive)
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	2	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1	
<i>methyl dopa oral tablet 250 mg, 500 mg</i>	1	
<b>Digitalis Glycosides</b>		
DIGITEK ORAL TABLET 250 MCG (0.25 MG)	2	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	2	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	PV (Preventive)
<b>Direct Acting Vasodilators</b>		
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	2	

Drug Name	Tier	Notes
<b>Diuretic - Aldosterone Receptor Antagonist, Non-Selective</b>		
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<b>Diuretic - Aldosterone Receptor Antagonist, Selective</b>		
<i>eplerenone oral tablet 25 mg, 50 mg</i>	2	
<b>Diuretic - Carbonic Anhydrase Inhibitors</b>		
<i>acetazolamide oral capsule, extended release 500 mg</i>	2	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	2	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	2	
<b>Diuretic - Loop</b>		
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	
<i>ethacrynic acid oral tablet 25 mg</i>	2	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	PV (Preventive)
<i>torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1	PV (Preventive)
<b>Diuretic - Potassium Sparing</b>		
<i>amiloride oral tablet 5 mg</i>	2	
<b>Diuretic - Potassium Sparing-Thiazide And Related Combinations</b>		
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	2	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	2	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1	PV (Preventive)
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1	PV (Preventive)
<b>Diuretic - Selective Arginine Vasopressin V2 Receptor Antagonists</b>		
<i>tolvaptan oral tablet 15 mg, 30 mg</i>	5	PA; LA; S
<b>Diuretic - Thiazides And Related</b>		
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	PV (Preventive)
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	PV (Preventive)
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	

Drug Name	Tier	Notes
<b>Factor Xii Inhibitors</b>		
ANDEMBRY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 200 MG/1.2 ML	5	PA; QL (1.2 ML per 28 days); LA; S
<b>Hyperpolarization-Activated Cyclic Nucleotide-Gated Channel Inhibitors</b>		
CORLANOR ORAL SOLUTION 5 MG/5 ML	4	PA; LA
<i>ivabradine oral tablet 5 mg, 7.5 mg</i>	2	PA
<b>Non-Cardiac Selective Beta Blocker-Thiazide Diuretic And Related Comb.</b>		
<i>propranolol-hydrochlorothiazid oral tablet 40-25 mg, 80-25 mg</i>	2	
<b>Pah Agents - Selective Prostacyclin Receptor (Ip) Agonists</b>		
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (2 EA per 1 day); LA; S
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	5	PA; LA; S
<b>Peripheral Alpha-1 Receptor Blockers</b>		
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1	PV (Preventive)
<i>phenoxybenzamine oral capsule 10 mg</i>	5	LA; S
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	PV (Preventive)
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<b>Plasma Kallikrein Inhibitor Agents, Recombinant Monoclonal Antibody</b>		
TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL (2 ML per 28 days); LA; S
TAKHZYRO SUBCUTANEOUS SYRINGE 300 MG/2 ML (150 MG/ML)	5	PA; QL (4 ML per 28 days); LA; S
<b>Plasma Kallikrein Inhibitor Agents, Small Molecule</b>		
EKTERLY ORAL TABLET 300 MG	5	PA; QL (4 EA per 30 days); LA; S
ORLADEYO ORAL CAPSULE 110 MG, 150 MG	5	PA; QL (1 EA per 1 day); LA; S
ORLADEYO ORAL PELLETS IN PACKET 108 MG, 132 MG, 72 MG, 96 MG	5	PA; QL (1 EA per 1 day)
<b>Pulmonary Antihypertensive Agent - Activin Receptor lia-Fc (Actria)</b>		
WINREVAIR SUBCUTANEOUS KIT 120 MG (60 MG X 2), 45 MG, 60 MG, 90 MG (45 MG X 2)	5	PA; QL (1 EA per 21 days); LA; S

Drug Name	Tier	Notes
<b>Pulmonary Antihypertensive Agents - Prostacyclin-Type</b>		
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	5	PA; LA; S
TYVASO INSTITUTIONAL START KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	5	PA; LA; S
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	5	PA; LA; S
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	5	PA; LA; S
YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE 106 MCG, 26.5 MCG, 53 MCG, 79.5 MCG	5	PA; LA; S
<b>Pulmonary Antihypertensive Agents-Soluble Guanylate Cyclase Stimulator</b>		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	5	PA; LA; S
<b>Pulmonary Arterial Hypertension - Endothelin Receptor Antagonists</b>		
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	3	PA; QL (1 EA per 1 day); LA; S
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	3	PA; LA; S
<i>bosentan oral tablet for suspension 32 mg</i>	5	PA; LA; S
OPSUMIT ORAL TABLET 10 MG	5	PA; LA; S
<b>Pulmonary Arterial Hypertension - Selective Cgmp-Pde5 Inhibitors</b>		
ALYQ ORAL TABLET 20 MG	2	QL (2 EA per 1 day)
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml</i>	5	PA; S
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	2	
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	2	QL (2 EA per 1 day)
<b>Renin Inhibitor, Direct</b>		
<i>aliskiren oral tablet 150 mg, 300 mg</i>	2	
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>		
<b>Agents To Treat Episodic Cluster Headaches</b>		
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	3	PA; QL (3 ML per 28 days)
<b>Antianxiety Agent - Antihistamine Type</b>		
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	

Drug Name	Tier	Notes
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<b>Antianxiety Agent - Benzodiazepines</b>		
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	1	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	2	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	2	
<b>DIAZEPAM INTENSOL ORAL CONCENTRATE 5 MG/ML</b>	2	
<i>diazepam oral concentrate 5 mg/ml</i>	2	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	2	
<i>diazepam oral tablet 10 mg</i>	1	
<i>diazepam oral tablet 2 mg, 5 mg</i>	2	
<b>LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML</b>	2	
<i>lorazepam oral concentrate 2 mg/ml</i>	2	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	2	
<b>Antianxiety Agent - Dicarbamate Type</b>		
<i>meprobamate oral tablet 400 mg</i>	2	
<b>Antianxiety Agent - Non-Benzodiazepine</b>		
<i>buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
<b>Anticonvulsant - Ampa-Type Glutamate Receptor Antagonists</b>		
<i>perampanel oral suspension 0.5 mg/ml</i>	2	ST; QL (24 ML per 1 day)
<i>perampanel oral tablet 10 mg, 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	2	ST; QL (1 EA per 1 day)
<b>Anticonvulsant - Barbiturates And Derivatives</b>		
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	2	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	
<i>primidone oral tablet 125 mg, 250 mg, 50 mg</i>	2	

Drug Name	Tier	Notes
<b>Anticonvulsant - Benzodiazepines</b>		
<i>clobazam oral suspension 2.5 mg/ml</i>	2	
<i>clobazam oral syringe 10 mg/4 ml</i>	2	
<i>clobazam oral tablet 10 mg, 20 mg</i>	2	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	2	
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	2	
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	4	QL (10 MG per 30 days)
VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	4	QL (10 EA per 30 days)
<b>Anticonvulsant - Cannabinoid Type</b>		
EPIDIOLEX ORAL SOLUTION 100 MG/ML	5	PA; LA; S
<b>Anticonvulsant - Carbamates</b>		
<i>felbamate oral suspension 600 mg/5 ml</i>	2	
<i>felbamate oral tablet 400 mg, 600 mg</i>	2	
<b>Anticonvulsant - Carboxylic Acid Derivatives</b>		
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	2	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	2	
<i>divalproex oral tablet, delayed release (drlec) 125 mg, 250 mg, 500 mg</i>	1	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml)</i>	2	
<i>valproic acid oral capsule 250 mg</i>	2	
<b>Anticonvulsant - Functionalized Amino Acid</b>		
<i>lacosamide oral solution 10 mg/ml</i>	2	
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	2	
<b>Anticonvulsant - Gaba Analogs</b>		
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1	
<i>gabapentin oral solution 250 mg/5 ml</i>	1	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	2	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>pregabalin oral solution 20 mg/ml</i>	2	QL (30 ML per 1 day)
<b>Anticonvulsant - Gaba Re-Uptake Inhibitor, Nipecotic Acid Derivatives</b>		
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	2	
<b>Anticonvulsant - Gaba Transaminase (Gaba-T) Inhibitor</b>		
<i>vigabatrin oral powder in packet 500 mg</i>	5	S
<i>vigabatrin oral tablet 500 mg</i>	5	S
VIGADRONE ORAL POWDER IN PACKET 500 MG	5	LA; S
VIGADRONE ORAL TABLET 500 MG	5	LA; S
<b>Anticonvulsant - Hydantoins</b>		
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	2	
<i>phenytoin oral tablet, chewable 50 mg</i>	2	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	2	
<b>Anticonvulsant - Iminostilbene Derivatives</b>		
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	2	
<i>carbamazepine oral suspension 100 mg/5 ml</i>	2	
<i>carbamazepine oral tablet 200 mg</i>	1	PV (Preventive)
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	2	
<i>carbamazepine oral tablet, chewable 100 mg</i>	2	
<i>eslicarbazepine oral tablet 200 mg, 600 mg</i>	2	ST; QL (2 EA per 1 day)
<i>eslicarbazepine oral tablet 400 mg</i>	2	ST; QL (2 EA per 2 days)
<i>eslicarbazepine oral tablet 800 mg</i>	2	ST; QL (1 EA per 1 day)
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	2	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	2	
<i>oxcarbazepine oral tablet extended release 24 hr 150 mg, 300 mg, 600 mg</i>	4	
<b>Anticonvulsant - Monosaccharide Derivatives</b>		
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg, 50 mg</i>	2	
<i>topiramate oral capsule, sprinkle, er 24hr 100 mg, 150 mg, 200 mg, 25 mg, 50 mg</i>	2	PA; QL (1 EA per 1 day)
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<b>Anticonvulsant - Phenyltriazine Derivatives</b>		
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK 25 MG (21) -50 MG (7)	4	
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK 50 MG(14)-100MG (14)-200 MG (7)	4	
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK 25MG (14)-50 MG (14)-100MG (7)	4	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg</i>	1	PV (Preventive)
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	2	
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1	
<i>lamotrigine oral tablets,dose pack 25 mg (35)</i>	1	
SUBVENITE ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG	1	
SUBVENITE STARTER (BLUE) KIT ORAL TABLETS,DOSE PACK 25 MG (35)	1	
<b>Anticonvulsant - Pyrrolidine Derivatives</b>		
BRIVIACT ORAL SOLUTION 10 MG/ML	4	ST; QL (20 ML per 1 day)
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	2	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	1	PV (Preventive)
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	2	
<b>Anticonvulsant - Succinimides</b>		
<i>ethosuximide oral capsule 250 mg</i>	2	
<i>ethosuximide oral solution 250 mg/5 ml</i>	2	
<i>methsuximide oral capsule 300 mg</i>	2	
<b>Anticonvulsant - Sulfonamide Derivatives</b>		
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<b>Anticonvulsant - Triazole Derivatives</b>		
<i>rufinamide oral suspension 40 mg/ml</i>	2	ST
<i>rufinamide oral tablet 200 mg, 400 mg</i>	2	ST
<b>Anticonvulsant Others</b>		
DIACOMIT ORAL CAPSULE 250 MG	5	PA; QL (12 EA per 1 day); LA; S
DIACOMIT ORAL CAPSULE 500 MG	5	PA; QL (6 EA per 1 day); LA; S

Drug Name	Tier	Notes
DIACOMIT ORAL POWDER IN PACKET 250 MG	5	PA; QL (12 EA per 1 day); LA; S
DIACOMIT ORAL POWDER IN PACKET 500 MG	5	PA; QL (6 EA per 1 day); LA; S
FINTEPLA ORAL SOLUTION 2.2 MG/ML	5	PA; QL (12 ML per 1 day); LA; S
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1)	4	ST
XCOPRI MAINTENANCE PACK ORAL TABLET 350 MG/DAY (200 MG X1-150MG X1)	4	ST; QL (1 EA per 1 day)
XCOPRI ORAL TABLET 100 MG, 150 MG, 25 MG, 50 MG	4	ST; QL (1 EA per 1 day)
XCOPRI ORAL TABLET 200 MG	4	ST; QL (2 EA per 1 day)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14), 50 MG (14)- 100 MG (14)	4	ST; QL (28 EA per 365 days)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 150 MG (14)- 200 MG (14)	4	ST; QL (1 pack per 365 days)
<b>Antidepressant - Alpha-2 Receptor Antagonists (Nassa)</b>		
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	1	PV (Preventive)
<i>mirtazapine oral tablet,disintegrating 15 mg, 30 mg, 45 mg</i>	2	
<b>Antidepressant - Mao Inhibitor Nonselective And Irreversible-Types A,B</b>		
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	4	
MARPLAN ORAL TABLET 10 MG	4	
<i>phenelzine oral tablet 15 mg</i>	2	
<i>tranylcypromine oral tablet 10 mg</i>	2	
<b>Antidepressant - Selective Serotonin Reuptake Inhibitors (Ssris)</b>		
<i>citalopram oral solution 10 mg/5 ml</i>	1	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	1	PV (Preventive)
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	1	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1	PV (Preventive)
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	1	PV (Preventive)
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	1	
<i>fluoxetine oral tablet 10 mg, 20 mg, 60 mg</i>	2	
<i>fluvoxamine oral capsule,extended release 24hr 100 mg, 150 mg</i>	2	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	1	

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>paroxetine hcl oral suspension 10 mg/5 ml</i>	2	
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	1	PV (Preventive)
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg</i>	2	
<i>sertraline oral concentrate 20 mg/ml</i>	1	PV (Preventive)
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1	PV (Preventive)
<b>Antidepressant - Serotonin-2 Antagonist-Reuptake Inhibitors (Saris)</b>		
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	2	
<i>trazodone oral tablet 100 mg, 150 mg, 50 mg</i>	1	
<b>Antidepressant - Serotonin-Norepinephrine Reuptake Inhibitors (Snrri)</b>		
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg</i>	2	QL (4 EA per 1 day)
<i>desvenlafaxine succinate oral tablet extended release 24 hr 25 mg, 50 mg</i>	2	QL (1 EA per 1 day)
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	PV (Preventive)
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	4	PA; QL (2 EA per 1 day)
SAVELLA ORAL TABLETS, DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	4	PA; QL (1 EA per 365 days)
<i>venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	1	PV (Preventive)
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	PV (Preventive)
<b>Antidepressant - Ssri And 5Ht1a Partial Agonist</b>		
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	2	
<b>Antidepressant - Tricyclic And Antipsychotic, Phenothiazine Comb</b>		
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	2	
<b>Antidepressant-Norepinephrine And Dopamine Reuptake Inhibitors (Ndris)</b>		
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	1	PV (Preventive)
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	PV (Preventive)
<i>bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<b>Antidepressant-Tricyclics And Related (Non-Select Reuptake Inhibitors)</b>		
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	2	
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	2	
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	
<i>doxepin oral concentrate 10 mg/ml</i>	2	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	1	PV (Preventive)
<i>nortriptyline oral solution 10 mg/5 ml</i>	2	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	2	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	2	
<b>Antiparkinson - Dopaminergic-Periph Comt-Dopa-Decarboxylase Inhib Comb</b>		
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	2	
<b>Antiparkinson - Dopaminerg-Peripheral Dopa-Decarboxylase Inhibit Comb</b>		
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	2	
<i>carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	2	
<b>Antiparkinson Adjuvant - Adenosine Receptor Antagonist</b>		
NOURIANZ ORAL TABLET 20 MG, 40 MG	5	QL (1 EA per 1 day); LA; S
<b>Antiparkinson Adjuvant - Central/Peripheral Comt Inhibitors</b>		
<i>tolcapone oral tablet 100 mg</i>	2	
<b>Antiparkinson Adjuvant - Peripheral Comt Inhibitors</b>		
<i>entacapone oral tablet 200 mg</i>	2	

Drug Name	Tier	Notes
<b>Antiparkinson Adjuvant - Peripheral Dopa-Decarboxylase Inhibitors</b>		
<i>carbidopa oral tablet 25 mg</i>	2	
<b>Antiparkinson Therapy - Anticholinergic Agents</b>		
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	2	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	2	
<b>Antiparkinson Therapy - Dopamine Precursors</b>		
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	3	QL (10 EA per 1 day); LA
<b>Antiparkinson Therapy - Ergot Alkaloids And Derivatives</b>		
<i>bromocriptine oral capsule 5 mg</i>	2	
<i>bromocriptine oral tablet 2.5 mg</i>	2	
<b>Antiparkinson Therapy - Monoamine Oxidase Inhibitor(Mao-B)</b>		
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	2	
<i>selegiline hcl oral capsule 5 mg</i>	2	
<i>selegiline hcl oral tablet 5 mg</i>	2	
ZELAPAR ORAL TABLET,DISINTEGRATING 1.25 MG	4	
<b>Antiparkinson Therapy - Non-Ergot Dopamine Agonist Agents</b>		
<i>amantadine hcl oral capsule 100 mg</i>	2	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	2	
<i>amantadine hcl oral tablet 100 mg</i>	2	
<i>apomorphine subcutaneous cartridge 10 mg/ml</i>	5	LA; S
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	4	ST
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	1	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1	
<i>ropinirole oral tablet extended release 24 hr 12 mg, 8 mg</i>	2	QL (2 EA per 1 day)
<i>ropinirole oral tablet extended release 24 hr 2 mg, 4 mg, 6 mg</i>	2	QL (1 EA per 1 day)

Drug Name	Tier	Notes
<b>Antipsychotic - Atyp Dopamine-Serotonin Antag Dibenzo-Oxepino Pyrroles</b>		
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	2	PA; QL (2 EA per 1 day)
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	4	PA; QL (1 EA per 1 day)
<b>Antipsychotic - Atypical Dopamine-Serotonin Antag- Benzisothiazolones</b>		
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	2	QL (1 EA per 1 day)
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	2	
<b>Antipsychotic - Atypical Dopamine-Serotonin Antag- Benzisoxazole Deriv</b>		
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	PA; QL (2 EA per 1 day)
FANAPT TITRATION PACK A ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	4	PA; QL (8 EA per 365 days)
FANAPT TITRATION PACK B ORAL TABLETS,DOSE PACK 1 MG(6)-2MG(2)- 6 MG(2)-8 MG(2)	4	PA; QL (12 EA per 365 days)
FANAPT TITRATION PACK C ORAL TABLETS,DOSE PACK 1 MG(4)-2 MG(2) -6 MG (2)	4	PA; QL (8 EA per 365 days)
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</i>	2	
<i>risperidone oral solution 1 mg/ml</i>	2	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	PV (Preventive)
<i>risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	2	
<b>Antipsychotic - Atypical Dopamine-Serotonin Antag-Butyrophenone Deriv</b>		
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	4	PA; QL (1 EA per 1 day)
<b>Antipsychotic - Atypical Dopamine-Serotonin Antag-Dibenzodiazepine Der</b>		
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	2	
<i>clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	2	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	4	
<b>Antipsychotic - Butyrophenone Derivatives</b>		
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	1	

Drug Name	Tier	Notes
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	1	
<b>Antipsychotic - Dibenzoxazepine Derivatives</b>		
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	2	
<b>Antipsychotic - Diphenylbutylpiperidine Derivatives</b>		
<i>pimozide oral tablet 1 mg, 2 mg</i>	2	
<b>Antipsychotic - Muscarinic Agonist/Antagonist Combinations</b>		
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG	3	PA; QL (2 EA per 1 day)
COBENFY STARTER PACK ORAL CAPSULE,DOSE PACK 50 MG-20 MG /100 MG-20 MG	3	PA; QL (2 EA per 1 day)
<b>Antipsychotic - Phenothiazines, Aliphatic</b>		
<i>chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml</i>	2	
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	2	
<b>Antipsychotic - Phenothiazines, Piperazine</b>		
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	2	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	2	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	2	
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	2	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	2	
<b>Antipsychotic - Phenothiazines, Piperidine</b>		
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	2	
<b>Antipsychotic - Thioxanthenes</b>		
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	2	
<b>Antipsychotic -Atypical Dopamine-Serotonin Antag-Dibenzothiazepine Der</b>		
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	PV (Preventive)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	2	QL (1 EA per 1 day)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	2	QL (2 EA per 1 day)

Drug Name	Tier	Notes
<b>Antipsychotic -Atypical Dopamine-Serotonin Antag-Thienobenzodiazepines</b>		
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	3	PA; QL (1 EA per 1 day)
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	PV (Preventive)
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	2	
<b>Antipsychotic-Atypical, D2 Receptor Partial Agonist-5Ht Serotonin Mixed</b>		
<i>aripiprazole oral solution 1 mg/ml</i>	2	
<i>aripiprazole oral tablet 10 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	PV (Preventive)
<i>aripiprazole oral tablet 15 mg</i>	2	
<i>aripiprazole oral tablet, disintegrating 10 mg, 15 mg</i>	2	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	PA; QL (1 EA per 1 day)
<b>Antipsychotic-Atypical, D3/D2 Receptor Partial Agonist-Serotonin Mixed</b>		
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	PA; QL (1 EA per 1 day)
<b>Antipsychotics, Atypical, Dopamine, Serotonin Antag And Opioid Antag Comb</b>		
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	3	PA; QL (1 EA per 1 day)
<b>Attention Deficit-Hyperact. Disorder (Adhd)- Alpha-2 Receptor Agonist</b>		
<i>clonidine hcl oral tablet extended release 12 hr 0.1 mg</i>	2	
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	2	
<b>Attention Deficit-Hyperactivity (Adhd) Therapy, Stimulant-Type</b>		
<i>dexmethylphenidate oral capsule, er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	2	QL (1 EA per 1 day)
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 15 mg</i>	2	QL (4 EA per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	2	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 25 mg, 30 mg, 5 mg</i>	2	QL (1 EA per 1 day)
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 20 mg</i>	2	QL (2 EA per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	2	
<i>lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</i>	2	QL (1 EA per 1 day)
<i>lisdexamfetamine oral tablet,chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	2	QL (1 EA per 1 day)
<i>methamphetamine oral tablet 5 mg</i>	2	
<i>methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	2	QL (1 EA per 1 day)
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	2	QL (1 EA per 1 day)
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	2	
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	2	
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	2	QL (1 EA per 1 day)
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 54 mg</i>	2	QL (1 EA per 1 day)
<i>methylphenidate hcl oral tablet extended release 24hr 36 mg</i>	2	QL (2 EA per 1 day)
<i>methylphenidate hcl oral tablet,chewable 10 mg, 2.5 mg, 5 mg</i>	2	
<i>methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr</i>	2	QL (1 EA per 1 day)
ZENZEDI ORAL TABLET 10 MG, 5 MG	2	
<b>Attention Deficit-Hyperactivity Disorder (Adhd) Therapy, Nri-Type</b>		
<i>atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	2	
<b>Benzodiazepines</b>		
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	2	
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	1	
<i>clobazam oral suspension 2.5 mg/ml</i>	2	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>clobazam oral syringe 10 mg/4 ml</i>	2	
<i>clobazam oral tablet 10 mg, 20 mg</i>	2	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	2	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	2	
<b>DIAZEPAM INTENSOL ORAL CONCENTRATE 5 MG/ML</b>	2	
<i>diazepam oral concentrate 5 mg/ml</i>	2	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	2	
<i>diazepam oral tablet 10 mg</i>	1	
<i>diazepam oral tablet 2 mg, 5 mg</i>	2	
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	2	
<i>estazolam oral tablet 1 mg, 2 mg</i>	2	
<b>LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML</b>	2	
<i>lorazepam oral concentrate 2 mg/ml</i>	2	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	
<i>midazolam (pf) injection solution 1 mg/ml, 5 mg/ml</i>	2	
<i>midazolam (pf) injection syringe 2 mg/2 ml (1 mg/ml), 5 mg/ml</i>	2	
<i>midazolam injection solution 1 mg/ml, 5 mg/ml</i>	2	
<i>midazolam intravenous syringe 150 mg/30 ml (5 mg/ml)</i>	2	
<b>NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)</b>	4	QL (10 MG per 30 days)
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	2	
<i>temazepam oral capsule 15 mg, 30 mg</i>	2	
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	2	QL (1 EA per 1 day)
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	2	
<b>VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)</b>	4	QL (10 EA per 30 days)
<b>Bipolar Therapy Agents - Anticonvulsant Type</b>		
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	2	

Drug Name	Tier	Notes
<i>carbamazepine oral suspension 100 mg/5 ml</i>	2	
<i>carbamazepine oral tablet 200 mg</i>	1	PV (Preventive)
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	2	
<i>carbamazepine oral tablet, chewable 100 mg</i>	2	
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	2	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	2	
<i>divalproex oral tablet, delayed release (drlec) 125 mg, 250 mg, 500 mg</i>	1	
<i>lamotrigine oral tablets, dose pack 25 mg (35)</i>	1	
SUBVENITE STARTER (BLUE) KIT ORAL TABLETS, DOSE PACK 25 MG (35)	1	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml)</i>	2	
<i>valproic acid oral capsule 250 mg</i>	2	
<b>Bipolar Therapy Agents - Atypical Antipsychotics</b>		
<i>aripiprazole oral solution 1 mg/ml</i>	2	
<i>aripiprazole oral tablet 10 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	PV (Preventive)
<i>aripiprazole oral tablet 15 mg</i>	2	
<i>aripiprazole oral tablet, disintegrating 10 mg, 15 mg</i>	2	
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	2	PA; QL (2 EA per 1 day)
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	3	PA; QL (1 EA per 1 day)
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	PV (Preventive)
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	2	
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	PV (Preventive)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	2	QL (1 EA per 1 day)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	2	QL (2 EA per 1 day)
<i>risperidone oral solution 1 mg/ml</i>	2	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<i>risperidone oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	2	
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	PA; QL (1 EA per 1 day)
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	2	
<b>Bipolar Therapy Agents - Lithium</b>		
<i>lithium carbonate oral capsule 300 mg</i>	1	PV (Preventive)
<i>lithium carbonate oral tablet 300 mg</i>	1	PV (Preventive)
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	1	
<i>lithium citrate oral solution 8 meq/5 ml</i>	2	
<b>Cannabis And Cannabinoids</b>		
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<b>Cns Stimulant - Amphetamine Combinations</b>		
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 25 mg, 30 mg, 5 mg</i>	2	QL (1 EA per 1 day)
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 20 mg</i>	2	QL (2 EA per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	2	
<b>Cns Stimulant - Amphetamines</b>		
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 15 mg</i>	2	QL (4 EA per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	2	
<i>methamphetamine oral tablet 5 mg</i>	2	
ZENZEDI ORAL TABLET 10 MG, 5 MG	2	
<b>Fibromyalgia Agents - Gaba Analogs</b>		
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	2	
<i>pregabalin oral solution 20 mg/ml</i>	2	QL (30 ML per 1 day)
<b>Fibromyalgia Agents - Serotonin-Norepinephrine Reuptake-Inhib (Snris)</b>		
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	PV (Preventive)
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	4	PA; QL (2 EA per 1 day)

Last Updated: 03/01/2026

Drug Name	Tier	Notes
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	4	PA; QL (1 EA per 365 days)
<b>Hypnotics - Melatonin M1/M2 Receptor Agonists</b>		
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML	5	PA; QL (5 ML per 1 day); S
<i>ramelteon oral tablet 8 mg</i>	2	QL (1 EA per 1 day)
<i>tasimelteon oral capsule 20 mg</i>	5	PA; QL (1 EA per 1 day); S
<b>Migraine Therapy - Carboxylic Acid Derivatives</b>		
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	2	
<b>Migraine Therapy - Cgrp Ligand Blocker, Monoclonal Antibody</b>		
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	3	PA; QL (1.5 ML per 28 days)
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	3	PA; QL (1.5 ML per 28 days)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	3	PA; QL (1 ML per 28 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	3	PA; QL (1 ML per 28 days)
<b>Migraine Therapy - Cgrp Receptor Blockers (Gepants And Mab)</b>		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA; QL (1 ML per 28 days)
NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG	3	PA; QL (16 EA per 30 days)
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG	3	PA; QL (1 EA per 1 day)
UBRELVY ORAL TABLET 100 MG, 50 MG	3	PA; QL (16 EA per 30 days)
ZAVZPRET NASAL SPRAY,NON-AEROSOL 10 MG/ACTUATION	3	PA; QL (8 units per 30 days)
<b>Migraine Therapy - Ergot Alkaloids And Derivatives</b>		
<i>dihydroergotamine injection solution 1 mg/ml</i>	2	QL (24 ML per 28 days)
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	2	QL (8 ML per 30 days)
ERGOMAR SUBLINGUAL TABLET 2 MG	5	QL (20 EA per 30 days); LA; S
<b>Migraine Therapy - Ergot Combinations</b>		
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	2	QL (40 EA per 28 days)
<b>Migraine Therapy - Nsaid Analgesics (Cyclooxygenase Inhibitor)</b>		
<i>diclofenac potassium oral powder in packet 50 mg</i>	2	PA; QL (9 EA per 30 days)

Drug Name	Tier	Notes
<b>Migraine Therapy - Selective Serotonin Agonists 5-Ht(1)</b>		
<i>eletriptan oral tablet 20 mg, 40 mg</i>	2	QL (12 EA per 30 days)
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	2	QL (9 EA per 30 days)
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	1	QL (12 EA per 30 days)
<i>rizatriptan oral tablet, disintegrating 10 mg, 5 mg</i>	1	QL (12 EA per 30 days)
<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	2	QL (6 EA per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL (9 EA per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
<i>zolmitriptan nasal spray, non-aerosol 2.5 mg</i>	2	QL (12 EA per 30 days)
<i>zolmitriptan nasal spray, non-aerosol 5 mg</i>	2	QL (6 EA per 30 days)
<i>zolmitriptan oral tablet 2.5 mg</i>	2	QL (12 EA per 30 days)
<i>zolmitriptan oral tablet 5 mg</i>	2	QL (9 EA per 30 days)
<i>zolmitriptan oral tablet, disintegrating 2.5 mg</i>	2	QL (12 EA per 30 days)
<i>zolmitriptan oral tablet, disintegrating 5 mg</i>	2	QL (9 EA per 30 days)
ZOMIG ORAL TABLET 5 MG	4	QL (9 EA per 30 days)
<b>Movement Disorder Drug Therapy</b>		
AUSTEDO ORAL TABLET 12 MG, 9 MG	5	PA; QL (4 EA per 1 day); S
AUSTEDO ORAL TABLET 6 MG	5	PA; QL (2 EA per 1 day); S
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	5	PA; QL (1 EA per 1 day); LA; S
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	5	PA; QL (1 EA per 1 day); S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	5	PA; QL (1 EA per 365 days); S
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	2	PA; QL (4 EA per 1 day); LA; S
<b>Movement Disorder Therapy - Huntington's Disease</b>		
AUSTEDO ORAL TABLET 12 MG, 9 MG	5	PA; QL (4 EA per 1 day); S
AUSTEDO ORAL TABLET 6 MG	5	PA; QL (2 EA per 1 day); S

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Drug Name	Tier	Notes
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	5	PA; QL (1 EA per 1 day); LA; S
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	5	PA; QL (1 EA per 1 day); S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	5	PA; QL (1 EA per 365 days); S
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	2	PA; QL (4 EA per 1 day); LA; S
<b>Movement Disorder Therapy - Tardive Dyskinesia</b>		
AUSTEDO ORAL TABLET 12 MG, 9 MG	5	PA; QL (4 EA per 1 day); S
AUSTEDO ORAL TABLET 6 MG	5	PA; QL (2 EA per 1 day); S
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	5	PA; QL (1 EA per 1 day); LA; S
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	5	PA; QL (1 EA per 1 day); S
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	5	PA; QL (1 EA per 365 days); S
<b>Narcolepsy And Cataplexy Therapy Agents - Sedative-Type</b>		
LUMRYZ ORAL EXTEND RELEASE GRANULES,PACKET 4.5 GRAM, 6 GRAM, 7.5 GRAM, 9 GRAM	5	PA; QL (1 EA per 1 day); LA; S
LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK 4.5-6-7.5 GRAM	5	PA; QL (28 EA per 365 days); LA; S
<i>sodium oxybate oral solution 500 mg/ml</i>	5	PA; QL (540 ML per 30 days); LA; S
XYWAV ORAL SOLUTION 0.5 GRAM/ML	5	PA; QL (540 ML per 30 days); LA; S
<b>Narcolepsy Therapy Agents - Dopamine And Ne Reuptake Inhibitor (Dnri)</b>		
SUNOSI ORAL TABLET 150 MG, 75 MG	3	PA; QL (1 EA per 1 day)
<b>Narcolepsy Therapy Agents - H3-Receptor Antagonist/Inverse Agonist</b>		
WAKIX ORAL TABLET 17.8 MG, 4.45 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Narcolepsy Therapy Agents - Non-Sympathomimetic</b>		
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg</i>	2	QL (1 EA per 1 day)
<i>armodafinil oral tablet 50 mg</i>	2	QL (2 EA per 1 day)

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<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>modafinil oral tablet 100 mg, 200 mg</i>	2	
<b>Narcolepsy Therapy Agents - Stimulant-Type, Piperadine Derivative</b>		
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	2	
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	2	
<i>methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg</i>	2	
<b>Narcolepsy Therapy Agents- Stimulant-Type, Sympathomimetic, Amphetamines</b>		
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 15 mg</i>	2	QL (4 EA per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	2	
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	2	
ZENZEDI ORAL TABLET 10 MG, 5 MG	2	
<b>Pseudobulbar Affect (Pba) Agents, Nmda Antagonists Type</b>		
NUDEXTA ORAL CAPSULE 20-10 MG	4	PA; QL (2 EA per 1 day)
<b>Sedative-Hypnotic - Barbiturates</b>		
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	2	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	
<b>Sedative-Hypnotic - Benzodiazepines</b>		
<i>estazolam oral tablet 1 mg, 2 mg</i>	2	
<i>temazepam oral capsule 15 mg, 30 mg</i>	2	
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	2	QL (1 EA per 1 day)
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	2	
<b>Sedative-Hypnotic - Gaba-Receptor Modulators</b>		
<i>eszopiclone oral tablet 1 mg</i>	2	QL (2 EA per 1 day)
<i>eszopiclone oral tablet 2 mg, 3 mg</i>	2	QL (1 EA per 1 day)
<i>zaleplon oral capsule 10 mg, 5 mg</i>	1	QL (2 EA per 1 day)
<i>zolpidem oral tablet 10 mg</i>	1	QL (1 EA per 1 day)
<i>zolpidem oral tablet 5 mg</i>	1	QL (2 EA per 1 day)
<i>zolpidem oral tablet, ext release multiphase 12.5 mg, 6.25 mg</i>	2	QL (1 EA per 1 day)

Drug Name	Tier	Notes
<b>CHEMICAL DEPENDENCY, AGENTS TO TREAT</b>		
<b>Agents For Opioid Withdrawal, Central Alpha-2 Adrenergic Agonist-Type</b>		
<i>lofexidine oral tablet 0.18 mg</i>	2	QL (224 EA per 30 days)
<b>Agents For Opioid Withdrawal, Opioid-Type</b>		
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	2	QL (4 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 12-3 mg</i>	2	QL (3 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>	2	QL (4 EA per 1 day)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	2	QL (4 EA per 1 day)
<b>Alcohol Abstinence Therapy - Glutamate And Gaba System Type</b>		
<i>acamprosate oral tablet, delayed release (dr/ec) 333 mg</i>	2	
<b>Alcohol Abstinence Therapy - Opioid Receptor Antagonist-Type</b>		
<i>naltrexone oral tablet 50 mg</i>	2	
<b>Alcohol Deterrents</b>		
<i>disulfiram oral tablet 250 mg, 500 mg</i>	2	
<b>Smoking Deterrents - Ne And Dopamine Reuptake Inhibitor (Ndri)-Type</b>		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	0	
<b>Smoking Deterrents - Nicotine-Type</b>		
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 21 MG/24 HR	0	
<i>nicotine (polacrilex) buccal gum 2 mg, 4 mg</i>	0	
<i>nicotine (polacrilex) buccal lozenge 2 mg, 4 mg</i>	0	
<i>nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg</i>	0	
<i>nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr</i>	0	
<i>nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr</i>	0	
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	0	
QUIT 2 BUCCAL GUM 2 MG	0	
QUIT 2 BUCCAL LOZENGE 2 MG	0	
QUIT 4 BUCCAL GUM 4 MG	0	

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Drug Name	Tier	Notes
QUIT 4 BUCCAL LOZENGE 4 MG	0	
STOP SMOKING AID BUCCAL LOZENGE 2 MG, 4 MG	0	
<b>Smoking Deterrents - Nicotinic Receptor Partial Agonist, Alpha4beta2</b>		
<i>varenicline tartrate oral tablet 0.5 mg, 1 mg</i>	0	
<i>varenicline tartrate oral tablets,dose pack 0.5 mg (11)-1 mg (42)</i>	0	
<b>CHEMICALS-PHARMACEUTICAL ADJUVANTS</b>		
<b>Pharmaceutical Adjuvant - Inhalation Vehicles</b>		
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 %	2	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
<i>sodium chloride inhalation solution for nebulization 0.9 %, 10 %, 3 %</i>	2	
<i>sodium chloride inhalation solution for nebulization 7 %</i>	2	QL (240 ML per 30 days)
<b>COGNITIVE DISORDER THERAPY</b>		
<b>Alzheimer's Disease Therapy - Cholinesterase Inhibitors</b>		
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>donepezil oral tablet 23 mg</i>	2	
<i>donepezil oral tablet,disintegrating 10 mg, 5 mg</i>	1	
<i>galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	2	
<i>galantamine oral solution 4 mg/ml</i>	2	
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	2	
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	2	QL (2 EA per 1 day)
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	2	
<b>Alzheimer's Disease Therapy - Nmda Receptor Antagonists</b>		
<i>memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg</i>	2	QL (1 EA per 1 day)
<i>memantine oral solution 2 mg/ml</i>	2	QL (10 ML per 1 day)
<i>memantine oral tablet 10 mg, 5 mg</i>	2	
<i>memantine oral tablets,dose pack 5-10 mg</i>	2	

Drug Name	Tier	Notes
<b>Cognitive Disorder Therapy - Cerebral Vasodilators</b>		
<i>ergoloid oral tablet 1 mg</i>	2	
<b>CONTRACEPTIVES</b>		
<b>Contraceptive - Vaginal Ph Modulator</b>		
PHEXX VAGINAL GEL 1.8-1-0.4 %	0	
<b>Contraceptive Injectable - Progestin</b>		
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	0	
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	0	
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	0	
<b>Contraceptive Oral - Biphasic</b>		
AMETHIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
ASHLYNA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
AZURETTE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	
CAMRESE LO ORAL TABLETS,DOSE PACK,3 MONTH 0.1 MG-20 MCG (84)/10 MCG (7)	0	
CAMRESE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
DAYSEE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	0	
JAIMIESS ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
KARIVA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	
<i>l norgest/e.estradiol-e.estrad oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	0	
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG (24)/10 MCG (2)	0	
LOJAIMIESS ORAL TABLETS,DOSE PACK,3 MONTH 0.1 MG-20 MCG (84)/10 MCG (7)	0	
PIMTREA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	

Drug Name	Tier	Notes
SIMLIYA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	
SIMPESSE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	0	
VIORELE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	
VOLNEA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	0	
<b>Contraceptive Oral - Monophasic</b>		
AFIRMELLE ORAL TABLET 0.1-20 MG-MCG	0	
ALTAVERA (28) ORAL TABLET 0.15-0.03 MG	0	
ALYACEN 1/35 (28) ORAL TABLET 1-35 MG-MCG	0	
AMETHYST (28) ORAL TABLET 90-20 MCG (28)	0	
APRI ORAL TABLET 0.15-0.03 MG	0	
AUBRA EQ ORAL TABLET 0.1-20 MG-MCG	0	
AUBRA ORAL TABLET 0.1-20 MG-MCG	0	
AUROVELA 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	0	
AUROVELA 1/20 (21) ORAL TABLET 1-20 MG-MCG	0	
AUROVELA 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
AUROVELA FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
AUROVELA FE 1-20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
AVERI ORAL TABLET 0.15 MG-0.03 MG (21)/36.5 MG(7)	0	
AVIANE ORAL TABLET 0.1-20 MG-MCG	0	
AYUNA ORAL TABLET 0.15-0.03 MG	0	
BALZIVA (28) ORAL TABLET 0.4-35 MG-MCG	0	
BLISOVI 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
BLISOVI FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
BLISOVI FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
BRIELLYN ORAL TABLET 0.4-35 MG-MCG	0	
CHARLOTTE 24 FE ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4)	0	

Drug Name	Tier	Notes
CHATEAL EQ (28) ORAL TABLET 0.15-0.03 MG	0	
CRYSELLE (28) ORAL TABLET 0.3-30 MG-MCG	0	
CYRED EQ ORAL TABLET 0.15-0.03 MG	0	
CYRED ORAL TABLET 0.15-0.03 MG	0	
DASETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG	0	
DOLISHALE ORAL TABLET 90-20 MCG (28)	0	
<i>drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)</i>	0	
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	0	
ELINEST ORAL TABLET 0.3-30 MG-MCG	0	
ENSKYCE ORAL TABLET 0.15-0.03 MG	0	
ESTARYLLA ORAL TABLET 0.25-0.035 MG	0	
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	0	
FALMINA (28) ORAL TABLET 0.1-20 MG-MCG	0	
FEIRZA ORAL TABLET 1 MG-20 MCG (21)/75 MG (7), 1.5 MG-30 MCG (21)/75 MG (7)	0	
FEMLYV ORAL TABLET,DISINTEGRATING 1 MG- 20 MCG	0	
FINZALA ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4)	0	
GALBRIELA ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4)	0	
GEMMILY ORAL CAPSULE 1 MG-20 MCG (24)/75 MG (4)	0	
HAILEY 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
HAILEY FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
HAILEY FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
HAILEY ORAL TABLET 1.5-30 MG-MCG	0	
ICLEVIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	0	
ISIBLOOM ORAL TABLET 0.15-0.03 MG	0	
JASMIEL (28) ORAL TABLET 3-0.02 MG	0	
JOLESSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	0	

Drug Name	Tier	Notes
JOYEAUX ORAL TABLET 0.1 MG-0.02 MG (21)/IRON (7)	0	
JULEBER ORAL TABLET 0.15-0.03 MG	0	
JUNEL 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	0	
JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG	0	
JUNEL FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
JUNEL FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
JUNEL FE 24 ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
KAITLIB FE ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4)	0	
KALLIGA ORAL TABLET 0.15-0.03 MG	0	
KELNOR 1/35 (28) ORAL TABLET 1-35 MG-MCG	0	
KURVELO (28) ORAL TABLET 0.15-0.03 MG	0	
LARIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	0	
LARIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	0	
LARIN 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
LARIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
LARIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
LESSINA ORAL TABLET 0.1-20 MG-MCG	0	
<i>levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	0	
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)</i>	0	
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)</i>	0	
LORYNA (28) ORAL TABLET 3-0.02 MG	0	
LOW-OGESTREL (28) ORAL TABLET 0.3-30 MG-MCG	0	
LO-ZUMANDIMINE (28) ORAL TABLET 3-0.02 MG	0	
LUIZZA ORAL TABLET 1-20 MG-MCG, 1.5-30 MG-MCG	0	
LUTERA (28) ORAL TABLET 0.1-20 MG-MCG	0	
MARLISSA (28) ORAL TABLET 0.15-0.03 MG	0	

Drug Name	Tier	Notes
MIBELAS 24 FE ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4)	0	
MICROGESTIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	0	
MICROGESTIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	0	
MICROGESTIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	0	
MICROGESTIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
MILI ORAL TABLET 0.25-0.035 MG	0	
MONO-LINYAH ORAL TABLET 0.25-0.035 MG	0	
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	0	
NIKKI (28) ORAL TABLET 3-0.02 MG	0	
<i>noreth-ethinyl estradiol-iron oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	0	
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	0	
<i>norethindrone-e.estradiol-iron oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	0	
<i>norethindrone-e.estradiol-iron oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	0	
<i>norethindrone-e.estradiol-iron oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)</i>	0	
<i>norgestimate-ethinyl estradiol oral tablet 0.25-0.035 mg</i>	0	
NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	0	
NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG (21)	0	
NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG	0	
NYLIA 1/35 (28) ORAL TABLET 1-35 MG-MCG	0	
OCELLA ORAL TABLET 3-0.03 MG	0	
PHILITH ORAL TABLET 0.4-35 MG-MCG	0	
PORTIA 28 ORAL TABLET 0.15-0.03 MG	0	
RECLIPSEN (28) ORAL TABLET 0.15-0.03 MG	0	
SETLAKIN ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	0	
SPRINTEC (28) ORAL TABLET 0.25-0.035 MG	0	
SYEDA ORAL TABLET 3-0.03 MG	0	

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Drug Name	Tier	Notes
TARINA 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	0	
TARINA FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
TARINA FE 1-20 EQ (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	0	
TURQOZ (28) ORAL TABLET 0.3-30 MG-MCG	0	
TYBLUME ORAL TABLET,CHEWABLE 0.1 MG- 20 MCG	0	
TYDEMY ORAL TABLET 3-0.03-0.451 MG (21) (7)	0	
VALTYA ORAL TABLET 1-35 MG-MCG, 1-50 MG-MCG	0	
VESTURA (28) ORAL TABLET 3-0.02 MG	0	
VIENVA ORAL TABLET 0.1-20 MG-MCG	0	
VYFEMLA (28) ORAL TABLET 0.4-35 MG-MCG	0	
VYLIBRA ORAL TABLET 0.25-0.035 MG	0	
WERA (28) ORAL TABLET 0.5-35 MG-MCG	0	
WYMZYA FE ORAL TABLET,CHEWABLE 0.4MG-35MCG(21) AND 75 MG (7)	0	
XELRIA FE ORAL TABLET,CHEWABLE 0.4MG-35MCG(21) AND 75 MG (7)	0	
ZARAH ORAL TABLET 3-0.03 MG	0	
ZOVIA 1-35 (28) ORAL TABLET 1-35 MG-MCG	0	
ZUMANDIMINE (28) ORAL TABLET 3-0.03 MG	0	
<b>Contraceptive Oral - Progestin</b>		
CAMILA ORAL TABLET 0.35 MG	0	
DEBLITANE ORAL TABLET 0.35 MG	0	
EMZAHH ORAL TABLET 0.35 MG	0	
ERRIN ORAL TABLET 0.35 MG	0	
HEATHER ORAL TABLET 0.35 MG	0	
INCASSIA ORAL TABLET 0.35 MG	0	
JENCYCLA ORAL TABLET 0.35 MG	0	
LYLEQ ORAL TABLET 0.35 MG	0	
LYZA ORAL TABLET 0.35 MG	0	
MELEYA ORAL TABLET 0.35 MG	0	
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	0	
ORQUIDEA ORAL TABLET 0.35 MG	0	
SHAROBEL ORAL TABLET 0.35 MG	0	

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Drug Name	Tier	Notes
SLYND ORAL TABLET 4 MG (28)	0	
TULANA ORAL TABLET 0.35 MG	0	
<b>Contraceptive Oral - Quadraphasic</b>		
NATAZIA ORAL TABLET 3 MG/2 MG-2 MG/ 2 MG-3 MG/1 MG	0	
RIVELSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG	0	
ROSYRAH ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG	0	
<b>Contraceptive Oral - Triphasic</b>		
ALYACEN 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG-35 MCG	0	
ARANELLE (28) ORAL TABLET 0.5/1/0.5-35 MG-MCG	0	
CAZIAN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG	0	
DASETTA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG-35 MCG	0	
ENPRESSE ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	0	
LEVONEST (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	0	
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	0	
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg, 0.18/0.215/0.25 mg-0.035mg (28)</i>	0	
NORTREL 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG-35 MCG	0	
NYLIA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	0	
TILIA FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9)	0	
TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	0	
TRI-LEGEST FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9)	0	
TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	0	
TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	0	

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Drug Name	Tier	Notes
TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	0	
TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	0	
TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	0	
TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	0	
TRI-SPRINTEC (28) ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	0	
TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	0	
TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	0	
VELIVET TRIPHASIC REGIMEN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG	0	
XARAH FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9)	0	
<b>Contraceptive Transdermal Combinations - Estrogen And Progestin Comb.</b>		
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24 HR	0	
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR	0	
ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR	0	
<b>Contraceptives - Intravaginal, Systemic - Estrogen And Progestin Comb.</b>		
ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR	0	QL (1 EA per 365 days)
ELURYNG VAGINAL RING 0.12-0.015 MG/24 HR	0	
ENILLORING VAGINAL RING 0.12-0.015 MG/24 HR	0	
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i>	0	
HALOETTE VAGINAL RING 0.12-0.015 MG/24 HR	0	
<b>Emergency Contraceptives - Progesterone Agonist/Antagonist Type</b>		
ELLA ORAL TABLET 30 MG	0	
<b>Emergency Contraceptives - Progestin Type</b>		
AFTER PILL ORAL TABLET 1.5 MG	0	

Drug Name	Tier	Notes
AFTERA ORAL TABLET 1.5 MG	0	
ECONTRA EZ ORAL TABLET 1.5 MG	0	
ECONTRA ONE-STEP ORAL TABLET 1.5 MG	0	
<i>levonorgestrel oral tablet 1.5 mg</i>	0	
MY CHOICE ORAL TABLET 1.5 MG	0	
MY WAY ORAL TABLET 1.5 MG	0	
NEW DAY ORAL TABLET 1.5 MG	0	
OPCICON ONE-STEP ORAL TABLET 1.5 MG	0	
OPTION-2 ORAL TABLET 1.5 MG	0	
TAKE ACTION ORAL TABLET 1.5 MG	0	
<b>Emergency Contraceptives</b>		
AFTER PILL ORAL TABLET 1.5 MG	0	
AFTERA ORAL TABLET 1.5 MG	0	
ECONTRA EZ ORAL TABLET 1.5 MG	0	
ECONTRA ONE-STEP ORAL TABLET 1.5 MG	0	
ELLA ORAL TABLET 30 MG	0	
<i>levonorgestrel oral tablet 1.5 mg</i>	0	
MY CHOICE ORAL TABLET 1.5 MG	0	
MY WAY ORAL TABLET 1.5 MG	0	
NEW DAY ORAL TABLET 1.5 MG	0	
OPCICON ONE-STEP ORAL TABLET 1.5 MG	0	
OPTION-2 ORAL TABLET 1.5 MG	0	
TAKE ACTION ORAL TABLET 1.5 MG	0	
<b>Spermicides</b>		
VAGINAL CONTRACEPTIVE FILM VAGINAL FILM 28 %	0	
VCF CONTRACEPTIVE FILM VAGINAL FILM 28 %	0	
VCF CONTRACEPTIVE GEL VAGINAL GEL 4 %	0	
<b>DERMATOLOGICAL</b>		
<b>Acne Therapy Systemic - Retinoids And Derivatives</b>		
ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	2	
AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	2	
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	2	

Drug Name	Tier	Notes
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	2	
ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	2	
<b>Acne Therapy Topical - Anti-Infective</b>		
<i>azelaic acid topical gel 15 %</i>	2	
<i>clindamycin phosphate topical gel 1 %</i>	2	
<i>clindamycin phosphate topical lotion 1 %</i>	2	
<i>clindamycin phosphate topical solution 1 %</i>	2	
<i>clindamycin phosphate topical swab 1 %</i>	2	
<i>dapsone topical gel 5 %, 7.5 %</i>	2	
<i>dapsone topical gel with pump 7.5 %</i>	2	
ERY PADS TOPICAL SWAB 2 %	2	
<i>erythromycin with ethanol topical gel 2 %</i>	2	
<i>erythromycin with ethanol topical solution 2 %</i>	2	
FINACEA TOPICAL FOAM 15 %	4	
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	2	
<b>Acne Therapy Topical - Anti-Infective-Keratolytic Combinations</b>		
<i>clindamycin-benzoyl peroxide topical gel 1-5 %, 1.2 % (1 % base) -5 %</i>	2	
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %</i>	2	
<i>erythromycin-benzoyl peroxide topical gel 3-5 %</i>	2	
NEUAC TOPICAL GEL 1.2 % (1 % BASE) -5 %	2	
<b>Acne Therapy Topical - Retinoids And Derivatives</b>		
ALTRENO TOPICAL LOTION 0.05 %	4	
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	2	
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	2	
<b>Antipsoriatic - Vitamin D Analog - Glucocorticoid Combinations</b>		
<i>calcipotriene-betamethasone topical ointment 0.005-0.064 %</i>	2	
<i>calcipotriene-betamethasone topical suspension 0.005-0.064 %</i>	2	
<b>Antipsoriatic Agents - Interleukin 12 And Il-23 Inhibitors, Mc Antibody</b>		
SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
SELARSDI SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S
SELARSDI SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 ML per 84 days); S
STEQEYMA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S
STEQEYMA SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 ML per 84 days); S
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S
YESINTEK SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); LA; S
YESINTEK SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 ML per 84 days); S
<b>Antipsoriatic Agents - Interleukin-23 (Il-23) Antagonist, Mc Antibody</b>		
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	5	PA; QL (1 ML per 84 days); S
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL (1 ML per 84 days); S
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	5	PA; QL (1 ML per 56 days); S
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; QL (1 ML per 56 days); S
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 56 days); S
<b>Antipsoriatic Agents - Tyrosine Kinase 2 (Tyk2) Inhibitor</b>		
SOTYKTU ORAL TABLET 6 MG	5	PA; QL (1 EA per 1 day); S
<b>Antipsoriatic Agents-Interleukin-17 (Il-17) Antagonist, Mc Antibody</b>		
BIMZELX AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 160 MG/ML	5	PA; QL (1 ML per 28 days); S
BIMZELX AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 320 MG/2 ML	5	PA; QL (2 ML per 56 days); S
BIMZELX SUBCUTANEOUS SYRINGE 160 MG/ML	5	PA; QL (1 ML per 28 days); S
BIMZELX SUBCUTANEOUS SYRINGE 320 MG/2 ML	5	PA; QL (2 ML per 56 days); S
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL (4 ML per 56 days); S
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	5	PA; QL (2 ML per 28 days); S
COSENTYX PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML	5	PA; QL (2 ML per 28 days); S
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	5	PA; QL (2 ML per 28 days); S

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Drug Name	Tier	Notes
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	5	PA; QL (2 ML per 28 days); S
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	5	PA; QL (1 ML per 28 days); S
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	5	PA; QL (1 ML per 28 days); S
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	5	PA; QL (1 ML per 28 days); S
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML	5	PA; QL (0.25 ML per 28 days); S
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 40 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	5	PA; QL (1 ML per 28 days); S
<b>Dermatitis - Janus Kinase (Jak) Inhibitors</b>		
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	5	PA; QL (1 EA per 1 day); S
<b>Dermatitis Agents, Systemic - Interleukin-13 Inhibitors Mab</b>		
ADBRY SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	5	PA; QL (2 ML per 28 days); S
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL (2 ML per 28 days); S
EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR 250 MG/2 ML	5	PA; QL (2 ML per 28 days); LA; S
EBGLYSS SYRINGE SUBCUTANEOUS SYRINGE 250 MG/2 ML	5	PA; QL (2 ML per 28 days); LA; S
<b>Dermatitis Agents, Systemic - Il-31 Receptor Alpha Antagonist Mab</b>		
NEMLUVIO SUBCUTANEOUS PEN INJECTOR 30 MG	5	PA; QL (1 mL per 56 days); LA; S
<b>Dermatitis Agents, Systemic - Il-4 Receptor Alpha Antagonist (Il-4Ra) Mab</b>		
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	5	PA; QL (2.28 ML per 28 days); S
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	5	PA; QL (4 ML per 28 days); S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	5	PA; QL (2.28 ML per 28 days); S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; QL (4 ML per 28 days); S

Drug Name	Tier	Notes
<b>Dermatitis Or Eczema Agents, Topical - Phosphodiesterase-4 Inhibitors</b>		
EUCRISA TOPICAL OINTMENT 2 %	4	PA; QL (60 GM per 30 days)
<b>Dermatological - Antibacterial Aminoglycosides</b>		
<i>gentamicin topical cream 0.1 %</i>	2	
<i>gentamicin topical ointment 0.1 %</i>	2	
<b>Dermatological - Antibacterial Other</b>		
<i>mupirocin topical ointment 2 %</i>	1	
<b>Dermatological - Anticholinergic Hyperhidrosis Treatment Agents</b>		
QBREXZA TOPICAL TOWELETTE 2.4 %	4	PA; QL (1 EA per 1 day)
<b>Dermatological - Antifungal Allylamines</b>		
<i>naftifine topical cream 1 %, 2 %</i>	2	
<b>Dermatological - Antifungal Amphoteric Polyene Macrolides</b>		
NYAMYC TOPICAL POWDER 100,000 UNIT/GRAM	2	
<i>nystatin topical cream 100,000 unit/gram</i>	2	
<i>nystatin topical ointment 100,000 unit/gram</i>	2	
<i>nystatin topical powder 100,000 unit/gram</i>	2	
NYSTOP TOPICAL POWDER 100,000 UNIT/GRAM	2	
<b>Dermatological - Antifungal Hydroxypyridinone</b>		
<i>ciclopirox topical cream 0.77 %</i>	2	
<i>ciclopirox topical gel 0.77 %</i>	2	
<i>ciclopirox topical shampoo 1 %</i>	2	
<i>ciclopirox topical suspension 0.77 %</i>	2	
<b>Dermatological - Antifungal Imidazole And Related Agents</b>		
<i>econazole nitrate topical cream 1 %</i>	2	
ERTACZO TOPICAL CREAM 2 %	4	
<i>ketoconazole topical cream 2 %</i>	2	
<i>ketoconazole topical shampoo 2 %</i>	2	
<i>oxiconazole topical cream 1 %</i>	2	
<b>Dermatological - Antifungal-Glucocorticoid Combinations</b>		
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	2	
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	2	
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	2	

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Drug Name	Tier	Notes
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	2	
<b>Dermatological - Antineoplastic Alkylating Agents</b>		
VALCHLOR TOPICAL GEL 0.016 %	5	LA; S
<b>Dermatological - Antineoplastic Antimetabolites</b>		
<i>fluorouracil topical cream 0.5 %</i>	2	PA
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution 2 %, 5 %</i>	2	
TOLAK TOPICAL CREAM 4 %	3	
<b>Dermatological - Antineoplastic Or Premalign. Lesions - Antimicrotubule</b>		
KLISYRI (250 MG) TOPICAL OINTMENT IN PACKET 1 %	4	PA
KLISYRI (350 MG) TOPICAL OINTMENT IN PACKET 1 %	4	PA
<b>Dermatological - Antineoplastic Or Premalignant Lesions - Nsaid's</b>		
<i>diclofenac sodium topical gel 3 %</i>	2	
<b>Dermatological - Antineoplastic Retinoids</b>		
PANRETIN TOPICAL GEL 0.1 %	5	LA; S
<b>Dermatological - Antineoplastic Selective Retinoid X Receptor Agonist</b>		
<i>bexarotene topical gel 1 %</i>	5	PA; QL (60 GM per 30 days); S
<b>Dermatological - Antiperspirants</b>		
DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 %	4	
DRYSOL TOPICAL SOLUTION 20 %	4	
<b>Dermatological - Antipsoriatic Agents Systemic, Photosensitizing</b>		
<i>methoxsalen oral capsule,liqd-filled,rapid rel 10 mg</i>	5	S
<b>Dermatological - Antipsoriatic Agents Systemic, Vitamin A Derivatives</b>		
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	2	
<b>Dermatological - Antipsoriatic Agents Topical</b>		
<i>calcipotriene scalp solution 0.005 %</i>	2	
<i>calcipotriene topical cream 0.005 %</i>	2	
<i>calcipotriene topical ointment 0.005 %</i>	2	
<i>calcitriol topical ointment 3 mcg/gram</i>	2	QL (100 GM per 30 days)
<i>tazarotene topical cream 0.1 %</i>	2	

Drug Name	Tier	Notes
<b>Dermatological - Antipsoriatics Systemic, Phosphodiesterase 4 Inhib.</b>		
OTEZLA ORAL TABLET 20 MG, 30 MG	5	PA; QL (2 EA per 1 day); S
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; QL (1 clm per 365 days); S
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG(19)	5	PA; QL (1 clm per 365 days)
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK 10-20-30-75 MG	5	PA; QL (41 EA per 28 days); S
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG	5	PA; QL (1 EA per 1 day); S
<b>Dermatological - Antiseborrheic</b>		
<i>selenium sulfide topical lotion 2.5 %</i>	1	
<b>Dermatological - Antiviral, Herpes</b>		
<i>acyclovir topical ointment 5 %</i>	2	
<i>penciclovir topical cream 1 %</i>	2	PA; QL (10 GM per 365 days)
<b>Dermatological - Burn Products Anti-Infective</b>		
<i>silver sulfadiazine topical cream 1 %</i>	2	
SULFAMYLON TOPICAL CREAM 85 MG/G	4	
<b>Dermatological - Calcineurin Inhibitors</b>		
<i>pimecrolimus topical cream 1 %</i>	2	ST
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	2	
<b>Dermatological - Enzymes</b>		
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	4	QL (30 GM per 30 days)
<b>Dermatological - Glucocorticoid</b>		
<i>alclometasone topical cream 0.05 %</i>	2	
<i>alclometasone topical ointment 0.05 %</i>	2	
<i>amcinonide topical cream 0.1 %</i>	2	
<i>amcinonide topical ointment 0.1 %</i>	2	
ANUSOL-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
BESER TOPICAL LOTION 0.05 %	2	
<i>betamethasone dipropionate topical cream 0.05 %</i>	2	
<i>betamethasone dipropionate topical lotion 0.05 %</i>	2	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	2	
<i>betamethasone valerate topical cream 0.1 %</i>	2	
<i>betamethasone valerate topical lotion 0.1 %</i>	2	
<i>betamethasone valerate topical ointment 0.1 %</i>	2	

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Drug Name	Tier	Notes
<i>betamethasone, augmented topical cream 0.05 %</i>	2	
<i>betamethasone, augmented topical gel 0.05 %</i>	2	
<i>betamethasone, augmented topical lotion 0.05 %</i>	2	
<i>betamethasone, augmented topical ointment 0.05 %</i>	2	
<i>clobetasol scalp solution 0.05 %</i>	2	
<i>clobetasol topical cream 0.05 %</i>	2	
<i>clobetasol topical foam 0.05 %</i>	2	
<i>clobetasol topical gel 0.05 %</i>	2	
<i>clobetasol topical lotion 0.05 %</i>	2	
<i>clobetasol topical ointment 0.05 %</i>	2	
<i>clobetasol topical shampoo 0.05 %</i>	2	
<i>clobetasol topical spray,non-aerosol 0.05 %</i>	2	
<i>clobetasol-emollient topical cream 0.05 %</i>	2	
<i>clocortolone pivalate topical cream 0.1 %</i>	2	
CLODAN TOPICAL SHAMPOO 0.05 %	2	
CORDRAN TAPE LARGE ROLL TOPICAL TAPE 4 MCG/CM2	4	
<i>desonide topical cream 0.05 %</i>	2	
<i>desonide topical lotion 0.05 %</i>	2	
<i>desonide topical ointment 0.05 %</i>	2	
<i>desoximetasone topical cream 0.05 %, 0.25 %</i>	2	
<i>desoximetasone topical gel 0.05 %</i>	2	
<i>desoximetasone topical ointment 0.05 %, 0.25 %</i>	2	
<i>desoximetasone topical spray,non-aerosol 0.25 %</i>	2	
<i>diflorasone topical cream 0.05 %</i>	2	
<i>diflorasone topical ointment 0.05 %</i>	2	
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	2	
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>	2	
<i>fluocinolone topical oil 0.01 %</i>	2	
<i>fluocinolone topical ointment 0.025 %</i>	2	
<i>fluocinolone topical solution 0.01 %</i>	2	
<i>fluocinonide topical cream 0.05 %, 0.1 %</i>	2	
<i>fluocinonide topical gel 0.05 %</i>	2	
<i>fluocinonide topical ointment 0.05 %</i>	2	
<i>fluocinonide topical solution 0.05 %</i>	2	
FLUOCINONIDE-E TOPICAL CREAM 0.05 %	2	

<b>Drug Name</b>	<b>Tier</b>	<b>Notes</b>
<i>fluocinonide-emollient topical cream 0.05 %</i>	2	
<i>fluticasone propionate topical cream 0.05 %</i>	2	
<i>fluticasone propionate topical lotion 0.05 %</i>	2	
<i>fluticasone propionate topical ointment 0.005 %</i>	2	
<i>halcinonide topical cream 0.1 %</i>	2	
<i>halobetasol propionate topical cream 0.05 %</i>	2	
<i>halobetasol propionate topical ointment 0.05 %</i>	2	
<i>hydrocortisone butyrate topical cream 0.1 %</i>	2	
<i>hydrocortisone butyrate topical ointment 0.1 %</i>	2	
<i>hydrocortisone butyrate topical solution 0.1 %</i>	2	
<i>hydrocortisone topical cream 2.5 %</i>	1	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	2	
<i>hydrocortisone topical lotion 2.5 %</i>	2	
<i>hydrocortisone topical ointment 2.5 %</i>	1	
<i>hydrocortisone topical solution 2.5 %</i>	2	
<i>hydrocortisone valerate topical cream 0.2 %</i>	2	
<i>hydrocortisone valerate topical ointment 0.2 %</i>	2	
<i>mometasone topical cream 0.1 %</i>	1	
<i>mometasone topical ointment 0.1 %</i>	1	
<i>mometasone topical solution 0.1 %</i>	2	
<i>prednicarbate topical cream 0.1 %</i>	2	
PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
PROCTOSOL HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	2	
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	2	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	2	
TRIANEX TOPICAL OINTMENT 0.05 %	2	
TRIDERM TOPICAL CREAM 0.5 %	1	

Drug Name	Tier	Notes
<b>Dermatological - Glucocorticoid-Local Anesthetic Combinations</b>		
EPIFOAM TOPICAL FOAM 1-1 %	4	
<b>Dermatological - Immunomodulator - Imidazoquinolinamines</b>		
<i>imiquimod topical cream in metered-dose pump 3.75 %</i>	2	PA
<i>imiquimod topical cream in packet 3.75 %</i>	2	PA
<i>imiquimod topical cream in packet 5 %</i>	2	
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 2.5 %	4	PA
<b>Dermatological - Keratolytic-Antimitotic Single Agents</b>		
<i>podofilox topical gel 0.5 %</i>	2	
<i>podofilox topical solution 0.5 %</i>	2	
<b>Dermatological - Local Anesthetic Combinations</b>		
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	2	
<b>Dermatological - Nsaid Single Agents</b>		
<i>diclofenac sodium topical drops 1.5 %</i>	2	
<b>Dermatological - Retinoids (Vitamin A Derivatives) - Topical Cosmetic</b>		
<i>tazarotene topical cream 0.1 %</i>	2	
<b>Dermatological - Rosacea Therapy, Topical</b>		
<i>azelaic acid topical gel 15 %</i>	2	
FINACEA TOPICAL FOAM 15 %	4	
<i>ivermectin topical cream 1 %</i>	2	ST; QL (45 GM per 30 days)
<i>metronidazole topical cream 0.75 %</i>	2	
<i>metronidazole topical gel 0.75 %, 1 %</i>	2	
<i>metronidazole topical gel with pump 1 %</i>	2	
<i>metronidazole topical lotion 0.75 %</i>	2	
<b>Dermatological - Topical Local Anesthetic Amides</b>		
DERMACINRX LIDOCAN TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
GLYDO MUCOUS MEMBRANE JELLY IN APPLICATOR 2 %	2	
<i>lidocaine hcl mucous membrane jelly in applicator 2 %</i>	2	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	PA
<i>lidocaine topical ointment 5 %</i>	2	

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Drug Name	Tier	Notes
LIDOCAN III TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
LIDOCAN IV TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
LIDOCAN V TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
TRIDACAINE II TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
TRIDACAINE III TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
TRIDACAINE XL TOPICAL ADHESIVE PATCH,MEDICATED 5 %	2	PA
<b>Scabicide And Pediculicide Single Agents</b>		
EURAX TOPICAL CREAM 10 %	4	
<i>malathion topical lotion 0.5 %</i>	2	
<i>permethrin topical cream 5 %</i>	2	
<i>spinosad topical suspension 0.9 %</i>	2	
ULESFIA TOPICAL LOTION 5 %	4	
<b>DRUGS TO TREAT ERECTILE DYSFUNCTION</b>		
<b>Erectile Dysfunction (Ed) Drugs-Sel.Cgmp Phosphodiesterase Type5 Inhib</b>		
<i>tadalafil oral tablet 5 mg</i>	2	QL (1 EA per 1 day)
<b>ELECTROLYTE BALANCE-NUTRITIONAL PRODUCTS</b>		
<b>Amino Acid - Carnitine Derivatives</b>		
ACTICARNITINE SF ORAL SOLUTION 1 GRAM/10 ML	2	
<i>levocarnitine oral solution 1 gram/10 ml</i>	2	
<b>Electrolyte Depleters - Ion Exchange Resin</b>		
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	3	
<i>sodium polystyrene sulfonate oral powder 15 gram</i>	2	
<i>sodium polystyrene sulfonate oral suspension 15 gram/60 ml</i>	2	
SPS (WITH SORBITOL) RECTAL ENEMA 30-40 GRAM/120 ML	4	
VELTASSA ORAL POWDER IN PACKET 1 GRAM, 16.8 GRAM, 8.4 GRAM	3	

Drug Name	Tier	Notes
<b>Minerals And Electrolytes - Iron</b>		
<i>ferric citrate oral tablet 210 mg iron</i>	2	ST
<i>ferrous sulfate oral drops 15 mg iron (75 mg)/ml</i>	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
FE-VITE ORAL DROPS 15 MG IRON (75 MG)/ML	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
PEDIA IRON ORAL DROPS 15 MG IRON (75 MG)/ML	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
WEE CARE ORAL SUSPENSION 15 MG/1.25 ML	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
<b>Minerals And Electrolytes - Phosphate</b>		
PHOSPHA 250 NEUTRAL ORAL TABLET 250 MG	2	
PHOSPHOROUS ORAL TABLET 250 MG	2	
PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET 250 MG	2	
WES-PHOS 250 NEUTRAL ORAL TABLET 250 MG	2	
<b>Minerals And Electrolytes - Potassium, Oral</b>		
KLOR-CON M10 ORAL TABLET,ER PARTICLES/CRYSTALS 10 MEQ	2	
KLOR-CON M20 ORAL TABLET,ER PARTICLES/CRYSTALS 20 MEQ	2	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	2	
<i>potassium chloride oral tablet extended release 10 meq, 15 meq, 20 meq, 8 meq</i>	2	
<i>potassium chloride oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq</i>	2	
<b>Multivitamin And Mineral Combinations</b>		
NIVA-PLUS ORAL TABLET 27 MG IRON- 1 MG	0	
<b>Multivitamins</b>		
PRENATAL-U ORAL CAPSULE 106.5-1 MG	0	
<b>Prenatal Vitamins And Minerals</b>		
CLASSIC PRENATAL ORAL TABLET 28 MG IRON- 800 MCG	0	
KPN ORAL TABLET 9 MG IRON- 267 MCG	0	
MINI PRENATAL ORAL TABLET 6.75 MG IRON- 200 MCG	0	
M-NATAL PLUS ORAL TABLET 27 MG IRON- 1 MG	0	

Drug Name	Tier	Notes
ONE A DAY WOMEN'S PRENATAL DHA ORAL COMBO PACK 28 MG IRON- 800 MCG	0	
ONE-A-DAY PRENATAL-1 ORAL CAPSULE 27 MG IRON- 800 MCG-235 MG	0	
<i>pnv no.95-ferrous fumarate-fa oral tablet 28 mg iron-800 mcg</i>	0	
PRENATAL + DHA ORAL COMBO PACK 28 MG IRON-800 MCG-200 MG	0	
PRENATAL 19 ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	0	
PRENATAL COMPLETE ORAL TABLET 14 MG IRON- 400 MCG	0	
PRENATAL FORMULA ORAL TABLET 9 MG IRON-267 MCG	0	
PRENATAL FORMULA-DHA ORAL CAPSULE 28 MG-800 MCG- 200 MG	0	
PRENATAL MULTI ORAL TABLET 27-800 MG-MCG	0	
PRENATAL MULTI-DHA (ALGAL OIL) ORAL CAPSULE 27MG IRON- 800 MCG-250 MG	0	
PRENATAL MULTI-DHA(WITH VIT K) ORAL CAPSULE 27 MG IRON-800 MCG-260 MG	0	
PRENATAL MULTIVITAMINS ORAL TABLET 28 MG IRON- 800 MCG	0	
PRENATAL ONE DAILY ORAL TABLET 27 MG IRON-800 MCG	0	
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG, 28-800 MG-MCG	0	
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG	0	
PRENATAL PLUS ORAL TABLET 29 MG IRON- 1 MG	0	
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG	0	
PRENATAL TABLET ORAL TABLET 28 MG IRON-800 MCG	0	
<i>prenatal vit no.179-iron-folic oral tablet 28 mg iron- 800 mcg</i>	0	
PRENATAL VITAMIN ORAL TABLET 27 MG IRON-0.8 MG, 27 MG IRON- 800 MCG	0	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	0	

Drug Name	Tier	Notes
PRENATAL VITAMIN WITH MINERALS ORAL TABLET 28 MG IRON- 800 MCG	0	
<i>prenatal vit-iron fum-folic ac oral tablet 28 mg iron- 800 mcg</i>	0	
PRENATAL WITH DHA-FOLIC ACID ORAL TABLET,CHEWABLE 400-32.5 MCG-MG	0	
SIMILAC PRENATAL ORAL COMBO PACK 27 MG IRON-800 MCG-200 MG	0	
STUART ONE ORAL CAPSULE 27 MG IRON- 800 MCG-200 MG	0	
THERANATAL COMPLETE ORAL COMBO PACK 27 MG IRON- 1 MG-150 MG	0	
THERANATAL ONE ORAL CAPSULE 27 MG IRON-1000 MCG-300 MG	0	
THERANATAL ORAL TABLET 27 MG IRON- 1 MG	0	
THERANATAL PLUS ORAL COMBO PACK 27 MG IRON- 1 MG-300 MG	0	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	0	
WESTAB PLUS ORAL TABLET 27 MG IRON- 1 MG	0	
<b>Prenatal Vitamins With Low Or No Iron (Less Than 27 Mg)</b>		
PRENATAL GUMMIES ORAL TABLET,CHEWABLE 400 MCG-35 MG- 25 MG-5 MG	0	
PRENATAL ORAL TABLET,CHEWABLE 400 MCG	0	
THERANATAL OVAVITE ORAL COMBO PACK 18-1-125 MG-MG-UNIT	0	
<b>Vitamins - B-12, Cyanocobalamin And Derivatives</b>		
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	1	
DODEX INJECTION SOLUTION 1,000 MCG/ML	1	
<b>Vitamins - B-3, Niacin And Derivatives</b>		
<i>niacin oral tablet 500 mg</i>	2	
<b>Vitamins - D Derivatives</b>		
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	2	
<i>calcitriol oral solution 1 mcg/ml</i>	2	
<i>cholecalciferol (vitamin d3) oral drops 10 mcg/ml (400 unit/ml)</i>	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
D-VI-SOL ORAL DROPS 10 MCG/ML (400 UNIT/ML)	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)

Drug Name	Tier	Notes
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
PEDIA D-VITE ORAL DROPS 10 MCG/ML (400 UNIT/ML)	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
PEDIATRIC D-VITE ORAL DROPS 10 MCG/ML (400 UNIT/ML)	0	Note (ACA ELIGIBLE - FOR AGES 0 TO 25 MONTHS)
VITAMIN D2 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	1	
<b>Vitamins - Folic Acid And Derivatives</b>		
FA-8 ORAL CAPSULE 0.8 MG	0	
<i>folic acid oral capsule 0.8 mg</i>	0	
<i>folic acid oral tablet 1 mg</i>	2	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	0	Note (ACA ELIGIBLE - FOR AGES 12-59 YEARS)
<b>Vitamins - K, Phytonadione And Derivatives</b>		
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	2	QL (10 EA per 90 days)
<b>ENDOCRINE</b>		
<b>Adrenocorticotrophic Hormones</b>		
ACTHAR INJECTION GEL 80 UNIT/ML	5	PA; S
ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR 40 UNIT/0.5 ML, 80 UNIT/ML	5	PA; S
CORTROPHIN GEL INJECTION GEL 80 UNIT/ML	5	PA; LA; S
CORTROPHIN GEL SUBCUTANEOUS SYRINGE 40 UNIT/0.5 ML, 80 UNIT/ML	5	PA; LA; S
<b>Agents To Treat Hypoglycemia (Hyperglycemics)</b>		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	3	
<i>diazoxide oral suspension 50 mg/ml</i>	2	
GLUCAGON 1 MG EMERGENCY KIT SUV	3	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	3	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	3	
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	3	

Drug Name	Tier	Notes
<b>Amyloidosis Agents- Transthyretin (Ttr) Stabilizer</b>		
ATTRUBY ORAL TABLET 356 MG	5	PA; QL (4 EA per 1 day); LA; S
VYNDAMAX ORAL CAPSULE 61 MG	5	PA; QL (1 EA per 1 day); LA; S
VYNDAQEL ORAL CAPSULE 20 MG	5	PA; QL (4 EA per 1 day); LA
<b>Amyloidosis Agents-Ttr Suppression, Antisense Oligonucleotide-Based</b>		
WAINUA SUBCUTANEOUS AUTO-INJECTOR 45 MG/0.8 ML	5	PA; QL (0.8 ML per 30 days); LA; S
<b>Androgen - Single Agents</b>		
METHITEST ORAL TABLET 10 MG	4	
<i>methyltestosterone oral capsule 10 mg</i>	2	
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	2	
<i>testosterone enanthate intramuscular oil 200 mg/ml</i>	2	
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	2	
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %), 20.25 mg/1.25 gram (1.62 %)</i>	2	
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)</i>	2	
<i>testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)</i>	2	
<b>Antidiuretic And Vasopressor Hormones</b>		
<i>desmopressin nasal spray with pump 10 mcg/spray (0.1 ml)</i>	2	
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	2	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	2	
<b>Antihyperglycemic - Alpha-Glucosidase Inhibitors</b>		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	2	
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	2	
<b>Antihyperglycemic - Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors</b>		
<i>alogliptin oral tablet 12.5 mg, 25 mg, 6.25 mg</i>	2	
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	4	ST; QL (1 EA per 1 day)
<i>linagliptin oral tablet 5 mg</i>	2	ST; QL (1 EA per 1 day)
<i>saxagliptin oral tablet 2.5 mg, 5 mg</i>	2	QL (1 EA per 1 day)
<i>sitagliptin oral tablet 100 mg, 25 mg, 50 mg</i>	2	QL (1 EA per 1 day)

Drug Name	Tier	Notes
<b>Antihyperglycemic - Dopamine Receptor Agonists</b>		
CYCLOSET ORAL TABLET 0.8 MG	4	
<b>Antihyperglycemic - Dual Gip And Glp-1 Receptor Agonists</b>		
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	3	PA; QL (2 ML per 28 days)
<b>Antihyperglycemic - Glucagon-Like Peptide-1 (Glp-1) Receptor Agonists</b>		
<i>liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)</i>	2	PA; QL (9 ML per 30 days)
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	3	PA; QL (3 ML per 28 days)
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	3	PA; QL (1 EA per 1 day)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	3	PA; QL (2 ML per 28 days)
<b>Antihyperglycemic - Meglitinide Analogs</b>		
<i>nateglinide oral tablet 120 mg, 60 mg</i>	2	
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	
<b>Antihyperglycemic - Sglt-2 Inhibitor And Biguanide Combinations</b>		
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	3	
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 25-1,000 MG, 5-1,000 MG	3	
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-500 MG, 2.5-1,000 MG, 5-500 MG	3	
<b>Antihyperglycemic - Sglt-2 Inhibitor And Dpp-4 Inhibitor Combinations</b>		
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	3	QL (1 EA per 1 day)
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG	4	ST; QL (1 EA per 1 day)
<b>Antihyperglycemic - Sulfonylurea And Biguanide Combinations</b>		
<i>glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	1	PV (Preventive)
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	1	PV (Preventive)

Drug Name	Tier	Notes
<b>Antihyperglycemic - Sulfonylurea Derivatives</b>		
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	1	PV (Preventive)
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	PV (Preventive)
<i>glipizide oral tablet 2.5 mg</i>	1	
<i>glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg</i>	1	PV (Preventive)
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	1	PV (Preventive)
<b>Antihyperglycemic - Thiazolidinedione And Biguanide Combinations</b>		
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	2	
<b>Antihyperglycemic-Dipeptidyl Peptidase-4 Inhibit And Thiazolidinedione</b>		
<i>alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg</i>	2	
<b>Antihyperglycemic-Dipeptidyl Peptidase-4(Dpp-4)Inhibitor And Biguanide</b>		
<i>alogliptin-metformin oral tablet 12.5-1,000 mg, 12.5-500 mg</i>	2	
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	4	ST; QL (2 EA per 1 day)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	4	ST; QL (1 EA per 1 day)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG	4	ST; QL (2 EA per 1 day)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	4	ST; QL (1 EA per 1 day)
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg</i>	2	ST; QL (2 EA per 1 day)
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 5-1,000 mg, 5-500 mg</i>	2	ST; QL (1 EA per 1 day)
<b>Antihyperglycemic-Sglt-2 Inhibitor, Dpp-4 Inhibitor And Biguanide Comb</b>		
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 25-5-1,000 MG	3	QL (1 EA per 1 day)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5-1,000 MG, 5-2.5-1,000 MG	3	QL (2 EA per 1 day)
<b>Antithyroid Agents, Thionamides - Imidazole Derivatives</b>		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	

Drug Name	Tier	Notes
<b>Antithyroid Agents, Thionamides - Thiouracil Derivatives</b>		
<i>propylthiouracil oral tablet 50 mg</i>	2	
<b>Bone Formation Stimulating Agents - Parathyroid Hormone Rel Peptides</b>		
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	5	PA; LA; S
<b>Bone Resorption Inhibitors - Bisphosphonates</b>		
<i>alendronate oral solution 70 mg/75 ml</i>	2	
<i>alendronate oral tablet 10 mg, 35 mg, 70 mg</i>	1	PV (Preventive)
<i>ibandronate oral tablet 150 mg</i>	1	PV (Preventive)
<i>risedronate oral tablet 150 mg, 30 mg, 35 mg, 5 mg</i>	2	
<i>risedronate oral tablet, delayed release (drlec) 35 mg</i>	2	
<b>Calcimimetic, Parathyroid Calcium Receptor Sensitivity Enhancer</b>		
<i>cinacalcet oral tablet 30 mg, 60 mg</i>	2	QL (2 EA per 1 day)
<i>cinacalcet oral tablet 90 mg</i>	2	QL (4 EA per 1 day)
<b>Calcitonins</b>		
<i>calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation</i>	2	
<b>Estrogen And Progestin With Antimineralocorticoid Activity, Combination</b>		
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG	4	
<b>Estrogen And Selective Estrogen Receptor Modulator (Serm) Combinations</b>		
DUAVEE ORAL TABLET 0.45-20 MG	4	
<b>Estrogen-Progestin</b>		
ABIGALE LO ORAL TABLET 0.5-0.1 MG	2	
ABIGALE ORAL TABLET 1-0.5 MG	2	
BIJUVA ORAL CAPSULE 0.5-100 MG, 1-100 MG	4	
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	4	
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	2	
FYAVOLV ORAL TABLET 0.5-2.5 MG-MCG, 1-5 MG-MCG	2	
JINTELI ORAL TABLET 1-5 MG-MCG	2	
MIMVEY ORAL TABLET 1-0.5 MG	2	

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Drug Name	Tier	Notes
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	2	
PREMPHASE ORAL TABLET 0.625 MG (14)/0.625MG-5MG(14)	4	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	4	
<b>Estrogens</b>		
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML	4	
DOTTI TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	2	
<i>estradiol transdermal gel in metered-dose pump 1.25 gram/actuation</i>	2	
<i>estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 0.75 mg/0.75 gram (0.1%), 1 mg/gram (0.1 %), 1.25 mg/1.25 gram (0.1 %)</i>	2	
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	2	
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	2	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	2	
EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL 1.53 MG/SPRAY (1.7%)	4	
LYLLANA TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	2	
MENEST ORAL TABLET 1.25 MG, 2.5 MG	4	
<b>Fertility Enhancer - Luteal Phase Supporting, Progesterone-Type</b>		
CRINONE VAGINAL GEL 8 %	4	PA
<i>progesterone micronized vaginal insert 100 mg</i>	2	PA
<b>Follicle-Stimulating Hormone (Fsh)</b>		
FOLLISTIM AQ SUBCUTANEOUS CARTRIDGE 300 UNIT/0.36 ML, 600 UNIT/0.72 ML, 900 UNIT/1.08 ML	5	PA
<b>Glucocorticoid Salt Combinations</b>		
<i>betamethasone acet,sod phos injection suspension 6 mg/ml</i>	2	

Drug Name	Tier	Notes
<b>Glucocorticoids</b>		
DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML	2	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1	
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	2	
MEDROL ORAL TABLET 2 MG	4	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	2	
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	2	
<i>prednisolone oral solution 15 mg/5 ml</i>	1	
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml)</i>	1	
<i>prednisolone sodium phosphate oral solution 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	
<i>prednisolone sodium phosphate oral tablet,disintegrating 10 mg, 15 mg, 30 mg</i>	2	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	1	
<i>prednisone oral solution 5 mg/5 ml</i>	1	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1	
<i>prednisone oral tablets,dose pack 10 mg, 5 mg</i>	1	
SOLU-CORTEF ACT-O-VIAL (PF) INJECTION RECON SOLN 100 MG/2 ML	3	QL (2 EA per 180 days)
<b>Gonadotropin Inhibitor Pituitary Suppressants</b>		
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	2	
<b>Growth Hormone Receptor Antagonists</b>		
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	5	PA; LA; S
<b>Growth Hormones</b>		
GENOTROPIN MINISUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	5	PA; S
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	5	PA; S

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Drug Name	Tier	Notes
NORDITROPIN FLEXPEN SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	5	PA; S
<b>Human Chorionic Gonadotropin (Hcg)</b>		
<i>chorionic gonadotropin, human injection recon soln 6,000 unit</i>	5	PA
<i>chorionic gonadotropin, human intramuscular recon soln 10,000 unit</i>	5	PA
NOVAREL INTRAMUSCULAR RECON SOLN 5,000 UNIT	5	PA
PREGNYL INTRAMUSCULAR RECON SOLN 10,000 UNIT	5	PA
<b>Human Insulins - Fixed Combinations</b>		
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	1	PV (Preventive)
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	1	PV (Preventive)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	1	PV (Preventive)
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	1	PV (Preventive)
<b>Human Insulins - Intermediate Acting</b>		
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1	PV (Preventive)
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	1	PV (Preventive)
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1	PV (Preventive)
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	1	PV (Preventive)
<b>Human Insulins - Short Acting</b>		
HUMULIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML	1	PV (Preventive)
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	1	PV (Preventive)
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1	PV (Preventive)
NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML	1	PV (Preventive)

Drug Name	Tier	Notes
<b>Insulin Analogs - Fixed Combinations</b>		
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	1	PV (Preventive)
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	1	PV (Preventive)
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	1	PV (Preventive)
<i>insulin lispro protamin-lispro subcutaneous insulin pen 100 unit/ml (75-25)</i>	1	PV (Preventive)
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	1	PV (Preventive)
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	1	PV (Preventive)
<b>Insulin Analogs - Long Acting</b>		
<i>insulin glargine-yfgn subcutaneous insulin pen 100 unit/ml (3 ml)</i>	1	PV (Preventive)
<i>insulin glargine-yfgn subcutaneous solution 100 unit/ml</i>	1	PV (Preventive)
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	1	PV (Preventive)
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	1	PV (Preventive)
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1	PV (Preventive)
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	1	PV (Preventive)
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	1	PV (Preventive)
<b>Insulin Analogs - Rapid Acting</b>		
APIDRA SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	4	
APIDRA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	4	
FIASP FLEXTOUCH U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	
FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML)	3	
FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	

Drug Name	Tier	Notes
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	1	PV (Preventive)
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	1	PV (Preventive)
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	1	PV (Preventive)
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	1	PV (Preventive)
<i>insulin lispro subcutaneous insulin pen 100 unit/ml</i>	1	PV (Preventive)
<i>insulin lispro subcutaneous insulin pen, half-unit 100 unit/ml</i>	1	PV (Preventive)
<i>insulin lispro subcutaneous solution 100 unit/ml</i>	1	PV (Preventive)
LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	1	PV (Preventive)
LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	1	PV (Preventive)
LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	1	PV (Preventive)
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	1	PV (Preventive)
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1	PV (Preventive)
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	1	PV (Preventive)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	1	PV (Preventive)
<b>Insulin Response Enhancers - Biguanides</b>		
<i>metformin oral solution 500 mg/5 ml</i>	2	
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	PV (Preventive)
<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	PV (Preventive)
<i>metformin oral tablet,er gast.retention 24 hr 500 mg</i>	1	
<b>Insulin Response Enhancers - Thiazolidinediones (Ppar-Gamma Agonists)</b>		
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	1	PV (Preventive)
<b>Insulin-Like Growth Factor-1 (Igf-1)</b>		
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	5	PA; LA; S

Drug Name	Tier	Notes
<b>Leptin Hormone Analogs</b>		
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	5	PA; LA; S
<b>Lhrh (Gnrh) Agonist Analog Pituitary Suppressants</b>		
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	5	PA; S
SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML	5	PA; LA; S
<b>Lhrh (Gnrh) Antagonist, Estrogen And Progesterin Combinations</b>		
ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG(AM) /300 MG(PM)	4	PA; QL (2 EA per 1 day)
<b>Lhrh (Gnrh) Antagonists</b>		
FYREMADEL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML	5	PA
<i>ganirelix subcutaneous syringe 250 mcg/0.5 ml</i>	5	PA
ORLISSA ORAL TABLET 150 MG	4	PA; QL (1 EA per 1 day)
ORLISSA ORAL TABLET 200 MG	4	PA; QL (2 EA per 1 day)
<b>Menopausal Symptoms Suppressant-Neurokinin 3 (Nk3) Receptor Antagonist</b>		
VEOZAH ORAL TABLET 45 MG	4	PA; QL (1 EA per 1 day)
<b>Mineralocorticoids</b>		
<i>fludrocortisone oral tablet 0.1 mg</i>	2	
<b>Oxytocic - Ergot Alkaloids</b>		
<i>methylergonovine oral tablet 0.2 mg</i>	2	
<b>Parathyroid Hormones And Analogs</b>		
YORVIPATH SUBCUTANEOUS PEN INJECTOR 168 MCG/0.56 ML	5	PA; QL (1.12 ML per 28 days); LA; S
YORVIPATH SUBCUTANEOUS PEN INJECTOR 294 MCG/0.98 ML	5	PA; QL (1.96 ML per 28 days); LA; S
YORVIPATH SUBCUTANEOUS PEN INJECTOR 420 MCG/1.4 ML	5	PA; QL (2.8 ML per 28 days); LA; S
<b>Progestins</b>		
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>norethindrone acetate oral tablet 5 mg</i>	2	
<i>progesterone intramuscular oil 50 mg/ml</i>	2	
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	2	
<b>Prolactin Inhibitor - Ergot Derivative Dopamine Receptor Agonists</b>		
<i>cabergoline oral tablet 0.5 mg</i>	2	

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Drug Name	Tier	Notes
<b>Selective Estrogen Receptor Modulators (Serms)</b>		
<i>raloxifene oral tablet 60 mg</i>	2	Note (ACA ELIGIBLE - FOR FEMALES AT HIGH RISK FOR BREAST CANCER AGED 35+)
<b>Somatostatic Agents</b>		
MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 20 MG	5	PA; QL (4 EA per 1 day); LA; S
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	5	S
<i>octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)</i>	5	S
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	S
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	5	PA; LA; S
<b>Thyroid Hormones - Animal Source (Porcine)</b>		
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	4	
ARMOUR THYROID ORAL TABLET 240 MG, 300 MG	4	
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 45 MG, 60 MG, 75 MG, 90 MG	2	
NIVA THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG	2	
NP THYROID ORAL TABLET 120 MG, 15 MG	2	
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	2	
<i>thyroid (pork) oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	2	
<b>Thyroid Hormones - Synthetic T3 (Triiodothyronine)</b>		
LIOMNY ORAL TABLET 25 MCG, 5 MCG, 50 MCG	2	
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	2	
<b>Thyroid Hormones - Synthetic T4 (Thyroxine)</b>		
<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<b>GASTROINTESTINAL THERAPY AGENTS</b>		
<b>Antidiarrheal Antiperistaltic-Anticholinergic Combinations</b>		
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	2	

Drug Name	Tier	Notes
<b>Antiemetic - Anticholinergics</b>		
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	2	
<b>Antiemetic - Cannabinoid Type</b>		
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<b>Antiemetic - Dopamine (D2)/5-Ht3 Antagonists</b>		
<i>trimethobenzamide oral capsule 300 mg</i>	2	
<b>Antiemetic - Phenothiazines</b>		
COMPRO RECTAL SUPPOSITORY 25 MG	2	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>prochlorperazine rectal suppository 25 mg</i>	2	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg, 50 mg</i>	2	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG	2	
<b>Antiemetic - Selective Serotonin 5-Ht3 Antagonists</b>		
<i>granisetron hcl oral tablet 1 mg</i>	2	QL (8 EA per 30 days)
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	2	
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	1	
<b>Antiemetic - Substance P-Neurokinin 1 (Nk1) Receptor Antagonists</b>		
<i>aprepitant oral capsule 125 mg</i>	2	QL (2 EA per 30 days)
<i>aprepitant oral capsule 40 mg</i>	2	QL (8 EA per 30 days)
<i>aprepitant oral capsule 80 mg</i>	2	QL (4 EA per 30 days)
<i>aprepitant oral capsule, dose pack 125 mg (1)- 80 mg (2)</i>	2	QL (6 EA per 30 days)
EMEND ORAL SUSPENSION FOR RECONSTITUTION 125 MG (25 MG/ ML FINAL CONC.)	4	QL (2 EA per 30 days)
VARUBI ORAL TABLET 90 MG	4	QL (8 EA per 28 days); LA
<b>Chronic Idiopathic Const. Agents - Guanylate Cyclase-C (Gc-C) Agonists</b>		
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	3	QL (1 EA per 1 day)

Drug Name	Tier	Notes
<b>Colonic Acidifier (Ammonia Inhibitor)</b>		
ENULOSE ORAL SOLUTION 10 GRAM/15 ML	1	
GENERLAC ORAL SOLUTION 10 GRAM/15 ML	1	
<i>lactulose oral solution 10 gram/15 ml</i>	2	
<b>Digestive Enzyme Mixtures</b>		
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 - 30,000 UNIT	3	
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	3	
<b>Digestive Enzymes</b>		
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	5	PA; LA; S
<b>Gallstone Solubilizing (Litholysis) Agents</b>		
<i>ursodiol oral capsule 300 mg</i>	2	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	2	
<b>Gastric Acid Secretion Reducer - Histamine H2-Receptor Antagonists</b>		
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	2	
<i>famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)</i>	1	
<i>nizatidine oral capsule 150 mg, 300 mg</i>	2	
<b>Gastric Acid Secretion Reducer - Proton Pump Inhibitors (Ppis)</b>		
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg, 40 mg</i>	2	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 40 mg, 5 mg</i>	2	
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	2	
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>	1	
<i>pantoprazole oral granules dr for susp in packet 40 mg</i>	2	
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg, 40 mg</i>	1	

Drug Name	Tier	Notes
<i>rabeprazole oral tablet, delayed release (dr/ec) 20 mg</i>	2	
<b>Gastric Mucosa - Cytoprotective Prostaglandin Analogs</b>		
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	2	
<b>Gastrointestinal - Prokinetic Agents - 5-Ht4 Receptor Agonists</b>		
<i>prucalopride oral tablet 1 mg, 2 mg</i>	2	PA; QL (1 EA per 1 day)
<b>Gastrointestinal Prokinetic Agents - D2 Antagonist/5-Ht4 Agonists</b>		
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1	
<b>Gi Antispasmodic - Belladonna Alkaloids</b>		
<i>methscopolamine oral tablet 2.5 mg, 5 mg</i>	2	
<b>Gi Antispasmodic - Quaternary Ammonium Compounds</b>		
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<b>Gi Antispasmodic - Synthetic Tertiary Amines</b>		
<i>dicyclomine oral capsule 10 mg</i>	1	
<i>dicyclomine oral solution 10 mg/5 ml</i>	2	
<i>dicyclomine oral tablet 20 mg</i>	1	
<b>H. Pylori Therapy - Bismuth And Antibiotics Combinations</b>		
<i>bismuth subcit k-metronidz-tcn oral capsule 140-125-125 mg</i>	2	QL (120 EA per 28 days)
<b>H. Pylori Therapy - Proton Pump Inhibitor And Antibiotics Combinations</b>		
<i>amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg</i>	2	
OMECLAMOX-PAK ORAL COMBO PACK 20 MG-500 MG- 500 MG (40)	4	QL (1 EA per 28 days)
TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE 10-250-12.5 MG	4	QL (168 EA per 28 days)
<b>Ibs Agent - Gastrointestinal Chloride Channel Activator Agents</b>		
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	2	QL (2 EA per 1 day)
<b>Ibs Agent - Guanylate Cyclase-C (Gc-C) Agonists</b>		
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	3	QL (1 EA per 1 day)

Drug Name	Tier	Notes
<b>Ibs Agent - Mixed Opioid Receptor Agonist And Antagonist</b>		
VIBERZI ORAL TABLET 100 MG, 75 MG	4	PA
<b>Ibs Agent - Selective 5-Ht3 Receptor Antagonists</b>		
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	2	PA
<b>Inflammatory Bowel Agent - Interleukin-12 And Il-23 Inhibitors, Mc Ab</b>		
SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S
STEQEYMA SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 ML per 84 days); S
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	5	PA; QL (0.5 ML per 84 days); S
YESINTEK SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 ML per 84 days); S
<b>Inflammatory Bowel Agent - Interleukin-23 (Il-23) Inhibitor, Mc Ab</b>		
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML, 200 MG/2 ML (100 MG/ML X 2)	5	PA; QL (2 ML per 28 days); S
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; QL (3 ML per 28 days); S
OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML, 200 MG/2 ML (100 MG/ML X 2)	5	PA; QL (2 ML per 28 days); S
OMVOH SUBCUTANEOUS SYRINGE 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; QL (3 ML per 28 days); S
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML)	5	PA; QL (1.2 ML per 56 days); S
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	5	PA; QL (2.4 ML per 56 days); S
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	5	PA; QL (1 ML per 56 days); S
TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	5	PA; QL (2 ML per 28 days); S
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; QL (1 ML per 56 days); S
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	5	PA; QL (2 ML per 28 days); S
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 56 days); S
TREMFYA SUBCUTANEOUS SYRINGE 200 MG/2 ML	5	PA; QL (2 ML per 28 days); S

Drug Name	Tier	Notes
<b>Inflammatory Bowel Agent - Aminosalicylates And Related Agents</b>		
<i>balsalazide oral capsule 750 mg</i>	2	
DIPENTUM ORAL CAPSULE 250 MG	4	
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	2	
<i>mesalamine oral capsule,extended release 24hr 0.375 gram</i>	2	
<i>mesalamine oral tablet,delayed release (drlec) 1.2 gram</i>	2	
<i>mesalamine rectal enema 4 gram/60 ml</i>	2	QL (60 ML per 1 day)
<i>mesalamine rectal suppository 1,000 mg</i>	2	
<i>sulfasalazine oral tablet 500 mg</i>	2	
<i>sulfasalazine oral tablet,delayed release (drlec) 500 mg</i>	2	
<b>Inflammatory Bowel Agent - Glucocorticoids</b>		
<i>budesonide oral capsule,delayed,extend.release 3 mg</i>	2	
<i>budesonide oral tablet,delayed and ext.release 9 mg</i>	2	PA; QL (1 EA per 1 day)
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	2	
<b>Inflammatory Bowel Agent - Integrin Receptor Antagonist, Mc Antibody</b>		
ENTYVIO PEN SUBCUTANEOUS PEN INJECTOR 108 MG/0.68 ML	5	PA; QL (1.36 ML per 28 days); S
<b>Inflammatory Bowel Agent - Janus Kinase (Jak) Inhibitors</b>		
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	5	PA; QL (1 EA per 1 day); S
XELJANZ ORAL TABLET 10 MG, 5 MG	5	PA; QL (2 EA per 1 day); S
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	5	PA; QL (1 EA per 1 day); S
<b>Inflammatory Bowel Agent - Sphingosine 1-Phosphate Receptor Modulator</b>		
ZEPOSIA ORAL CAPSULE 0.92 MG	5	PA; LA; S
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG-0.46 MG -0.92 MG (21)	5	PA; S
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG (4)- 0.46 MG (3)	5	PA; LA; S

Drug Name	Tier	Notes
<b>Inflammatory Bowel Agent - Tumor Necrosis Factor Alpha Blockers</b>		
<i>adalimumab-aaty subcutaneous auto-injector, kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S
<i>adalimumab-aaty subcutaneous auto-injector, kit 80 mg/0.8 ml</i>	5	PA; QL (1 EA per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 20 mg/0.2 ml</i>	5	PA; QL (2 SYR per 28 days); S
<i>adalimumab-aaty subcutaneous syringe kit 40 mg/0.4 ml</i>	5	PA; QL (2 EA per 28 days); S
ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (3 EA per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S
<i>adalimumab-adaz subcutaneous pen injector 80 mg/0.8 ml</i>	5	PA; QL (1.6 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 20 mg/0.2 ml</i>	5	PA; QL (0.4 ML per 28 days); S
<i>adalimumab-adaz subcutaneous syringe 40 mg/0.4 ml</i>	5	PA; QL (0.8 ML per 28 days); S
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA; QL (1 EA per 28 days); S
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	5	PA; QL (1.6 ML per 28 days); S
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL (0.8 ML per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	5	PA; QL (2 mL per 28 days); S
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	5	PA; QL (2 EA per 28 days); S
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; QL (1 ML per 28 days); S
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 28 days); S

Drug Name	Tier	Notes
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML	5	PA; QL (2 mL per 28 days); LA; S
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML	5	PA; QL (2 mL per 28 days); LA; S
<b>Irritable Bowel Syndrome (Ibs) Agents</b>		
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	2	PA
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	2	QL (2 EA per 1 day)
VIBERZI ORAL TABLET 100 MG, 75 MG	4	PA
<b>Laxative - Saline And Osmotic</b>		
CONSTULOSE ORAL SOLUTION 10 GRAM/15 ML	1	
<i>lactulose oral solution 10 gram/15 ml</i>	2	
<b>Laxative - Saline/Osmotic Mixtures</b>		
GAVILYTE-C ORAL RECON SOLN 240-22.72-6.72 - 5.84 GRAM	1	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
GAVILYTE-G ORAL RECON SOLN 236-22.74-6.74 - 5.86 GRAM	1	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
GAVILYTE-N ORAL RECON SOLN 420 GRAM	1	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 - 5.86 gram</i>	1	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram</i>	2	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<i>peg-electrolyte soln oral recon soln 420 gram</i>	1	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	4	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<i>sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram</i>	2	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
SUTAB ORAL TABLET 1.479-0.188- 0.225 GRAM	3	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<b>Laxative - Stimulant And Saline/Osmotic Combinations</b>		
CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM- 12 GRAM/175 ML	3	Note (ACA ELIGIBLE - FOR AGES 45 AND OLDER)
<b>Peptic Ulcer - Gastric Lumen Adherent Cytoprotectives</b>		
<i>sucralfate oral suspension 100 mg/ml</i>	2	
<i>sucralfate oral tablet 1 gram</i>	2	

Drug Name	Tier	Notes
<b>Short Bowel Syndrome (Sbs) Agents</b>		
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	5	S
<i>octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)</i>	5	S
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	S
<b>GENITOURINARY THERAPY</b>		
<b>Cystinosis Therapy (Cystine Depleting Agents)</b>		
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	5	S
PROCYSBI ORAL CAPSULE, DELAYED REL SPRINKLE 25 MG, 75 MG	5	PA; LA; S
PROCYSBI ORAL GRANULES DEL RELEASE IN PACKET 300 MG, 75 MG	5	PA; LA; S
<b>Interstitial Cystitis Agents</b>		
ELMIRON ORAL CAPSULE 100 MG	4	QL (3 EA per 1 day)
<b>Kidney Stone Agents</b>		
<i>tiopronin oral tablet 100 mg</i>	5	LA; S
<b>Overactive Bladder Agents - Beta -3 Adrenergic Receptor Agonist</b>		
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON 8 MG/ML	3	QL (10 ML per 1 day)
<b>Phosphate Binders - Calcium-Based</b>		
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	2	
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	2	
<b>Phosphate Binders - Iron-Based</b>		
<i>ferric citrate oral tablet 210 mg iron</i>	2	ST
VELPHORO ORAL TABLET,CHEWABLE 500 MG	4	ST
<b>Phosphate Binders</b>		
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	2	
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	2	
<i>ferric citrate oral tablet 210 mg iron</i>	2	ST
FOSRENOL ORAL POWDER IN PACKET 1,000 MG, 750 MG	4	ST
<i>lanthanum oral tablet,chewable 1,000 mg, 500 mg, 750 mg</i>	2	ST
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	2	ST
<i>sevelamer carbonate oral tablet 800 mg</i>	2	

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Drug Name	Tier	Notes
<i>sevelamer hcl oral tablet 400 mg, 800 mg</i>	2	ST
VELPHORO ORAL TABLET,CHEWABLE 500 MG	4	ST
<b>Polycystic Kidney Disease - Vasopressin V2 Receptor Antagonists</b>		
<i>tolvaptan (polycys kidney dis) oral tablet 15 mg, 30 mg</i>	5	PA; LA; S
<i>tolvaptan (polycys kidney dis) oral tablets, sequential 15 mg (am)/ 15 mg (pm), 30 mg (am)/ 15 mg (pm), 45 mg (am)/ 15 mg (pm), 60 mg (am)/ 30 mg (pm), 90 mg (am)/ 30 mg (pm)</i>	5	PA; LA; S
<b>Prostatic Hypertrophy Agent - Alpha-1-Adrenoceptor Antagonists</b>		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	2	
<i>silodosin oral capsule 4 mg, 8 mg</i>	2	
<i>tamsulosin oral capsule 0.4 mg</i>	1	
<b>Prostatic Hypertrophy Agent - Type II 5-Alpha Reductase Inhibitors</b>		
<i>finasteride oral tablet 5 mg</i>	1	
<b>Prostatic Hypertrophy Agent-5-Alpha Phosphodiesterase Type 5 Inhibitor</b>		
<i>tadalafil oral tablet 5 mg</i>	2	QL (1 EA per 1 day)
<b>Prostatic Hypertrophy Agent-Type I And II 5-Alpha Reductase Inhibitors</b>		
<i>dutasteride oral capsule 0.5 mg</i>	2	
<b>Urinary Acidifier - Phosphates</b>		
PHOSPHA 250 NEUTRAL ORAL TABLET 250 MG	2	
PHOSPHOROUS ORAL TABLET 250 MG	2	
PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET 250 MG	2	
WES-PHOS 250 NEUTRAL ORAL TABLET 250 MG	2	
<b>Urinary Alkalinizer - Citrates</b>		
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)</i>	2	
<b>Urinary Antibacterial - Methenamine And Salts</b>		
<i>methenamine hippurate oral tablet 1 gram</i>	2	
<b>Urinary Antibacterial - Nitrofurantoin Derivatives</b>		
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	2	
<i>nitrofurantoin monohydr/m-cryst oral capsule 100 mg</i>	2	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	2	

Drug Name	Tier	Notes
<b>Urinary Antibacterials Other</b>		
<i>fosfomycin tromethamine oral packet 3 gram</i>	2	
<b>Urinary Antispasmodic - Antichol., M(3) Muscarinic Selective (Bladder)</b>		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	2	
<i>solifenacin oral tablet 10 mg, 5 mg</i>	2	
<b>Urinary Antispasmodic - Smooth Muscle Relaxants</b>		
<i>fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg</i>	2	
<i>flavoxate oral tablet 100 mg</i>	2	
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	2	
<i>oxybutynin chloride oral tablet 5 mg</i>	2	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	2	
<i>tolterodine oral capsule, extended release 24hr 2 mg, 4 mg</i>	2	
<i>tolterodine oral tablet 1 mg, 2 mg</i>	2	
<i>trospium oral capsule, extended release 24hr 60 mg</i>	2	
<i>trospium oral tablet 20 mg</i>	2	
<b>Urinary Retention Therapy - Parasympathomimetic Agents</b>		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>	2	
<b>GOUT AND HYPERURICEMIA THERAPY</b>		
<b>Gout Acute Therapy - Antimitotics</b>		
<i>colchicine oral capsule 0.6 mg</i>	2	
<i>colchicine oral tablet 0.6 mg</i>	2	
<b>Gout And Hyperuricemia - Antimitotic-Uricosuric Combinations</b>		
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	2	
<b>Hyperuricemia Therapy - Uricosurics</b>		
<i>probenecid oral tablet 500 mg</i>	2	
<b>Hyperuricemia Therapy - Xanthine Oxidase Inhibitors</b>		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	PV (Preventive)
<i>febuxostat oral tablet 40 mg, 80 mg</i>	2	

Drug Name	Tier	Notes
<b>HEMATOLOGICAL AGENTS</b>		
<b>Agents To Treat Attp- Anti Von Willebrand Factor (Vwf) A1 Domain</b>		
CABLIVI INJECTION KIT 11 MG	5	PA; QL (1 EA per 1 day); LA; S
<b>Anticoagulants - Coumarin</b>		
JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG	1	PV (Preventive)
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	PV (Preventive)
<b>C1 Esterase Inhibitor Agents</b>		
BERINERT INTRAVENOUS KIT 500 UNIT (10 ML)	5	PA; QL (2 EA per 30 days); S
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT	5	PA; LA; S
<b>Direct Factor Xa Inhibitors</b>		
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	3	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	3	
ELIQUIS ORAL TABLET FOR SUSPENSION 0.5 MG, 1.5 MG (0.5 MG X 3), 2 MG (0.5 MG X 4)	3	
ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE 0.15 MG	3	
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG	4	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	3	
<b>Erythropoietins</b>		
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	5	PA; S
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 10 MCG/0.4 ML, 100 MCG/0.5 ML, 150 MCG/0.3 ML, 200 MCG/0.4 ML, 25 MCG/0.42 ML, 300 MCG/0.6 ML, 40 MCG/0.4 ML, 500 MCG/ML, 60 MCG/0.3 ML	5	PA; S
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	5	PA; S
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	5	PA; S

Drug Name	Tier	Notes
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	5	PA; S
<b>Granulocyte Colony-Stimulating Factor (G-Csf)</b>		
FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	5	S
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML	5	S
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	S
NEULASTA ONPRO SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	5	S
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	5	S
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	5	S
NEUPOGEN INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	S
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	5	S
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	S
NYPOZI INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	S
RELEUKO SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	S
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	LA; S
<b>Granulocyte-Macrophage Colony-Stimulating Factor (Gm-Csf)</b>		
LEUKINE INJECTION RECON SOLN 250 MCG	5	S
<b>Hematorheologic Agents</b>		
<i>pentoxifylline oral tablet extended release 400 mg</i>	2	
<b>Hemostatic Systemic - Antifibrinolytic Agents</b>		
<i>tranexamic acid oral tablet 650 mg</i>	2	
<b>Heparins</b>		
<i>heparin (porcine) injection solution 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	2	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	2	
<i>heparin, porcine (pf) injection syringe 5,000 unit/ml</i>	2	

Drug Name	Tier	Notes
<b>Indirect Factor Xa Inhibitors</b>		
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 2.5 mg/0.5 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml</i>	2	
<b>Low Molecular Weight Heparins</b>		
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	1	PV (Preventive)
<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	1	PV (Preventive)
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML, 25,000 ANTI-XA UNIT/ML	5	S
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	5	S
<b>Platelet Aggregation Inhib - Cyclopentyl-Triazolo-Pyrimidines (Cptps)</b>		
<i>ticagrelor oral tablet 60 mg, 90 mg</i>	1	PV (Preventive)
<b>Platelet Aggregation Inhibitor Combinations</b>		
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	2	
<b>Platelet Aggregation Inhibitors - Phosphodiesterase Iii Inhibitors</b>		
<i>cilostazol oral tablet 100 mg, 50 mg</i>	1	PV (Preventive)
<b>Platelet Aggregation Inhibitors - Quinazoline Agents</b>		
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	2	
<b>Platelet Aggregation Inhibitors - Thienopyridine Agents</b>		
<i>clopidogrel oral tablet 300 mg</i>	2	
<i>clopidogrel oral tablet 75 mg</i>	1	PV (Preventive)
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i>	1	PV (Preventive)
<b>Platelet Aggregation Inhib-Pdesterase And Adenosine Deaminase Inhibitr</b>		
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	2	
<b>Platelet Aggregation Inhib-Protease-Activ.Receptor-1(Par-1) Antagonist</b>		
ZONTIVITY ORAL TABLET 2.08 MG	4	
<b>Pyruvate Kinase (Pk) Activators</b>		
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	5	PA; QL (2 EA per 1 day); LA; S

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Drug Name	Tier	Notes
PYRUKYND ORAL TABLETS,DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)- 20 MG (7)	5	PA; QL (2 EA per 1 day); LA; S
<b>Sickle Cell Anemia Agents, Others</b>		
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	3	
SIKLOS ORAL TABLET 100 MG	4	QL (1 EA per 1 day)
<b>Thrombin Inhibitor - Selective Direct And Reversible</b>		
<i>dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg</i>	2	
<b>Thrombopoietin Receptor Agonists</b>		
DOPTELET (10 TAB PACK) ORAL TABLET 20 MG	5	PA; QL (15 EA per 30 days); LA; S
DOPTELET (15 TAB PACK) ORAL TABLET 20 MG	5	PA; QL (15 EA per 30 days); LA; S
DOPTELET (30 TAB PACK) ORAL TABLET 20 MG	5	PA; QL (15 EA per 30 days); LA; S
DOPTELET SPRINKLE ORAL CAPSULE, SPRINKLE 10 MG	5	PA; QL (2 EA per 1 day); LA; S
<i>eltrombopag olamine oral powder in packet 12.5 mg</i>	5	PA; QL (1 EA per 1 day); S
<i>eltrombopag olamine oral powder in packet 25 mg</i>	5	PA; QL (6 EA per 1 day); S
<i>eltrombopag olamine oral tablet 12.5 mg, 25 mg</i>	5	PA; QL (1 EA per 1 day); S
<i>eltrombopag olamine oral tablet 50 mg, 75 mg</i>	5	PA; QL (2 EA per 1 day); S
MULPLETA ORAL TABLET 3 MG	5	PA; QL (7 EA per 30 days); S
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
<b>Immunosuppressive - Calcineurin Inhibitors</b>		
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	2	
<i>cyclosporine modified oral solution 100 mg/ml</i>	2	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	2	
GENGRAF ORAL CAPSULE 100 MG, 25 MG	2	
GENGRAF ORAL SOLUTION 100 MG/ML	2	
LUPKYNIS ORAL CAPSULE 7.9 MG	5	PA; QL (6 EA per 1 day); LA; S
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	2	
<i>tacrolimus oral capsule,extended release 24hr 0.5 mg, 1 mg, 5 mg</i>	2	
<b>Immunosuppressive - Inosine Monophosphate Dehydrogenase Inhibitors</b>		
<i>mycophenolate mofetil oral capsule 250 mg</i>	2	
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	2	
<i>mycophenolate mofetil oral tablet 500 mg</i>	2	

Drug Name	Tier	Notes
<i>mycophenolate sodium oral tablet, delayed release (drlec) 180 mg, 360 mg</i>	2	
<b>Immunosuppressive - Mammalian Target Of Rapamycin (Mtor) Inhibitors</b>		
<i>everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	5	S
<i>sirolimus oral solution 1 mg/ml</i>	2	
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	
<b>Immunosuppressive - Purine Analogs</b>		
<i>azathioprine oral tablet 50 mg</i>	2	
<b>LOCOMOTOR SYSTEM</b>		
<b>Amyotrophic Lateral Sclerosis (Als) Agents - Benzothiazoles</b>		
<i>riluzole oral tablet 50 mg</i>	2	
<b>Antimyasthenic Agent - Neonatal Fc Receptor (Fc<math>\gamma</math>n) Inhibitor</b>		
VYVGART HYTRULO SUBCUTANEOUS SYRINGE 1,000 MG-10,000 UNIT/5 ML	5	PA; LA; S
<b>Antimyasthenic Agent - Reversible Cholinesterase Inhibitors</b>		
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	2	
<i>pyridostigmine bromide oral tablet 60 mg</i>	2	
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	2	
<b>Skeletal Muscle Relaxant - Analgesic Salicylate Combinations</b>		
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	2	
<b>Skeletal Muscle Relaxant - Central Muscle Relaxants</b>		
<i>baclofen oral tablet 10 mg, 20 mg</i>	1	
<i>baclofen oral tablet 5 mg</i>	2	
<i>carisoprodol oral tablet 250 mg</i>	2	
<i>carisoprodol oral tablet 350 mg</i>	1	
<i>chlorzoxazone oral tablet 500 mg</i>	2	
<i>cyclobenzaprine oral tablet 10 mg, 5 mg, 7.5 mg</i>	1	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	2	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	2	

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Drug Name	Tier	Notes
<i>tizanidine oral tablet 2 mg, 4 mg</i>	1	
VANADOM ORAL TABLET 350 MG	1	
<b>Skeletal Muscle Relaxant - Direct Muscle Relaxants</b>		
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	2	
<b>Skeletal Muscle Relaxant - Opioid Analgesic Combinations</b>		
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>Skeletal Muscle Relaxant, Salicylate, And Opioid Analgesic Comb.</b>		
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	2	PA; QL (Total cumulative opioid dose limited to 90 morphine milligram equivalent (MME) per day)
<b>MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT (DME)</b>		
<b>Medical Supplies And Dme - Blood Glucose Tests</b>		
<i>accu-chek aviva plus test strp strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek guide test strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek smartview test strip strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle insulinx test strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle lite strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle precision neo strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle test strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))

Drug Name	Tier	Notes
<i>precision xtra test strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<b>Medical Supplies And Dme - Glucose Monitoring Test Supplies</b>		
<i>accu-chek aviva control soln solution</i>	2	
<i>accu-chek fastclix lancet drum</i>	2	
<i>accu-chek guide glucose meter</i>	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek guide l1-l2 ctrl sol solution</i>	2	
<i>accu-chek guide me glucose mtr</i>	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek smartview contrl sol solution</i>	2	
DEXCOM G6 RECEIVER	3	PA; QL (1 EA per 365 days)
DEXCOM G6 SENSOR DEVICE	3	PA; QL (3 EA per 30 days)
DEXCOM G6 TRANSMITTER DEVICE	3	PA; QL (1 EA per 90 days)
DEXCOM G7 15 DAY SENSOR DEVICE	3	PA; QL (2 EA per 30 days)
DEXCOM G7 RECEIVER	3	PA; QL (1 EA per 365 days)
DEXCOM G7 SENSOR DEVICE	3	PA; QL (3 EA per 30 days)
<i>droplet lancets 30 gauge</i>	2	
FREESTYLE FLASH SYSTEM KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE FREEDOM KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE FREEDOM LITE KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE INSULINX	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE LIBRE 14 DAY READER	3	PA; QL (1 EA per 365 days)
FREESTYLE LIBRE 14 DAY SENSOR KIT	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 2 PLUS SENSOR DEVICE	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 2 READER	3	PA; QL (1 EA per 365 days)
FREESTYLE LIBRE 2 SENSOR KIT	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE	3	PA; QL (2 EA per 28 days)

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Drug Name	Tier	Notes
FREESTYLE LIBRE 3 READER	3	PA; QL (1 EA per 365 days)
FREESTYLE LIBRE 3 SENSOR DEVICE	3	PA; QL (2 EA per 28 days)
FREESTYLE LITE METER KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE PRECISION NEO METER	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE SIDEKICK II KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE SYSTEM KIT KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>microlet lancet</i>	2	
PRECISION XTRA MONITOR	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>techlite lancets 26 gauge, 28 gauge</i>	2	
<b>Medical Supplies And Dme - Insulin Needles- Syringes And Admin Supplies</b>		
<i>droplet micron pen needle needle 34 gauge x 9/64"</i>	2	QL (8 EA per 1 day)
<i>droplet pen needle needle 30 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<i>dropsafe pen needle needle 31 gauge x 3/16"</i>	2	QL (8 EA per 1 day)
<i>novofine 32 needle 32 gauge x 1/4"</i>	2	QL (8 EA per 1 day)
NOVOFINE PLUS NEEDLE 32 GAUGE X 1/6"	3	QL (8 EA per 1 day)
<i>pentips pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>techlite pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>techlite plus pen needle needle 32 gauge x 5/32"</i>	2	
<i>trueplus pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>unifine pentips needle 31 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<i>unifine pentips plus needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>unifine safecontrol pen needle needle 30 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<i>unifine ultra pen needle needle 31 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<b>Medical Supplies And Dme - Subcutaneous Insulin Delivery Devices</b>		
OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)

Drug Name	Tier	Notes
OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)
OMNIPOD 5 INTRO(G6/LIBRE2PLUS) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)
<b>MEDICAL SUPPLY, FDB SUPERSET</b>		
<b>Medical Supply, Fdb Superset</b>		
<i>accu-chek aviva control soln solution</i>	2	
<i>accu-chek aviva plus test strp strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek fastclix lancet drum</i>	2	
<i>accu-chek guide glucose meter</i>	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek guide l1-l2 ctrl sol solution</i>	2	
<i>accu-chek guide me glucose mtr</i>	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek guide test strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>accu-chek smartview contrl sol solution</i>	2	
<i>accu-chek smartview test strip strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
DEXCOM G6 RECEIVER	3	PA; QL (1 EA per 365 days)
DEXCOM G6 SENSOR DEVICE	3	PA; QL (3 EA per 30 days)
DEXCOM G6 TRANSMITTER DEVICE	3	PA; QL (1 EA per 90 days)
DEXCOM G7 15 DAY SENSOR DEVICE	3	PA; QL (2 EA per 30 days)
DEXCOM G7 RECEIVER	3	PA; QL (1 EA per 365 days)
DEXCOM G7 SENSOR DEVICE	3	PA; QL (3 EA per 30 days)
<i>droplet lancets 30 gauge</i>	2	
<i>droplet micron pen needle needle 34 gauge x 9/64"</i>	2	QL (8 EA per 1 day)

Drug Name	Tier	Notes
FREESTYLE FLASH SYSTEM KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE FREEDOM KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE FREEDOM LITE KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE INSULINX	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle insulinx test strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE LIBRE 14 DAY READER	3	PA; QL (1 EA per 365 days)
FREESTYLE LIBRE 14 DAY SENSOR KIT	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 2 READER	3	PA; QL (1 EA per 365 days)
FREESTYLE LIBRE 2 SENSOR KIT	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE	3	PA; QL (2 EA per 28 days)
FREESTYLE LIBRE 3 SENSOR DEVICE	3	PA; QL (2 EA per 28 days)
FREESTYLE LITE METER KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle lite strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE PRECISION NEO METER	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle precision neo strips strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE SIDEKICK II KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
FREESTYLE SYSTEM KIT KIT	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>freestyle test strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))

Drug Name	Tier	Notes
<i>microlet lancet</i>	2	
<i>novofine 32 needle 32 gauge x 1/4"</i>	2	QL (8 EA per 1 day)
NOVOFINE PLUS NEEDLE 32 GAUGE X 1/6"	3	QL (8 EA per 1 day)
OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)
OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)
OMNIPOD 5 INTRO(G6/LIBRE2PLUS) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	3	PA; QL (1 EA per 365 days)
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	3	PA; QL (15 EA per 30 days)
<i>pentips pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
PRECISION XTRA MONITOR	2	QL (1 EA per 365 days); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>precision xtra test strip</i>	2	QL (5 EA per 1 day); Note (DIABETIC DURABLE MEDICAL EQUIPMENT (DME))
<i>techlite lancets 26 gauge, 28 gauge</i>	2	
<i>techlite pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>techlite plus pen needle needle 32 gauge x 5/32"</i>	2	
<i>trueplus pen needle needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>unifine pentips needle 31 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<i>unifine pentips plus needle 29 gauge x 1/2"</i>	2	QL (8 EA per 1 day)
<i>unifine safecontrol pen needle needle 30 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<i>unifine ultra pen needle needle 31 gauge x 5/16"</i>	2	QL (8 EA per 1 day)
<b>METABOLIC DISEASE ENZYME REPLACEMENT AGENTS</b>		
<b>Metabolic Disease Enzyme Replacement, Hypophosphatasia</b>		
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	5	PA; LA; S

Drug Name	Tier	Notes
<b>Metabolic Dx Enzyme Replacement, Severe Combined Immune Deficiency</b>		
REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	5	PA; LA; S
<b>METABOLIC MODIFIERS</b>		
<b>Hyperparathyroid Treatment Agents - Vitamin D Analog-Type</b>		
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	2	
<i>calcitriol oral solution 1 mcg/ml</i>	2	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	2	
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	2	
<b>Metabolic Modifier - Carnitine Replenisher Agents</b>		
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<b>Metabolic Modifier - Gaucher's Disease, Type-1, Substrate Reduction Tx</b>		
CERDELGA ORAL CAPSULE 84 MG	5	PA; S
<b>Metabolic Modifier - Tyrosine Metabolism Disorder Agents</b>		
<i>nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg</i>	5	S
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG	5	LA; S
ORFADIN ORAL SUSPENSION 4 MG/ML	5	LA; S
<b>Metabolic Modifier - Urea Cycle Disorder Agents-Conjugating Agents</b>		
<i>sodium phenylbutyrate oral tablet 500 mg</i>	5	PA; LA; S
<b>Metabolic Modifier-Carbamoyl Phosphate Synthetase 1 (Cps 1) Activator</b>		
<i>carglumic acid oral tablet, dispersible 200 mg</i>	5	PA; LA; S
<b>Pharmacoenhancer - Cytochrome P450 Inhibitors</b>		
TYBOST ORAL TABLET 150 MG	4	
<b>Phenylketonuria(Pku) Tx Agents - Cofactor Of Phenylalanine Hydroxylase</b>		
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	5	LA; S
<i>sapropterin oral tablet, soluble 100 mg</i>	5	LA; S
ZELVYSIA ORAL POWDER IN PACKET 100 MG, 500 MG	5	LA; S

Drug Name	Tier	Notes
<b>MOUTH-THROAT-DENTAL - PREPARATIONS</b>		
<b>Dental Product - Fluoride Preparations</b>		
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	0	
<i>fluoride (sodium) oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	0	
LUDENT FLUORIDE ORAL TABLET,CHEWABLE 0.25 MG(0.55 MG SOD. FLUORIDE), 0.5 MG (1.1 MG SODIUM FLUORID), 1 MG (2.2 MG SOD. FLUORIDE)	0	
<b>Mouth And Throat - Antifungals</b>		
<i>clotrimazole mucous membrane troche 10 mg</i>	2	
<i>nystatin oral suspension 100,000 unit/ml</i>	2	
<b>Mouth And Throat - Antiseptics</b>		
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1	
PERIOGARD MUCOUS MEMBRANE MOUTHWASH 0.12 %	1	
<b>Mouth And Throat - Glucocorticoids</b>		
ORALONE DENTAL PASTE 0.1 %	2	
<i>triamcinolone acetonide dental paste 0.1 %</i>	2	
<b>Mouth And Throat - Local Anesthetic Amides</b>		
<i>lidocaine hcl mucous membrane solution 2 %, 4 % (40 mg/ml)</i>	2	
LIDOCAINE VISCOUS MUCOUS MEMBRANE SOLUTION 2 %	2	
<b>Mouth And Throat - Mucositis-Stomatitis Agents</b>		
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	4	PA; QL (3 ML per 1 day)
<b>Mouth And Throat - Saliva Stimulants</b>		
<i>cevimeline oral capsule 30 mg</i>	2	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	2	
<b>Periodontal Product - Tetracycline-Type, Collagenase Inhibitors</b>		
<i>doxycycline hyclate oral tablet 20 mg</i>	2	
<b>Therapy For Drooling- Primary Or Secondary Sialorrhea-Anticholinergic</b>		
<i>glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)</i>	2	

Drug Name	Tier	Notes
<b>MULTIPLE SCLEROSIS AGENTS</b>		
<b>Multiple Sclerosis Agent - Cd20 Specific Monoclonal Antibody</b>		
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	5	PA; S
<b>Multiple Sclerosis Agent - Interferons</b>		
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	5	PA; S
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	5	PA; QL (4 EA per 28 days); S
BETASERON SUBCUTANEOUS KIT 0.3 MG	5	PA; S
BETASERON SUBCUTANEOUS RECON SOLN 0.3 MG	5	PA
PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML	5	PA; QL (1 ML per 28 days); S
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL (1 ML per 28 days); S
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL (1 ML per 28 days); S
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	PA; QL (6 ML per 30 days); S
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	PA; QL (6 ML per 30 days); S
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA; QL (1 CLAIM per 365 days); S
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA; QL (1 CLAIM per 365 days); S
<b>Multiple Sclerosis Agent - Others</b>		
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg, 120 mg (14)- 240 mg (46), 240 mg</i>	2	QL (2 EA per 1 day); S
<i>glatiramer subcutaneous syringe 20 mg/ml</i>	5	QL (1 ML per 1 day); S
<i>glatiramer subcutaneous syringe 40 mg/ml</i>	5	QL (12 ML per 28 days); S
GLATOPA SUBCUTANEOUS SYRINGE 20 MG/ML	5	QL (1 ML per 1 day); S
GLATOPA SUBCUTANEOUS SYRINGE 40 MG/ML	5	QL (12 ML per 28 days); S
VUMERITY ORAL CAPSULE, DELAYED RELEASE(DR/EC) 231 MG	5	PA; S
<b>Multiple Sclerosis Agent - Potassium Channel Blocker</b>		
<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	2	QL (2 EA per 1 day); LA

Drug Name	Tier	Notes
<b>Multiple Sclerosis Agent - Pyrimidine Synthesis Inhibitors</b>		
<i>teriflunomide oral tablet 14 mg, 7 mg</i>	5	QL (1 EA per 1 day); S
<b>Multiple Sclerosis Agent - Sphingosine 1-Phosphate Receptor Modulator</b>		
<i> fingolimod oral capsule 0.5 mg</i>	5	QL (1 EA per 1 day); S
MAYZENT ORAL TABLET 0.25 MG	5	PA; QL (5 EA per 1 day); S
MAYZENT ORAL TABLET 1 MG	5	PA; QL (1 EA per 1 day); S
MAYZENT ORAL TABLET 2 MG	5	PA; S
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (7 TABS)	5	PA; S
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (12 TABS)	5	PA; S
ZEPOSIA ORAL CAPSULE 0.92 MG	5	PA; LA; S
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG-0.46 MG -0.92 MG (21)	5	PA; S
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG (4)- 0.46 MG (3)	5	PA; LA; S
<b>OPHTHALMIC AGENTS</b>		
<b>Miotics - Direct Acting</b>		
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	2	
<b>Ophthalmic - Adrenergic Receptor Agonist</b>		
UPNEEQ (PF) OPHTHALMIC (EYE) DROPPERETTE 0.1 %	4	PA; QL (2 EA per 1 day)
<b>Ophthalmic - Adrenergic-Carbonic Anhydrase Inhibitor Combinations</b>		
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.2 %	4	
<b>Ophthalmic - Antibacterial-Glucocorticoid Combinations</b>		
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	2	

Drug Name	Tier	Notes
NEO-POLYCIDIN HC OPHTHALMIC (EYE) OINTMENT 3.5-400-10,000 MG-UNIT/G-1%	2	
<i>sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	2	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	4	
TOBRADEX ST OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.05 %	4	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	2	
<b>Ophthalmic - Anticholinergics</b>		
<i>atropine ophthalmic (eye) drops 1 %</i>	2	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i>	2	
<i>tropicamide ophthalmic (eye) drops 0.5 %, 1 %</i>	2	
<b>Ophthalmic - Antihistamines</b>		
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	2	
<i>bepotastine besilate ophthalmic (eye) drops 1.5 %</i>	2	PA
<i>epinastine ophthalmic (eye) drops 0.05 %</i>	2	
ZERVIAE OPHTHALMIC (EYE) DROPPERETTE 0.24 %	4	PA
<b>Ophthalmic - Anti-Inflammatory, Glucocorticoids</b>		
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	2	
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	2	
FLAREX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	4	
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	2	
FML FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	4	
INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	4	
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	4	
<i>loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %</i>	2	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %, 0.5 %</i>	2	
MAXIDEX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	4	

Drug Name	Tier	Notes
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	2	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	2	
<b>Ophthalmic - Anti-Inflammatory, Immunomodulators</b>		
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	4	QL (5.5 ML per 28 days)
<b>Ophthalmic - Anti-Inflammatory, Lfa-1 Antagonists</b>		
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	4	QL (2 EA per 1 day)
<b>Ophthalmic - Anti-Inflammatory, Nsaids</b>		
<i>bromfenac ophthalmic (eye) drops 0.07 %, 0.09 %</i>	2	
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	1	
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	2	
NEVANAC OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	4	
<b>Ophthalmic - Beta Blockers-Carbonic Anhydrase Inhibitor Combinations</b>		
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	2	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	1	
<b>Ophthalmic - Carbonic Anhydrase Inhibitors</b>		
<i>brinzolamide ophthalmic (eye) drops,suspension 1 %</i>	2	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	1	
<b>Ophthalmic - Intraocular Pressure Reducing Agents, Beta-Blockers</b>		
<i>betaxolol ophthalmic (eye) drops 0.5 %</i>	2	
BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	4	
<i>carteolol ophthalmic (eye) drops 1 %</i>	2	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	2	
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily 0.5 %</i>	2	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	2	
<i>timolol ophthalmic (eye) drops 0.5 %</i>	2	

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Drug Name	Tier	Notes
<b>Ophthalmic - Local Anesthetic Esters</b>		
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	2	
<b>Ophthalmic - Mast Cell Stabilizers</b>		
<i>cromolyn ophthalmic (eye) drops 4 %</i>	1	
<b>Ophthalmic Antibacterial Mixtures</b>		
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	2	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	2	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	2	
NEO-POLYCIN OPHTHALMIC (EYE) OINTMENT 3.5-400-10,000 MG-UNIT-UNIT/G	2	
POLYCIN OPHTHALMIC (EYE) OINTMENT 500-10,000 UNIT/GRAM	2	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	1	
<b>Ophthalmic Antibiotic - Aminoglycosides</b>		
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	1	
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	1	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	4	
<b>Ophthalmic Antibiotic - Dehydropeptidase Inhibitors</b>		
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	2	
<b>Ophthalmic Antibiotic - Fluoroquinolones</b>		
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	1	
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	2	
<i>levofloxacin ophthalmic (eye) drops 1.5 %</i>	2	
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	2	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	2	
<b>Ophthalmic Antibiotic - Macrolides</b>		
AZASITE OPHTHALMIC (EYE) DROPS 1 %	4	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	1	QL (7 GM per 30 days); Note (ACA ELIGIBLE - FOR AGES 0 TO 1 MONTH)
<b>Ophthalmic Antibiotic - Sulfonamides</b>		
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	2	
<i>sulfacetamide sodium ophthalmic (eye) ointment 10 %</i>	2	

Drug Name	Tier	Notes
<b>Ophthalmic Antifungals - Tetraene Polyene-Type</b>		
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	4	
<b>Ophthalmic Antifungals</b>		
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	4	
<b>Ophthalmic Antivirals</b>		
<i>trifluridine ophthalmic (eye) drops 1 %</i>	2	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	3	
<b>Ophthalmic-Intraocular Press. Reducing, Sel. Alpha Adrenergic Agonists</b>		
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	
<b>Ophthalmic-Intraocular Pressure Reducing Agents, Prostaglandin Analogs</b>		
<i>bimatoprost (pf) ophthalmic (eye) drops 0.01 %</i>	2	ST; QL (5 ML per 28 days)
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	2	ST; QL (2.5 ML per 25 days)
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1	QL (2.5 ML per 25 days)
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	ST; QL (2.5 ML per 25 days)
<i>tafluprost (pf) ophthalmic (eye) dropperette 0.0015 %</i>	2	ST; QL (1 EA per 1 day)
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	2	
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	4	ST; QL (2.5 ML per 25 days)
XELPROS OPHTHALMIC (EYE) DROPS, EMULSION 0.005 %	4	
<b>Ophthalmic-Intraocular Pressure Reducing Agents, Rho Kinase Inhibitors</b>		
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	4	ST; QL (2.5 ML per 25 days)
<b>OTIC (EAR)</b>		
<b>Otic (Ear) - Anti-Infective-Glucocorticoid Combinations</b>		
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	2	
<i>ciprofloxacin-hydrocortisone otic (ear) drops,suspension 0.2-1 %</i>	2	
CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION 3.3-3-10-0.5 MG/ML	4	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	2	

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Drug Name	Tier	Notes
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	2	
<b>Otic (Ear) - Anti-Infectives Other</b>		
<i>acetic acid otic (ear) solution 2 %</i>	2	
<b>Otic (Ear) - Fluoroquinolones</b>		
<i>ciprofloxacin hcl otic (ear) dropperette 0.2 %</i>	2	
<i>ofloxacin otic (ear) drops 0.3 %</i>	2	
<b>Otic (Ear) - Glucocorticoids</b>		
FLAC OTIC OIL OTIC (EAR) DROPS 0.01 %	2	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	2	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	2	
<b>RESPIRATORY THERAPY AGENTS</b>		
<b>Antihistamine - 1St Generation - Ethanolamines</b>		
<i>carbinoxamine maleate oral liquid 4 mg/5 ml</i>	2	
<i>carbinoxamine maleate oral tablet 4 mg</i>	2	
<i>clemastine oral tablet 2.68 mg</i>	2	
CLEMSZA ORAL TABLET 2.68 MG	2	
<b>Antihistamine - 1St Generation - Phenothiazines</b>		
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg, 50 mg</i>	2	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG	2	
<b>Antihistamine - 1St Generation - Piperidines</b>		
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	2	
<i>cyproheptadine oral tablet 4 mg</i>	2	
<b>Antihistamines - 1St Generation</b>		
<i>carbinoxamine maleate oral liquid 4 mg/5 ml</i>	2	
<i>carbinoxamine maleate oral tablet 4 mg</i>	2	
<i>clemastine oral tablet 2.68 mg</i>	2	
CLEMSZA ORAL TABLET 2.68 MG	2	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	2	
<i>cyproheptadine oral tablet 4 mg</i>	2	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	

Drug Name	Tier	Notes
<i>promethazine rectal suppository 12.5 mg, 25 mg, 50 mg</i>	2	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG	2	
<b>Antihistamines - 2Nd Generation - Piperidines</b>		
<i>desloratadine oral tablet 5 mg</i>	2	
<b>Antihistamines - 2Nd Generation</b>		
<i>desloratadine oral tablet 5 mg</i>	2	
<b>Antitussives - Non-Opioid</b>		
<i>benzonatate oral capsule 100 mg, 200 mg</i>	1	
<b>Asthma Therapy - 5-Lipoxygenase Inhibitors</b>		
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	2	ST
<b>Asthma Therapy - Immunoglobulin E (Ige) Inhibitors, Mab</b>		
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML	5	PA; QL (1 ML per 28 days); S
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML	5	PA; QL (2 ML per 28 days); S
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL (1 ML per 28 days); S
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; QL (2 ML per 28 days); S
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days); S
<b>Asthma Therapy - Inhaled Corticosteroids (Glucocorticoids)</b>		
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	3	
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ACTUATION (30), 220 MCG/ACTUATION (120), 220 MCG/ACTUATION (14), 220 MCG/ACTUATION (30), 220 MCG/ACTUATION (60)	3	
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	2	
<i>fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation, 220 mcg/actuation, 44 mcg/actuation</i>	1	PV (Preventive)

Drug Name	Tier	Notes
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	3	
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	3	
<b>Asthma Therapy - Interleukin-4 (Il-4) Receptor Alpha Antagonists, Mab</b>		
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	5	PA; QL (2.28 ML per 28 days); S
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	5	PA; QL (4 ML per 28 days); S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	5	PA; QL (2.28 ML per 28 days); S
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; QL (4 ML per 28 days); S
<b>Asthma Therapy - Interleukin-5 (Il-5) Inhibitors, Mab</b>		
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	5	PA; QL (1 ML per 28 days); S
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (1 ML per 28 days); S
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL (0.4 ML per 28 days); S
<b>Asthma Therapy - Interleukin-5 (Il-5) Receptor Alpha Antagonists, Mab</b>		
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	5	PA; QL (1 ML per 56 days); S
<b>Asthma Therapy - Leukotriene Receptor Antagonists</b>		
<i>montelukast oral granules in packet 4 mg</i>	1	
<i>montelukast oral tablet 10 mg</i>	1	PV (Preventive)
<i>montelukast oral tablet, chewable 4 mg, 5 mg</i>	1	PV (Preventive)
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	2	
<b>Asthma Therapy - Mast Cell Stabilizers</b>		
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	2	
<b>Asthma Therapy - Thymic Stromal Lymphopoietin Inhibitor, Mab</b>		
TEZSPIRE SUBCUTANEOUS PEN INJECTOR 210 MG/1.91 ML (110 MG/ML)	5	PA; QL (1.91 ML per 28 days); LA; S

Drug Name	Tier	Notes
<b>Asthma Therapy - Xanthines</b>		
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	2	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	2	
<b>Asthma/Copd - Phosphodiesterase-4 (Pde4) Inhibitors</b>		
<i>roflumilast oral tablet 250 mcg, 500 mcg</i>	2	QL (1 EA per 1 day)
<b>Asthma/Copd - Anticholinergic Agents, Inhaled Long Acting</b>		
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	3	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	3	
<b>Asthma/Copd - Anticholinergic Agents, Inhaled Short Acting</b>		
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	3	
<i>ipratropium bromide inhalation solution 0.02 %</i>	2	
<b>Asthma/Copd Therapy - Beta 2-Adrenergic Agents, Inhaled, Long Acting</b>		
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	2	QL (4 ML per 1 day)
<i>formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml</i>	2	
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	3	
<b>Asthma/Copd Therapy - Beta 2-Adrenergic Agents, Inhaled, Short Acting</b>		
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i>	2	QL (2 INHALERS per 30 days)
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	2	
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	2	
<i>levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation</i>	2	
<b>Asthma/Copd Therapy - Beta Adrenergic Agents</b>		
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	2	

Drug Name	Tier	Notes
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	2	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	2	
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	2	
<b>Asthma/Copd Therapy - Beta Adrenergic-Anticholinergic Combinations</b>		
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	3	QL (8 GM per 30 days)
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	2	
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	3	
<b>Asthma/Copd Therapy - Beta Adrenergic-Glucocorticoid Combinations</b>		
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE	3	
BREYNA INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	1	PV (Preventive)
<i>budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	1	PV (Preventive)
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	1	QL (1 EA per 30 days); PV (Preventive)
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL (60 EA per 30 days); PV (Preventive)
WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	1	QL (60 EA per 30 days); PV (Preventive)
<b>Asthma/Copd Tx - Beta-Adrenergic-Anticholinergic-Glucocorticoid Comb,</b>		
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	3	
<b>Bronchiectasis Therapy Agents</b>		
BRINSUPRI ORAL TABLET 10 MG, 25 MG	5	PA; QL (1 EA per 1 day); LA
<b>Cystic Fibrosis - Inhaled Aminoglycosides</b>		
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	5	LA; S
<b>Cystic Fibrosis - Inhaled Monobactams</b>		
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	5	LA; S

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Drug Name	Tier	Notes
<b>Cystic Fibrosis-Transmembrane Conductance Regulator (Cftr) Potentiator</b>		
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG	5	PA; QL (2 EA per 1 day); LA; S
KALYDECO ORAL TABLET 150 MG	5	PA; QL (2 EA per 1 day); LA; S
<b>Cystic Fib-Transmemb Conduct. Reg.(Cftr) Potentiator And Corrector Cmb</b>		
ALYFTREK ORAL TABLET 10-50-125 MG	5	PA; QL (2 EA per 1 day); LA; S
ALYFTREK ORAL TABLET 4-20-50 MG	5	PA; QL (3 EA per 1 day); LA; S
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG, 75-94 MG	5	PA; QL (2 EA per 1 day); LA; S
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	5	PA; QL (4 EA per 1 day); LA; S
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	5	PA; QL (2 EA per 1 day); LA; S
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	5	PA; QL (2 EA per 1 day); LA; S
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	5	PA; QL (3 EA per 1 day); LA; S
<b>Mucolytics</b>		
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	2	
PULMOZYME INHALATION SOLUTION 1 MG/ML	5	LA; S
<b>Nasal Anticholinergics</b>		
<i>ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	2	
<b>Nasal Antihistamines</b>		
<i>azelastine nasal spray,non-aerosol 137 mcg (0.1 %)</i>	2	
<i>olopatadine nasal spray,non-aerosol 0.6 %</i>	2	
<b>Nasal Corticosteroids</b>		
<i>flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)</i>	2	
<i>fluticasone propionate nasal spray,suspension 50 mcg/actuation</i>	2	
<i>mometasone nasal spray,non-aerosol 50 mcg/actuation</i>	2	QL (17 GM per 30 days)
<b>Non-Opioid Antitussive-Antihistamine Combinations</b>		
<i>promethazine-dm oral solution 6.25-15 mg/5 ml</i>	1	

Drug Name	Tier	Notes
<b>Opioid Antitussive-1st Generation Antihistamine Combinations</b>		
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1	PA
<b>Opioid Antitussive-Anticholinergic Combinations</b>		
<i>hydrocodone-homatropine oral solution 5-1.5 mg/5 ml</i>	2	
HYDROMET ORAL SOLUTION 5-1.5 MG/5 ML	2	
<b>Pulmonary Fibrosis Treatment Agents - Antifibrotic Therapy</b>		
<i>pirfenidone oral capsule 267 mg</i>	5	PA; QL (6 EA per 1 day); S
<i>pirfenidone oral tablet 267 mg</i>	5	PA; QL (6 EA per 1 day); S
<i>pirfenidone oral tablet 801 mg</i>	5	PA; QL (3 EA per 1 day); S
<b>Pulmonary Fibrosis Treatment Agents - Multikinase Inhibitors</b>		
OFEV ORAL CAPSULE 100 MG	5	PA; LA; S
OFEV ORAL CAPSULE 150 MG	5	PA; S
<b>VAGINAL PRODUCTS</b>		
<b>Vaginal Antibacterial - Lincosamides</b>		
<i>clindamycin phosphate vaginal cream 2 %</i>	2	
<b>Vaginal Antifungal - Imidazoles</b>		
MICONAZOLE-3 VAGINAL SUPPOSITORY 200 MG	2	
<b>Vaginal Antifungal - Triazoles</b>		
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	2	
<i>terconazole vaginal suppository 80 mg</i>	2	
<b>Vaginal Antiprotozoal-Antibacterial - Nitroimidazole Derivatives</b>		
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	2	
<b>Vaginal Estrogens</b>		
<i>estradiol vaginal tablet 10 mcg</i>	2	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	4	
FEMRING VAGINAL RING 0.05 MG/24 HR, 0.1 MG/24 HR	4	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	3	
YUVAFEM VAGINAL TABLET 10 MCG	2	
<b>Vaginal Progestins</b>		
CRINONE VAGINAL GEL 4 %	4	PA

Drug Name	Tier	Notes
<b>WEIGHT LOSS/GAIN AGENTS</b>		
<b>Anti-Obesity - Glucagon-Like Peptide-1 (Glp-1) Receptor Agonists</b>		
<i>liraglutide (weight loss) subcutaneous pen injector 3 mg/0.5 ml (18 mg/3 ml)</i>	3	PA; QL (0.5 ML per 1 day)
<b>Appetite Stimulants - Cannabinoids</b>		
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	2	QL (2 EA per 1 day)
<b>Appetite Stimulants - Progestin Hormone Type</b>		
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)</i>	2	

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