



**Rhode Island Individual and Small Group
4-Tier Formulary**

Effective: 12/01/2021

Key Terms

Formulary

A formulary is a list of prescription medications developed by a committee of practicing physicians and practicing pharmacists who represent a variety of specialty areas and who are knowledgeable in the diagnosis and treatment of disease.

Brand-Name Drugs

Brand-name drugs are typically the first products to gain U.S. Food and Drug Administration (FDA) approval.

Generic Drugs

Generic drugs have the same active ingredients and come in the same strengths and dosage forms as the equivalent brand-name drug. Multiple manufacturers may produce the same generic drug and the product may differ from its brand name counterpart in color, size or shape, but the differences do not alter the effectiveness. Generic versions of brand-name drugs are reviewed and approved by the FDA. The FDA works closely with all pharmaceutical companies to make sure that all drugs sold in the U.S. meet appropriate standards for strength, quality, and purity.

Note: With limited exceptions, when a generic launches the brand name drug will move to not covered immediately following the generic launch.

4-Tier Pharmacy Copayment Program (4-Tier Program)

To help maintain affordability in the pharmacy benefit, we encourage the use of cost-effective drugs and preferred brand names through the four-tier program. This program gives you and your doctor the opportunity to work together to find a prescription medication that's affordable and appropriate for you.

All covered drugs are placed into one of four tiers. Your physician may have the option to write you a prescription for a Tier 1, Tier 2, Tier 3 or Tier 4 drug (as defined below); however, there may be instances when only a Tier 4 drug is appropriate, which will require a higher copayment. The program features a high cost tier mostly inclusive of specialty drugs included in and available through the Designated Specialty Pharmacy (SP) program. Drugs available through the SP program include but are not limited to medications used in the treatment of rare diseases, infertility, hepatitis C, growth hormone deficiency, multiple sclerosis, rheumatoid arthritis, and cancers treated with oral medications.

- **Tier 1:** Medications on this tier have the lowest cost sharing amount
- **Tier 2:** Medications on this tier have a higher cost sharing amount
- **Tier 3:** Medications on this tier have a higher cost sharing amount
- **Tier 4:** Medications on this tier have the highest cost sharing amount; limited to a 30- day supply

Please note that tier placement is subject to change throughout the year.

Copayment

A copayment is the fee a member pays for certain covered drugs. A member pays the copayment directly to the provider when he/she receives a covered drug, unless the provider arranges otherwise.

Coinsurance

Coinurance requires the member to pay a percentage of the total cost for certain covered drugs.

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

Medical Review Process

Tufts Health Plan has pharmacy programs in place to help manage the pharmacy benefit. Requests for medically necessary review for coverage of drugs included in the New-to-Market Drug Evaluation Process (NTM), Prior Authorization Program (PA), Step Therapy Prior Authorization Program (STPA), Quantity Limitations Program (QL), Non-Covered Drugs (NC) With Suggested Alternatives Program should be completed by the physician and sent to Tufts Health Plan. Drugs excluded under your pharmacy benefit will not be covered through this process. The request must include clinical information that supports why the drug is medically necessary for you. Tufts Health Plan will approve the request if it meets coverage guidelines. If Tufts Health Plan does not approve the request, you have the right to appeal. The appeal process is described in your benefit document.

Quantity Limitation (QL) Program

Because of potential safety and utilization concerns, Tufts Health Plan has placed quantity limitations on some prescription drugs. You are covered for up to the amount posted in our list of covered drugs. These quantities are based on recognized standards of care as well as from FDA-approved dosing guidelines. If your provider believes it is necessary for you to take more than the QL amount posted on the list, he or she may submit a request for coverage under the Medical Review Process.

New-To-Market Drug Evaluation Process (NTM)

In an effort to make sure the new-to-market prescription drugs we cover are safe, effective and affordable, we delay coverage of many new drug products until the Plan's Pharmacy and Therapeutics Committee and physician specialists have reviewed them. This review process is usually completed within six months after a drug becomes available.

The review process enables us to learn a great deal about these new drugs, including how a physician can safely prescribe these new drugs and how physicians can choose the most appropriate patients for the new therapy. During the review process, if your physician believes you have a medical need for the New-to-Market drug, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

Non-Covered Drugs (NC)

There are thousands of drugs listed on the Tufts Health Plan covered drug list. In fact, most drugs are covered. There is, however, a list of drugs that Tufts Health Plan currently does not cover.

In many cases, these drugs are not covered by Tufts Health Plan because there are safe, comparably effective, and cost effective alternatives available. Our goal is to keep pharmacy benefits as affordable as possible.

If your doctor feels that one of the non-covered drugs is needed, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

Prior Authorization (PA) Program

In order to ensure safety and affordability for everyone, some medications require prior authorization. This helps us work with your doctor to ensure that medications are prescribed appropriately.

If your doctor feels it is medically necessary for you to take one of the drugs listed below, he/she can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

Step Therapy Prior Authorization (STPA)

Step Therapy is an automated form of Prior Authorization. It encourages the use of therapies that should be tried first, before other treatments are covered, based on clinical practice guidelines and cost-effectiveness. Some types of Step Therapy include requiring the use of generics before brand name drugs, preferred before non-preferred brand name drugs, and first-line before second-line therapies.

Medications included on step 1—the lowest step—are usually covered without authorization. We have noted the few exceptions, which may require your physician to submit a request to Tufts Health Plan for coverage. Medications on Step 2 or higher are automatically authorized at the point-of-sale if you have taken the required prerequisite drugs. However, if your physician prescribes a medication on a higher step, and you have not yet taken the required medication(s) on a lower step, or if you are a new Tufts Health Plan member and do not have any prescription drug claims history, the prescription will deny at the point-of-sale with a message indicating that a Prior Authorization (PA) is required. Physicians may submit requests for coverage to Tufts Health Plan for members who do not meet the Step Therapy criteria at the point of sale under the Medical Review process.

Designated Specialty Pharmacy Program (SP)

Tufts Health Plan's goal is to offer you the most clinically appropriate and cost-effective services.

As a result, we have designated special pharmacies to supply up to a 30-day supply of a select number of medications used in the treatment of complex diseases. These pharmacies are specialized in providing these medications and are staffed with nurses, coordinators and pharmacists to provide support services for members.

Other special designated pharmacies and medications may be identified and added to this program from time to time.

Benefits vary; some members may not participate in this program. Please see your benefit document for complete information.

Physicians may obtain a select number of specialty medications through a designated SP for administration in the office as an alternative to direct purchase. These medications are covered under the medical benefit, and will be shipped directly to and administered in the office by the member's provider. The designated pharmacy will bill Tufts Health Plan directly for the medication.

For the most current listing of special designated pharmacies or to find out if your plan includes this program, please call us at the number listed on the back of your member identification card.

Designated Specialty Infusion Program for Drugs Covered Under the Medical Benefit (SI)

Tufts Health Plan has designated home infusion providers for a select number of specialized pharmacy products and drug administration services.

The designated specialty infusion provider offers clinical management of drug therapies, nursing support, and care coordination to members with acute and chronic conditions. Place of service may be in the home or alternate infusion site based on availability of infusion centers and determination of the most clinically appropriate site for treatment. These medications are covered under the medical benefit (not the pharmacy benefit) and generally require support services, medication dose management, and special handling in addition to the drug administration services. Medications include, but are not limited to, medications used in the treatment of hemophilia, pulmonary arterial hypertension, and immune deficiency. Other specialty infusion providers and medications may be identified and added to this program from time to time.

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

Over-The-Counter Drugs (OTC)

When a medication with the same active ingredient or a modified version of an active ingredient that is therapeutically equivalent, becomes available over-the-counter, Tufts Health Plan may exclude coverage of the specific medication or all of the prescription drugs in the class. For more information, please call our Member Services Department at the number listed on the back of your member identification card.

Cancer Mandate (CM)

Oral Cancer medications may have a cost share of \$0 for up to a 30 day supply under the Rhode Island oral cancer therapy mandate. Please check your benefit document.

Low Cost Generic (LCG)

Certain medications may be included in the Low Cost Generic program and be subject to a \$5 copay for a 30-day supply rather than the tier 1 copay. Please check your benefit document.

Women's Health (WH)

Certain medications may be covered without copayment under Women's Health Preventive Services Initiative. Please contact your plan sponsor / employer about applicability and effective date for your group.

Affordable Care Act (ACA)

Under the Patient Protection and Affordable Care Act (PPACA), commonly called the Affordable Care Act (ACA) or health care reform, these preventive medications may be covered at no cost (copay, coinsurance, or deductible) for Tufts Health Plan members, depending on their plan benefits. Please check the specific terms of your plan benefit document.

Note: A prescription is required for all listed medications, including over-the-counter (OTC) medications

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Tufts Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Tufts Health Plan at 800.462-0224.

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Tufts Health Plan, Attention:

Civil Rights Coordinator Legal Dept.

705 Mount Auburn St. Watertown, MA 02472

Phone: 888.880.8699 ext. 48000, [TTY number— 800.439.2370 or 711]

Fax: 617.972.9048

Email: OCRCordinator@tufts-health.com.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building Washington, D.C. 20201

800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

For no cost translation in English, call the number on your ID card.

للحصول على خدمة الترجمة المجانية باللغة العربية، يرجى الاتصال على الرقم المدون على بطاقة الهوية الخاصة بك Arabic.

Chinese 若需免費的中文版本，請撥打ID卡上的電話號碼。

French Pour demander une traduction gratuite en français, composez le numéro indiqué sur votre carte d'identité.

German Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die Telefonnummer auf Ihrer Ausweiskarte an.

Greek Για δωρεάν μετάφραση στα Ελληνικά, καλέστε τον αριθμό που αναγράφεται στην αναγνωριστική κάρτας σας.

Haitian Creole Pou jwenn tradiksyon gratis nan lang Kreyòl Ayisyen, rele nimewo ki sou kat ID ou.

Italian Per la traduzione in italiano senza costi aggiuntivi, è possibile chiamare il numero indicato sulla tessera identificativa.

Japanese 日本語の無料翻訳についてはIDカードに書いてある番号に電話してください。

Khmer (Cambodian) ប៊ែនសរីបែរ គេបងយកតាតគិតចម្លោះ តាមរាជធានី
សូមទូរសព្ទការអំពេលខ្លួនដើម្បីបែណ្ឌក្រុមហ៍ ឬសមាជិករបស់អ្នក។

Korean 한국어로 무료 통역을 원하시면, ID 카드에 있는 번호로 연락하십시오.

Laotian ດ້ວຍເຫັນ ປກການແປພາກອັນປ ນພາສາລາວໂທ່ງທົ່ວໄວ້ ເລີ່ມຕໍ່ ອີຣ ດ້ວຍ ໃຫຍ້ ດີ່ຈົກຕົວບົດຫຼຸ້ມ ຕີ່
ດປະຈຳຕົວ ວຂອງທ່ານ ດ້ວຍ.

Navajo Doo báah iliní da Diné k’ehjí álnéehgo, hodiilnih béishee bee haní’é bee néé ho’dílzingo nantinigíí bikáá’.

Persian. برای ترجمه رایگان فارسی به شماره تلفن مندرج در کارت شناسائی تان زنگ بزنید

Polish Aby uzyskać bezpłatne tłumaczenie w języku polskim, należy zadzwonić na numer znajdujący się na Pana/i dowodzie tożsamości.

Portuguese Para tradução grátis para português, ligue para o número no seu cartão de identificação.

Russian Для получения услуг бесплатного перевода на русский язык позвоните по номеру, указанному на идентификационной карточке.

Spanish Por servicio de traducción gratuito en español, llame al número de su tarjeta de miembro.

Tagalog Para sa walang bayad na pagsasalin sa Tagalog, tawagan ang numero na nasa inyong ID card.

Vietnamese Để có bản dịch tiếng Việt không phải trả phí, gọi theo số trên thẻ căn cước của bạn.

CM	Cancer Mandate	MM	Mandatory Mail	NC	Non Covered Drugs
NTM	New-to-Market	PA	Prior Authorization	QL	Quantity Limitation Program
SI	Specialty Infusion	SP	Designated Specialty Pharmacy	STPA	Step Therapy Prior Authorization
WH	Women's Health	ACA	Preventive Service		

Table of Contents

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	3
ALLERGENIC EXTRACTS/BIOLOGICALS MISC	5
ALTERNATIVE MEDICINES	6
AMEBICIDES	6
AMINOGLYCOSIDES	6
ANALGESICS - ANTI-INFLAMMATORY	6
ANALGESICS - NONNARCOTIC	8
ANALGESICS - OPIOID	8
ANDROGENS-ANABOLIC	11
ANORECTAL AND RELATED PRODUCTS	11
ANTHELMINTICS	12
ANTIANGINAL AGENTS	12
ANTIANXIETY AGENTS	12
ANTIARRHYTHMICS	13
ANTIASTHMATIC AND BRONCHODILATOR AGENTS	13
ANTICOAGULANTS	15
ANTICONVULSANTS	16
ANTIDEPRESSANTS	18
ANTIDIABETICS	20
ANTIDIARRHEAL/PROBIOTIC AGENTS	23
ANTIDOTES AND SPECIFIC ANTAGONISTS	23
ANTIEMETICS	23
ANTIFUNGALS	24
ANTIHISTAMINES	24
ANTIHYPERLIPIDEMICS	25
ANTIHYPERTENSIVES	26
ANTI-INFECTIVE AGENTS - MISC.	27
ANTIMALARIALS	28
ANTIMYASTHENIC/CHOLINERGIC AGENTS	29
ANTIMYCOBACTERIAL AGENTS	29
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES	29
ANTIPARKINSON AND RELATED THERAPY AGENTS	34
ANTIPSYCHOTICS/ANTIMANIC AGENTS	35
ANTIVIRALS	36
BETA BLOCKERS	39
CALCIUM CHANNEL BLOCKERS	40
CARDIOTONICS	41
CARDIOVASCULAR AGENTS - MISC.	41
CEPHALOSPORINS	42
CONTRACEPTIVES	42
CORTICOSTEROIDS	45
COUGH/COLD/ALLERGY	45
DERMATOLOGICALS	46
DIAGNOSTIC PRODUCTS	53
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS	53
DIGESTIVE AIDS	53
DIURETICS	54
ENDOCRINE AND METABOLIC AGENTS - MISC.	55
ESTROGENS	57
FLUOROQUINOLONES	58

GASTROINTESTINAL AGENTS - MISC.	59
GENITOURINARY AGENTS - MISCELLANEOUS	60
GOUT AGENTS	60
HEMATOLOGICAL AGENTS - MISC.	61
HEMATOPOIETIC AGENTS	63
HEMOSTATICS	66
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	66
LAXATIVES	66
MACROLIDES	67
MEDICAL DEVICES AND SUPPLIES	67
MIGRAINE PRODUCTS	68
MINERALS & ELECTROLYTES	70
MISCELLANEOUS THERAPEUTIC CLASSES	70
MOUTH/THROAT/DENTAL AGENTS	71
MULTIVITAMINS	72
MUSCULOSKELETAL THERAPY AGENTS	72
NASAL AGENTS - SYSTEMIC AND TOPICAL	72
NEUROMUSCULAR AGENTS	72
NUTRIENTS	73
OPHTHALMIC AGENTS	73
OTIC AGENTS	76
OXYTOCICS	77
PASSIVE IMMUNIZING AND TREATMENT AGENTS	77
PENICILLINS	78
PROGESTINS	78
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	78
RESPIRATORY AGENTS - MISC.	82
SULFONAMIDES	82
TETRACYCLINES	82
THYROID AGENTS	83
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	83
URINARY ANTISPASMODICS	85
VAGINAL AND RELATED PRODUCTS	86
VASOPRESSORS	86
VITAMINS	86

CURRENT AS OF 12/1/2021

Drug	Status	Notes
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 capsules per 30 days)
amphetamine-dextroamphetamine oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
armodafinil oral tablet	Tier-3	PA; QL (90 TABLETS per 90 days)
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg	Tier-2	QL (180 EA per 90 days)
atomoxetine hcl oral capsule 100 mg, 80 mg	Tier-2	QL (90 EA per 90 days)
benzphetamine hcl oral tablet	Tier-1	
clonidine hcl er oral tablet extended release 12 hour	Tier-2	
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-3	PA
DAYTRANA TRANSDERMAL PATCH	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 patches per 30 days)
dexmethylphenidate hcl er oral capsule extended release 24 hour	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
dexmethylphenidate hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (150 capsules per 30 days)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (120 capsules per 30 days)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
dextroamphetamine sulfate oral solution	Tier-1	PA; ¥ (PA applies to members 25 and older)
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	Tier-1	PA; ¥ (PA applies to members 25 and older)
diethylpropion hcl oral tablet	Tier-1	

Drug	Status	Notes
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (240 ML per 30 days)
guanfacine hcl er oral tablet extended release 24 hour	Tier-1	
IMCIVREE SUBCUTANEOUS SOLUTION	Tier-4	PA
LOMAIRA ORAL TABLET	Tier-3	PA
methamphetamine hcl oral tablet	Tier-3	PA; ¥ (PA applies to members 25 and older); QL (150 tablets per 30 days)
methylphenidate hcl er (cd) oral capsule extended release	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 60 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 capsules per 30 days)
methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 54 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 24 hour 36 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 36 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 72 mg	Tier-3	PA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
methylphenidate hcl oral solution	Tier-2	PA; ¥ (PA applies to members 25 and older)
methylphenidate hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
methylphenidate hcl oral tablet chewable	Tier-1	PA; ¥ (PA applies to members 25 and older)
modafinil oral tablet	Tier-2	PA; QL (90 tablets per 90 days)
phendimetrazine tartrate oral tablet	Tier-1	
phentermine hcl oral capsule	Tier-1	
phentermine hcl oral tablet	Tier-1	
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG	Tier-3	PA; QL (30 EA per 30 days)

Drug	Status	Notes
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 200 MG	Tier-3	PA; QL (60 EA per 30 days)
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	PA
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	PA
SUNOSI ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
VYVANSE ORAL CAPSULE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
VYVANSE ORAL TABLET CHEWABLE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
WAKIX ORAL TABLET	Tier-3	PA; QL (60 tablets per 30 days)
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA
XENICAL ORAL CAPSULE	Tier-3	PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA
PALFORZIA (12 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (120 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (160 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (20 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (200 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (240 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (3 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET	Tier-3	PA
PALFORZIA (300 MG TITRATION) ORAL PACKET	Tier-3	PA
PALFORZIA (40 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (6 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (80 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA INITIAL ESCALATION ORAL	Tier-3	PA
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA

Drug	Status	Notes
ALTERNATIVE MEDICINES		
coenzyme q10 oral tablet 100 mg, 200 mg, 50 mg	Tier-3	PA
AMEBICIDES		
SOLSEC ORAL PACKET	Tier-3	
AMINOGLYCOSIDES		
ARIKAYCE INHALATION SUSPENSION	Tier-4	
neomycin sulfate oral tablet	Tier-1	
paromomycin sulfate oral capsule	Tier-2	
TOBI PODHALER INHALATION CAPSULE	Tier-4	
tobramycin inhalation nebulization solution	Tier-4	
ANALGESICS - ANTI-INFLAMMATORY		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-Injector	Tier-4	PA; QL (4 syringes per 28 days)
ACTEMRA INTRAVENOUS SOLUTION	Medical Benefit	PA
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (4 Syringes per 28 Days)
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-4	PA; QL (4 VIALS per 28 Days)
celecoxib oral capsule	Tier-2	
diclofenac potassium oral tablet 50 mg	Tier-1	
diclofenac sodium er oral tablet extended release 24 hour	Tier-1	
diclofenac sodium oral tablet delayed release	Tier-1	
diclofenac-misoprostol oral tablet delayed release	Tier-2	
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-4	PA; QL (4 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	Tier-4	PA; QL (8 syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	Tier-4	PA; QL (8 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	Tier-4	PA; QL (4 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-4	PA; QL (8 syringes per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	Tier-4	PA; QL (4 Syringes per 28 days)
etodolac er oral tablet extended release 24 hour	Tier-2	
etodolac oral capsule	Tier-1	
etodolac oral tablet	Tier-1	
fenoprofen calcium oral tablet	Tier-3	
flurbiprofen oral tablet	Tier-1	

Drug	Status	Notes
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	Tier-4	PA; ¥ (1 FILL PER LIFE OF PLAN); QL (1 fill per 1 Lifetime)
HUMIRA PEN SUBCUTANEOUS PEN- INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	Tier-4	PA; QL (2 Syringes per 28 days)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier-4	PA; ¥ (1 FILL PER LIFE OF PLAN); QL (1 fill per 1 Lifetime)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	Tier-4	PA; ¥ (1 FILL PER LIFE OF PLAN); QL (1 fill per 1 Lifetime)
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier-4	PA; QL (1 fill per 1 Lifetime)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	Tier-4	PA; QL (2 Syringes per 28 days)
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	Tier-1	^ (LCG)
INDOCIN ORAL SUSPENSION	Tier-3	
INDOCIN RECTAL SUPPOSITORY	Tier-3	
indomethacin er oral capsule extended release	Tier-2	
indomethacin oral capsule 25 mg, 50 mg	Tier-1	
ketorolac tromethamine oral tablet	Tier-1	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; QL (2 auto-injectors per 28 days)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (2 syringes per 28 days)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (28 Syringes per 28 days)
leflunomide oral tablet	Tier-2	
meclofenamate sodium oral capsule	Tier-3	
mefenamic acid oral capsule	Tier-3	
meloxicam oral tablet	Tier-1	^ (LCG)
nabumetone oral tablet	Tier-1	
naproxen oral suspension	Tier-3	
naproxen oral tablet	Tier-1	^ (LCG)
naproxen sodium oral tablet 275 mg, 550 mg	Tier-2	
OLUMIANT ORAL TABLET	Tier-4	PA
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; QL (4 Syringes per 28 days)
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	Tier-4	PA; QL (4 Syringes per 28 days)

Drug	Status	Notes
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML	Tier-4	PA; QL (4 ML per 28 days)
OTEZLA ORAL TABLET	Tier-4	PA; QL (60 EA per 30 days)
OTEZLA ORAL TABLET THERAPY PACK	Tier-4	PA; ¥ (1 FILL PER LIFE OF PLAN); QL (1 fill per 1 Lifetime)
oxaprozin oral tablet	Tier-3	
piroxicam oral capsule	Tier-1	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	Tier-3	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-4	PA; QL (30 Tablets per 30 days)
SIMPONI ARIA INTRAVENOUS SOLUTION	Medical Benefit	PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; QL (1 Syringe per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (1 Syringe per 28 days)
sulindac oral tablet	Tier-1	
XELJANZ ORAL TABLET 10 MG	Tier-4	PA; QL (60 Tablets per 30 days)
XELJANZ ORAL TABLET 5 MG	Tier-4	PA; QL (60 TABLETS per 30 Days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	Tier-4	PA; QL (30 Tablets per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	Tier-4	PA; QL (30 EA per 30 days)

ANALGESICS - NONNARCOTIC

BUPAP ORAL TABLET 50-300 MG	Tier-3	
butalbital-acetaminophen oral tablet 50-325 mg	Tier-1	
butalbital-apap-caffeine oral capsule 50-325-40 mg	Tier-3	
butalbital-apap-caffeine oral tablet 50-325-40 mg	Tier-3	
butalbital-asa-caffeine oral capsule	Tier-1	
diflunisal oral tablet	Tier-1	
ESGIC ORAL CAPSULE	Tier-3	

ANALGESICS - OPIOID

acetaminophen-codeine #2 oral tablet	Tier-1	QL (12 Tablets per 1 day)
acetaminophen-codeine #3 oral tablet	Tier-1	QL (12 Tablets per 1 day)
acetaminophen-codeine #4 oral tablet	Tier-1	QL (6 Tablets per 1 day)
acetaminophen-codeine oral solution	Tier-1	QL (150 ML per 1 day)

Drug	Status	Notes
apap-caff-dihydrocodeine oral capsule	Tier-2	QL (10 Capsules per 1 day)
apap-caff-dihydrocodeine oral tablet 325-30-16 mg	Tier-2	QL (10 Tablets per 1 day)
BELBUCA BUCCAL FILM	Tier-3	PA; QL (60 Films per 30 days)
buprenorphine hcl sublingual tablet sublingual 2 mg	Tier-1	QL (90 EA per 30 days)
buprenorphine hcl sublingual tablet sublingual 8 mg	Tier-1	QL (120 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film	Tier-2	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	Tier-1	
buprenorphine transdermal patch weekly	Tier-2	PA; QL (4 EA per 30 days)
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	Tier-2	QL (360 Capsules per 30 days)
butalbital-asa-caff-codeine oral capsule	Tier-1	
butorphanol tartrate nasal solution	Tier-1	
codeine sulfate oral tablet 15 mg	Tier-1	QL (24 tablets per 1 day)
codeine sulfate oral tablet 30 mg	Tier-1	QL (12 tablets per 1 day)
codeine sulfate oral tablet 60 mg	Tier-1	QL (6 tablets per 1 day)
fentanyl citrate buccal lozenge on a handle	Tier-1	QL (120 UNITS per 30 Days)
fentanyl citrate buccal tablet	Tier-2	QL (120 buccal tablets per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	Tier-1	PA; QL (10 PATCHES per 30 days)
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	Tier-2	PA; QL (10 patches per 30 days)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrant 100 mg, 120 mg	Tier-3	PA; QL (2 tablets per 1 day)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrant 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	Tier-3	QL (2 tablets per 1 day)
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	Tier-1	QL (90 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 7.5-300 mg, 7.5-325 mg	Tier-1	QL (6 Tablets per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	Tier-1	QL (8 Tablets per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	Tier-1	QL (5 Tablets per 1 day)
hydromorphone hcl oral liquid	Tier-1	QL (20 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	Tier-1	QL (10 tablets per 1 day)
hydromorphone hcl oral tablet 4 mg	Tier-1	QL (5 tablets per 1 day)

Drug	Status	Notes
hydromorphone hcl oral tablet 8 mg	Tier-1	QL (2 tablets per 1 day)
hydromorphone hcl rectal suppository	Tier-1	QL (4 EA per 1 day)
meperidine hcl oral solution	Tier-1	QL (90 ML per 1 day)
meperidine hcl oral tablet 50 mg	Tier-1	QL (18 tablets per 1 day)
methadone hcl injection solution	Tier-1	PA; QL (2 ML per 1 day)
METHADONE HCL INTENSOL ORAL CONCENTRATE	Tier-1	PA; QL (2 ML per 1 day)
methadone hcl oral solution 10 mg/5ml	Tier-1	PA; QL (10 ML per 1 day)
methadone hcl oral solution 5 mg/5ml	Tier-1	PA; QL (20 ML per 1 day)
methadone hcl oral tablet 10 mg	Tier-1	PA; QL (2 tablets per 1 day)
methadone hcl oral tablet 5 mg	Tier-1	PA; QL (4 tablets per 1 day)
METHADOSE ORAL CONCENTRATE 10 MG/ML	Tier-1	PA; QL (2 ML per 1 day)
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	Tier-1	QL (4.5 ML per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour	Tier-1	PA; QL (1 capsule per 1 day)
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg	Tier-1	PA; QL (60 EA per 30 days)
morphine sulfate er oral capsule extended release 24 hour 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	Tier-1	PA; QL (60 CAPSULES per 30 days)
morphine sulfate er oral tablet extended release	Tier-1	PA; QL (90 TABLETS per 30 days)
morphine sulfate oral solution 10 mg/5ml	Tier-1	QL (45 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	Tier-1	QL (22.5 ML per 1 day)
morphine sulfate oral tablet 15 mg	Tier-1	QL (6 tablets per 1 day)
morphine sulfate oral tablet 30 mg	Tier-1	QL (3 tablets per 1 day)
morphine sulfate rectal suppository 10 mg, 5 mg	Tier-1	QL (6 suppositories per 1 day)
morphine sulfate rectal suppository 20 mg	Tier-1	QL (4 suppositories per 1 day)
morphine sulfate rectal suppository 30 mg	Tier-2	QL (3 suppositories per 1 day)
oxycodone hcl er oral tablet er 12 hour abuse-deterrent	Tier-2	PA; QL (2 tablets per 1 day)
oxycodone hcl oral capsule	Tier-1	QL (12 capsules per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml	Tier-1	QL (3 ML per 1 day)
oxycodone hcl oral solution	Tier-1	QL (60 ML per 1 day)
oxycodone hcl oral tablet 10 mg	Tier-1	QL (6 tablets per 1 day)
oxycodone hcl oral tablet 15 mg	Tier-1	QL (4 tablets per 1 day)
oxycodone hcl oral tablet 20 mg	Tier-1	QL (3 tablets per 1 day)
oxycodone hcl oral tablet 30 mg	Tier-1	QL (2 tablets per 1 day)
oxycodone hcl oral tablet 5 mg	Tier-1	QL (12 tablets per 1 day)

Drug	Status	Notes
oxycodone-acetaminophen oral tablet 10-325 mg	Tier-1	QL (6 Tablets per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	Tier-1	QL (12 Tablets per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	Tier-1	QL (8 Tablets per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	Tier-2	PA; QL (2 tablets per 1 day)
oxymorphone hcl er oral tablet extended release 12 hour	Tier-2	PA; QL (2 tablets per 1 day)
oxymorphone hcl oral tablet 10 mg	Tier-1	QL (3 tablets per 1 day)
oxymorphone hcl oral tablet 5 mg	Tier-1	QL (6 tablets per 1 day)
pentazocine-naloxone hcl oral tablet	Tier-1	QL (4 tablets per 1 day)
PROLATE ORAL SOLUTION	Tier-3	QL (30 ML per 1 day)
SUBSYS SUBLINGUAL LIQUID	Tier-3	QL (30 Bottles per 30 Days)
tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg	Tier-1	QL (1 tablet per 1 day)
tramadol hcl er oral tablet extended release 24 hour	Tier-1	PA; QL (1 tablet per 1 day)
tramadol hcl oral tablet 100 mg	Tier-1	QL (4 tablets per 1 day)
tramadol hcl oral tablet 50 mg	Tier-1	QL (8 tablets per 1 day)
tramadol-acetaminophen oral tablet	Tier-1	QL (8 Tablets per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	Tier-3	PA
ANDROGENS-ANABOLIC		
danazol oral capsule	Tier-1	
JATENZO ORAL CAPSULE 158 MG, 237 MG	Tier-3	PA; QL (2 capsules per 1 day)
JATENZO ORAL CAPSULE 198 MG	Tier-3	PA; QL (4 capsules per 1 day)
methitest oral tablet	Tier-3	
oxandrolone oral tablet	Tier-2	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	Tier-1	
testosterone enanthate intramuscular solution	Tier-1	
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%)	Tier-2	
testosterone transdermal gel 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	Tier-3	
testosterone transdermal solution	Tier-2	
ANORECTAL AND RELATED PRODUCTS		
hydrocortisone rectal enema	Tier-1	

Drug	Status	Notes
RECTIV RECTAL OINTMENT	Tier-3	QL (1 TUBE per 30 Days)
UCERIS RECTAL FOAM	Tier-2	
ANTHELMINTICS		
albendazole oral tablet	Tier-2	
benznidazole oral tablet	Tier-2	
EMVERM ORAL TABLET CHEWABLE	Tier-3	
ivermectin oral tablet	Tier-1	QL (20 EA per 90 days)
praziquantel oral tablet	Tier-2	
ANTIANGINAL AGENTS		
ISORDIL TITRADOSE ORAL TABLET 40 MG	Tier-3	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	Tier-1	
isosorbide mononitrate er oral tablet extended release 24 hour	Tier-1	
isosorbide mononitrate oral tablet	Tier-1	
NITRO-BID TRANSDERMAL OINTMENT	Tier-3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	Tier-3	
nitroglycerin er oral capsule extended release 2.5 mg	Tier-1	
nitroglycerin sublingual tablet sublingual	Tier-1	
nitroglycerin transdermal patch 24 hour	Tier-1	
nitroglycerin translingual solution	Tier-1	
ranolazine er oral tablet extended release 12 hour	Tier-2	
ANTIANXIETY AGENTS		
alprazolam oral tablet	Tier-1	^ (LCG)
alprazolam oral tablet dispersible	Tier-1	
buspirone hcl oral tablet 10 mg, 15 mg, 5 mg	Tier-1	
chlordiazepoxide hcl oral capsule	Tier-1	^ (LCG)
clorazepate dipotassium oral tablet	Tier-2	
diazepam oral tablet	Tier-1	^ (LCG)
hydroxyzine hcl oral syrup	Tier-1	
hydroxyzine hcl oral tablet	Tier-1	
hydroxyzine pamoate oral capsule	Tier-1	
LORAZEPAM INTENSOL ORAL CONCENTRATE	Tier-1	
lorazepam oral concentrate 2 mg/ml	Tier-1	
lorazepam oral tablet	Tier-1	^ (LCG)
meprobamate oral tablet	Tier-1	

Drug	Status	Notes
oxazepam oral capsule	Tier-1	
ANTIARRHYTHMICS		
amiodarone hcl oral tablet 200 mg, 400 mg	Tier-1	
disopyramide phosphate oral capsule	Tier-1	
dofetilide oral capsule	Tier-2	
flecainide acetate oral tablet	Tier-1	
mexiletine hcl oral capsule	Tier-1	
MULTAQ ORAL TABLET	Tier-3	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier-3	
PACERONE ORAL TABLET 100 MG	Tier-2	
PACERONE ORAL TABLET 200 MG, 400 MG	Tier-1	
propafenone hcl er oral capsule extended release 12 hour	Tier-2	
propafenone hcl oral tablet	Tier-1	
quinidine gluconate er oral tablet extended release	Tier-2	
quinidine sulfate oral tablet	Tier-1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ADVAIR HFA INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 Days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	Tier-1	¥ (Generic for Proair HFA and Ventolin HFA. Generic Proventil HFA is Non-covered.); QL (6 inhalers per 90 days)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	Tier-1	QL (360 vials per 90 Days)
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%	Tier-1	QL (360 vials per 90 days)
albuterol sulfate oral syrup	Tier-1	^ (LCG)
albuterol sulfate oral tablet	Tier-1	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (1 INHALER per 30 days)
arformoterol tartrate inhalation nebulization solution	Tier-2	
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 Inhalers per 90 days)
ATROVENT HFA INHALATION AEROSOL SOLUTION	Tier-2	QL (6 EA per 90 Days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 Inhalers per 90 days)

Drug	Status	Notes
budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml	Tier-1	QL (180 VIALS per 90 Days)
budesonide inhalation suspension 1 mg/2ml	Tier-1	QL (180 VIALS per 90 days)
CINQAIR INTRAVENOUS SOLUTION	Medical Benefit	PA
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (6 EA per 90 Days)
cromolyn sodium inhalation nebulization solution	Tier-1	QL (360 Vials per 90 Days)
DALIRESP ORAL TABLET	Tier-2	
ELIXOPHYLLIN ORAL ELIXIR	Tier-2	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-Injector	Tier-4	PA; QL (1 pen per 56 days)
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (6 UNITS per 90 Days)
FLOVENT HFA INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 Days)
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	Tier-1	QL (3 Diskus per 90 days)
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	Tier-1	QL (3 inhalers per 90 days)
ipratropium bromide inhalation solution	Tier-1	QL (360 vials per 90 Days)
ipratropium-albuterol inhalation solution	Tier-1	QL (360 vials per 90 Days)
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	Tier-1	
levalbuterol tartrate inhalation aerosol	Tier-1	QL (6 inhalers per 90 days)
montelukast sodium oral tablet	Tier-1	^ (LCG)
montelukast sodium oral tablet chewable	Tier-1	^ (LCG)
NUCALA SUBCUTANEOUS SOLUTION AUTO-Injector	Tier-4	PA; QL (3 auto-injectors per 28 days)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (3 syringes per 28 days)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
PERFOROMIST INHALATION NEBULIZATION SOLUTION	Tier-2	QL (180 VIALS per 90 Days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (6 UNITS per 90 days)

Drug	Status	Notes
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 UNITS per 90 days)
SPIRIVA HANDIHALER INHALATION CAPSULE	Tier-2	QL (3 UNITS per 90 Days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	Tier-2	QL (3 UNITS per 90 days)
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	Tier-2	QL (6 Inhalers per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (3 UNITS per 90 days)
SYMBICORT INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 days)
terbutaline sulfate oral tablet	Tier-1	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-2	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	Tier-1	
theophylline er oral tablet extended release 24 hour	Tier-1	
theophylline oral solution	Tier-1	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH	Tier-2	QL (3 inhalers per 90 days)
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200-62.5-25 MCG/INH	Tier-2	
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-1	QL (3 Diskus per 90 days)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (8 syringes per 28 days)
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
zafirlukast oral tablet	Tier-1	
zileuton er oral tablet extended release 12 hour	Tier-2	
ZYFLO ORAL TABLET	Tier-3	
ANTICOAGULANTS		
ELIQUIS ORAL TABLET	Tier-2	
enoxaparin sodium injection solution	Tier-1	
enoxaparin sodium subcutaneous solution	Tier-1	
fondaparinux sodium subcutaneous solution	Tier-2	

Drug	Status	Notes
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	Tier-3	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml	Tier-1	
JANTOVEN ORAL TABLET	Tier-1	
warfarin sodium oral tablet	Tier-1	
XARELTO ORAL TABLET	Tier-2	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Tier-2	¥ (1 FILL PER LIFE OF PLAN)
ANTICONVULSANTS		
APTIOM ORAL TABLET	Tier-2	
BRIVIACT ORAL SOLUTION	Tier-3	
BRIVIACT ORAL TABLET	Tier-3	
carbamazepine er oral capsule extended release 12 hour	Tier-1	
carbamazepine er oral tablet extended release 12 hour	Tier-1	
carbamazepine oral suspension	Tier-1	
carbamazepine oral tablet	Tier-1	
carbamazepine oral tablet chewable	Tier-1	
CELONTIN ORAL CAPSULE	Tier-3	
clobazam oral suspension	Tier-2	
clobazam oral tablet	Tier-2	
clonazepam oral tablet	Tier-1	^ (LCG)
clonazepam oral tablet dispersible	Tier-1	
DIACOMIT ORAL CAPSULE	Tier-4	PA
DIACOMIT ORAL PACKET	Tier-4	PA
DIASTAT ACUDIAL RECTAL GEL	Tier-3	QL (1 kit per 1 fill)
DIASTAT PEDIATRIC RECTAL GEL	Tier-3	QL (1 kit per 1 fill)
diazepam rectal gel	Tier-2	QL (1 kit per 1 fill)
DILANTIN ORAL CAPSULE 30 MG	Tier-3	
divalproex sodium er oral tablet extended release 24 hour	Tier-1	
divalproex sodium oral capsule delayed release sprinkle	Tier-2	
divalproex sodium oral tablet delayed release	Tier-1	
EPIDIOLEX ORAL SOLUTION	Tier-4	PA
EPITOL ORAL TABLET	Tier-1	

Drug	Status	Notes
ethosuximide oral capsule	Tier-1	
ethosuximide oral solution	Tier-1	
felbamate oral suspension	Tier-1	
felbamate oral tablet	Tier-1	
FINTEPLA ORAL SOLUTION	Tier-3	PA
FYCOMPA ORAL SUSPENSION	Tier-2	
FYCOMPA ORAL TABLET	Tier-2	
gabapentin oral capsule	Tier-1	
gabapentin oral solution 250 mg/5ml	Tier-1	
gabapentin oral tablet	Tier-1	
lamotrigine er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	Tier-2	QL (90 EA per 90 days)
lamotrigine er oral tablet extended release 24 hour 200 mg	Tier-2	QL (270 EA per 90 days)
lamotrigine er oral tablet extended release 24 hour 250 mg, 300 mg	Tier-2	QL (180 EA per 90 days)
lamotrigine oral tablet	Tier-1	^ (LCG)
lamotrigine oral tablet chewable	Tier-1	
lamotrigine oral tablet dispersible	Tier-2	
lamotrigine starter kit-blue oral kit	Tier-2	
lamotrigine starter kit-green oral kit	Tier-2	
lamotrigine starter kit-orange oral kit	Tier-2	
levetiracetam er oral tablet extended release 24 hour	Tier-1	
levetiracetam oral solution	Tier-1	
levetiracetam oral tablet	Tier-1	
NAYZILAM NASAL SOLUTION	Tier-3	PA; ¥ (PA applies to members 11 and younger); QL (1 box per 1 Fill)
oxcarbazepine oral suspension	Tier-1	
oxcarbazepine oral tablet	Tier-1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	
phenytoin oral suspension 125 mg/5ml	Tier-1	
phenytoin oral tablet chewable	Tier-1	
phenytoin sodium extended oral capsule	Tier-1	
pregabalin oral capsule	Tier-1	STPA
pregabalin oral solution	Tier-1	STPA
primidone oral tablet	Tier-1	
rufinamide oral suspension	Tier-2	

Drug	Status	Notes
rufinamide oral tablet	Tier-2	
SYMPAZAN ORAL FILM	Tier-3	PA
tiagabine hcl oral tablet 12 mg, 16 mg	Tier-2	
tiagabine hcl oral tablet 2 mg, 4 mg	Tier-1	
topiramate er oral capsule er 24 hour sprinkle 100 mg, 200 mg, 25 mg, 50 mg	Tier-2	
topiramate oral capsule sprinkle	Tier-1	
topiramate oral tablet	Tier-1	^ (LCG)
valproic acid oral capsule	Tier-1	
VALTOCO 10 MG DOSE NASAL LIQUID	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 5 MG DOSE NASAL LIQUID	Tier-3	PA; QL (2 blister packs per 1 fill)
vigabatrin oral packet	Tier-2	
vigabatrin oral tablet	Tier-4	
VIMPAT ORAL SOLUTION	Tier-2	
VIMPAT ORAL TABLET	Tier-2	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG	Tier-2	
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-2	
XCOPRI ORAL TABLET	Tier-2	
XCOPRI ORAL TABLET THERAPY PACK	Tier-2	
zonisamide oral capsule	Tier-1	
ANTIDEPRESSANTS		
amitriptyline hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
amoxapine oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (sr) oral tablet extended release 12 hour	Tier-1	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg	Tier-2	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)

Drug	Status	Notes
citalopram hydrobromide oral solution	Tier-1	
citalopram hydrobromide oral tablet	Tier-1	^ (LCG)
clomipramine hcl oral capsule	Tier-2	
desipramine hcl oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)
desvenlafaxine er oral tablet extended release 24 hour 100 mg	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger); Only generic products are covered.
desvenlafaxine succinate er oral tablet extended release 24 hour	Tier-2	PA; STPA; ¥ (PA applies to members 12 and younger); Only generic products are covered.
doxepin hcl oral capsule	Tier-1	PA; ¥ (PA applies to members 12 and younger)
doxepin hcl oral concentrate	Tier-1	PA; ¥ (PA applies to members 12 and younger)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	Tier-3	STPA; QL (60 capsules per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	Tier-3	STPA; QL (90 capsules per 30 days)
duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	Tier-1	QL (60 EA per 30 Days)
duloxetine hcl oral capsule delayed release particles 30 mg	Tier-1	QL (90 EA per 30 Days)
EMSAM TRANSDERMAL PATCH 24 HOUR	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
escitalopram oxalate oral solution	Tier-1	
escitalopram oxalate oral tablet	Tier-1	^ (LCG)
fluoxetine hcl oral capsule	Tier-1	^ (LCG)
fluoxetine hcl oral solution	Tier-1	^ (LCG)
fluoxetine hcl oral tablet	Tier-2	PA
fluvoxamine maleate oral tablet	Tier-1	
imipramine hcl oral tablet	Tier-1	
imipramine pamoate oral capsule	Tier-2	
MARPLAN ORAL TABLET	Tier-3	PA; ¥ (PA applies to members 12 and younger)
mirtazapine oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
mirtazapine oral tablet dispersible	Tier-1	PA; ¥ (PA applies to members 12 and younger)
nefazodone hcl oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)

Drug	Status	Notes
nortriptyline hcl oral capsule	Tier-1	PA; ¥ (PA applies to members 12 and younger)
nortriptyline hcl oral solution	Tier-1	PA; ¥ (PA applies to members 12 and younger)
paroxetine hcl er oral tablet extended release 24 hour	Tier-2	PA; ¥ (PA applies to members 12 and younger)
paroxetine hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger); ^ (LCG)
PEXEVA ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
phenelzine sulfate oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
protriptyline hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
sertraline hcl oral concentrate	Tier-1	
sertraline hcl oral tablet	Tier-1	^ (LCG)
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA
tranylcypromine sulfate oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger); ^ (LCG)
trazodone hcl oral tablet 300 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger)
trimipramine maleate oral capsule	Tier-3	PA; ¥ (PA applies to members 12 and younger)
TRINTELLIX ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
venlafaxine hcl er oral capsule extended release 24 hour	Tier-1	
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	Tier-3	
venlafaxine hcl oral tablet	Tier-1	
VIIBRYD ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
VIIBRYD STARTER PACK ORAL KIT	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
ZULRESSO INTRAVENOUS SOLUTION	Medical Benefit	PA
ANTIDIABETICS		
acarbose oral tablet	Tier-1	
alogliptin benzoate oral tablet	Tier-1	

Drug	Status	Notes
alogliptin-metformin hcl oral tablet	Tier-1	
alogliptin-pioglitazone oral tablet	Tier-1	
BAQSIMI ONE PACK NASAL POWDER	Tier-2	QL (2 devices per 1 fill)
BAQSIMI TWO PACK NASAL POWDER	Tier-2	QL (2 devices per 1 fill)
CYCLOSET ORAL TABLET	Tier-2	
diazoxide oral suspension	Tier-2	
FARXIGA ORAL TABLET	Tier-2	
glimepiride oral tablet	Tier-1	^ (LCG)
glipizide er oral tablet extended release 24 hour	Tier-1	
glipizide oral tablet	Tier-1	^ (LCG)
glipizide xl oral tablet extended release 24 hour	Tier-1	
glipizide-metformin hcl oral tablet	Tier-1	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	Tier-2	
glucagon emergency injection kit	Tier-2	
glucagon emergency injection solution reconstituted	Tier-2	
glyburide micronized oral tablet	Tier-1	^ (LCG)
glyburide oral tablet	Tier-1	^ (LCG)
glyburide-metformin oral tablet	Tier-1	
GLYXAMBI ORAL TABLET	Tier-2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	Tier-2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier-2	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier-2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMALOG SUBCUTANEOUS SOLUTION	Tier-2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMULIN N SUBCUTANEOUS SUSPENSION	Tier-2	

Drug	Status	Notes
HUMULIN R INJECTION SOLUTION	Tier-2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Tier-2	
JANUMET ORAL TABLET	Tier-2	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
JANUVIA ORAL TABLET	Tier-2	
JARDIANCE ORAL TABLET	Tier-2	
KORLYM ORAL TABLET	Tier-4	PA; QL (120 TABLETS per 30 Days)
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
LANTUS SUBCUTANEOUS SOLUTION	Tier-2	
metformin hcl er (mod) oral tablet extended release 24 hour	Tier-3	PA
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	Tier-3	PA
metformin hcl er oral tablet extended release 24 hour	Tier-1	
metformin hcl oral solution	Tier-2	
metformin hcl oral tablet	Tier-1	^ (LCG)
miglitol oral tablet	Tier-2	
nateglinide oral tablet	Tier-1	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN- INJECTOR	Tier-2	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Tier-2	
pioglitazone hcl oral tablet	Tier-1	^ (LCG)
pioglitazone hcl-glimepiride oral tablet	Tier-1	
pioglitazone hcl-metformin hcl oral tablet	Tier-1	
repaglinide oral tablet	Tier-1	
RYBELSUS ORAL TABLET	Tier-2	QL (30 tablets per 30 days)
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
SYNJARDY ORAL TABLET	Tier-2	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	

Drug	Status	Notes
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TRESIBA SUBCUTANEOUS SOLUTION	Tier-2	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML	Tier-2	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
diphenoxylate-atropine oral liquid	Tier-1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	Tier-1	
loperamide hcl oral capsule	Tier-1	
MOTOFEN ORAL TABLET	Tier-3	
MYTESI ORAL TABLET DELAYED RELEASE	Tier-2	PA
ANTIDOTES AND SPECIFIC ANTAGONISTS		
CHEMET ORAL CAPSULE	Tier-3	
deferasirox granules oral packet	Tier-2	
deferasirox oral packet	Tier-2	
deferasirox oral tablet	Tier-2	
deferasirox oral tablet soluble	Tier-4	
FERRIPROX ORAL SOLUTION	Tier-2	QL (150 ML per 30 days)
FERRIPROX ORAL TABLET 1000 MG	Tier-2	QL (30 tablets per 30 days)
FERRIPROX ORAL TABLET 500 MG	Tier-2	QL (30 TABLETS per 30 Days)
JADENU SPRINKLE ORAL PACKET 360 MG, 90 MG	Tier-4	
naloxone hcl injection solution 0.4 mg/ml	No Copayment	
naloxone hcl injection solution cartridge	No Copayment	
naltrexone hcl oral tablet	Tier-1	
NARCAN NASAL LIQUID	No Copayment	¥ (Max of 4 units per 30 days); QL (2 EA per 1 Fill)
VISTOGARD ORAL PACKET	Tier-2	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Medical Benefit	
ANTIEMETICS		
AKYNZEO ORAL CAPSULE	Tier-3	¥ (1 capsule per fill); QL (3 EA per 28 days)

Drug	Status	Notes
aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg	Tier-2	QL (1 EA per 7 days)
aprepitant oral capsule 80 mg	Tier-2	QL (2 EA per 7 days)
dronabinol oral capsule	Tier-2	
EMEND ORAL SUSPENSION RECONSTITUTED	Tier-3	QL (3 Units per 7 days)
granisetron hcl oral tablet	Tier-2	QL (6 TABLETS per 7 days)
meclizine hcl oral tablet 12.5 mg, 25 mg	Tier-1	
ondansetron hcl oral solution	Tier-1	QL (90 ML per 7 Days)
ondansetron hcl oral tablet 24 mg	Tier-1	QL (1 TABLET per 7 Days)
ondansetron hcl oral tablet 4 mg, 8 mg	Tier-1	QL (9 TABLETS per 7 Days)
ondansetron oral tablet dispersible	Tier-1	QL (9 EA per 7 Days)
SANCUSO TRANSDERMAL PATCH	Tier-4	QL (1 PATCH per 7 days)
scopolamine transdermal patch 72 hour	Tier-2	
trimethobenzamide hcl oral capsule	Tier-1	
ZUPLENZ ORAL FILM 4 MG	Tier-3	QL (10 FILMS per 7 Days)

ANTIFUNGALS

CRESEMPA ORAL CAPSULE	Tier-3	PA
fluconazole oral suspension reconstituted	Tier-1	
fluconazole oral tablet	Tier-1	
flucytosine oral capsule	Tier-1	
griseofulvin microsize oral suspension	Tier-2	
griseofulvin microsize oral tablet	Tier-2	
griseofulvin ultramicrosize oral tablet	Tier-2	
itraconazole oral capsule	Tier-2	PA
itraconazole oral solution	Tier-2	
ketoconazole oral tablet	Tier-1	
NOXAFIL ORAL SUSPENSION	Tier-3	PA
nystatin oral tablet	Tier-1	
posaconazole oral tablet delayed release	Tier-3	PA
terbinafine hcl oral tablet	Tier-1	¥ (90 DAYS PER YEAR)
voriconazole oral suspension reconstituted	Tier-1	
voriconazole oral tablet	Tier-2	

ANTIHISTAMINES

clemastine fumarate oral tablet	Tier-1	
cyproheptadine hcl oral syrup	Tier-1	
cyproheptadine hcl oral tablet	Tier-1	
desloratadine oral tablet	Tier-1	
diphenhydramine hcl oral capsule	Tier-1	

Drug	Status	Notes
promethazine hcl oral solution	Tier-1	^ (LCG)
promethazine hcl oral syrup	Tier-1	^ (LCG)
promethazine hcl oral tablet	Tier-1	^ (LCG)
promethazine hcl rectal suppository 12.5 mg, 25 mg	Tier-2	
PROMETHEGAN RECTAL SUPPOSITORY	Tier-1	
ANTIHYPERTENSIVES		
atorvastatin calcium oral tablet 10 mg, 20 mg	Tier-1	^ (ACA); QL (90 EA per 90 days)
atorvastatin calcium oral tablet 40 mg, 80 mg	Tier-1	^ (ACA)
colesevelam hcl oral packet	Tier-2	
colesevelam hcl oral tablet	Tier-2	
colestipol hcl oral packet	Tier-1	
colestipol hcl oral tablet	Tier-1	
EVKEEZA INTRAVENOUS SOLUTION	Medical Benefit	PA
ezetimibe oral tablet	Tier-1	
ezetimibe-simvastatin oral tablet	Tier-2	
fenofibrate micronized oral capsule 130 mg	Tier-2	
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	Tier-1	
fenofibrate oral capsule 150 mg, 50 mg	Tier-2	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	Tier-1	
fenofibric acid oral capsule delayed release	Tier-1	
fenofibric acid oral tablet 105 mg	Tier-1	
fluvastatin sodium er oral tablet extended release 24 hour	Tier-2	^ (ACA); QL (90 EA per 90 days)
fluvastatin sodium oral capsule	Tier-1	^ (ACA); QL (90 EA per 90 days)
gemfibrozil oral tablet	Tier-1	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	Tier-4	PA; QL (30 Capsules per 30 days)
lovastatin oral tablet	Tier-1	^ (ACA); QL (90 EA per 90 days)
niacin er (antihyperlipidemic) oral tablet extended release	Tier-2	
NIACOR ORAL TABLET	Tier-1	
omega-3-acid ethyl esters oral capsule	Tier-2	
pravastatin sodium oral tablet	Tier-1	^ (ACA); QL (90 EA per 90 days)
PREVALITE ORAL POWDER	Tier-1	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	PA; # (Preferred product); QL (1 System per 28 days)

Drug	Status	Notes
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; # (Preferred product); QL (2 Syringes per 28 days)
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; # (Preferred product); QL (2 Autoinjectors per 28 days)
rosuvastatin calcium oral tablet 10 mg, 5 mg	Tier-2	^ (ACA); QL (90 EA per 90 days)
rosuvastatin calcium oral tablet 20 mg, 40 mg	Tier-2	^ (ACA)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Tier-1	^ (ACA); QL (90 EA per 90 days)
simvastatin oral tablet 80 mg	Tier-1	^ (ACA)
VASCEPA ORAL CAPSULE	Tier-2	PA
ANTIHYPERTENSIVES		
aliskiren fumarate oral tablet	Tier-2	
amlodipine besy-benazepril hcl oral capsule	Tier-1	
amlodipine besylate-valsartan oral tablet	Tier-1	
amlodipine-olmesartan oral tablet	Tier-2	
atenolol-chlorthalidone oral tablet	Tier-1	
benazepril hcl oral tablet	Tier-1	^ (LCG)
benazepril-hydrochlorothiazide oral tablet	Tier-1	
bisoprolol-hydrochlorothiazide oral tablet	Tier-1	^ (LCG)
candesartan cilexetil oral tablet	Tier-2	
candesartan cilexetil-hctz oral tablet	Tier-2	
captopril oral tablet	Tier-2	
clonidine hcl oral tablet	Tier-1	^ (LCG)
doxazosin mesylate oral tablet	Tier-1	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	
enalapril maleate oral tablet	Tier-1	
enalapril-hydrochlorothiazide oral tablet	Tier-1	
eplerenone oral tablet	Tier-2	
fosinopril sodium oral tablet	Tier-1	
fosinopril sodium-hctz oral tablet	Tier-1	
guanfacine hcl oral tablet	Tier-1	^ (LCG)
hydralazine hcl oral tablet	Tier-1	
irbesartan oral tablet	Tier-1	
irbesartan-hydrochlorothiazide oral tablet	Tier-1	
lisinopril oral tablet	Tier-1	
lisinopril-hydrochlorothiazide oral tablet	Tier-1	
losartan potassium oral tablet	Tier-1	^ (LCG)
losartan potassium-hctz oral tablet	Tier-1	^ (LCG)

Drug	Status	Notes
methyldopa oral tablet	Tier-1	
metoprolol-hydrochlorothiazide oral tablet	Tier-1	
metyrosine oral capsule	Tier-2	
minoxidil oral tablet	Tier-1	
moexipril hcl oral tablet	Tier-1	
olmesartan medoxomil oral tablet	Tier-2	
olmesartan medoxomil-hctz oral tablet	Tier-2	
olmesartan-amlodipine-hctz oral tablet	Tier-2	
perindopril erbumine oral tablet	Tier-1	
phenoxybenzamine hcl oral capsule	Tier-1	
prazosin hcl oral capsule	Tier-1	
quinapril hcl oral tablet	Tier-1	^ (LCG)
quinapril-hydrochlorothiazide oral tablet	Tier-1	
ramipril oral capsule	Tier-1	^ (LCG)
telmisartan oral tablet	Tier-1	
telmisartan-amlodipine oral tablet	Tier-2	
telmisartan-hctz oral tablet	Tier-2	
terazosin hcl oral capsule	Tier-1	
trandolapril oral tablet	Tier-1	
trandolapril-verapamil hcl er oral tablet extended release	Tier-1	
valsartan oral tablet	Tier-1	
valsartan-hydrochlorothiazide oral tablet	Tier-1	
VECAMYL ORAL TABLET	Tier-3	
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO ORAL TABLET DELAYED RELEASE	Tier-3	QL (12 tablets per 1 Fill)
ALINIA ORAL SUSPENSION RECONSTITUTED	Tier-3	
ALINIA ORAL TABLET	Tier-3	
atovaquone oral suspension	Tier-2	
CAYSTON INHALATION SOLUTION RECONSTITUTED	Tier-4	
clindamycin hcl oral capsule	Tier-1	
clindamycin palmitate hcl oral solution reconstituted	Tier-1	
dapsone oral tablet	Tier-1	
FIRVANQ ORAL SOLUTION RECONSTITUTED	Tier-3	QL (2 ML per 10 days)
fosfomycin tromethamine oral packet	Tier-2	

Drug	Status	Notes
IMPAVIDO ORAL CAPSULE	Tier-2	
LAMPIT ORAL TABLET	Tier-3	
linezolid oral suspension reconstituted	Tier-3	
linezolid oral tablet	Tier-1	
MACRODANTIN ORAL CAPSULE 25 MG	Tier-3	
methenamine hippurate oral tablet	Tier-1	
metronidazole oral capsule	Tier-3	
metronidazole oral tablet	Tier-1	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	Tier-3	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	Tier-1	
nitrofurantoin monohyd macro oral capsule	Tier-1	
nitrofurantoin oral suspension	Tier-3	
PRIMSOL ORAL SOLUTION	Tier-3	
SIVEXTRO ORAL TABLET	Tier-3	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	Tier-1	
sulfamethoxazole-trimethoprim oral tablet	Tier-1	^ (LCG)
tinidazole oral tablet	Tier-1	
trimethoprim oral tablet	Tier-1	
URIBEL ORAL CAPSULE	Tier-1	
vancomycin hcl oral capsule	Tier-2	
XENLETA INTRAVENOUS SOLUTION	Medical Benefit	
XENLETA ORAL TABLET	Tier-3	
XIFAXAN ORAL TABLET 200 MG	Tier-2	PA; QL (9 TABLETS per 30 days)
XIFAXAN ORAL TABLET 550 MG	Tier-2	PA; QL (60 TABLETS per 30 days)

ANTIMALARIALS

atovaquone-proguanil hcl oral tablet	Tier-2	
chloroquine phosphate oral tablet	Tier-1	¥ (Coverage is limited to 28 tablets when used for treatment of COVID infection)
COARTEM ORAL TABLET	Tier-2	QL (24 tablets per 90 Days)
hydroxychloroquine sulfate oral tablet 200 mg	Tier-1	¥ (Coverage is limited to 28 tablets when used for treatment of COVID infection)
KRINTAFEL ORAL TABLET	Tier-1	
mefloquine hcl oral tablet	Tier-1	

Drug	Status	Notes
primaquine phosphate oral tablet 26.3 (15 base) mg	Tier-2	
quinine sulfate oral capsule	Tier-1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE ORAL TABLET	Tier-4	PA
pyridostigmine bromide er oral tablet extended release	Tier-2	
pyridostigmine bromide oral tablet	Tier-1	
RUZURGI ORAL TABLET	Tier-4	PA
ANTIMYCOBACTERIAL AGENTS		
cycloserine oral capsule	Tier-1	
ethambutol hcl oral tablet	Tier-1	
isoniazid oral syrup	Tier-1	
isoniazid oral tablet 100 mg	Tier-1	
isoniazid oral tablet 300 mg	Tier-1	^ (LCG)
PASER ORAL PACKET	Tier-3	
pretomanid oral tablet	Tier-3	
PRIFTIN ORAL TABLET	Tier-2	
pyrazinamide oral tablet	Tier-1	
rifabutin oral capsule	Tier-2	
rifampin oral capsule	Tier-1	
SIRTURO ORAL TABLET	Tier-2	PA
TRECATOR ORAL TABLET	Tier-3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
abiraterone acetate oral tablet	Tier-4	PA; ^ (CM)
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	Medical Benefit	PA
ACTIMMUNE SUBCUTANEOUS SOLUTION	Tier-4	PA
AFINITOR DISPERZ ORAL TABLET SOLUBLE	Tier-4	PA; ^ (CM)
AFINITOR ORAL TABLET 10 MG	Tier-4	PA; ^ (CM)
ALECensa ORAL CAPSULE	Tier-4	PA; ^ (CM)
ALUNBRIG ORAL TABLET	Tier-4	PA; ^ (CM)
ALUNBRIG ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
anastrozole oral tablet	Tier-1	^ (CM); May be covered at no copayment for members 35 and older
AYVAKIT ORAL TABLET	Tier-4	PA; ^ (CM)

Drug	Status	Notes
BALVERSA ORAL TABLET	Tier-4	PA; ^ (CM)
bexarotene oral capsule	Tier-4	^ (CM)
bicalutamide oral tablet	Tier-1	^ (CM)
BOSULIF ORAL TABLET	Tier-4	PA; ^ (CM)
BRAFTOVI ORAL CAPSULE 75 MG	Tier-4	PA; ^ (CM)
BRUKINSA ORAL CAPSULE	Tier-4	PA; ^ (CM)
CABOMETYX ORAL TABLET	Tier-4	PA; ^ (CM)
CALQUENCE ORAL CAPSULE	Tier-4	PA; ^ (CM)
capecitabine oral tablet	Tier-1	^ (CM)
CAPRELSA ORAL TABLET	Tier-4	PA; ^ (CM)
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	Tier-4	PA; ^ (CM)
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	Tier-4	PA; ^ (CM)
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	Tier-4	PA; ^ (CM)
COPIKTRA ORAL CAPSULE	Tier-4	PA; ^ (CM)
COSELA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
COTELLIC ORAL TABLET	Tier-4	PA; ^ (CM)
cyclophosphamide oral capsule	Tier-2	^ (CM)
DAURISMO ORAL TABLET	Tier-4	PA; ^ (CM)
EMCYT ORAL CAPSULE	Tier-4	^ (CM)
ERIVEDGE ORAL CAPSULE	Tier-4	PA; ^ (CM)
erlotinib hcl oral tablet	Tier-4	^ (CM)
etoposide oral capsule	Tier-4	^ (CM)
everolimus oral tablet 2.5 mg, 5 mg, 7.5 mg	Tier-4	PA; ^ (CM)
exemestane oral tablet	Tier-1	^ (CM)
FARYDAK ORAL CAPSULE 10 MG, 20 MG	Tier-4	PA; ^ (CM)
flutamide oral capsule	Tier-1	^ (CM)
FOTIVDA ORAL CAPSULE	Tier-4	PA; ^ (CM)
GAVRETO ORAL CAPSULE	Tier-4	PA; ^ (CM)
GILOTRIF ORAL TABLET	Tier-4	PA; ^ (CM)
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	Tier-3	^ (CM)
HYCAMTIN ORAL CAPSULE	Tier-4	PA; ^ (CM)
hydroxyurea oral capsule	Tier-1	^ (CM)
IBRANCE ORAL CAPSULE	Tier-2	PA; ^ (CM)
IBRANCE ORAL TABLET	Tier-2	PA; ^ (CM)
ICLUSIG ORAL TABLET	Tier-4	PA; ^ (CM)

Drug	Status	Notes
IDHIFA ORAL TABLET	Tier-4	PA; ^ (CM)
imatinib mesylate oral tablet	Tier-1	^ (CM)
IMBRUICA ORAL CAPSULE	Tier-4	PA; ^ (CM)
IMBRUICA ORAL TABLET	Tier-4	PA; ^ (CM)
INLYTA ORAL TABLET	Tier-4	PA; ^ (CM)
INQOVI ORAL TABLET	Tier-4	PA; ^ (CM)
INREBIC ORAL CAPSULE	Tier-4	PA; ^ (CM)
INTRON A INJECTION SOLUTION	Tier-4	
INTRON A INJECTION SOLUTION RECONSTITUTED	Tier-4	
IRESSA ORAL TABLET	Tier-2	PA; ^ (CM)
JAKAFI ORAL TABLET	Tier-4	PA; ^ (CM)
KOSELUGO ORAL CAPSULE	Tier-4	PA; ^ (CM)
lapatinib ditosylate oral tablet	Tier-4	PA; ^ (CM)
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
letrozole oral tablet	Tier-1	^ (CM)
leucovorin calcium oral tablet	Tier-1	^ (CM)
LEUKERAN ORAL TABLET	Tier-3	^ (CM)
leuprolide acetate injection kit	Tier-1	# (Lupron Depot and Lupron Depot-Ped are covered under the medical benefit)
LONSURF ORAL TABLET	Tier-4	PA; ^ (CM)
LORBRENA ORAL TABLET	Tier-4	PA; ^ (CM)
LUMAKRAS ORAL TABLET	Tier-4	PA; ^ (CM)
LYNPARZA ORAL TABLET	Tier-4	PA; ^ (CM)
LYSODREN ORAL TABLET	Tier-2	^ (CM)

Drug	Status	Notes
MATULANE ORAL CAPSULE	Tier-4	^ (CM)
megestrol acetate oral suspension 40 mg/ml	Tier-1	
megestrol acetate oral tablet	Tier-1	^ (CM)
MEKINIST ORAL TABLET	Tier-4	PA; ^ (CM)
MEKTOVI ORAL TABLET	Tier-4	PA; ^ (CM)
melphalan oral tablet	Tier-2	^ (CM)
mercaptopurine oral tablet	Tier-1	
MESNEX ORAL TABLET	Tier-4	^ (CM)
methotrexate oral tablet	Tier-1	
MYLERAN ORAL TABLET	Tier-4	^ (CM)
NERLYNX ORAL TABLET	Tier-4	PA; ^ (CM)
NEXAVAR ORAL TABLET	Tier-4	PA; ^ (CM)
nilutamide oral tablet	Tier-4	^ (CM)
NINLARO ORAL CAPSULE	Tier-4	PA; ^ (CM)
ODOMZO ORAL CAPSULE	Tier-4	PA; ^ (CM)
ORGOVYX ORAL TABLET	Tier-4	PA
PEMAZYRE ORAL TABLET	Tier-4	PA; ^ (CM)
PHESGO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
POMALYST ORAL CAPSULE	Tier-4	PA; ^ (CM)
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
PURIXAN ORAL SUSPENSION	Tier-3	
QINLOCK ORAL TABLET	Tier-4	PA; ^ (CM)
RETEVMO ORAL CAPSULE	Tier-4	PA; ^ (CM)
RIABNI INTRAVENOUS SOLUTION	Medical Benefit	PA
RITUXAN INTRAVENOUS SOLUTION	Medical Benefit	PA
ROZLYTREK ORAL CAPSULE	Tier-4	PA; ^ (CM)
RUBRACA ORAL TABLET	Tier-4	PA; ^ (CM)
RUXIENCE INTRAVENOUS SOLUTION	Medical Benefit	PA
RYDAPT ORAL CAPSULE	Tier-4	PA; ^ (CM)
SOLTAMOX ORAL SOLUTION	Tier-2	^ (CM)
SPRYCEL ORAL TABLET	Tier-4	PA; ^ (CM)
STIVARGA ORAL TABLET	Tier-4	PA; ^ (CM)

Drug	Status	Notes
SUTENT ORAL CAPSULE	Tier-4	PA; ^ (CM)
TABLOID ORAL TABLET	Tier-2	^ (CM)
TABRECTA ORAL TABLET	Tier-4	PA; ^ (CM)
TAFINLAR ORAL CAPSULE	Tier-4	PA; ^ (CM)
TAGRISSO ORAL TABLET	Tier-4	PA; ^ (CM)
TALZENNA ORAL CAPSULE	Tier-4	PA; ^ (CM)
tamoxifen citrate oral tablet	Tier-1	^ (CM)
TASIGNA ORAL CAPSULE	Tier-4	PA; ^ (CM)
TAZVERIK ORAL TABLET	Tier-4	PA; ^ (CM)
temozolomide oral capsule	Tier-2	^ (CM)
TEPMETKO ORAL TABLET	Tier-4	PA; ^ (CM)
TIBSOVO ORAL TABLET	Tier-4	PA; ^ (CM)
toremifene citrate oral tablet	Tier-2	^ (CM)
tretinoin oral capsule	Tier-4	^ (CM)
TREXALL ORAL TABLET	Tier-2	
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-4	PA; ^ (CM)
TRUXIMA INTRAVENOUS SOLUTION	Medical Benefit	PA
TUKYSA ORAL TABLET	Tier-4	PA; ^ (CM)
TURALIO ORAL CAPSULE	Tier-4	PA; ^ (CM)
UKONIQ ORAL TABLET	Tier-4	PA; ^ (CM)
VENCLEXTA ORAL TABLET	Tier-4	PA; ^ (CM)
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
VERZENIO ORAL TABLET	Tier-4	PA; ^ (CM)
VITRAKVI ORAL CAPSULE	Tier-4	PA; ^ (CM)
VITRAKVI ORAL SOLUTION	Tier-4	PA; ^ (CM)
VIZIMPRO ORAL TABLET	Tier-4	PA; ^ (CM)
VOTRIENT ORAL TABLET	Tier-4	PA; ^ (CM)
WELIREG ORAL TABLET	Tier-4	PA; ^ (CM)
XALKORI ORAL CAPSULE	Tier-4	PA; ^ (CM)
XATMEP ORAL SOLUTION	Tier-3	PA; ^ (CM)
XOSPATA ORAL TABLET	Tier-4	PA; ^ (CM)

Drug	Status	Notes
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	Tier-4	PA; ^ (CM)
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier-4	PA; ^ (CM)
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier-4	PA; ^ (CM)
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	Tier-4	PA; ^ (CM)
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier-4	PA; ^ (CM)
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier-4	PA; ^ (CM)
XTANDI ORAL CAPSULE	Tier-4	PA; ^ (CM)
XTANDI ORAL TABLET	Tier-4	PA; ^ (CM)
ZEJULA ORAL CAPSULE	Tier-4	PA; ^ (CM)
ZELBORA ORAL TABLET	Tier-4	PA; ^ (CM)
ZOLINZA ORAL CAPSULE	Tier-4	PA; ^ (CM)
ZYDELIG ORAL TABLET	Tier-4	PA; ^ (CM)
ZYKADIA ORAL TABLET	Tier-4	PA

ANTIPARKINSON AND RELATED THERAPY AGENTS

amantadine hcl oral capsule	Tier-1	
amantadine hcl oral solution	Tier-1	
amantadine hcl oral tablet	Tier-1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	
benztropine mesylate oral tablet 0.5 mg, 1 mg	Tier-1	^ (LCG)
benztropine mesylate oral tablet 2 mg	Tier-1	
bromocriptine mesylate oral capsule	Tier-1	
bromocriptine mesylate oral tablet	Tier-1	
carbidopa oral tablet	Tier-1	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	Tier-1	
carbidopa-levodopa oral tablet	Tier-1	
carbidopa-levodopa oral tablet dispersible	Tier-1	
carbidopa-levodopa-entacapone oral tablet	Tier-2	
DUOPA ENTERAL SUSPENSION	Tier-2	
entacapone oral tablet	Tier-1	
INBRIJA INHALATION CAPSULE	Tier-3	PA

Drug	Status	Notes
NEUPRO TRANSDERMAL PATCH 24 HOUR	Tier-3	
NOURIANZ ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
ONGENTYS ORAL CAPSULE	Tier-3	PA; QL (30 EA per 30 days)
pramipexole dihydrochloride er oral tablet extended release 24 hour	Tier-2	
pramipexole dihydrochloride oral tablet	Tier-1	
rasagiline mesylate oral tablet	Tier-2	
ropinirole hcl er oral tablet extended release 24 hour	Tier-1	
ropinirole hcl oral tablet	Tier-1	
selegiline hcl oral capsule	Tier-1	
selegiline hcl oral tablet	Tier-1	
tolcapone oral tablet	Tier-1	
trihexyphenidyl hcl oral tablet	Tier-1	
XADAGO ORAL TABLET	Tier-3	PA
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ABILITY MYCITE MAINTENANCE KIT ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
ABILITY MYCITE ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
ABILITY MYCITE STARTER KIT ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
aripiprazole oral solution	Tier-2	STPA
aripiprazole oral tablet	Tier-1	STPA
aripiprazole oral tablet dispersible	Tier-2	STPA
CAPLYTA ORAL CAPSULE	Tier-3	STPA
chlorpromazine hcl oral tablet	Tier-2	
clozapine oral tablet	Tier-1	
clozapine oral tablet dispersible	Tier-1	
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier-3	
fluphenazine hcl oral concentrate	Tier-1	
fluphenazine hcl oral elixir	Tier-1	
fluphenazine hcl oral tablet	Tier-2	
haloperidol lactate oral concentrate	Tier-1	
haloperidol oral tablet	Tier-1	
LATUDA ORAL TABLET	Tier-2	STPA
lithium carbonate er oral tablet extended release	Tier-1	
lithium carbonate oral capsule	Tier-1	^ (LCG)
lithium carbonate oral tablet	Tier-1	

Drug	Status	Notes
loxapine succinate oral capsule	Tier-1	
NUPLAZID ORAL CAPSULE	Tier-4	PA; QL (30 capsules per 30 days)
NUPLAZID ORAL TABLET 10 MG	Tier-4	PA; QL (60 tablets per 30 days)
olanzapine oral tablet	Tier-1	
olanzapine oral tablet dispersible	Tier-1	STPA
paliperidone er oral tablet extended release 24 hour	Tier-2	STPA
perphenazine oral tablet	Tier-1	
prochlorperazine maleate oral tablet	Tier-1	^ (LCG)
prochlorperazine rectal suppository	Tier-1	
quetiapine fumarate er oral tablet extended release 24 hour	Tier-2	STPA
quetiapine fumarate oral tablet	Tier-1	
REXULTI ORAL TABLET	Tier-3	STPA; QL (1 tablet per 1 day)
risperidone oral solution	Tier-1	
risperidone oral tablet	Tier-1	
risperidone oral tablet dispersible	Tier-1	
SECUADO TRANSDERMAL PATCH 24 HOUR	Tier-3	STPA
thioridazine hcl oral tablet	Tier-1	
thiothixene oral capsule	Tier-1	
trifluoperazine hcl oral tablet	Tier-1	
VERSACLOZ ORAL SUSPENSION	Tier-3	
VRAYLAR ORAL CAPSULE	Tier-3	STPA
VRAYLAR ORAL CAPSULE THERAPY PACK	Tier-3	STPA
ziprasidone hcl oral capsule	Tier-1	
ANTIVIRALS		
abacavir sulfate oral solution	Tier-2	
abacavir sulfate oral tablet	Tier-1	
abacavir sulfate-lamivudine oral tablet	Tier-2	
abacavir-lamivudine-zidovudine oral tablet	Tier-1	
acyclovir oral capsule	Tier-1	^ (LCG)
acyclovir oral suspension	Tier-2	
acyclovir oral tablet	Tier-1	^ (LCG)
adefovir dipivoxil oral tablet	Tier-1	
APTIVUS ORAL CAPSULE		
atazanavir sulfate oral capsule	Tier-2	
BARACLUDE ORAL SOLUTION		

Drug	Status	Notes
BIKTARVY ORAL TABLET	Tier-2	
CIMDUO ORAL TABLET	Tier-2	
COMPLERA ORAL TABLET	Tier-2	
CRIXIVAN ORAL CAPSULE 400 MG	Tier-2	
DELSTRIGO ORAL TABLET	Tier-2	
DESCOVY ORAL TABLET	Tier-2	PA; ^ (ACA)
DOVATO ORAL TABLET	Tier-2	
EDURANT ORAL TABLET	Tier-2	
efavirenz oral capsule	Tier-2	
efavirenz oral tablet	Tier-2	
efavirenz-emtricitab-tenofovir oral tablet	Tier-2	
efavirenz-lamivudine-tenofovir oral tablet	Tier-2	
emtricitabine oral capsule	Tier-2	
emtricitabine-tenofovir df oral tablet	Tier-2	^ (ACA)
EMTRIVA ORAL SOLUTION	Tier-2	
entecavir oral tablet	Tier-2	
EPCLUSIA ORAL TABLET 200-50 MG	Tier-4	PA; QL (30 EA per 30 days)
EPCLUSIA ORAL TABLET 400-100 MG	Tier-4	PA; ¥ (Generic formulations are non-covered)
EPIVIR HBV ORAL SOLUTION	Tier-2	
EVOTAZ ORAL TABLET	Tier-2	
famciclovir oral tablet	Tier-1	
fosamprenavir calcium oral tablet	Tier-2	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-4	
GENVOYA ORAL TABLET	Tier-2	
HARVONI ORAL PACKET	Tier-4	PA; ¥ (Generic formulations are non-covered)
HARVONI ORAL TABLET	Tier-4	PA; ¥ (Generic formulations are non-covered)
INTELENCE ORAL TABLET	Tier-2	
INVIRASE ORAL TABLET	Tier-2	
ISENTRESS HD ORAL TABLET	Tier-2	
ISENTRESS ORAL PACKET	Tier-2	
ISENTRESS ORAL TABLET	Tier-2	
ISENTRESS ORAL TABLET CHEWABLE	Tier-2	
JULUCA ORAL TABLET	Tier-2	
lamivudine oral solution	Tier-1	
lamivudine oral tablet	Tier-1	

Drug	Status	Notes
lamivudine-zidovudine oral tablet	Tier-1	
LEXIVA ORAL SUSPENSION	Tier-2	
lopinavir-ritonavir oral solution	Tier-2	
lopinavir-ritonavir oral tablet	Tier-2	
nevirapine er oral tablet extended release 24 hour	Tier-1	
nevirapine oral suspension	Tier-1	
nevirapine oral tablet	Tier-1	
NORVIR ORAL PACKET	Tier-2	
NORVIR ORAL SOLUTION	Tier-2	
ODEFSEY ORAL TABLET	Tier-2	
oseltamivir phosphate oral capsule	Tier-2	¥ (2 fills per 365 days); QL (10 EA per 1 Fill)
oseltamivir phosphate oral suspension reconstituted	Tier-2	¥ (2 fills per 365 days); QL (180 ML per 1 Fill)
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Tier-4	
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	
PIFELTRO ORAL TABLET	Tier-2	
PREVYMIS INTRAVENOUS SOLUTION	Medical Benefit	PA
PREVYMIS ORAL TABLET	Tier-4	PA
PREZCOBIX ORAL TABLET	Tier-2	
PREZISTA ORAL SUSPENSION	Tier-2	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	Tier-2	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (20 UNITS per 365 Days)
REYATAZ ORAL PACKET	Tier-2	
ribavirin oral capsule	Tier-1	
ribavirin oral tablet 200 mg	Tier-1	
rimantadine hcl oral tablet	Tier-1	
ritonavir oral tablet	Tier-2	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-2	
SELZENTRY ORAL SOLUTION	Tier-2	
SELZENTRY ORAL TABLET	Tier-2	
stavudine oral capsule	Tier-1	
STRIBILD ORAL TABLET	Tier-2	
SYMTUZA ORAL TABLET	Tier-2	

Drug	Status	Notes
tenofovir disoproxil fumarate oral tablet	Tier-2	
TIVICAY ORAL TABLET	Tier-2	
TIVICAY PD ORAL TABLET SOLUBLE	Tier-2	
TRIUMEQ ORAL TABLET	Tier-2	
TYBOST ORAL TABLET	Tier-2	
valacyclovir hcl oral tablet	Tier-1	
VALCYTE ORAL TABLET	Tier-2	
valganciclovir hcl oral solution reconstituted	Tier-2	
valganciclovir hcl oral tablet	Tier-2	
VEMLIDY ORAL TABLET	Tier-2	
VIRACEPT ORAL TABLET	Tier-2	
VIREAD ORAL POWDER	Tier-2	
VOSEVI ORAL TABLET	Tier-4	PA
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG, 2 X 20 MG	Tier-3	¥ (2 fills per 365 days); QL (2 tablets Max Qty Per Fill Retail)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG, 2 X 40 MG	Tier-3	¥ (2 fills per 365 days); QL (2 tablets Max Qty Per Fill Retail)
zidovudine oral capsule	Tier-1	
zidovudine oral syrup	Tier-1	
zidovudine oral tablet	Tier-1	
BETA BLOCKERS		
acebutolol hcl oral capsule	Tier-1	
atenolol oral tablet	Tier-1	^ (LCG)
betaxolol hcl oral tablet	Tier-1	
bisoprolol fumarate oral tablet	Tier-1	
BYSTOLIC ORAL TABLET	Tier-3	
carvedilol oral tablet	Tier-1	^ (LCG)
carvedilol phosphate er oral capsule extended release 24 hour	Tier-2	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	
labetalol hcl oral tablet	Tier-1	
metoprolol succinate er oral tablet extended release 24 hour	Tier-1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	Tier-1	^ (LCG)
metoprolol tartrate oral tablet 37.5 mg, 75 mg	Tier-3	
nadolol oral tablet 20 mg, 40 mg, 80 mg	Tier-2	
nebivolol hcl oral tablet	Tier-2	
pindolol oral tablet	Tier-1	

Drug	Status	Notes
propranolol hcl er oral capsule extended release 24 hour	Tier-1	
propranolol hcl oral solution	Tier-1	
propranolol hcl oral tablet	Tier-1	^ (LCG)
sotalol hcl oral tablet	Tier-1	
SOTYLIZE ORAL SOLUTION	Tier-3	
timolol maleate oral tablet	Tier-1	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG	Tier-1	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate oral tablet	Tier-1	^ (LCG)
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-1	
diltiazem hcl er beads oral capsule extended release 24 hour	Tier-1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	Tier-1	
diltiazem hcl er coated beads oral tablet extended release 24 hour	Tier-1	
diltiazem hcl er oral capsule extended release 12 hour	Tier-1	
diltiazem hcl er oral capsule extended release 24 hour 120 mg	Tier-1	
diltiazem hcl oral tablet	Tier-1	
dilt-xr oral capsule extended release 24 hour	Tier-1	
felodipine er oral tablet extended release 24 hour	Tier-1	
isradipine oral capsule	Tier-1	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-1	
nicardipine hcl oral capsule	Tier-1	
nifedipine er oral tablet extended release 24 hour	Tier-1	
nifedipine er osmotic release oral tablet extended release 24 hour	Tier-1	
nifedipine oral capsule	Tier-1	
nimodipine oral capsule	Tier-1	
nisoldipine er oral tablet extended release 24 hour	Tier-1	
NYMALIZE ORAL SOLUTION 6 MG/ML	Tier-3	
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-1	
verapamil hcl er oral capsule extended release 24 hour	Tier-1	

Drug	Status	Notes
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	Tier-1	
verapamil hcl oral tablet	Tier-1	
CARDIOTONICS		
digoxin oral solution	Tier-1	
digoxin oral tablet	Tier-1	
LANOXIN ORAL TABLET 62.5 MCG	Tier-3	
CARDIOVASCULAR AGENTS - MISC.		
ADEMPAS ORAL TABLET	Tier-4	PA
ambrisentan oral tablet	Tier-4	PA
amlodipine-atorvastatin oral tablet	Tier-2	
BIDIL ORAL TABLET		
bosentan oral tablet	Tier-4	PA
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED 40 MCG	Tier-3	
CORLANOR ORAL TABLET		
EDEX INTRACAVERNOSAL KIT	Tier-3	
ENTRESTO ORAL TABLET		
epoprostenol sodium intravenous solution reconstituted	Medical Benefit	PA; SI
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
MUSE URETHRAL PELLET 1000 MCG, 250 MCG, 500 MCG	Tier-3	
OPSUMIT ORAL TABLET	Tier-4	PA
ORENITRAM ORAL TABLET EXTENDED RELEASE	Tier-4	PA
REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML	Medical Benefit	PA; SI
sildenafil citrate oral suspension reconstituted	Tier-1	PA
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	Tier-2	QL (4 EA per 30 days)
sildenafil citrate oral tablet 20 mg	Tier-1	PA
tadalafil (pah) oral tablet	Tier-4	PA
tadalafil oral tablet 10 mg, 2.5 mg, 20 mg	Tier-3	QL (4 Tablets per 30 days)
tadalafil oral tablet 5 mg	Tier-3	PA; ¥ (PA only applies for diagnosis of Symptomatic Benign Prostatic Hyperplasia (BPH).); QL (30 Tablets per 30 days)
TRACLEER ORAL TABLET SOLUBLE	Tier-4	PA
TYVASO INHALATION SOLUTION	Medical Benefit	PA; SI

Drug	Status	Notes
TYVASO REFILL INHALATION SOLUTION	Medical Benefit	PA; SI
TYVASO STARTER INHALATION SOLUTION	Medical Benefit	PA; SI
UPTRAVI ORAL TABLET	Tier-4	PA
UPTRAVI ORAL TABLET THERAPY PACK	Tier-4	PA
vardenafil hcl oral tablet	Tier-2	QL (4 tablets per 30 days)
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
VENTAVIS INHALATION SOLUTION	Medical Benefit	PA; SI
VERQUVO ORAL TABLET	Tier-2	
VYNDAMAX ORAL CAPSULE	Tier-4	PA; QL (30 capsules per 30 days)
VYNDAQEL ORAL CAPSULE	Tier-4	PA; QL (120 capsules per 30 days)
CEPHALOSPORINS		
cefaclor er oral tablet extended release 12 hour	Tier-2	
cefaclor oral capsule	Tier-1	
cefaclor oral suspension reconstituted	Tier-1	
cefadroxil oral capsule	Tier-1	^ (LCG)
cefadroxil oral suspension reconstituted	Tier-1	
cefadroxil oral tablet	Tier-1	
cefdinir oral capsule	Tier-1	
cefdinir oral suspension reconstituted	Tier-1	
cefixime oral capsule	Tier-2	
cefixime oral suspension reconstituted	Tier-2	
cefpodoxime proxetil oral suspension reconstituted	Tier-2	
cefpodoxime proxetil oral tablet	Tier-2	
cefprozil oral suspension reconstituted	Tier-1	
cefprozil oral tablet	Tier-1	
cefuroxime axetil oral tablet	Tier-1	
cephalexin oral capsule 250 mg, 500 mg	Tier-1	^ (LCG)
cephalexin oral capsule 750 mg	Tier-1	
cephalexin oral suspension reconstituted	Tier-1	
cephalexin oral tablet	Tier-2	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	Tier-3	
SUPRAX ORAL TABLET CHEWABLE	Tier-3	
CONTRACEPTIVES		
AMETHIA ORAL TABLET	Tier-1	^ (WH)
AMETHYST ORAL TABLET	Tier-1	^ (WH)

Drug	Status	Notes
ANNOVERA VAGINAL RING	Tier-3	^ (WH); QL (1 Ring per 1 Year)
APRI ORAL TABLET	Tier-1	^ (WH)
ARANELLE ORAL TABLET	Tier-1	^ (WH)
AVIANE ORAL TABLET	Tier-1	^ (WH)
AZURETTE ORAL TABLET	Tier-1	^ (WH)
BALCOLTRA ORAL TABLET	Tier-3	^ (WH)
BALZIVA ORAL TABLET	Tier-1	^ (WH)
BEYAZ ORAL TABLET	Tier-3	PA; ^ (WH)
CAMILA ORAL TABLET	Tier-1	^ (WH)
CAMRESE LO ORAL TABLET	Tier-1	^ (WH)
CAMRESE ORAL TABLET	Tier-1	^ (WH)
CRYSELLE-28 ORAL TABLET	Tier-1	^ (WH)
CYCLAFEM 1/35 ORAL TABLET	Tier-1	^ (WH)
CYCLAFEM 7/7/7 ORAL TABLET	Tier-1	^ (WH)
drospirene-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	Tier-1	^ (WH)
drospirenone-ethinyl estradiol oral tablet	Tier-1	^ (WH)
ELLA ORAL TABLET	Tier-3	^ (WH)
ELURYNG VAGINAL RING	Tier-1	
ENPRESSE-28 ORAL TABLET	Tier-1	^ (WH)
ERRIN ORAL TABLET	Tier-1	^ (WH)
ESTROSTEP FE ORAL TABLET	Tier-3	PA; ^ (WH)
ethynodiol diac-eth estradiol oral tablet	Tier-1	^ (WH)
etonogestrel-ethinyl estradiol vaginal ring	Tier-1	
FAYOSIM ORAL TABLET	Tier-1	^ (WH)
GENERESS FE ORAL TABLET CHEWABLE	Tier-3	PA; ^ (WH)
JOLESSA ORAL TABLET	Tier-1	^ (WH)
JUNEL 1.5/30 ORAL TABLET	Tier-1	^ (WH)
JUNEL 1/20 ORAL TABLET	Tier-1	^ (WH)
JUNEL FE 1.5/30 ORAL TABLET	Tier-1	^ (WH)
JUNEL FE 1/20 ORAL TABLET	Tier-1	^ (WH)
KARIVA ORAL TABLET	Tier-1	^ (WH)
KELNOR 1/35 ORAL TABLET	Tier-1	^ (WH)
KELNOR 1/50 ORAL TABLET	Tier-1	^ (WH)
LESSINA ORAL TABLET	Tier-1	^ (WH)
LEVORA 0.15/30 (28) ORAL TABLET	Tier-1	^ (WH)
LO LOESTRIN FE ORAL TABLET	Tier-2	^ (WH)
LOESTRIN 1.5/30 (21) ORAL TABLET	Tier-3	PA; ^ (WH)

Drug	Status	Notes
LOESTRIN 1/20 (21) ORAL TABLET	Tier-3	PA; ^ (WH)
LOESTRIN FE 1.5/30 ORAL TABLET	Tier-3	PA; ^ (WH)
LOESTRIN FE 1/20 ORAL TABLET	Tier-3	PA; ^ (WH)
LOSEASONIQUE ORAL TABLET	Tier-3	PA; ^ (WH)
LOW-OGESTREL ORAL TABLET	Tier-1	^ (WH)
LUTERA ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN 1.5/30 ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN 1/20 ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN FE 1.5/30 ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN FE 1/20 ORAL TABLET	Tier-1	^ (WH)
MINASTRIN 24 FE ORAL TABLET CHEWABLE	Tier-3	PA; ^ (WH)
MIRCETTE ORAL TABLET	Tier-3	PA; ^ (WH)
NATAZIA ORAL TABLET	Tier-2	^ (WH)
NECON 0.5/35 (28) ORAL TABLET	Tier-3	^ (WH)
NECON 1/35 (28) ORAL TABLET	Tier-1	^ (WH)
NEXTSTELLIS ORAL TABLET	Tier-3	^ (ACA)
NORA-BE ORAL TABLET	Tier-1	^ (WH)
norethin ace-eth estrad-fe oral capsule	Tier-1	^ (WH)
norethin ace-eth estrad-fe oral tablet chewable	Tier-1	^ (WH)
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg	Tier-1	^ (WH)
NORTREL 1/35 (21) ORAL TABLET	Tier-1	^ (WH)
NORTREL 1/35 (28) ORAL TABLET	Tier-1	^ (WH)
NORTREL 7/7/7 ORAL TABLET	Tier-1	^ (WH)
NUVARING VAGINAL RING	Tier-3	PA; ^ (WH)
OCELLA ORAL TABLET	Tier-1	^ (WH)
ORSYTHIA ORAL TABLET	Tier-1	^ (WH)
ORTHO TRI-CYCLEN LO ORAL TABLET	Tier-3	PA; ^ (WH)
PLAN B ONE-STEP ORAL TABLET	Tier-3	^ (WH)
PORTIA-28 ORAL TABLET	Tier-1	^ (WH)
PREVIFEM ORAL TABLET	Tier-1	^ (WH)
QUARTETTE ORAL TABLET	Tier-3	PA; ^ (WH)
RECLIPSEN ORAL TABLET	Tier-1	^ (WH)
SAFYRAL ORAL TABLET	Tier-3	PA; ^ (WH)
SEASONIQUE ORAL TABLET	Tier-3	PA; ^ (WH)
SLYND ORAL TABLET	Tier-3	^ (WH)
SPRINTEC 28 ORAL TABLET	Tier-1	^ (WH)
TAYTULLA ORAL CAPSULE	Tier-3	PA; ^ (WH)

Drug	Status	Notes
TILIA FE ORAL TABLET	Tier-1	^ (WH)
TRI-ESTARYLLA ORAL TABLET	Tier-1	^ (WH)
TRI-LEGEST FE ORAL TABLET	Tier-1	^ (WH)
TRINESSA (28) ORAL TABLET	Tier-1	^ (WH)
TRI-PREVIFEM ORAL TABLET	Tier-1	^ (WH)
TRI-SPRINTEC ORAL TABLET	Tier-1	^ (WH)
TRIVORA (28) ORAL TABLET	Tier-1	^ (WH)
TWIRLA TRANSDERMAL PATCH WEEKLY	Tier-3	^ (WH)
VELIVET ORAL TABLET	Tier-1	^ (WH)
WYMZYA FE ORAL TABLET CHEWABLE	Tier-1	^ (WH)
YASMIN 28 ORAL TABLET	Tier-3	PA; ^ (WH)
YAZ ORAL TABLET	Tier-3	PA; ^ (WH)
ZOVIA 1/35E (28) ORAL TABLET	Tier-1	^ (WH)
CORTICOSTEROIDS		
budesonide er oral tablet extended release 24 hour	Tier-2	
dexamethasone oral elixir	Tier-1	
dexamethasone oral tablet	Tier-1	
dexamethasone oral tablet therapy pack	Tier-1	
EMFLAZA ORAL SUSPENSION	Tier-4	PA; QL (26 ML per 30 days)
EMFLAZA ORAL TABLET	Tier-4	PA; QL (30 tablets per 30 days)
fludrocortisone acetate oral tablet	Tier-1	
hydrocortisone oral tablet	Tier-1	
MEDROL ORAL TABLET 2 MG	Tier-3	
methylprednisolone oral tablet	Tier-1	
MILLIPRED ORAL TABLET	Tier-3	
prednisolone oral syrup 15 mg/5ml	Tier-1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml	Tier-1	
prednisolone sodium phosphate oral tablet dispersible	Tier-2	
PREDNISONE INTENSOL ORAL CONCENTRATE	Tier-3	
prednisone oral solution	Tier-1	
prednisone oral tablet	Tier-1	^ (LCG)
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21)	Tier-1	
COUGH/COLD/ALLERGY		
acetylcysteine inhalation solution	Tier-1	
benzonatate oral capsule 100 mg	Tier-1	^ (LCG)

Drug	Status	Notes
benzonatate oral capsule 150 mg, 200 mg	Tier-1	
coditussin ac oral liquid	Tier-1	QL (60 ML per 1 day)
coditussin dac oral liquid	Tier-1	QL (40 ML per 1 day)
guaiatussin ac oral syrup	Tier-1	
guaifenesin ac oral syrup	Tier-1	
guaifenesin-codeine oral solution	Tier-1	
hydrocod polst-cpm polst er oral suspension extended release	Tier-1	QL (10 ML per 1 day)
hydrocodone-homatropine oral syrup	Tier-1	
hydrocodone-homatropine oral tablet	Tier-1	
hydromet oral syrup	Tier-1	QL (30 ML per 1 day)
MAR-COF CG EXPECTORANT ORAL LIQUID	Tier-1	QL (45 ML per 1 day)
promethazine vc/codeine oral syrup	Tier-1	QL (30 ML per 1 day)
promethazine-codeine oral solution	Tier-1	QL (30 ML per 1 day)
promethazine-dm oral syrup	Tier-1	^ (LCG)
SSKI ORAL SOLUTION	Tier-3	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR 10-8 MG	Tier-3	QL (2 capsules per 1 day)
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	Tier-3	QL (20 ML per 1 day)
virtussin dac oral solution	Tier-1	QL (40 ML per 1 day)
DERMATOLOGICALS		
acitretin oral capsule	Tier-1	
acyclovir external cream	Tier-2	
acyclovir external ointment	Tier-2	QL (1 TUBE per 30 days)
adapalene external cream	Tier-3	PA
adapalene external gel	Tier-3	PA
adapalene-benzoyl peroxide external gel	Tier-2	
ala-cort external cream 1 %	Tier-1	^ (LCG)
alclometasone dipropionate external cream	Tier-1	
alclometasone dipropionate external ointment	Tier-1	
ALTABAX EXTERNAL OINTMENT	Tier-3	
ALTRENO EXTERNAL LOTION	Tier-3	PA; ¥ (PA applies to members 26 and older)
amcinonide external cream	Tier-2	PA
amcinonide external lotion	Tier-2	PA
amcinonide external ointment	Tier-2	PA
ammonium lactate external cream	Tier-1	

Drug	Status	Notes
ammonium lactate external lotion	Tier-1	
APEXICON E EXTERNAL CREAM	Tier-3	
AVITA EXTERNAL CREAM	Tier-1	PA
AVITA EXTERNAL GEL	Tier-1	PA
azelaic acid external gel	Tier-2	
bacitracin external ointment	Tier-1	
bacitracin zinc external ointment	Tier-1	
bacitracin-polymyxin b external ointment	Tier-1	
BACITRAYCIN PLUS EXTERNAL OINTMENT 500 UNIT/GM	Tier-1	
BENZEPRO EXTERNAL FOAM 5.3 %	Tier-3	
BENZEPRO FOAMING CLOTHS EXTERNAL	Tier-3	
benzoyl peroxide-erythromycin external gel	Tier-2	
betamethasone dipropionate aug external cream	Tier-1	
betamethasone dipropionate aug external gel	Tier-1	
betamethasone dipropionate aug external lotion	Tier-1	
betamethasone dipropionate aug external ointment	Tier-1	
betamethasone dipropionate external cream	Tier-1	
betamethasone dipropionate external lotion	Tier-1	
betamethasone dipropionate external ointment	Tier-2	PA
betamethasone valerate external cream	Tier-1	
betamethasone valerate external foam	Tier-2	PA
betamethasone valerate external lotion	Tier-1	
betamethasone valerate external ointment	Tier-1	
bimatoprost external solution	Tier-2	STPA
BIONECT EXTERNAL CREAM	Tier-3	
BIONECT EXTERNAL GEL	Tier-3	
bp wash external liquid 2.5 %	Tier-3	
calcipotriene external cream	Tier-2	
calcipotriene external ointment	Tier-1	
calcipotriene external solution	Tier-1	
calcipotriene-betameth diprop external ointment	Tier-2	
CALCITRENE EXTERNAL OINTMENT	Tier-3	
calcitriol external ointment	Tier-2	
CAPEX EXTERNAL SHAMPOO	Tier-3	PA
ciclopirox external gel	Tier-1	
ciclopirox external shampoo	Tier-2	
ciclopirox external solution	Tier-1	QL (1 BOTTLE per 30 Days)

Drug	Status	Notes
ciclopirox olamine external cream	Tier-1	
ciclopirox olamine external suspension	Tier-1	
CLARAVIS ORAL CAPSULE	Tier-3	
CLINDACIN-P EXTERNAL SWAB	Tier-3	
clindamycin phos-benzoyl perox external gel 1.2-5 %	Tier-1	
clindamycin phos-benzoyl perox external gel 1-5 %	Tier-3	
clindamycin phosphate external foam	Tier-3	
clindamycin phosphate external gel	Tier-2	
clindamycin phosphate external lotion	Tier-2	
clindamycin phosphate external solution	Tier-1	
clobetasol prop emollient base external cream	Tier-2	PA
clobetasol propionate e external cream	Tier-2	PA
clobetasol propionate emulsion external foam	Tier-2	PA
clobetasol propionate external cream	Tier-2	PA
clobetasol propionate external foam	Tier-2	PA
clobetasol propionate external gel	Tier-2	PA
clobetasol propionate external liquid	Tier-2	PA
clobetasol propionate external lotion	Tier-2	PA
clobetasol propionate external ointment	Tier-2	PA
clobetasol propionate external shampoo	Tier-2	PA
clobetasol propionate external solution	Tier-2	PA
clocortolone pivalate external cream	Tier-2	PA
clotrimazole-betamethasone external cream	Tier-1	
clotrimazole-betamethasone external lotion	Tier-2	
CORDRAN EXTERNAL TAPE	Tier-3	PA
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (2 Syringes per 28 days)
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; QL (2 Syringes per 28 days)
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	Tier-4	PA; QL (1 Syringe per 28 days)
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	Tier-4	PA; QL (1 Syringe per 28 days)
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	Tier-4	PA; QL (1 syringe per 28 days)
CROTAN EXTERNAL LOTION	Tier-2	

Drug	Status	Notes
dapsone external gel 5 %	Tier-2	
dapsone external gel 7.5 %	Tier-3	
DENAVIR EXTERNAL CREAM	Tier-3	PA
desonide external cream	Tier-2	PA
desonide external gel	Tier-2	
desonide external lotion	Tier-2	PA
desonide external ointment	Tier-2	
desoximetasone external cream	Tier-2	PA
desoximetasone external gel	Tier-2	PA
desoximetasone external ointment	Tier-2	PA
DIFFERIN GEL 0.1 % EXTERNAL (OTC)	Tier-1	PA; # (OTC)
diflorasone diacetate external cream	Tier-2	PA
diflorasone diacetate external ointment	Tier-2	PA
doxepin hcl external cream	Tier-2	
DRYSOL EXTERNAL SOLUTION	Tier-1	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	Tier-4	PA; QL (2 pens per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	Tier-4	PA; QL (2 syringes per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	Tier-4	PA; QL (4 ML per 28 days)
econazole nitrate external cream	Tier-1	
ELETONE EXTERNAL CREAM	Tier-3	
ERTACZO EXTERNAL CREAM	Tier-3	
ery external pad	Tier-1	
erythromycin external gel	Tier-2	
erythromycin external solution	Tier-1	
EUCRISA EXTERNAL OINTMENT	Tier-3	PA
EXELDERM EXTERNAL CREAM	Tier-3	
EXELDERM EXTERNAL SOLUTION	Tier-3	
FABIOR EXTERNAL FOAM	Tier-3	PA
FINACEA EXTERNAL FOAM	Tier-2	
fluocinolone acetonide body external oil	Tier-2	PA
fluocinolone acetonide external cream	Tier-1	
fluocinolone acetonide external ointment	Tier-1	
fluocinolone acetonide external solution	Tier-2	PA
fluocinolone acetonide scalp external oil	Tier-2	PA
fluocinonide external cream 0.05 %	Tier-1	QL (60 GM per 30 days)
fluocinonide external cream 0.1 %	Tier-2	PA; QL (240 GM per 30 days)

Drug	Status	Notes
fluocinonide external gel	Tier-2	PA; QL (60 GM per 30 days)
fluocinonide external ointment	Tier-2	PA; QL (60 GM per 30 days)
fluocinonide external solution	Tier-2	PA; QL (60 ML per 30 days)
FLUOROPLEX EXTERNAL CREAM	Tier-3	
fluorouracil external cream 0.5 %	Tier-3	
fluorouracil external cream 5 %	Tier-1	
fluorouracil external solution	Tier-1	
flurandrenolide external cream	Tier-2	PA
flurandrenolide external lotion	Tier-2	PA
flurandrenolide external ointment	Tier-2	PA
fluticasone propionate external cream	Tier-1	
fluticasone propionate external lotion	Tier-2	PA
fluticasone propionate external ointment	Tier-1	
gentamicin sulfate external cream	Tier-1	
gentamicin sulfate external ointment	Tier-1	
halcinonide external cream	Tier-2	PA
halobetasol propionate external cream	Tier-2	
halobetasol propionate external ointment	Tier-2	PA
HALOG EXTERNAL OINTMENT	Tier-3	PA
hydrocortisone butyr lipo base external cream	Tier-2	PA
hydrocortisone butyrate external cream	Tier-2	PA
hydrocortisone butyrate external lotion	Tier-2	PA
hydrocortisone butyrate external ointment	Tier-1	PA
hydrocortisone butyrate external solution	Tier-2	PA
hydrocortisone external cream 2.5 %	Tier-1	^ (LCG)
hydrocortisone external lotion 2.5 %	Tier-1	
hydrocortisone external ointment 1 %, 2.5 %	Tier-1	^ (LCG)
hydrocortisone valerate external cream	Tier-2	PA
hydrocortisone valerate external ointment	Tier-2	PA
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
imiquimod external cream 3.75 %	Tier-2	
imiquimod external cream 5 %	Tier-1	
imiquimod pump external cream	Tier-2	
KERALYT EXTERNAL GEL 3 %	Tier-3	
ketoconazole external cream	Tier-1	
ketoconazole external foam	Tier-3	
ketoconazole external shampoo 2 %	Tier-1	

Drug	Status	Notes
lidocaine external ointment 5 %	Tier-2	QL (50 GM per 30 days)
lidocaine external patch 5 %	Tier-3	PA; QL (30 PATCHES per 30 days)
lidocaine pain relief external patch	Tier-2	# (All lidocaine 4% OTC patches are covered); QL (30 patches per 30 days)
lidocaine-prilocaine external cream	Tier-1	
lidocaine-prilocaine external kit	Tier-1	
lidocaine-tetracaine external cream 7-7 %	Tier-3	QL (1 tube per 1 Fill)
lindane external shampoo	Tier-1	
luliconazole external cream	Tier-2	
mafenide acetate external packet	Tier-2	
malathion external lotion	Tier-2	
MENTAX EXTERNAL CREAM	Tier-3	
methoxsalen rapid oral capsule	Tier-1	
metronidazole external cream	Tier-1	
metronidazole external gel 0.75 %	Tier-1	
metronidazole external gel 1 %	Tier-2	
metronidazole external lotion	Tier-2	
mometasone furoate external cream	Tier-1	
mometasone furoate external ointment	Tier-1	
mometasone furoate external solution	Tier-1	¥ (*This product is a lotion); ^ (LCG)
mupirocin calcium external cream	Tier-2	
mupirocin external ointment	Tier-1	
naftifine hcl external cream	Tier-2	
naftifine hcl external gel	Tier-2	
NAFTIN EXTERNAL GEL 2 %	Tier-3	
NATROBA EXTERNAL SUSPENSION	Tier-3	
NUCORT EXTERNAL LOTION	Tier-3	
nystatin external cream	Tier-1	
nystatin external ointment	Tier-1	
nystatin external powder	Tier-1	
nystatin-triamcinolone external cream	Tier-1	
nystatin-triamcinolone external ointment	Tier-1	
NYSTOP EXTERNAL POWDER	Tier-1	
oxiconazole nitrate external cream	Tier-2	
OXISTAT EXTERNAL LOTION	Tier-2	
PANDEL EXTERNAL CREAM	Tier-3	PA

Drug	Status	Notes
PANRETIN EXTERNAL GEL	Tier-3	
permethrin external cream	Tier-1	
pimecrolimus external cream	Tier-2	STPA
podofilox external solution	Tier-1	
PR BENZOYL PEROXIDE WASH EXTERNAL LIQUID	Tier-2	
prednicarbate external ointment	Tier-1	
QBREXZA EXTERNAL PAD	Tier-3	PA; QL (30 pads per 30 days)
REGRANEX EXTERNAL GEL	Tier-2	
ROSADAN EXTERNAL CREAM	Tier-1	
ROSADAN EXTERNAL GEL	Tier-1	
salicylic acid external foam	Tier-3	
SANTYL EXTERNAL OINTMENT	Tier-3	
SCENESSE SUBCUTANEOUS IMPLANT	Medical Benefit	PA
selenium sulfide external lotion	Tier-1	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (2 Syringes per 28 days)
silver sulfadiazine external cream	Tier-1	
SILVRSTAT WOUND DRESSING EXTERNAL GEL	Tier-3	
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Tier-4	PA; QL (2 syringes per 84 days)
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; QL (2 syringes per 84 days)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (2 syringes per 84 days)
SOOLANTRA EXTERNAL CREAM	Tier-3	
spinosad external suspension	Tier-2	QL (1 Bottle per 1 Fill)
SSD (SILVER SULFADIAZINE) EXTERNAL CREAM	Tier-1	
SSD EXTERNAL CREAM	Tier-1	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	Tier-4	PA; QL (1 Syringe per 84 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	Tier-4	PA; ¥ (1 injection every 54 days for Crohn's Disease); QL (1 Syringe per 84 days)
SULFAMYLYON EXTERNAL CREAM	Tier-3	
tacrolimus external ointment	Tier-2	STPA
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA; ¥ (One 80mg autoinjector/syringe per 28 days); QL (80 mg per 28 days)

Drug	Status	Notes
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (One 80mg autoinjector/syringe per 28 days); QL (80 mg per 28 days)
TARGRETIN EXTERNAL GEL	Tier-4	
tazarotene external cream	Tier-2	PA; ¥ (PA applies to members 26 and older)
TAZORAC EXTERNAL CREAM 0.05 %	Tier-2	PA
TAZORAC EXTERNAL GEL	Tier-2	PA
TEXACORT EXTERNAL SOLUTION	Tier-3	PA
THERMAZENE EXTERNAL CREAM	Tier-1	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-4	PA; QL (1 Pen per 54 days)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (1 Syringes per 54 days)
tretinoin external cream	Tier-2	PA
tretinoin external gel 0.01 %, 0.025 %	Tier-1	PA
tretinoin external gel 0.05 %	Tier-3	PA
tretinoin microsphere external gel	Tier-3	PA
tretinoin microsphere pump external gel	Tier-3	PA
triamcinolone acetonide external aerosol solution	Tier-2	PA
triamcinolone acetonide external cream 0.025 %, 0.5 %	Tier-1	
triamcinolone acetonide external lotion	Tier-1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	Tier-1	
urea external cream 39 %, 40 %, 45 %	Tier-2	
VALCHLOR EXTERNAL GEL	Tier-4	PA
WINLEVI EXTERNAL CREAM	Tier-3	PA
XEPI EXTERNAL CREAM	Tier-3	
DIAGNOSTIC PRODUCTS		
ONETOUCH ULTRA IN VITRO STRIP	Tier-2	
ONETOUCH VERIO IN VITRO STRIP	Tier-2	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
l-methylfolate oral tablet	Tier-3	
DIGESTIVE AIDS		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-2	

Drug	Status	Notes
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT	Tier-3	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-3	
SUCRAID ORAL SOLUTION	Tier-3	
VIOKACE ORAL TABLET	Tier-3	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	Tier-2	
DIURETICS		
acetazolamide er oral capsule extended release 12 hour	Tier-1	
acetazolamide oral tablet	Tier-1	
amiloride hcl oral tablet	Tier-1	
amiloride-hydrochlorothiazide oral tablet	Tier-1	
bumetanide oral tablet	Tier-1	
chlorthalidone oral tablet 25 mg, 50 mg	Tier-1	
DIURIL ORAL SUSPENSION	Tier-3	
ethacrynic acid oral tablet	Tier-3	
furosemide oral solution 10 mg/ml	Tier-1	
furosemide oral solution 8 mg/ml	Tier-3	
furosemide oral tablet	Tier-1	^ (LCG)
hydrochlorothiazide oral capsule	Tier-1	^ (LCG)
hydrochlorothiazide oral tablet	Tier-1	^ (LCG)
indapamide oral tablet	Tier-1	^ (LCG)
KEVEYIS ORAL TABLET	Tier-3	PA
methazolamide oral tablet	Tier-1	
metolazone oral tablet	Tier-1	
spironolactone oral tablet	Tier-1	^ (LCG)
spironolactone-hctz oral tablet	Tier-1	
torsemide oral tablet	Tier-1	
triamterene oral capsule	Tier-2	
triamterene-hctz oral capsule 37.5-25 mg	Tier-1	^ (LCG)
triamterene-hctz oral tablet	Tier-1	^ (LCG)

Drug	Status	Notes
*ENDOCRINE AND METABOLIC AGENTS		
- MISC.*		
ACTHAR INJECTION GEL	Tier-4	PA
ALDURAZYME INTRAVENOUS SOLUTION	Medical Benefit	SI
alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg	Tier-1	^ (LCG)
BUPHENYL ORAL TABLET	Tier-3	
cabergoline oral tablet	Tier-1	
calcitonin (salmon) nasal solution	Tier-1	
calcitriol oral capsule	Tier-1	
calcitriol oral solution	Tier-1	
CARBAGLU ORAL TABLET	Tier-2	
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	Tier-4	PA
chorionic gonadotropin intramuscular solution reconstituted	Coinurance	
cinacalcet hcl oral tablet	Tier-2	
clomiphene citrate oral tablet	Tier-1	
CRYSVITA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
CYSTADANE ORAL POWDER	Tier-3	
desmopressin ace spray refrig nasal solution	Tier-1	
desmopressin acetate oral tablet	Tier-1	
doxercalciferol oral capsule	Tier-2	
ELAPRASE INTRAVENOUS SOLUTION	Medical Benefit	SI
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
FOLLISTIM AQ SUBCUTANEOUS SOLUTION	Coinurance	PA
GALAFOLD ORAL CAPSULE	Tier-4	PA
GONAL-F INJECTION SOLUTION RECONSTITUTED	Coinurance	PA
GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED	Coinurance	PA
ibandronate sodium oral tablet	Tier-1	
INCRELEX SUBCUTANEOUS SOLUTION	Tier-4	PA
ISTURISA ORAL TABLET	Tier-3	PA
JYNARQUE ORAL TABLET	Tier-4	
JYNARQUE ORAL TABLET THERAPY PACK	Tier-4	
KANUMA INTRAVENOUS SOLUTION	Medical Benefit	PA; SI

Drug	Status	Notes
KERENDIA ORAL TABLET	Tier-2	PA; QL (30 EA per 30 days)
levocarnitine oral solution	Tier-1	
levocarnitine oral tablet	Tier-1	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	SI
MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED	Coinurance	PA
MIACALCIN INJECTION SOLUTION	Tier-2	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; QL (30 Injections per 30 days)
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	Tier-4	PA
NAGLAZYME INTRAVENOUS SOLUTION	Medical Benefit	SI
NATPARA SUBCUTANEOUS CARTRIDGE	Tier-4	QL (2 Cartridges per 28 days)
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	SI
nitisinone oral capsule	Tier-4	
NITYR ORAL TABLET	Tier-4	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-4	PA; ¥ (Coverage applies to all Norditropin products including Norditropin Flexpro and Norditropin Nordiflex.)
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 10000 UNIT	Coinurance	PA
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); ^ (CM)
octreotide acetate subcutaneous solution prefilled syringe	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); ^ (CM)
ORFADIN ORAL CAPSULE 20 MG	Tier-4	
ORFADIN ORAL SUSPENSION	Tier-4	
ORILISSA ORAL TABLET 150 MG	Tier-3	PA; QL (30 tablets per 30 days)
ORILISSA ORAL TABLET 200 MG	Tier-3	PA; QL (60 tablets per 30 days)
OSPHENA ORAL TABLET	Tier-3	
OVIDREL SUBCUTANEOUS INJECTABLE	Coinurance	
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML	Tier-4	PA

Drug	Status	Notes
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier-4	PA; QL (1 syringe per 1 day)
paricalcitol oral capsule	Tier-1	
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED	Coinurance	PA
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
raloxifene hcl oral tablet	Tier-1	^ (ACA)
RAVICTI ORAL LIQUID	Tier-4	PA
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	Tier-2	
risedronate sodium oral tablet delayed release	Tier-2	
sapropterin dihydrochloride oral packet	Tier-4	PA
sapropterin dihydrochloride oral tablet	Tier-4	PA
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	Tier-4	PA
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 30 MG	Medical Benefit	PA
SIGNIFOR SUBCUTANEOUS SOLUTION	Tier-4	PA; QL (60 Ampules per 30 Days)
sodium phenylbutyrate oral tablet	Tier-2	
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-4	PA
STIMATE NASAL SOLUTION	Tier-3	
STRENSIQ SUBCUTANEOUS SOLUTION	Tier-2	PA; QL (24 Vials per 28 days)
SYNAREL NASAL SOLUTION	Tier-3	PA
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
teriparatide (recombinant) subcutaneous solution pen-injector	Tier-4	PA
tolvaptan oral tablet	Tier-2	QL (14 EA per 7 days)
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-4	PA
VIMIZIM INTRAVENOUS SOLUTION	Medical Benefit	PA; SI
XGEVA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
XURIDEN ORAL PACKET	Tier-2	QL (120 Packets per 30 days)
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-4	PA
ESTROGENS		
ALORA TRANSDERMAL PATCH TWICE WEEKLY	Tier-3	

Drug	Status	Notes
ANGELIQ ORAL TABLET	Tier-3	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	Tier-2	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	Tier-2	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	Tier-3	
DIVIGEL TRANSDERMAL GEL	Tier-3	
DUAVEE ORAL TABLET	Tier-2	
ELESTRIN TRANSDERMAL GEL	Tier-3	
estradiol oral tablet	Tier-1	^ (LCG)
estradiol transdermal patch twice weekly	Tier-2	
estradiol transdermal patch weekly	Tier-1	
estradiol-norethindrone acet oral tablet	Tier-1	
ESTROGEL TRANSDERMAL GEL	Tier-3	
EVAMIST TRANSDERMAL SOLUTION	Tier-3	
JINTELI ORAL TABLET	Tier-1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	Tier-3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	Tier-3	
MIMVEY ORAL TABLET	Tier-1	
MYFEMBREE ORAL TABLET	Tier-3	PA; QL (30 EA per 30 days)
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg	Tier-1	
ORIAHNN ORAL CAPSULE THERAPY PACK	Tier-3	PA; QL (4 blister packs per 28 days)
PREFEST ORAL TABLET	Tier-2	
PREMARIN ORAL TABLET	Tier-3	
PREMPHASE ORAL TABLET	Tier-3	
PREMPRO ORAL TABLET	Tier-2	
FLUOROQUINOLOLONES		
BAXDELA ORAL TABLET	Tier-3	
ciprofloxacin hcl oral tablet 100 mg	Tier-1	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	Tier-1	^ (LCG)
levofloxacin oral solution	Tier-1	
levofloxacin oral tablet	Tier-1	^ (LCG)
moxifloxacin hcl oral tablet	Tier-2	
ofloxacin oral tablet 300 mg, 400 mg	Tier-1	

Drug	Status	Notes
GASTROINTESTINAL AGENTS - MISC.		
alosetron hcl oral tablet	Tier-2	
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
balsalazide disodium oral capsule	Tier-1	
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	Tier-4	PA
BYLVAY ORAL CAPSULE	Tier-4	PA
calcium acetate (phos binder) oral capsule	Tier-1	
calcium acetate (phos binder) oral tablet	Tier-1	
CHOLBAM ORAL CAPSULE	Tier-2	
CIMZIA PREFILLED SUBCUTANEOUS KIT	Tier-4	PA; QL (2 Injections per 28 Days)
CIMZIA STARTER KIT SUBCUTANEOUS KIT	Tier-4	PA; QL (1 fill per 1 lifetime)
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Tier-4	PA; QL (2 Injections per 28 days)
cromolyn sodium oral concentrate	Tier-2	
DIPENTUM ORAL CAPSULE	Tier-2	
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
enulose oral solution	Tier-1	
GATTEX SUBCUTANEOUS KIT	Tier-4	
generlac oral solution	Tier-1	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
lanthanum carbonate oral tablet chewable	Tier-3	
LINZESS ORAL CAPSULE	Tier-2	
lubiprostone oral capsule	Tier-2	
mesalamine er oral capsule extended release 24 hour	Tier-2	
mesalamine oral capsule delayed release	Tier-2	
mesalamine oral tablet delayed release	Tier-2	
mesalamine rectal suppository	Tier-2	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	Tier-1	
metoclopramide hcl oral tablet	Tier-1	^ (LCG)
metoclopramide hcl oral tablet dispersible 10 mg	Tier-3	QL (120 EA per 30 days)
metoclopramide hcl oral tablet dispersible 5 mg	Tier-1	QL (120 EA per 30 days)
MOVANTIK ORAL TABLET	Tier-2	
OCALIVA ORAL TABLET	Tier-4	PA; QL (30 Tablets per 30 days)

Drug	Status	Notes
PENTASA ORAL CAPSULE EXTENDED RELEASE	Tier-2	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
sevelamer carbonate oral packet 0.8 gm	Tier-2	
sevelamer carbonate oral tablet	Tier-2	
SFROWASA RECTAL ENEMA	Tier-2	
STELARA INTRAVENOUS SOLUTION	Medical Benefit	PA
sulfasalazine oral tablet	Tier-1	
sulfasalazine oral tablet delayed release	Tier-1	
ursodiol oral capsule 300 mg	Tier-2	
ursodiol oral tablet	Tier-1	
VIBERZI ORAL TABLET	Tier-2	PA
XERMELO ORAL TABLET	Tier-4	
GENITOURINARY AGENTS - MISCELLANEOUS		
alfuzosin hcl er oral tablet extended release 24 hour	Tier-1	
CYSTAGON ORAL CAPSULE	Tier-3	
dutasteride oral capsule	Tier-1	
dutasteride-tamsulosin hcl oral capsule	Tier-1	
ELMIRON ORAL CAPSULE	Tier-3	
finasteride oral tablet 5 mg	Tier-1	
OXLUMO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
potassium citrate er oral tablet extended release	Tier-2	
tamsulosin hcl oral capsule	Tier-1	^ (LCG)
THIOLA EC ORAL TABLET DELAYED RELEASE	Tier-3	
GOUT AGENTS		
allopurinol oral tablet	Tier-1	^ (LCG)
colchicine oral capsule	Tier-2	
colchicine oral tablet	Tier-2	
colchicine-probenecid oral tablet	Tier-1	
febuxostat oral tablet	Tier-2	STPA
KRYSTEXXA INTRAVENOUS SOLUTION	Medical Benefit	PA
probenecid oral tablet	Tier-1	

Drug	Status	Notes
HEMATOLOGICAL AGENTS - MISC.		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
adynovate intravenous solution reconstituted 1000 unit, 1500 unit, 2000 unit, 250 unit, 500 unit, 750 unit	Medical Benefit	PA; SI
adynovate intravenous solution reconstituted 3000 unit	Medical Benefit	PA
AFSTYLA INTRAVENOUS KIT	Medical Benefit	PA; SI
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	Medical Benefit	PA; SI
anagrelide hcl oral capsule	Tier-1	
aspirin-dipyridamole er oral capsule extended release 12 hour	Tier-2	
BENEFIX INTRAVENOUS KIT	Medical Benefit	PA; SI
BERINERT INTRAVENOUS KIT	Medical Benefit	SI
BRILINTA ORAL TABLET	Tier-3	
CABLIVI INJECTION KIT	Tier-4	
cilostazol oral tablet	Tier-1	^ (LCG)
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
clopidogrel bisulfate oral tablet 300 mg	Tier-1	
clopidogrel bisulfate oral tablet 75 mg	Tier-1	^ (LCG)
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
CORIFACT INTRAVENOUS KIT	Medical Benefit	PA; SI
dipyridamole oral tablet	Tier-1	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT	Medical Benefit	PA; SI
EMPAVELI SUBCUTANEOUS SOLUTION	Medical Benefit	PA
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
GIVLAARI SUBCUTANEOUS SOLUTION	Medical Benefit	PA

Drug	Status	Notes
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	Tier-4	PA; QL (40 Vials per 30 days)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	Tier-4	PA; QL (27 vials per 30 days)
HEMLIBRA SUBCUTANEOUS SOLUTION	Tier-4	PA
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	Medical Benefit	PA; SI
icatibant acetate subcutaneous solution	Tier-4	PA; QL (6 ML per 30 Fills)
IDEVION INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT	Medical Benefit	PA; SI
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT	Medical Benefit	PA; SI
KOGENATE FS INTRAVENOUS KIT	Medical Benefit	PA; SI
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	Medical Benefit	PA; SI
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
NUWIQ INTRAVENOUS KIT	Medical Benefit	PA; SI
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
obizur intravenous solution reconstituted	Medical Benefit	PA; SI
ORLADEYO ORAL CAPSULE	Tier-4	PA; QL (1 capsules per 1 day)
pentoxifylline er oral tablet extended release	Tier-1	
prasugrel hcl oral tablet	Tier-2	
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI

Drug	Status	Notes
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
rixubis intravenous solution reconstituted	Medical Benefit	PA; SI
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	SI
SAJAZIR SUBCUTANEOUS SOLUTION	Tier-4	PA; QL (6 mL per 1 fill)
TAKHZYRO SUBCUTANEOUS SOLUTION	Tier-4	PA; QL (4 ML per 28 days)
TAVALISSE ORAL TABLET	Tier-3	QL (60 tablets per 30 days)
TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML	Medical Benefit	PA
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
WILATE INTRAVENOUS KIT	Medical Benefit	PA; SI
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
XYNTHA SOLOFUSE INTRAVENOUS KIT	Medical Benefit	PA; SI
ZONTIVITY ORAL TABLET	Tier-3	
HEMATOPOIETIC AGENTS		
ADAKVEO INTRAVENOUS SOLUTION	Medical Benefit	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (4 ML per 30 days)
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (4 ML per 30 days)
CERDELGA ORAL CAPSULE	Tier-4	
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	Medical Benefit	PA; SI
cyanocobalamin injection solution 1000 mcg/ml	Tier-1	^ (LCG)
cyanocobalamin injection solution 2000 mcg/ml	Tier-1	
DOPTELET ORAL TABLET 20 MG	Tier-4	PA
DROXIA ORAL CAPSULE	Tier-2	^ (CM)
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ENDARI ORAL PACKET	Tier-4	PA

Drug	Status	Notes
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 vials per 14 Days)
FERRALET 90 ORAL TABLET	Tier-3	
folic acid oral tablet 1 mg	Tier-1	^ (ACA)
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
FUSION PLUS ORAL CAPSULE	Tier-3	
GRANIX SUBCUTANEOUS SOLUTION	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 vials per 14 days)
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 Syringes per 14 days)
INTEGRA F ORAL CAPSULE	Tier-3	
INTEGRA PLUS ORAL CAPSULE	Tier-3	
IROSPAN 24/6 ORAL	Tier-3	
LEUKINE INJECTION SOLUTION RECONSTITUTED	Tier-4	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (6 vials per 14 days)
miglustat oral capsule	Tier-3	PA
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 200 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	Tier-2	QL (2 Syringes per 28 days)
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 150 MCG/0.3ML, 30 MCG/0.3ML	Tier-2	QL (2 ML per 28 days)
MULPLETA ORAL TABLET	Tier-4	PA
NASCOBAL NASAL SOLUTION	Tier-2	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (1 Syringe per 14 days)
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 VIALS per 14 days)

Drug	Status	Notes
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 Syringes per 14 days)
NIVESTYM INJECTION SOLUTION	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 syringes per 14 days)
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 syringes per 14 days)
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (1 syringe per 14 days)
OXBRYTA ORAL TABLET	Tier-4	PA
PROCRIT INJECTION SOLUTION	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 vials per 14 Days)
PROMACTA ORAL PACKET 12.5 MG	Tier-4	QL (60 packets per 30 days)
PROMACTA ORAL PACKET 25 MG	Tier-4	QL (60 EA per 30 days)
PROMACTA ORAL TABLET 12.5 MG, 75 MG	Tier-4	QL (30 TABLETS per 30 days)
PROMACTA ORAL TABLET 25 MG	Tier-4	QL (30 TABLETS per 30 Days)
PROMACTA ORAL TABLET 50 MG	Tier-4	QL (60 TABLETS per 30 days)
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	Tier-2	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 vials per 14 days)
SIKLOS ORAL TABLET	Tier-2	PA; ^ (CM)
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 mL per 14 days)
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	Tier-4	¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 Syringes per 14 days)

Drug	Status	Notes
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (1 syringe per 14 days)
HEMOSTATICS		
aminocaproic acid oral solution	Tier-2	
aminocaproic acid oral tablet	Tier-2	
tranexamic acid oral tablet	Tier-1	QL (30 TABLETS per 28 Days)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BELSOMRA ORAL TABLET	Tier-3	STPA; QL (10 EA per 30 days)
DAYVIGO ORAL TABLET	Tier-3	STPA; QL (10 EA per 30 days)
estazolam oral tablet	Tier-1	
eszopiclone oral tablet	Tier-1	QL (10 TABLETS per 30 days)
flurazepam hcl oral capsule	Tier-1	^ (LCG)
HETLIOZ LQ ORAL SUSPENSION	Tier-3	PA; ¥ (48 mL: 3 bottles/30 days; 158 mL: 1 bottle/30 days); QL (158 ML per 30 days)
HETLIOZ ORAL CAPSULE	Tier-4	PA; QL (30 EA per 30 days)
phenobarbital oral elixir	Tier-1	
phenobarbital oral tablet	Tier-1	
ramelteon oral tablet	Tier-2	STPA; QL (10 tablets per 30 days)
temazepam oral capsule	Tier-1	
triazolam oral tablet	Tier-1	
zaleplon oral capsule	Tier-1	QL (10 CAPSULES per 30 Days)
zolpidem tartrate er oral tablet extended release	Tier-1	STPA; QL (10 TABLETS per 30 Days)
zolpidem tartrate oral tablet	Tier-1	^ (LCG); QL (10 TABLETS per 30 Days)
zolpidem tartrate sublingual tablet sublingual	Tier-2	STPA; QL (10 TABLETS per 30 days)
ZOLPIMIST ORAL SOLUTION	Tier-3	STPA; QL (1 Unit per 30 Days)
LAXATIVES		
CLENPIQ ORAL SOLUTION	Tier-3	^ (ACA)
constulose oral solution	Tier-1	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	Tier-1	^ (ACA)
GAVILYTE-G ORAL SOLUTION RECONSTITUTED	Tier-1	^ (ACA)
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	Tier-2	^ (ACA)

Drug	Status	Notes
KRISTALOSE ORAL PACKET	Tier-3	
lactulose oral solution	Tier-1	
OSMOPREP ORAL TABLET	Tier-3	
peg-3350/electrolytes oral solution reconstituted	Tier-1	^ (ACA)
peg-3350/electrolytes/ascorbat oral solution reconstituted	Tier-2	^ (ACA)
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	Tier-2	^ (ACA)
PLENVU ORAL SOLUTION RECONSTITUTED	Tier-3	^ (ACA)
SUPREP BOWEL PREP KIT ORAL SOLUTION	Tier-3	^ (ACA)
SUTAB ORAL TABLET	Tier-3	^ (ACA)
MACROLIDES		
azithromycin oral packet	Tier-1	
azithromycin oral suspension reconstituted	Tier-1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	Tier-1	
clarithromycin er oral tablet extended release 24 hour	Tier-1	
clarithromycin oral suspension reconstituted	Tier-2	
clarithromycin oral tablet	Tier-1	
DIFICID ORAL SUSPENSION RECONSTITUTED	Tier-3	PA
DIFICID ORAL TABLET	Tier-3	PA
E.E.S. 400 ORAL TABLET	Tier-1	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	Tier-2	
ERY-TAB ORAL TABLET DELAYED RELEASE	Tier-2	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	Tier-1	
erythromycin base oral capsule delayed release particles	Tier-2	
erythromycin base oral tablet	Tier-2	
erythromycin ethylsuccinate oral suspension reconstituted	Tier-2	
erythromycin ethylsuccinate oral tablet	Tier-2	
erythromycin stearate oral tablet 250 mg	Tier-2	
MEDICAL DEVICES AND SUPPLIES		
BD AUTOSHIELD 29G X 5MM , 29G X 8MM	Tier-2	
BD AUTOSHIELD DUO	Tier-2	

Drug	Status	Notes
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML	Tier-2	
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, U-100 1 ML	Tier-2	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier-2	
BD INSULIN SYRINGE U/F	Tier-2	
BD INSULIN SYRINGE U/F 1/2UNIT	Tier-2	
BD INSULIN SYRINGE U-500	Tier-2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.5 ML	Tier-2	
BD PEN NEEDLE MICRO U/F	Tier-2	
BD PEN NEEDLE MINI U/F	Tier-2	
BD PEN NEEDLE NANO 2ND GEN	Tier-2	
BD PEN NEEDLE NANO U/F	Tier-2	
BD PEN NEEDLE ORIGINAL U/F	Tier-2	
BD PEN NEEDLE SHORT U/F	Tier-2	
BD SAFETYGLIDE INSULIN SYRINGE	Tier-2	
BD SAFETY-LOK INSULIN SYRINGE	Tier-2	
BD VEO INSULIN SYR U/F 1/2UNIT	Tier-2	
BD VEO INSULIN SYRINGE U/F	Tier-2	
OMNIPOD DASH 5 PACK PODS	Tier-2	¥ (only Omnipod DASH Pods are covered under the pharmacy benefit); QL (10 pods per 30 days)

MIGRAINE PRODUCTS

AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (1 injector per 30 days)
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (3 pens per 90 days)
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (3 pens per 90 days)
almotriptan malate oral tablet	Tier-2	QL (6 TABLETS per 30 days)
dihydroergotamine mesylate nasal solution	Tier-3	QL (1 Box per 30 days)
eletriptan hydrobromide oral tablet	Tier-2	QL (6 EA per 30 days)

Drug	Status	Notes
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (3 syringes per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-Injector	Tier-2	PA; ¥ (2 auto-injectors/ syringes (240 mg) as a single loading dose, followed by 120 mg / 30 days.); QL (1 pen per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; ¥ (2 auto-injectors/ syringes (240 mg) as a single loading dose, followed by 120 mg / 30 days.); QL (1 syringe per 30 days)
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	Tier-3	
ergotamine-caffeine oral tablet	Tier-2	
frovatriptan succinate oral tablet	Tier-3	QL (9 EA per 30 days)
MIGERGOT RECTAL SUPPOSITORY	Tier-3	
MIGRANAL NASAL SOLUTION	Tier-3	QL (1 Box per 30 Days)
naratriptan hcl oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
NURTEC ORAL TABLET DISPERSIBLE	Tier-2	PA; QL (8 tablets per 30 days)
ONZETRA XSAIL NASAL EXHALER POWDER	Tier-3	STPA; ¥ (Max of 1 kit (8 units) per 30 days); QL (16 Units per 30 days)
REYVOW ORAL TABLET 100 MG	Tier-2	PA; QL (8 tablets per 30 days)
REYVOW ORAL TABLET 50 MG	Tier-2	PA; QL (4 tablets per 30 days)
rizatriptan benzoate oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
rizatriptan benzoate oral tablet dispersible	Tier-1	QL (9 TABLETS per 30 Days)
sumatriptan nasal solution 20 mg/act	Tier-2	QL (1 Box per 30 days)
sumatriptan nasal solution 5 mg/act	Tier-2	QL (2 Boxes per 30 days)
sumatriptan succinate oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
sumatriptan succinate refill subcutaneous solution cartridge	Tier-2	QL (6 injections per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	Tier-2	QL (6 injections per 30 days)
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	Tier-2	QL (6 injections per 30 days)
sumatriptan-naproxen sodium oral tablet	Tier-3	PA; QL (9 EA per 30 days)
VYEPTI INTRAVENOUS SOLUTION	Medical Benefit	PA
zolmitriptan nasal solution	Tier-2	STPA; QL (6 sprays per 30 days)
zolmitriptan oral tablet 2.5 mg	Tier-2	QL (6 TABLETS per 30 Days)
zolmitriptan oral tablet 5 mg	Tier-2	QL (6 TABLETS per 30 days)
zolmitriptan oral tablet dispersible 2.5 mg	Tier-2	QL (6 TABLETS per 30 Days)
zolmitriptan oral tablet dispersible 5 mg	Tier-2	QL (6 TABLETS per 30 days)

Drug	Status	Notes
MINERALS & ELECTROLYTES		
EFFER-K ORAL TABLET EFFERVESCENT	Tier-3	
GALZIN ORAL CAPSULE	Tier-2	
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	Tier-3	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON ORAL TABLET EXTENDED RELEASE	Tier-1	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	Tier-1	
potassium chloride er oral capsule extended release	Tier-1	
potassium chloride er oral tablet extended release 10 meq, 8 meq	Tier-1	
potassium chloride oral packet	Tier-2	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	Tier-2	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	Tier-1	^ (ACA)
sodium fluoride oral tablet	Tier-1	^ (ACA)
sodium fluoride oral tablet chewable	Tier-1	^ (ACA)
MISCELLANEOUS THERAPEUTIC CLASSES		
AZASAN ORAL TABLET	Tier-2	
azathioprine oral tablet 50 mg	Tier-1	
azathioprine sodium injection solution reconstituted	Tier-1	
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	PA
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA
cyclosporine modified oral capsule	Tier-1	
cyclosporine modified oral solution	Tier-1	
cyclosporine oral capsule	Tier-1	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg	Tier-2	
LOKELMA ORAL PACKET	Tier-2	

Drug	Status	Notes
LUPKYNIS ORAL CAPSULE	Tier-4	PA
mycophenolate mofetil oral capsule	Tier-1	
mycophenolate mofetil oral suspension reconstituted	Tier-2	
mycophenolate mofetil oral tablet	Tier-1	
mycophenolate sodium oral tablet delayed release	Tier-2	
MYFORTIC ORAL TABLET DELAYED RELEASE	Tier-4	
penicillamine oral capsule	Tier-2	
penicillamine oral tablet	Tier-2	
PROGRAF ORAL PACKET	Tier-3	
RAPAMUNE ORAL TABLET	Tier-4	
REVLIMID ORAL CAPSULE	Tier-4	PA; ^ (CM)
REZUROCK ORAL TABLET	Tier-4	PA
SAPHNELO INTRAVENOUS SOLUTION	Medical Benefit	PA
sirolimus oral solution	Tier-1	
sirolimus oral tablet	Tier-1	
tacrolimus oral capsule	Tier-1	
THALOMID ORAL CAPSULE	Tier-4	^ (CM)
trientine hcl oral capsule	Tier-2	
UPLIZNA INTRAVENOUS SOLUTION	Medical Benefit	PA
VELTASSA ORAL PACKET	Tier-2	
XIAFLEX INJECTION SOLUTION RECONSTITUTED	Medical Benefit	PA
ZOKINVY ORAL CAPSULE	Tier-4	PA
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl oral capsule	Tier-2	
chlorhexidine gluconate mouth/throat solution	Tier-1	^ (LCG)
clotrimazole mouth/throat troche	Tier-1	
EPISIL MOUTH/THROAT LIQUID	Tier-2	QL (4 Bottles per 30 Days)
GELCLAIR MOUTH/THROAT GEL	Tier-2	
lidocaine hcl mouth/throat solution	Tier-1	
NUMOISYN MOUTH/THROAT LIQUID	Tier-3	
nystatin mouth/throat suspension	Tier-1	
ORALONE MOUTH/THROAT PASTE	Tier-1	
PERIOGARD MOUTH/THROAT SOLUTION	Tier-1	^ (LCG)
pilocarpine hcl oral tablet	Tier-1	
triamcinolone acetonide mouth/throat paste	Tier-1	

Drug	Status	Notes
MULTIVITAMINS		
ATABEX EC ORAL TABLET DELAYED RELEASE	Tier-3	
NEEVO DHA ORAL CAPSULE 27-1.13 MG	Tier-3	
pnv-dha+docusate oral capsule	Tier-1	
prenatal plus iron oral tablet	Tier-3	
SELECT-OB+DHA ORAL	Tier-3	
VITAFOL-OB+DHA ORAL	Tier-3	
MUSCULOSKELETAL THERAPY AGENTS		
baclofen oral tablet	Tier-1	
carisoprodol oral tablet	Tier-1	
carisoprodol-aspirin-codeine oral tablet	Tier-1	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	Tier-1	
chlorzoxazone oral tablet 500 mg	Tier-1	^ (LCG)
cyclobenzaprine hcl oral tablet	Tier-1	
dantrolene sodium oral capsule	Tier-2	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
metaxalone oral tablet 800 mg	Tier-2	
methocarbamol oral tablet	Tier-1	^ (LCG)
orphenadrine citrate er oral tablet extended release 12 hour	Tier-1	
OZOBAX ORAL SOLUTION	Tier-4	PA
tizanidine hcl oral capsule	Tier-2	
tizanidine hcl oral tablet	Tier-1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
azelastine hcl nasal solution 0.1 %	Tier-1	QL (3 EA per 90 Days)
azelastine hcl nasal solution 0.15 %	Tier-1	QL (3 EA per 90 days)
budesonide nasal suspension	Tier-2	QL (3 EA per 90 days)
flunisolide nasal solution 25 mcg/act (0.025%)	Tier-1	QL (3 EA per 90 Days)
fluticasone propionate nasal suspension	Tier-1	QL (3 EA per 90 Days)
ipratropium bromide nasal solution	Tier-1	QL (6 EA per 90 Days)
mometasone furoate nasal suspension	Tier-2	QL (6 BOTTLES per 90 days)
olopatadine hcl nasal solution	Tier-2	QL (3 EA per 90 days)
triamcinolone acetonide nasal aerosol	Tier-2	QL (3 EA per 90 days)
NEUROMUSCULAR AGENTS		
amondys 45 intravenous solution	Medical Benefit	PA

Drug	Status	Notes
BOTOX INJECTION SOLUTION RECONSTITUTED	Medical Benefit	PA
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	Medical Benefit	PA
EVRYSDI ORAL SOLUTION RECONSTITUTED	Tier-4	PA; QL (240 ML per 1 fill)
EXONDYS 51 INTRAVENOUS SOLUTION	Medical Benefit	PA
EXSERVAN ORAL FILM	Tier-4	
MYOBLOC INTRAMUSCULAR SOLUTION	Medical Benefit	PA
RADICAVA INTRAVENOUS SOLUTION	Medical Benefit	PA
riluzole oral tablet	Tier-1	
SPINRAZA INTRATHECAL SOLUTION	Medical Benefit	PA
TIGLUTIK ORAL SUSPENSION	Tier-4	
VYONDYS 53 INTRAVENOUS SOLUTION	Medical Benefit	PA
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 50 UNIT	Medical Benefit	PA
NUTRIENTS		
DOJOLVI ORAL LIQUID	Tier-4	PA
OPHTHALMIC AGENTS		
ACUVAIL OPHTHALMIC SOLUTION	Tier-2	
ak-poly-bac ophthalmic ointment	Tier-1	
ALOCRIL OPHTHALMIC SOLUTION	Tier-3	
ALOMIDE OPHTHALMIC SOLUTION	Tier-3	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	Tier-2	
ALREX OPHTHALMIC SUSPENSION	Tier-2	
apraclonidine hcl ophthalmic solution	Tier-1	
atropine sulfate ophthalmic solution 1 %	Tier-1	
AZASITE OPHTHALMIC SOLUTION	Tier-3	QL (1 Bottle per 7 Days)
azelastine hcl ophthalmic solution	Tier-1	
bacitracin ophthalmic ointment	Tier-1	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	Tier-1	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	Tier-1	
bepotastine besilate ophthalmic solution	Tier-2	
BESIVANCE OPHTHALMIC SUSPENSION	Tier-3	
betaxolol hcl ophthalmic solution	Tier-1	
BETIMOL OPHTHALMIC SOLUTION	Tier-2	
BETOPTIC-S OPHTHALMIC SUSPENSION	Tier-3	

Drug	Status	Notes
BLEPHAMIDE OPHTHALMIC SUSPENSION	Tier-3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	Tier-3	
brimonidine tartrate ophthalmic solution 0.15 %	Tier-2	
brimonidine tartrate ophthalmic solution 0.2 %	Tier-1	
brinzolamide ophthalmic suspension	Tier-2	
bromfenac sodium (once-daily) ophthalmic solution	Tier-2	
carteolol hcl ophthalmic solution	Tier-1	
CEQUA OPHTHALMIC SOLUTION	Tier-3	PA
CILOXAN OPHTHALMIC OINTMENT	Tier-3	
ciprofloxacin hcl ophthalmic solution	Tier-1	
COMBIGAN OPHTHALMIC SOLUTION	Tier-2	
cromolyn sodium ophthalmic solution	Tier-1	
cyclopentolate hcl ophthalmic solution 0.5 %	Tier-1	
CYSTADROPS OPHTHALMIC SOLUTION	Tier-4	
CYSTARAN OPHTHALMIC SOLUTION	Tier-4	
dexamethasone sodium phosphate ophthalmic solution	Tier-1	
diclofenac sodium ophthalmic solution	Tier-1	
difluprednate ophthalmic emulsion	Tier-3	
dorzolamide hcl ophthalmic solution	Tier-1	
dorzolamide hcl-timolol mal ophthalmic solution	Tier-1	
epinastine hcl ophthalmic solution	Tier-1	
erythromycin ophthalmic ointment	Tier-1	
FLAREX OPHTHALMIC SUSPENSION	Tier-3	
fluorometholone ophthalmic suspension	Tier-1	
flurbiprofen sodium ophthalmic solution	Tier-1	
FML FORTE OPHTHALMIC SUSPENSION	Tier-2	
FML OPHTHALMIC OINTMENT	Tier-2	
FRESHKOTE OPHTHALMIC SOLUTION	Tier-3	
gatifloxacin ophthalmic solution	Tier-2	
GENTAK OPHTHALMIC OINTMENT	Tier-1	
gentamicin sulfate ophthalmic solution	Tier-1	
ILEVRO OPHTHALMIC SUSPENSION	Tier-3	
INVELTYS OPHTHALMIC SUSPENSION	Tier-3	
IOPIDINE OPHTHALMIC SOLUTION 1 %	Tier-3	
ketorolac tromethamine ophthalmic solution	Tier-1	
LACRISERT OPHTHALMIC INSERT	Tier-3	

Drug	Status	Notes
LASTACAFT OPHTHALMIC SOLUTION	Tier-2	
latanoprost ophthalmic solution	Tier-1	
levobunolol hcl ophthalmic solution 0.5 %	Tier-1	
levofloxacin ophthalmic solution	Tier-1	
LOTEMAX OPHTHALMIC OINTMENT	Tier-3	
loteprednol etabonate ophthalmic gel	Tier-2	
loteprednol etabonate ophthalmic suspension	Tier-2	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier-2	STPA
MAXIDEX OPHTHALMIC SUSPENSION	Tier-3	
moxifloxacin hcl (2x day) ophthalmic solution	Tier-2	
moxifloxacin hcl ophthalmic solution	Tier-1	
NATACYN OPHTHALMIC SUSPENSION	Tier-3	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	Tier-1	
neomycin-polymyxin-dexameth ophthalmic ointment	Tier-1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	Tier-1	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-0.025	Tier-1	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	Tier-2	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	Tier-1	
NEO-POLYCIN OPHTHALMIC OINTMENT	Tier-1	
NEVANAC OPHTHALMIC SUSPENSION	Tier-3	
ofloxacin ophthalmic solution	Tier-1	
olopatadine hcl ophthalmic solution	Tier-2	
OXERVATE OPHTHALMIC SOLUTION	Tier-4	PA
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	Tier-1	
POLYCIN OPHTHALMIC OINTMENT	Tier-1	
PRED MILD OPHTHALMIC SUSPENSION	Tier-2	
PRED-G OPHTHALMIC SUSPENSION	Tier-2	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Tier-2	
prednisolone acetate ophthalmic suspension	Tier-1	
prednisolone sodium phosphate ophthalmic solution	Tier-3	
PROLENSA OPHTHALMIC SOLUTION	Tier-3	

Drug	Status	Notes
proparacaine hcl ophthalmic solution	Tier-1	
RESTASIS OPHTHALMIC EMULSION	Tier-2	PA
RHOPRESSA OPHTHALMIC SOLUTION	Tier-3	STPA
ROCKLATAN OPHTHALMIC SOLUTION	Tier-3	STPA
SIMBRINZA OPHTHALMIC SUSPENSION	Tier-2	
sulfacetamide sodium ophthalmic ointment	Tier-1	
sulfacetamide sodium ophthalmic solution	Tier-1	
sulfacetamide-prednisolone ophthalmic solution	Tier-1	
sulfacetamide-prednisolone ophthalmic suspension	Tier-3	
timolol maleate (once-daily) ophthalmic solution	Tier-2	
timolol maleate ophthalmic gel forming solution	Tier-1	
timolol maleate ophthalmic solution	Tier-1	^ (LCG)
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	Tier-3	
TOBRADEX OPHTHALMIC OINTMENT	Tier-3	
tobramycin ophthalmic solution	Tier-1	
tobramycin-dexamethasone ophthalmic suspension	Tier-2	
TOBREX OPHTHALMIC OINTMENT	Tier-3	
travoprost (bak free) ophthalmic solution	Tier-2	STPA
trifluridine ophthalmic solution	Tier-2	
tropicamide ophthalmic solution	Tier-1	
VYZULTA OPHTHALMIC SOLUTION	Tier-2	STPA
XELPROS OPHTHALMIC EMULSION	Tier-3	STPA
XiIDRA OPHTHALMIC SOLUTION	Tier-2	PA
ZIOPTAN OPHTHALMIC SOLUTION	Tier-3	STPA
ZIRGAN OPHTHALMIC GEL	Tier-3	
ZYLET OPHTHALMIC SUSPENSION	Tier-3	
OTIC AGENTS		
ACETASOL HC OTIC SOLUTION	Tier-1	
acetic acid otic solution	Tier-1	
antibiotic ear otic solution	Tier-1	
CIPRO HC OTIC SUSPENSION	Tier-3	
ciprofloxacin hcl otic solution	Tier-1	
ciprofloxacin-dexamethasone otic suspension	Tier-2	
CORTISPORIN-TC OTIC SUSPENSION	Tier-3	
fluocinolone acetonide otic oil	Tier-1	
hydrocortisone-acetic acid otic solution	Tier-1	

Drug	Status	Notes
neomycin-polymyxin-hc otic solution 3.5-10000-1	Tier-1	
neomycin-polymyxin-hc otic suspension	Tier-1	
ofloxacin otic solution	Tier-1	
OXYTOCICS		
methylergonovine maleate oral tablet	Tier-1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ASCENIV INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CUTAQUIG SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CUVITRU SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CYTOGAM INTRAVENOUS INJECTABLE	Medical Benefit	PA; SI
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAGARD INJECTION SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMUNEX-C INJECTION SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HYQVIA SUBCUTANEOUS KIT	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
OCTAGAM INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
PANZYGA INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)

Drug	Status	Notes
PRIVIGEN INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
SYNAGIS INTRAMUSCULAR SOLUTION	Medical Benefit	PA
XEMBIFY SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
PENICILLINS		
amoxicillin oral capsule	Tier-1	^ (LCG)
amoxicillin oral suspension reconstituted 125 mg/5ml	Tier-1	^ (LCG)
amoxicillin oral suspension reconstituted 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	Tier-1	
amoxicillin oral tablet	Tier-1	^ (LCG)
amoxicillin oral tablet chewable 125 mg	Tier-1	
amoxicillin oral tablet chewable 250 mg	Tier-1	^ (LCG)
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	Tier-1	
amoxicillin-pot clavulanate oral suspension reconstituted	Tier-1	
amoxicillin-pot clavulanate oral tablet	Tier-1	
amoxicillin-pot clavulanate oral tablet chewable	Tier-1	
ampicillin oral capsule 500 mg	Tier-1	^ (LCG)
dicloxacillin sodium oral capsule	Tier-1	
penicillin v potassium oral solution reconstituted	Tier-1	^ (LCG)
penicillin v potassium oral tablet	Tier-1	^ (LCG)
PROGESTINS		
medroxyprogesterone acetate oral tablet	Tier-1	^ (LCG)
megestrol acetate oral suspension 625 mg/5ml	Tier-2	
norethindrone acetate oral tablet	Tier-1	
progesterone oral capsule	Tier-1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
acamprosate calcium oral tablet delayed release	Tier-1	
ADDYI ORAL TABLET	Tier-3	PA
AUBAGIO ORAL TABLET	Tier-4	QL (30 tablets per 30 Days)
AUSTEDO ORAL TABLET 12 MG	Tier-4	PA; QL (120 EA per 30 days)
AUSTEDO ORAL TABLET 6 MG, 9 MG	Tier-4	PA; QL (60 EA per 30 days)
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Tier-4	QL (4 Pens per 28 days)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Tier-4	QL (4 Syringes per 28 days)

Drug	Status	Notes
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	Tier-4	QL (120 capsules per 30 days)
BETASERON SUBCUTANEOUS KIT	Tier-4	QL (15 Vials per 30 Days)
bupropion hcl er (smoking det) oral tablet extended release 12 hour	No Copayment	
chlordiazepoxide-amitriptyline oral tablet	Tier-1	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier-4	QL (30 Syringes per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Tier-4	QL (12 Syringes per 30 days)
cvs nicotine polacrilex mouth/throat gum	No Copayment	
cvs nicotine polacrilex mouth/throat lozenge	No Copayment	
cvs nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	No Copayment	
dalfampridine er oral tablet extended release 12 hour	Tier-4	PA; QL (60 Tablets per 30 days)
dimethyl fumarate oral capsule delayed release	Tier-4	QL (60 capsules per 30 days)
dimethyl fumarate starter pack oral	Tier-4	QL (1 fill per 1 lifetime)
disulfiram oral tablet	Tier-1	
donepezil hcl oral tablet	Tier-1	^ (LCG)
donepezil hcl oral tablet dispersible	Tier-1	
eq nicotine mouth/throat lozenge	No Copayment	
eq nicotine polacrilex mouth/throat gum	No Copayment	
eq nicotine polacrilex mouth/throat lozenge	No Copayment	
eq nicotine step 3 transdermal patch 24 hour	No Copayment	
eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	No Copayment	
eql nicotine polacrilex mouth/throat lozenge	No Copayment	
ergoloid mesylates oral tablet	Tier-1	
fluoxetine hcl (pmdd) oral tablet	Tier-1	
galantamine hydrobromide er oral capsule extended release 24 hour	Tier-1	
galantamine hydrobromide oral solution	Tier-1	
galantamine hydrobromide oral tablet	Tier-1	
GILENYA ORAL CAPSULE 0.5 MG	Tier-4	QL (30 EA per 30 days)
gnp nicotine mini mouth/throat lozenge 2 mg	No Copayment	
gnp nicotine polacrilex mouth/throat gum	No Copayment	
gnp nicotine polacrilex mouth/throat lozenge	No Copayment	
hm nicotine polacrilex mouth/throat gum	No Copayment	
hm nicotine polacrilex mouth/throat lozenge	No Copayment	

Drug	Status	Notes
hm nicotine transdermal patch 24 hour	No Copayment	
HORIZANT ORAL TABLET EXTENDED RELEASE	Tier-3	QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE	Tier-2	PA; QL (30 capsules per 30 days)
INGREZZA ORAL CAPSULE THERAPY PACK	Tier-2	PA; QL (1 fill per 1 lifetime)
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	QL (0.4 ML per 30 days)
LUCEMYRA ORAL TABLET	Tier-3	QL (132 Tablets per 1 Fill)
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	Tier-4	PA; QL (10 tablets per 30 days)
MAYZENT ORAL TABLET 0.25 MG	Tier-4	QL (120 Tablets per 30 days)
MAYZENT ORAL TABLET 2 MG	Tier-4	QL (30 Tablets per 30 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	Tier-4	QL (1 fill per 1 lifetime)
memantine hcl er oral capsule extended release 24 hour	Tier-2	
memantine hcl oral solution 2 mg/ml	Tier-2	
memantine hcl oral tablet	Tier-1	
nicotine mini mouth/throat lozenge 2 mg	No Copayment	
nicotine polacrilex mouth/throat gum	No Copayment	
nicotine polacrilex mouth/throat lozenge	No Copayment	
nicotine step 1 transdermal patch 24 hour	No Copayment	
nicotine step 2 transdermal patch 24 hour	No Copayment	
nicotine step 3 transdermal patch 24 hour	No Copayment	
nicotine transdermal kit	No Copayment	
nicotine transdermal patch 24 hour	No Copayment	
NICOTROL INHALATION INHALER	No Copayment	
NICOTROL NS NASAL SOLUTION	No Copayment	

Drug	Status	Notes
NUEDEXTA ORAL CAPSULE	Tier-2	PA
olanzapine-fluoxetine hcl oral capsule	Tier-1	STPA
ONPATTRO INTRAVENOUS SOLUTION	Medical Benefit	PA
paroxetine mesylate oral capsule	Tier-2	
perphenazine-amitriptyline oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
pimozide oral tablet	Tier-1	
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Tier-4	QL (2 syringes per 28 days)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-4	¥ (1 time fill only); QL (1 Pack per 1 Fill)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	¥ (1 time fill only); QL (1 Pack per 1 Fill)
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-4	QL (2 Syringes per 28 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	QL (2 Syringes per 28 days)
ra mini nicotine mouth/throat lozenge	No Copayment	
ra nicotine mouth/throat gum	No Copayment	
ra nicotine polacrilex mouth/throat lozenge	No Copayment	
ra nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	No Copayment	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	QL (12 Syringes per 28 days)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-4	QL (1 fill per 1 lifetime)
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	QL (12 Syringes per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	QL (1 fill per 1 lifetime)
rivastigmine tartrate oral capsule	Tier-1	
rivastigmine transdermal patch 24 hour	Tier-2	
SAVELLA ORAL TABLET	Tier-2	STPA; QL (180 TABLETS per 90 Days)
sm nicotine mouth/throat gum	No Copayment	
sm nicotine mouth/throat lozenge	No Copayment	
sm nicotine polacrilex mouth/throat gum	No Copayment	
sm nicotine polacrilex mouth/throat lozenge 4 mg	No Copayment	
sm nicotine transdermal patch 24 hour	No Copayment	

Drug	Status	Notes
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-4	PA; QL (4 syringes per 30 days)
tetrabenazine oral tablet 12.5 mg	Tier-4	QL (90 EA per 30 days)
tetrabenazine oral tablet 25 mg	Tier-4	QL (120 EA per 30 days)
VUMERITY ORAL CAPSULE DELAYED RELEASE	Tier-4	QL (4 EA per 1 day)
VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; QL (8 pens per 30 days)
XYREM ORAL SOLUTION	Tier-3	PA; QL (18 ML per 1 day)
XYWAV ORAL SOLUTION	Tier-3	PA; QL (18 ML per 1 day)
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	Tier-4	PA; QL (1 fill per 1 lifetime)
ZEPOSIA ORAL CAPSULE	Tier-4	PA; QL (30 EA per 30 days)
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	Tier-4	PA; QL (1 fill per 1 lifetime)
RESPIRATORY AGENTS - MISC.		
BRONCHITOL INHALATION CAPSULE	Tier-4	PA; QL (20 capsules per 1 day)
ESBRIET ORAL CAPSULE	Tier-4	QL (270 EA per 30 days)
ESBRIET ORAL TABLET	Tier-4	QL (270 EA per 30 days)
KALYDECO ORAL PACKET	Tier-4	PA; QL (56 EA per 28 days)
OFEV ORAL CAPSULE	Tier-4	QL (60 EA per 30 days)
ORKAMBI ORAL PACKET	Tier-4	PA; QL (56 Packets per 28 days)
ORKAMBI ORAL TABLET	Tier-4	PA; QL (112 tablets per 28 days)
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	Tier-4	
SYMDEKO ORAL TABLET THERAPY PACK	Tier-4	PA; QL (56 Tablets per 28 days)
TRIKAFTA ORAL TABLET THERAPY PACK	Tier-4	PA; QL (84 tablets per 28 days)
SULFONAMIDES		
sulfadiazine oral tablet	Tier-3	
TETRACYCLINES		
demeclacycline hcl oral tablet	Tier-1	
doxycycline hyclate oral capsule	Tier-1	
doxycycline hyclate oral tablet 100 mg, 20 mg	Tier-1	
doxycycline hyclate oral tablet 75 mg	Tier-2	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 75 mg	Tier-3	
doxycycline monohydrate oral capsule	Tier-1	
doxycycline monohydrate oral tablet	Tier-1	

Drug	Status	Notes
minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 65 mg, 80 mg, 90 mg	Tier-3	
minocycline hcl oral capsule	Tier-1	
minocycline hcl oral tablet	Tier-2	
NUZYRA ORAL TABLET 150 MG	Tier-3	
tetracycline hcl oral capsule	Tier-3	
VIBRAMYCIN ORAL SYRUP	Tier-3	
THYROID AGENTS		
ARMOUR THYROID ORAL TABLET	Tier-2	
levothyroxine sodium oral capsule	Tier-2	
levothyroxine sodium oral tablet	Tier-1	
LEVOXYL ORAL TABLET	Tier-1	
liothyronine sodium oral tablet	Tier-1	
methimazole oral tablet	Tier-1	^ (LCG)
NATURE-THROID ORAL TABLET		
propylthiouracil oral tablet	Tier-1	
SYNTHROID ORAL TABLET	Tier-3	
THYQUIDITY ORAL SOLUTION	Tier-3	
TIROSINT ORAL CAPSULE	Tier-3	
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML	Tier-3	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG	Tier-1	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLIN ERGICS		
ACIPHEX ORAL TABLET DELAYED RELEASE	Tier-3	PA; QL (90 tablets per 90 days)
amoxicill-clarithro-lansopraz oral	Tier-1	
chlordiazepoxide-clidinium oral capsule	Tier-3	
cimetidine hcl oral solution 300 mg/5ml	Tier-2	
cimetidine oral tablet	Tier-2	
cvs omeprazole-sod bicarbonate oral capsule	Tier-2	¥ (All OTC versions of this product are on Tier 2); QL (90 capsules per 90 days)

Drug	Status	Notes
DEXILANT ORAL CAPSULE DELAYED RELEASE	Tier-3	PA; QL (90 EA per 90 days)
dicyclomine hcl oral capsule	Tier-1	
dicyclomine hcl oral solution	Tier-1	
dicyclomine hcl oral tablet	Tier-1	
ed-spaz oral tablet dispersible	Tier-1	
esomeprazole magnesium oral capsule delayed release 20 mg	Tier-1	¥ (Only OTC esomeprazole products are covered)
esomeprazole magnesium oral packet	Tier-2	PA; ¥ (PA applies to members > 12 years); QL (90 packets per 90 days)
famotidine oral suspension reconstituted	Tier-2	
famotidine oral tablet 20 mg, 40 mg	Tier-1	^ (LCG)
FIRST-LANSOPRAZOLE ORAL SUSPENSION	Tier-3	QL (300 ML per 30 days)
FIRST-OMEPRAZOLE ORAL SUSPENSION	Tier-3	QL (300 ML per 30 days)
glycopyrrolate oral tablet 1 mg, 2 mg	Tier-1	
hyoscyamine sulfate er oral tablet extended release 12 hour	Tier-1	
hyoscyamine sulfate oral elixir	Tier-1	
hyoscyamine sulfate oral solution	Tier-1	
hyoscyamine sulfate oral tablet	Tier-1	
hyoscyamine sulfate oral tablet dispersible	Tier-1	
hyoscyamine sulfate sublingual tablet sublingual	Tier-1	
lansoprazole oral capsule delayed release	Tier-2	
lansoprazole oral tablet delayed release dispersible	Tier-3	PA; ¥ (PA applies to members > 12 years); QL (90 EA per 90 days)
methscopolamine bromide oral tablet	Tier-1	
misoprostol oral tablet	Tier-1	
NEXIUM 24HR CLEAR MINIS ORAL CAPSULE DELAYED RELEASE	Tier-3	
NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE	Tier-3	
nizatidine oral capsule	Tier-2	
nizatidine oral solution	Tier-2	
omeprazole oral capsule delayed release	Tier-1	
omeprazole-sodium bicarbonate oral capsule	Tier-3	¥ (Only these two NDCs are covered: 68682-0102-30 or 68682-0104-30); QL (90 capsules per 90 days)

Drug	Status	Notes
omeprazole-sodium bicarbonate oral packet	Tier-2	PA; ¥ (PA applies to members > 12 years)
pantoprazole sodium oral packet	Tier-2	PA; ¥ (PA applies to members 12 and older); QL (90 EA per 90 days)
pantoprazole sodium oral tablet delayed release	Tier-1	
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG	Tier-3	PA; QL (90 capsules per 90 days)
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	Tier-3	PA; ¥ (PA applies to members > 12 years); QL (90 EA per 90 days)
PRILOSEC ORAL PACKET	Tier-3	PA; ¥ (PA applies to members > 12 years); QL (90 EA per 90 days)
PROTONIX ORAL TABLET DELAYED RELEASE	Tier-3	PA; QL (90 tablets per 90 days)
PYLERA ORAL CAPSULE	Tier-2	
rabeprazole sodium oral tablet delayed release	Tier-2	
sucralfate oral suspension	Tier-3	Age Limit (Max 12 Years)
sucralfate oral tablet	Tier-1	
ZEGERID ORAL CAPSULE	Tier-3	PA; QL (90 capsules per 90 days)
ZEGERID ORAL PACKET	Tier-3	PA; QL (90 packets per 90 days)
URINARY ANTISPASMODICS		
bethanechol chloride oral tablet	Tier-1	
darifenacin hydrobromide er oral tablet extended release 24 hour	Tier-2	
flavoxate hcl oral tablet	Tier-1	
GELNIQUE TRANSDERMAL GEL 10 %	Tier-3	STPA
GEMTESA ORAL TABLET	Tier-3	STPA
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	Tier-3	STPA
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	STPA
oxybutynin chloride er oral tablet extended release 24 hour	Tier-1	
oxybutynin chloride oral syrup	Tier-1	
oxybutynin chloride oral tablet	Tier-1	
solifenacain succinate oral tablet	Tier-2	
tolterodine tartrate er oral capsule extended release 24 hour	Tier-2	
tolterodine tartrate oral tablet	Tier-1	
trospium chloride er oral capsule extended release 24 hour	Tier-2	

Drug	Status	Notes
VESICARE LS ORAL SUSPENSION	Tier-3	STPA
VAGINAL AND RELATED PRODUCTS		
CLEOCIN VAGINAL SUPPOSITORY	Tier-3	
clindamycin phosphate vaginal cream	Tier-1	
CLINDESSE VAGINAL CREAM	Tier-3	
CRINONE VAGINAL GEL	Tier-3	
ENDOMETRIN VAGINAL INSERT	Tier-3	
estradiol vaginal cream	Tier-1	
estradiol vaginal tablet	Tier-1	
ESTRING VAGINAL RING	Tier-2	
FEMRING VAGINAL RING	Tier-2	
GYNAZOLE-1 VAGINAL CREAM	Tier-3	
INTRAROSA VAGINAL INSERT	Tier-3	
metronidazole vaginal gel	Tier-2	
NUVESSA VAGINAL GEL	Tier-3	
PHEXXI VAGINAL GEL	Tier-3	^ (WH)
PREMARIN VAGINAL CREAM	Tier-2	
terconazole vaginal cream	Tier-1	
terconazole vaginal suppository	Tier-2	
VANDAZOLE VAGINAL GEL	Tier-1	
VASOPRESSORS		
droxidopa oral capsule	Tier-4	PA
epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.3 mg/0.3ml	Tier-1	¥ (Generic Adrenaclick); QL (2 Injectors per 1 Fill)
epinephrine solution auto-injector 0.15 mg/0.15ml injection	Tier-1	¥ (Generic Adrenaclick); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.15 mg/0.3ml injection	Tier-2	¥ (Generic Epipen Jr); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.3 mg/0.3ml injection	Tier-1	¥ (Generic Adrenaclick); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.3 mg/0.3ml injection	Tier-2	¥ (Generic Epipen); QL (2 INJECTORS per 1 Fill)
midodrine hcl oral tablet	Tier-1	
VITAMINS		
ergocalciferol oral capsule	Tier-1	
phytonadione oral tablet	Tier-2	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	Tier-1	
vitamin d3 oral capsule 1.25 mg (50000 ut)	Tier-1	

Index

abacavir sulfate.....	36	alclometasone dipropionate.....	46	anagrelide hcl.....	61
abacavir sulfate-lamivudine.....	36	ALDURAZYME.....	55	anastrozole.....	29
abacavir-lamivudine-zidovudine	36	ALECENSA.....	29	ANGELIQ.....	58
ABILIFY MYCITE.....	35	alendronate sodium.....	55	ANNOVERA.....	43
ABILIFY MYCITE MAINTENANCE KIT.....	35	alfuzosin hcl er.....	60	ANORO ELLIPTA.....	13
ABILIFY MYCITE STARTER KIT.....	35	ALINIA.....	27	antibiotic ear.....	76
abiraterone acetate.....	29	aliskiren fumarate.....	26	apap-caff-dihydrocodeine.....	9
ABRAXANE.....	29	allopurinol.....	60	APEXICON E.....	47
acamprosate calcium.....	78	almotriptan malate.....	68	APLENZIN.....	18
acarbose.....	20	ALOCRIL.....	73	APOKYN.....	34
acebutolol hcl.....	39	alogliptin benzoate.....	20	apraclonidine hcl.....	73
acetaminophen-codeine.....	8	alogliptin-metformin hcl.....	21	aprepitant.....	24
acetaminophen-codeine #2.....	8	alogliptin-pioglitazone.....	21	APRI.....	43
acetaminophen-codeine #3.....	8	ALOMIDE.....	73	APTIOM.....	16
acetaminophen-codeine #4.....	8	ALORA.....	57	APTIVUS.....	36
ACETASOL HC.....	76	alosetron hcl.....	59	ARANELLE.....	43
acetazolamide.....	54	ALPHAGAN P.....	73	ARANESP (ALBUMIN FREE).....	63
acetazolamide er.....	54	ALPHANATE.....	61	ARCALYST.....	6
acetic acid.....	76	ALPHANINE SD.....	61	arformoterol tartrate.....	13
acetylcysteine.....	45	alprazolam.....	12	ARIKAYCE.....	6
ACIPHEX.....	83	ALPROLIX.....	61	aripiprazole.....	35
acitretin.....	46	ALREX.....	73	armodafinil.....	3
ACTEMRA.....	6	ALTABAX.....	46	ARMOUR THYROID.....	83
ACTEMRA ACTPEN.....	6	ALTRENO.....	46	ARNUNITY ELLIPTA.....	13
ACTHAR.....	55	ALUNBRIG.....	29	ASCENIV.....	77
ACTIMMUNE.....	29	amantadine hcl.....	34	aspirin-dipyridamole er.....	61
ACUVAIL.....	73	ambrisentan.....	41	ATABEX EC.....	72
acyclovir.....	36, 46	amcinonide.....	46	atazanavir sulfate.....	36
ADAKVEO.....	63	AMETHIA.....	42	atenolol.....	39
adapalene.....	46	AMETHYST.....	42	atenolol-chlorthalidone.....	26
adapalene-benzoyl peroxide.....	46	amiloride hcl.....	54	atomoxetine hcl.....	3
ADDYI.....	78	amiloride-hydrochlorothiazide....	54	atorvastatin calcium.....	25
adefovir dipivoxil.....	36	aminocaproic acid.....	66	atovaquone.....	27
ADEMPAS.....	41	amiodarone hcl.....	13	atovaquone-proguanil hcl.....	28
ADVAIR HFA.....	13	amitriptyline hcl.....	18	atropine sulfate.....	73
ADVATE.....	61	amlodipine besy-benazepril hcl..	26	ATROVENT HFA.....	13
adynovate.....	61	amlodipine besylate.....	40	AUBAGIO.....	78
AEMCOLO.....	27	amlodipine besylate-valsartan....	26	AUSTEDO.....	78
AFINITOR.....	29	amlodipine-atorvastatin.....	41	AVIANE.....	43
AFINITOR DISPERZ.....	29	amlodipine-olmesartan.....	26	AVITA.....	47
AFSTYLA.....	61	ammonium lactate.....	46, 47	AVONEX PEN.....	78
AIMOVIG.....	68	amondys 45.....	72	AVONEX PREFILLED.....	78
AJOVY.....	68	amoxapine.....	18	AVSOLA.....	59
ak-poly-bac.....	73	amoxicill-clarithro-lansopraz....	83	AYVAKIT.....	29
AKYNZEO.....	23	amoxicillin.....	78	AZASAN.....	70
ala-cort.....	46	amoxicillin-pot clavulanate.....	78	AZASITE.....	73
albendazole.....	12	amoxicillin-pot clavulanate er....	78	azathioprine.....	70
albuterol sulfate.....	13	amphetamine-dextroamphet er....	3	azathioprine sodium.....	70
albuterol sulfate hfa.....	13	amphetamine- dextroamphetamine.....	3	azelaic acid.....	47
		ampicillin.....	78	azelastine hcl.....	72, 73

azithromycin	67	benazepril hcl	26	BUPAP	8
AZURETTE	43	benazepril-hydrochlorothiazide ..	26	BUPHENYL	55
bacitracin	47, 73	BENEFIX	61	buprenorphine	9
bacitracin zinc	47	BENLYSTA	70	buprenorphine hcl	9
bacitracin-polymyxin b	47, 73	BENZEPRO	47	buprenorphine hcl-naloxone hcl ..	9
bacitra-neomycin-polymyxin-hc ..	73	BENZEPRO FOAMING		bupropion hcl	18
BACITRAYCIN PLUS	47	CLOTHS	47	bupropion hcl er (smoking det) ..	79
baclofen	72	benznidazole	12	bupropion hcl er (sr)	18
BAFIERTAM	79	benzonatate	45, 46	bupropion hcl er (xl)	18
BALCOLTRA	43	benzoyl peroxide-erythromycin ..	47	buspirone hcl	12
balsalazide disodium	59	benzphetamine hcl	3	butalbital-acetaminophen	8
BALVERSA	30	benztropine mesylate	34	butalbital-apap-caff-cod	9
BALZIVA	43	bepotastine besilate	73	butalbital-apap-caffeine	8
BAQSIMI ONE PACK	21	BERINERT	61	butalbital-asa-caff-codeine	9
BAQSIMI TWO PACK	21	BESIVANCE	73	butalbital-asa-caffeine	8
BARACLUDÉ	36	betamethasone dipropionate ..	47	butorphanol tartrate	9
BAXDELA	58	betamethasone dipropionate aug ..	47	BYLVAY	59
BD AUTOSHIELD	67	betamethasone valerate	47	BYLVAY (PELLETS)	59
BD AUTOSHIELD DUO	67	BETASERON	79	BYSTOLIC	39
BD INSULIN SYR		betaxolol hcl	39, 73	cabergoline	55
ULTRAFINE II	68	bethanechol chloride	85	CABLIVI	61
BD INSULIN SYRINGE	68	BETIMOL	73	CABOMETYX	30
BD INSULIN SYRINGE		BETOPTIC-S	73	calcipotriene	47
MICROFINE	68	bexarotene	30	calcipotriene-betameth diprop ..	47
BD INSULIN SYRINGE U/F ..	68	BEYAZ	43	calcitonin (salmon)	55
BD INSULIN SYRINGE U/F		bicalutamide	30	CALCITRENE	47
1/2UNIT	68	BIDIL	41	calcitriol	47, 55
BD INSULIN SYRINGE U-		BIKTARVY	37	calcium acetate (phos binder) ..	59
500	68	bimatoprost	47	CALQUENCE	30
BD INSULIN SYRINGE		BIONECT	47	CAMILA	43
ULTRAFINE	68	bisoprolol fumarate	39	CAMRESE	43
BD PEN NEEDLE MICRO		bisoprolol-hydrochlorothiazide ..	26	CAMRESE LO	43
U/F	68	BIVIGAM	77	candesartan cilexetil	26
BD PEN NEEDLE MINI U/F ..	68	BLEPHAMIDE	74	candesartan cilexetil-hctz	26
BD PEN NEEDLE NANO		BLEPHAMIDE S.O.P.	74	capecitabine	30
2ND GEN	68	bosentan	41	CAPEX	47
BD PEN NEEDLE NANO		BOSULIF	30	CAPLYTA	35
U/F	68	BOTOX	73	CAPRELSA	30
BD PEN NEEDLE		bp wash	47	captotril	26
ORIGINAL U/F	68	BRAFTOVI	30	CARBAGLU	55
BD PEN NEEDLE SHORT		BREO ELLIPTA	13	carbamazepine	16
U/F	68	BRILINTA	61	carbamazepine er	16
BD SAFETYGLIDE		brimonidine tartrate	74	carbidopa	34
INSULIN SYRINGE	68	brinzolamide	74	carbidopa-levodopa	34
BD SAFETY-LOK INSULIN		BRIVIACT	16	carbidopa-levodopa er	34
SYRINGE	68	bromfenac sodium (once-daily) ..	74	carbidopa-levodopa-entacapone ..	34
BD VEO INSULIN SYR U/F		bromocriptine mesylate	34	carisoprodol	72
1/2UNIT	68	BRONCHITOL	82	carisoprodol-aspirin-codeine ..	72
BD VEO INSULIN SYRINGE		BRUKINSA	30	carteolol hcl	74
U/F	68	budesonide	14, 72	CARTIA XT	40
BELBUCA	9	budesonide er	45	carvedilol	39
BELSOMRA	66	bumetanide	54	carvedilol phosphate er	39

CAVERJECT	41	CLIMARA PRO	58	COSELA	30
CAYSTON	27	CLINDACIN-P	48	COSENTYX	48
cefaclor	42	clindamycin hcl	27	COSENTYX (300 MG DOSE)	48
cefaclor er	42	clindamycin palmitate hcl	27	COSENTYX SENSOREADY (300 MG)	48
cefadroxil	42	clindamycin phos-benzoyl	48	COSENTYX SENSOREADY PEN	48
cefdinir	42	perox	48	COTELLIC	30
cefixime	42	clindamycin phosphate	48, 86	CREON	53
cefpodoxime proxetil	42	CLINDESSE	86	CRESEMBA	24
cefprozil	42	clobazam	16	CRINONE	86
cefuroxime axetil	42	clobetasol prop emollient base	48	CRIXIVAN	37
celecoxib	6	clobetasol propionate	48	cromolyn sodium	14, 59, 74
CELONTIN	16	clobetasol propionate e	48	CROTAN	48
cephalexin	42	clobetasol propionate emulsion	48	CRYSELLE-28	43
CEQUA	74	clorcortolone pivalate	48	CRYSVITA	55
CERDELGA	63	clomiphene citrate	55	CUTAQUIG	77
CEREZYME	63	clomipramine hcl	19	CUVITRU	77
CETROTIDE	55	clonazepam	16	cvs nicotine	79
cevimeline hcl	71	clonidine hcl	26	cvs nicotine polacrilex	79
CHEMET	23	clonidine hcl er	3	cvs omeprazole-sod bicarbonate	83
chlordiazepoxide hcl	12	clopidogrel bisulfate	61	cyanocobalamin	63
chlordiazepoxide-amitriptyline	79	clorazepate dipotassium	12	CYCLAFEM 1/35	43
chlordiazepoxide-clidinium	83	clotrimazole	71	CYCLAFEM 7/7/7	43
chlorhexidine gluconate	71	clotrimazole-betamethasone	48	cyclobenzaprine hcl	72
chloroquine phosphate	28	clozapine	35	cyclopentolate hcl	74
chlorpromazine hcl	35	COAGADEX	61	cyclophosphamide	30
chlorthalidone	54	COARTEM	28	cycloserine	29
chlorzoxazone	72	codeine sulfate	9	CYCLOSET	21
CHOLBAM	59	coditussin ac	46	cyclosporine	70
chorionic gonadotropin	55	coditussin dac	46	cyclosporine modified	70
ciclopirox	47	coenzyme q10	6	cyproheptadine hcl	24
ciclopirox olamine	48	colchicine	60	CYSTADANE	55
cilostazol	61	colchicine-probenecid	60	CYSTADROPS	74
CILOXAN	74	colesevelam hcl	25	CYSTAGON	60
CIMDUO	37	colestipol hcl	25	CYSTARAN	74
cimetidine	83	COMBIGAN	74	CYTOGAM	77
cimetidine hcl	83	COMBIPATCH	58	dalfampridine er	79
CIMZIA	59	COMBIVENT RESPIMAT	14	DALIRESP	14
CIMZIA PREFILLED	59	COMETRIQ (100 MG DAILY DOSE)	30	danazol	11
CIMZIA STARTER KIT	59	COMETRIQ (140 MG DAILY DOSE)	30	dantrolene sodium	72
cinacalcet hcl	55	COMETRIQ (60 MG DAILY DOSE)	30	dapsone	27, 49
CINQAIR	14	CONSTUILOSE	66	darifenacin hydrobromide er	85
CINRYZE	61	CONTRAVE	3	DAURISMO	30
CIPRO HC	76	COPAXONE	79	DAYTRANA	3
ciprofloxacin hcl	58, 74, 76	COPIKTRA	30	DAYVIGO	66
ciprofloxacin-dexamethasone	76	CORDRAN	48	deferasirox	23
citalopram hydrobromide	19	CORIFACT	61	deferasirox granules	23
CLARAVIS	48	CORLANOR	41	DElestrogen	58
clarithromycin	67	CORTISPORIN-TC	76	DELSTRIGO	37
clarithromycin er	67			demeclercycline hcl	82
clemastine fumarate	24			DENAVIR	49
CLENPIQ	66				
CLEOCIN	86				

DESCOVERY	37	divalproex sodium er	16	EMFLAZA	45
desipramine hcl	19	DIVIGEL	58	EMGALITY	69
desloratadine	24	dofetilide	13	EMGALITY (300 MG DOSE)	69
desmopressin ace spray refrig	55	DOJOLVI	73	EMPAVELL	61
desmopressin acetate	55	donepezil hcl	79	EMSAM	19
desonide	49	DOPTELET	63	emtricitabine	37
desoximetasone	49	dorzolamide hcl	74	emtricitabine-tenofovir df	37
desvenlafaxine er	19	dorzolamide hcl-timolol mal	74	EMTRIVA	37
desvenlafaxine succinate er	19	DOVATO	37	EMVERM	12
dexamethasone	45	doxazosin mesylate	26	enalapril maleate	26
dexamethasone sodium phosphate	74	doxepin hcl	19, 49	enalapril-hydrochlorothiazide	26
DEXILANT	84	doxercalciferol	55	ENBREL	6
dexamethylphenidate hcl	3	doxycycline hyclate	82	ENBREL MINI	6
dexamethylphenidate hcl er	3	doxycycline monohydrate	82	ENBREL SURECLICK	6
dextroamphetamine sulfate	3	DRIZALMA SPRINKLE	19	ENDARI	63
dextroamphetamine sulfate er	3	dronabinol	24	ENDOMETRIN	86
DIACOMIT	16	drospiren-eth estrad-levomefol	43	enoxaparin sodium	15
DIASTAT ACUDIAL	16	drospirenone-ethinyl estradiol	43	ENPRESSE-28	43
DIASTAT PEDIATRIC	16	DROXIA	63	entacapone	34
diazepam	12, 16	droxidopa	86	entecavir	37
diazoxide	21	DRYSOL	49	ENTRESTO	41
diclofenac potassium	6	DUAVEE	58	ENTYVIO	59
diclofenac sodium	6, 74	duloxetine hcl	19	enulose	59
diclofenac sodium er	6	DUOPA	34	EPCLUSA	37
diclofenac-misoprostol	6	DUPIXENT	49	EPIDIOLEX	16
dicloxacillin sodium	78	dutasteride	60	epinastine hcl	74
dicyclomine hcl	84	dutasteride-tamsulosin hcl	60	epinephrine	86
diethylpropion hcl	3	DUTOPROL	26	EPISIL	71
DIFFERIN	49	DYANAVEL XR	4	EPITOL	16
DIFICID	67	DYSPORT	73	EPIVIR HBV	37
diflorasone diacetate	49	E.E.S. 400	67	eplerenone	26
diflunisal	8	econazole nitrate	49	EPOGEN	64
difluprednate	74	EDEX	41	epoprostenol sodium	41
digoxin	41	ed-spaz	84	eq nicotine	79
dihydroergotamine mesylate	68	EDURANT	37	eq nicotine polacrilex	79
DILANTIN	16	efavirenz	37	eq nicotine step 3	79
diltiazem hcl	40	efavirenz-emtricitab-tenofovir	37	eql nicotine polacrilex	79
diltiazem hcl er	40	efavirenz-lamivudine-tenofovir	37	EQUETRO	35
diltiazem hcl er beads	40	EFFER-K	70	ergocalciferol	86
diltiazem hcl er coated beads	40	ELAPRASE	55	ergoloid mesylates	79
dilt-xr	40	ELELYSO	63	ERGOMAR	69
dimethyl fumarate	79	ELESTRIN	58	ergotamine-caffeine	69
dimethyl fumarate starter pack	79	ELETONE	49	ERIVEDGE	30
DIPENTUM	59	eletriptan hydrobromide	68	erlotinib hcl	30
diphenhydramine hcl	24	ELIQUIS	15	ERRIN	43
diphenoxylate-atropine	23	ELIXOPHYLLIN	14	ERTACZO	49
dipyridamole	61	ELLA	43	ery	49
disopyramide phosphate	13	ELMIRON	60	ERYPED 200	67
disulfiram	79	ELOCTATE	61	ERY-TAB	67
DIURIL	54	ELURYNG	43	ERYTHROCIN STEARATE	67
divalproex sodium	16	EMCYT	30	erythromycin	49, 74
		EMEND	24	erythromycin base	67

erythromycin ethylsuccinate	67	fenoprofen calcium	6	FOTIVDA	30
erythromycin stearate	67	fentanyl	9	FRAGMIN	16
ESBRIET	82	fentanyl citrate	9	FRESHKOTE	74
escitalopram oxalate	19	FERRALET 90	64	frovatriptan succinate	69
ESGIC	8	FERRIPROX	23	FULPHILA	64
esomeprazole magnesium	84	FINACEA	49	furosemide	54
ESPEROCT	61	finasteride	60	FUSION PLUS	64
estazolam	66	FINTEPLA	17	FUZEON	37
estradiol	58, 86	FIRDAPSE	29	FYCOMPA	17
estradiol-norethindrone acet	58	FIRST-LANSOPRAZOLE	84	gabapentin	17
ESTRING	86	FIRST-OMEPRAZOLE	84	GALAFOLD	55
ESTROGEL	58	FIRVANQ	27	galantamine hydrobromide	79
ESTROSTEP FE	43	FLAREX	74	galantamine hydrobromide er	79
eszopiclone	66	flavoxate hcl	85	GALZIN	70
ethacrynic acid	54	FLEBOGAMMA DIF	77	GAMMAGARD	77
ethambutol hcl	29	flecainide acetate	13	GAMMAGARD S/D LESS	
ethosuximide	17	FLOLAN	41	IGA	77
ethynodiol diac-eth estradiol	43	FLOVENT DISKUS	14	GAMMAKED	77
etodolac	6	FLOVENT HFA	14	GAMMAPLEX	77
etodolac er	6	fluconazole	24	GAMUNEX-C	77
etonogestrel-ethinyl estradiol	43	flucytosine	24	gatifloxacin	74
etoposide	30	fludrocortisone acetate	45	GATTEX	59
EUCRISA	49	flunisolide	72	GAVILYTE-C	66
EUFLEXXA	72	fluocinolone acetonide	49, 76	GAVILYTE-G	66
EVAMIST	58	fluocinolone acetonide body	49	GAVRETO	30
EVENITY	55	fluocinolone acetonide scalp	49	GELCLAIR	71
everolimus	30, 70	fluocinonide	49, 50	GELNIQUE	85
EVKEEZA	25	fluorometholone	74	gemfibrozil	25
EVOTAZ	37	FLUOROPLEX	50	GEMTESA	85
EVRYSDI	73	fluorouracil	50	GENERESS FE	43
EXELDERM	49	fluoxetine hcl	19	generlac	59
exemestane	30	fluoxetine hcl (pmdd)	79	GENTAK	74
EXONDYS 51	73	fluphenazine hcl	35	gentamicin sulfate	50, 74
EXSERVAN	73	flurandrenolide	50	GENVOYA	37
ezetimibe	25	flurazepam hcl	66	GILENYA	79
ezetimibe-simvastatin	25	flurbiprofen	6	GILOTrif	30
FABIOR	49	flurbiprofen sodium	74	GIVLAARI	61
FABRAZYME	55	flutamide	30	GLEOSTINE	30
famciclovir	37	fluticasone propionate	50, 72	glimepiride	21
famotidine	84	fluticasone-salmeterol	14	glipizide	21
FARXIGA	21	fluvastatin sodium	25	glipizide er	21
FARYDAK	30	fluvastatin sodium er	25	glipizide xl	21
FASENRA	14	fluvoxamine maleate	19	glipizide-metformin hcl	21
FASENRA PEN	14	FML	74	GLUCAGEN HYPOKIT	21
FAYOSIM	43	FML FORTE	74	glucagon emergency	21
febuxostat	60	folic acid	64	glyburide	21
felbamate	17	FOLLISTIM AQ	55	glyburide micronized	21
felodipine er	40	fondaparinux sodium	15	glyburide-metformin	21
FEMRING	86	fosamprenavir calcium	37	glycopyrrolate	84
fenofibrate	25	fosfomycin tromethamine	27	GLYXAMBI	21
fenofibrate micronized	25	fosinopril sodium	26	gnp nicotine mini	79
fenofibric acid	25	fosinopril sodium-hctz	26	gnp nicotine polacrilex	79

GOLYTELY	66	HUMULIN R U-500 (CONCENTRATED)	22	INREBIC	31
GONAL-F	55	HYCAMTIN	30	INTEGRA F	64
GONAL-F RFF	55	hydralazine hcl	26	INTEGRA PLUS	64
granisetron hcl	24	hydrochlorothiazide	54	INTELENCE	37
GRANIX	64	hydrocod polst-cpm polst er	46	INTRAROSA	86
GRASTEK	5	hydrocodone bitartrate er	9	INTRON A	31
griseofulvin microsize	24	hydrocodone-acetaminophen	9	INVELTYS	74
griseofulvin ultramicrosize	24	hydrocodone-homatropine	46	INVIRASE	37
guaiacussin ac	46	hydrocodone-ibuprofen	9	IOPIDINE	74
guaifenesin ac	46	hydrocortisone	11, 45, 50	ipratropium bromide	14, 72
guaifenesin-codeine	46	hydrocortisone butyryl lipo base	50	ipratropium-albuterol	14
guanfacine hcl	26	hydrocortisone butyrate	50	irbesartan	26
guanfacine hcl er	4	hydrocortisone valerate	50	irbesartan-hydrochlorothiazide	26
GYNAZOLE-1	86	hydrocortisone-acetic acid	76	IRESSA	31
HAEGARDA	62	hydromet	46	IROSPAN 24/6	64
halcinonide	50	hydromorphone hcl	9, 10	ISENTRESS	37
halobetasol propionate	50	hydroxychloroquine sulfate	28	ISENTRESS HD	37
HALOG	50	hydroxyurea	30	isoniazid	29
haloperidol	35	hydroxyzine hcl	12	ISORDIL TITRADOSE	12
haloperidol lactate	35	hydroxyzine pamoate	12	isosorbide dinitrate	12
HARVONI	37	hyoscyamine sulfate	84	isosorbide mononitrate	12
HEMLIBRA	62	hyoscyamine sulfate er	84	isosorbide mononitrate er	12
HEMOFIL M	62	HYQVIA	77	isradipine	40
heparin sodium (porcine)	16	ibandronate sodium	55	ISTURISA	55
HETLIOZ	66	IBRANCE	30	itraconazole	24
HETLIOZ LQ	66	ibuprofen	7	ivermectin	12
HIZENTRA	77	icatibant acetate	62	IXINITY	62
hm nicotine	80	ICLUSIG	30	JADENU SPRINKLE	23
hm nicotine polacrilex	79	IDELVION	62	JAKAFI	31
HORIZANT	80	IDHIFA	31	JANTOVEN	16
HUMALOG	21	ILEVRO	74	JANUMET	22
HUMALOG KWIKPEN	21	ILUMYA	50	JANUMET XR	22
HUMALOG MIX 50/50	21	imatinib mesylate	31	JANUVIA	22
HUMALOG MIX 50/50		IMBRUVICA	31	JARDIANC	22
KWIKPEN	21	IMCIVREE	4	JATENZO	11
HUMALOG MIX 75/25	21	imipramine hcl	19	JINTELI	58
HUMALOG MIX 75/25		imipramine pamoate	19	JIVI	62
KWIKPEN	21	imiquimod	50	JOLESSA	43
HUMATE-P	62	imiquimod pump	50	JULUCA	37
HUMIRA	7	IMPAVIDO	28	JUNEL 1.5/30	43
HUMIRA PEDIATRIC		INBRIJA	34	JUNEL 1/20	43
CROHNS START	7	INCRELEX	55	JUNEL FE 1.5/30	43
HUMIRA PEN	7	indapamide	54	JUNEL FE 1/20	43
HUMIRA PEN-CD/UC/HS		INDOCIN	7	JUXTAPIID	25
STARTER	7	indomethacin	7	JYNARQUE	55
HUMIRA PEN-PS/UV/ADOL		indomethacin er	7	KALYDECO	82
HS START	7	INFLECTRA	59	KANUMA	55
HUMIRA PEN-PSOR/UVEIT		INGREZZA	80	KARIVA	43
STARTER	7	INLYTA	31	KELNOR 1/35	43
HUMULIN 70/30	21	INNOPRAN XL	39	KELNOR 1/50	43
HUMULIN N	21	INQOVI	31	KERALYT	50
HUMULIN R	22			KERENDIA	56

KESIMPTA	80	LENVIMA (4 MG DAILY DOSE).....	31	loteprednol etabonate	75
ketoconazole	24, 50	LENVIMA (8 MG DAILY DOSE).....	31	lovastatin	25
ketorolac tromethamine	7, 74	LESSINA	43	LOW-OGESTREL	44
KEVEYIS	54	letrozole	31	loxapine succinate	36
KEVZARA	7	leucovorin calcium	31	lubiprostone	59
KINERET	7	LEUKERAN	31	LUCEMYRA	80
KLOR-CON	70	LEUKINE	64	luliconazole	51
KLOR-CON 10	70	leuprolide acetate	31	LUMAKRAS	31
KLOR-CON M10	70	levalbuterol hcl	14	LUMIGAN	75
KLOR-CON M15	70	levalbuterol tartrate	14	LUMIZYME	56
KLOR-CON M20	70	levetiracetam	17	LUPKYNIS	71
KOATE-DVI	62	levetiracetam er	17	LUTERA	44
KOGENATE FS	62	levobunolol hcl	75	LYNPARZA	31
KORLYM	22	levocarnitine	56	LYSODREN	31
KOSELUGO	31	levofloxacin	58, 75	MACRODANTIN	28
KOVALTRY	62	LEVORA 0.15/30 (28).....	43	mafenide acetate	51
KRINTAFEL	28	levothyroxine sodium	83	malathion	51
KRISTALOSE	67	LEVOXYL	83	MAR-COF CG	
KRYSTEXXA	60	LEXIVA	38	EXPECTORANT	46
labetalol hcl	39	lidocaine	51	MARPLAN	19
LACRISERT	74	lidocaine hcl	71	MATULANE	32
lactulose	67	lidocaine pain relief	51	MATZIM LA	40
lamivudine	37	lidocaine-prilocaine	51	MAVENCLAD (10 TABS)	80
lamivudine-zidovudine	38	lidocaine-tetracaine	51	MAVENCLAD (4 TABS)	80
lamotrigine	17	lindane	51	MAVENCLAD (5 TABS)	80
lamotrigine er	17	linezolid	28	MAVENCLAD (6 TABS)	80
lamotrigine starter kit-blue	17	LINZESS	59	MAVENCLAD (7 TABS)	80
lamotrigine starter kit-green	17	liothyronine sodium	83	MAVENCLAD (8 TABS)	80
lamotrigine starter kit-orange	17	lisinopril	26	MAVENCLAD (9 TABS)	80
LAMPIT	28	lisinopril-hydrochlorothiazide	26	MAXIDEX	75
LANOXIN	41	lithium carbonate	35	MAYZENT	80
lansoprazole	84	lithium carbonate er	35	MAYZENT STARTER PACK ..	80
lanthanum carbonate	59	l-methylfolate	53	meclizine hcl	24
LANTUS	22	LO LOESTRIN FE	43	meclofenamate sodium	7
LANTUS SOLOSTAR	22	LOESTRIN 1.5/30 (21).....	43	MEDROL	45
lapatinib ditosylate	31	LOESTRIN 1/20 (21).....	44	medroxyprogesterone acetate	78
LASTACAFT	75	LOESTRIN FE 1.5/30	44	mefenamic acid	7
latanoprost	75	LOESTRIN FE 1/20	44	mefloquine hcl	28
LATUDA	35	LOKELMA	70	megestrol acetate	32, 78
leflunomide	7	LOMAIRA	4	MEKINIST	32
LENVIMA (10 MG DAILY DOSE).....	31	LONSURF	31	MEKTOVI	32
LENVIMA (12 MG DAILY DOSE).....	31	loperamide hcl	23	meloxicam	7
LENVIMA (14 MG DAILY DOSE).....	31	lopinavir-ritonavir	38	melphalan	32
LENVIMA (18 MG DAILY DOSE).....	31	lorazepam	12	memantine hcl	80
LENVIMA (20 MG DAILY DOSE).....	31	LORAZEPAM INTENSOL	12	memantine hcl er	80
LENVIMA (24 MG DAILY DOSE).....	31	LORBRENA	31	MENEST	58
		losartan potassium	26	MENOPUR	56
		losartan potassium-hctz	26	MENOSTAR	58
		LOSEASONIQUE	44	MENTAX	51
		LOTEMAX	75	meperidine hcl	10
				meprobamate	12
				mercaptopurine	32

mesalamine	59	MIRCERA	64	NEBUPENT	28
mesalamine er	59	MIRCETTE	44	NECON 0.5/35 (28)	44
MESNEX	32	mirtazapine	19	NECON 1/35 (28)	44
metaxalone	72	misoprostol	84	NEEVO DHA	72
metformin hcl	22	modafinil	4	nefazodone hcl	19
metformin hcl er	22	moexipril hcl	27	neomycin sulfate	6
metformin hcl er (mod)	22	mometasone furoate	51, 72	neomycin-bacitracin zn-	
metformin hcl er (osm)	22	MONONINE	62	polymyx	75
methadone hcl	10	montelukast sodium	14	neomycin-polymyxin-dexameth. 75	
METHADONE HCL		morphine sulfate	10	neomycin-polymyxin-	
INTENSOL	10	morphine sulfate (concentrate) ...	10	gramicidin	75
METHADOSE	10	morphine sulfate er	10	neomycin-polymyxin-hc	75, 77
methamphetamine hcl	4	morphine sulfate er beads	10	NEO-POLYCIN	75
methazolamide	54	MOTOFEN	23	NEO-POLYCIN HC	75
methenamine hippurate	28	MOVANTIK	59	NERLYNX	32
methimazole	83	moxifloxacin hcl	58, 75	NEULASTA	64
methitest	11	moxifloxacin hcl (2x day)	75	NEUPOGEN	64, 65
methocarbamol	72	MULPLETA	64	NEUPRO	35
methotrexate	32	MULTAQ	13	NEVANAC	75
methoxsalen rapid	51	mupirocin	51	nevirapine	38
methscopolamine bromide	84	mupirocin calcium	51	nevirapine er	38
methyldopa	27	MUSE	41	NEXAVAR	32
methylergonovine maleate	77	MYALEPT	56	NEXIUM 24HR	84
methylphenidate hcl	4	MYCAPSSA	56	NEXIUM 24HR CLEAR	
methylphenidate hcl er	4	mycophenolate mofetil	71	MINIS	84
methylphenidate hcl er (cd)	4	mycophenolate sodium	71	NEXTSTELLIS	44
methylphenidate hcl er (la)	4	MYFEMBREE	58	NEXVIAZYME	56
methylprednisolone	45	MYFORTIC	71	niacin er (antihyperlipidemic)	25
metoclopramide hcl	59	MYLERAN	32	NIACOR	25
metolazone	54	MYOBLOC	73	nicardipine hcl	40
metoprolol succinate er	39	MYRBETRIQ	85	nicotine	80
metoprolol tartrate	39	MYTESI	23	nicotine mini	80
metoprolol-hydrochlorothiazide	27	nabumetone	7	nicotine polacrilex	80
metronidazole	28, 51, 86	nadolol	39	nicotine step 1	80
metyrosine	27	naftifine hcl	51	nicotine step 2	80
mexiletine hcl	13	NAFTIN	51	nicotine step 3	80
MIACALCIN	56	NAGLAZYME	56	NICOTROL	80
MICROGESTIN 1.5/30	44	naloxone hcl	23	NICOTROL NS	80
MICROGESTIN 1/20	44	naltrexone hcl	23	nifedipine	40
MICROGESTIN FE 1.5/30	44	naproxen	7	nifedipine er	40
MICROGESTIN FE 1/20	44	naproxen sodium	7	nifedipine er osmotic release	40
midodrine hcl	86	naratriptan hcl	69	nilutamide	32
MIGERGOT	69	NARCAN	23	nimodipine	40
miglitol	22	NASCOBAL	64	NINLARO	32
miglustat	64	NATACYN	75	nisoldipine er	40
MIGRANAL	69	NATAZIA	44	nitisinone	56
MILLIPRED	45	nateglinide	22	NITRO-BID	12
MIMVEY	58	NATPARA	56	NITRO-DUR	12
MINASTRIN 24 FE	44	NATROBA	51	nitrofurantoin	28
minocycline hcl	83	NATURE-THROID	83	nitrofurantoin macrocrystal	28
minocycline hcl er	83	NAYZILAM	17	nitrofurantoin monohyd macro	28
minoxidil	27	nebivolol hcl	39	nitroglycerin	12

nitroglycerin er.....	12	olopatadine hcl.....	72, 75	oxymorphone hcl er.....	11
NITYR.....	56	OLUMIANT.....	7	OZEMPIC (0.25 OR 0.5	
NIVESTYM.....	65	omega-3-acid ethyl esters.....	25	MG/DOSE).....	22
nizatidine.....	84	omeprazole.....	84	OZEMPIC (1 MG/DOSE).....	22
NORA-BE.....	44	omeprazole-sodium bicarbonate	84, 85	OZOBAX.....	72
NORDITROPIN FLEXPRO.....	56	OMNIPOD DASH 5 PACK		PACERONE	13
norethrin ace-eth estrad-fe.....	44	PODS	68	PACERONE.....	13
norethindrone acetate.....	78	ondansetron.....	24	PALFORZIA (12 MG DAILY DOSE).....	5
norethindrone-eth estradiol.....	58	ondansetron hcl.....	24	PALFORZIA (120 MG DAILY DOSE).....	5
noreth-in-eth estradiol-fe.....	44	ONETOUCH ULTRA	53	PALFORZIA (160 MG DAILY DOSE).....	5
NORPACE CR.....	13	ONETOUCH VERIO	53	PALFORZIA (20 MG DAILY DOSE).....	5
NORTREL 1/35 (21).....	44	ONGENTYS.....	35	PALFORZIA (200 MG DAILY DOSE).....	5
NORTREL 1/35 (28).....	44	ONPATTRO.....	81	PALFORZIA (240 MG DAILY DOSE).....	5
NORTREL 7/7/7.....	44	ONZETRA XSAIL.....	69	PALFORZIA (3 MG DAILY DOSE).....	5
nortriptyline hcl.....	20	OPSUMIT.....	41	PALFORZIA (300 MG MAINTENANCE).....	5
NORVIR	38	ORALAIR.....	5	PALFORZIA (300 MG TITRATION).....	5
NOURIANZ.....	35	ORALONE.....	71	PALFORZIA (40 MG DAILY DOSE).....	5
NOVAREL.....	56	ORENCIA.....	7, 8	PALFORZIA (6 MG DAILY DOSE).....	5
NOVOEIGHT.....	62	ORENCIA CLICKJECT.....	7	PALFORZIA (80 MG DAILY DOSE).....	5
NOVOSEVEN RT.....	62	ORENITRAM.....	41	PALFORZIA INITIAL ESCALATION).....	5
NOXAFIL.....	24	ORFADIN.....	56	paliperidone er.....	36
NUCALA.....	14	ORGOVYX.....	32	PALYNZIQ.....	56, 57
NUCORT.....	51	ORIAHNN.....	58	PANCREAZE.....	54
NUEDEXTA	81	ORILISSA.....	56	PANDEL.....	51
NULIBRY.....	56	ORKAMBI.....	82	PANRETIN.....	52
NUMOISYN.....	71	ORLADEYO.....	62	pantoprazole sodium.....	85
NUPLAZID.....	36	orphenadrine citrate er.....	72	PANZYGA.....	77
NURTEC	69	ORSYTHIA.....	44	paricalcitol.....	57
NUVARING.....	44	ORTHO TRI-CYCLEN LO.....	44	paromomycin sulfate.....	6
NUVESSA.....	86	oseltamivir phosphate.....	38	paroxetine hcl.....	20
NUWIQ.....	62	OSMOPREP.....	67	paroxetine hcl er.....	20
NUZYRA.....	83	OSPHENA.....	56	paroxetine mesylate.....	81
NYMALIZE.....	40	OTEZLA.....	8	PASER.....	29
nystatin.....	24, 51, 71	OVIDREL.....	56	peg-3350/electrolytes.....	67
nystatin-triamcinolone.....	51	oxandrolone.....	11	peg-3350/electrolytes/ascorbat...	67
NYSTOP.....	51	oxaprozin.....	8	PEGASYS.....	38
NYVEPRIA.....	65	oxazepam.....	13	peg-kcl-nacl-nasulf-na asc-c.....	67
obizur.....	62	OXBRYTA.....	65	PEMAZYRE.....	32
OCALIVA.....	59	oxcarbazepine.....	17	penicillamine.....	71
OCELLA.....	44	OXERVATE.....	75		
OCTAGAM.....	77	oxiconazole nitrate.....	51		
octreotide acetate.....	56	OXISTAT	51		
ODACTRA.....	5	OXLUMO.....	60		
ODEFSEY	38	OXTELLAR XR.....	17		
ODOMZO.....	32	oxybutynin chloride.....	85		
OFEV.....	82	oxybutynin chloride er.....	85		
ofloxacin.....	58, 75, 77	oxycodone hcl.....	10		
olanzapine.....	36	oxycodone hcl er.....	10		
olanzapine-fluoxetine hcl.....	81	oxycodone-acetaminophen.....	11		
olmesartan medoxomil.....	27	OXYCONTIN	11		
olmesartan medoxomil-hctz.....	27	oxymorphone hcl.....	11		
olmesartan-amlodipine-hctz.....	27				

penicillin v potassium	78	PR BENZOYL PEROXIDE	
PENTASA	60	WASH	52
pentazocine-naloxone hcl	11	pramipexole dihydrochloride	35
pentoxifylline er	62	pramipexole dihydrochloride er	35
PERFOROMIST	14	prasugrel hcl	62
perindopril erbumine	27	pravastatin sodium	25
PERIOGARD	71	praziquantel	12
permethrin	52	prazosin hcl	27
perphenazine	36	PRED MILD	75
perphenazine-amitriptyline	81	PRED-G	75
PERTZYE	54	PRED-G S.O.P.	75
PEXEVA	20	prednicarbate	52
phendimetrazine tartrate	4	prednisolone	45
phenelzine sulfate	20	prednisolone acetate	75
phenobarbital	66	prednisolone sodium phosphate	
phenoxybenzamine hcl	27	45, 75
phentermine hcl	4	prednisone	45
phenytoin	17	PREDNISONE INTENSOL	45
phenytoin sodium extended	17	PREFEST	58
PHESGO	32	pregabalin	17
PHEXXI	86	PREGNYL	57
phytonadione	86	PREMARIN	58
PIFELTRO	38	PREMARIN	86
pilocarpine hcl	71, 75	PREMPHASE	58
pimecrolimus	52	PREMPRO	58
pimozide	81	prenatal plus iron	72
pindolol	39	pretomanid	29
pioglitazone hcl	22	PREVACID	85
pioglitazone hcl-glimepiride	22	PREVACID SOLUTAB	85
pioglitazone hcl-metformin hcl	22	PREVALITE	25
PIQRAY (200 MG DAILY DOSE)	32	PREVIFEM	44
PIQRAY (250 MG DAILY DOSE)	32	PREVYMIS	38
PIQRAY (300 MG DAILY DOSE)	32	PREZCOBIX	38
piroxicam	8	PREZISTA	38
PLAN B ONE-STEP	44	PRIFTIN	29
PLEGRIDY	81	PRILOSEC	85
PLEGRIDY STARTER PACK	81	primaquine phosphate	29
PLENVU	67	primidone	17
pnv-dha+docusate	72	PRIMSOL	28
podofilox	52	PRIVIGEN	78
POLYCIN	75	probenecid	60
POMALYST	32	prochlorperazine	36
PORTIA-28	44	prochlorperazine maleate	36
posaconazole	24	PROCRIT	65
potassium chloride	70	PROFILNINE	62
potassium chloride crys er	70	progesterone	78
potassium chloride er	70	PROGRAF	71
potassium citrate er	60	PROLATE	11
		PROLENSA	75
		PROLEUKIN	32
		PROLIA	57
		PROMACTA	65
		promethazine hcl	25
		promethazine vc/codeine	46
		promethazine-codeine	46
		promethazine-dm	46
		PROMETHEGAN	25
		propafenone hcl	13
		propafenone hcl er	13
		proparacaine hcl	76
		propranolol hcl	40
		propranolol hcl er	40
		propylthiouracil	83
		PROTONIX	85
		protriptyline hcl	20
		PULMICORT FLEXHALER	14
		PULMOZYME	82
		PURIXAN	32
		PYLERA	85
		pyrazinamide	29
		pyridostigmine bromide	29
		pyridostigmine bromide er	29
		QBREXZA	52
		QELBREE	4, 5
		QINLOCK	32
		QSYMIA	5
		QUARTETTE	44
		quetiapine fumarate	36
		quetiapine fumarate er	36
		quinapril hcl	27
		quinapril-hydrochlorothiazide	27
		quinidine gluconate er	13
		quinidine sulfate	13
		quinine sulfate	29
		ra mini nicotine	81
		ra nicotine	81
		ra nicotine polacrilex	81
		rabeprazole sodium	85
		RADICAVA	73
		RAGWITEK	5
		raloxifene hcl	57
		ramelteon	66
		ramipril	27
		ranolazine er	12
		RAPAMUNE	71
		rasagiline mesylate	35
		RASUVO	8
		RAVICTI	57
		REBIF	81
		REBIF REBIDOSE	81
		REBIF REBIDOSE	
		TITRATION PACK	81
		REBIF TITRATION PACK	81
		REBINYN	62

REBLOZYL	65	RYDAPT	32	SOTYLIZE	40
RECLIPSEN	44	SAFYRAL	44	spinosad	52
RECOMBINATE	62	SAJAZIR	63	SPINRAZA	73
RECTIV	12	salicylic acid	52	SPIRIVA HANDIHALER	15
REGRANEX	52	SANCUSO	24	SPIRIVA RESPIMAT	15
RELENZA DISKHALER	38	SANTYL	52	spironolactone	54
REMICADE	60	SAPHNELO	71	spironolactone-hctz	54
REMODULIN	41	sapropterin dihydrochloride	57	SPRAVATO (56 MG DOSE)	20
RENFLEXIS	60	SAVELLA	81	SPRAVATO (84 MG DOSE)	20
repaglinide	22	SAXENDA	5	SPRINTEC 28	44
REPATHA	26	SCENESSE	52	SPRYCEL	32
REPATHA PUSHTRONEX SYSTEM	25	scopolamine	24	SSD	52
REPATHA SURECLICK	26	SEASONIQUE	44	SSD (SILVER	
RESTASIS	76	SECUADO	36	SULFADIAZINE)	52
RETACRIT	65	SELECT-OB+DHA	72	SSKI	46
RETEVMO	32	selegiline hcl	35	stavudine	38
REVLIMID	71	selenium sulfide	52	STELARA	52, 60
REXULTI	36	SELZENTRY	38	STIMATE	57
REYATAZ	38	SEREVENT DISKUS	15	STIOLTO RESPIMAT	15
REYVOW	69	SEROSTIM	57	STIVARGA	32
REZUROCK	71	sertraline hcl	20	STRENSIQ	57
RHOPRESSA	76	sevelamer carbonate	60	STRIBILD	38
RIABNI	32	SFROWASA	60	STRIVERDI RESPIMAT	15
RIASTAP	63	SIGNIFOR	57	SUBSYS	11
ribavirin	38	SIGNIFOR LAR	57	SUCRAID	54
rifabutin	29	SIKLOS	65	sucralfate	85
rifampin	29	sildenafil citrate	41	sulfacetamide sodium	76
riluzole	73	SILIQ	52	sulfacetamide-prednisolone	76
rimantadine hcl	38	silver sulfadiazine	52	sulfadiazine	82
RINVOQ	8	SILVRSTAT WOUND		sulfamethoxazole-trimethoprim	28
risedronate sodium	57	DRESSING	52	SULFAMYLYON	52
risperidone	36	SIMBRINZA	76	sulfasalazine	60
ritonavir	38	SIMPONI	8	sulindac	8
RITUXAN	32	SIMPONI ARIA	8	sumatriptan	69
rivastigmine	81	simvastatin	26	sumatriptan succinate	69
rivastigmine tartrate	81	sirolimus	71	sumatriptan succinate refill	69
rixubis	63	SIRTURO	29	sumatriptan-naproxen sodium	69
rizatriptan benzoate	69	SIVEXTRO	28	SUNOSI	5
ROCKLATAN	76	SKYRIZI	52	SUPRAX	42
ropinirole hcl	35	SKYRIZI (150 MG DOSE)	52	SUPREP BOWEL PREP KIT	67
ropinirole hcl er	35	SKYRIZI PEN	52	SUTAB	67
ROSADAN	52	SLYND	44	SUTENT	33
rosuvastatin calcium	26	sm nicotine	81	SYMBICORT	15
ROZLYTREK	32	sm nicotine polacrilex	81	SYMDEKO	82
RUBRACA	32	sodium fluoride	70	SYMLINPEN 120	22
RUCONEST	63	sodium phenylbutyrate	57	SYMLINPEN 60	22
rufinamide	17, 18	solifenacin succinate	85	SYMPAZAN	18
RUKOBIA	38	SOLOSEC	6	SYMTUZA	38
RUXIENCE	32	SOLTAMOX	32	SYNAGIS	78
RUZURGI	29	SOMAVERT	57	SYNAREL	57
RYBELSUS	22	SOOLANTRA	52	SYNJARDY	22
		sotalol hcl	40	SYNJARDY XR	22

SYNTHROID	83	TIGLUTIK	73	TRI-ESTARYLLA	45
TABLOID	33	TILIA FE	45	trifluoperazine hcl	36
TABRECTA	33	timolol maleate	40, 76	trifluridine	76
tacrolimus	52, 71	timolol maleate (once-daily)	76	trihexyphenidyl hcl	35
tadalafil	41	TIMOPTIC OCUDOSE	76	TRIKAFTA	82
tadalafil (pah)	41	tinidazole	28	TRI-LEGEST FE	45
TAFINLAR	33	TIROSINT	83	trimethobenzamide hcl	24
TAGRISSO	33	TIROSINT-SOL	83	trimethoprim	28
TAKHZYRO	63	TIVICAY	39	trimipramine maleate	20
TALTZ	52, 53	TIVICAY PD	39	TRINESSA (28)	45
TALZENNA	33	tizanidine hcl	72	TRINTELLIX	20
tamoxifen citrate	33	TOBI PODHALER	6	TRI-PREVIFEM	45
tamsulosin hcl	60	TOBRADEX	76	TRI-SPRINTEC	45
TARGRETIN	53	tobramycin	6, 76	TRIUMEQ	39
TASIGNA	33	tobramycin-dexamethasone	76	TRIVORA (28)	45
TAVALISSE	63	TOBREX	76	tropicamide	76
TAYTULLA	44	tolcapone	35	trospium chloride er	85
tazarotene	53	tolterodine tartrate	85	TRULICITY	23
TAZORAC	53	tolterodine tartrate er	85	TRUSELTIQ (100MG DAILY DOSE)	33
TAZTIA XT	40	tolvaptan	57	TRUSELTIQ (125MG DAILY DOSE)	33
TAZVERIK	33	topiramate	18	TRUSELTIQ (50MG DAILY DOSE)	33
TEGSEDI	82	topiramate er	18	TRUSELTIQ (75MG DAILY DOSE)	33
telmisartan	27	TOPROL XL	40	TOUJEON SOLOSTAR	22
telmisartan-amlodipine	27	toremifene citrate	33	TRACLEER	41
telmisartan-hctz	27	torsemide	54	tramadol hcl	11
temazepam	66	TYBOST	39	tramadol hcl er	11
temozolomide	33	TYMLOS	57	tramadol hcl er (biphasic)	11
tenofovir disoproxil fumarate	39	TYVASO	41	tramadol-acetaminophen	11
TEPEZZA	57	TYVASO REFILL	42	trandolapril	27
TEPMETKO	33	TYVASO STARTER	42	trandolapril-verapamil hcl er	27
terazosin hcl	27	UCERIS	12	tranexamic acid	66
terbinafine hcl	24	TRELEGY ELLIPTA	15	tranylcypromine sulfate	20
terbutaline sulfate	15	TREMFYA	53	travoprost (bak free)	76
terconazole	86	TRESIBA	23	trazodone hcl	20
teriparatide (recombinant)	57	TRESIBA FLEXTOUCH	23	TRECATOR	29
testosterone	11	tretinoin	33, 53	TRELEGY ELLIPTA	15
testosterone cypionate	11	tretinoin microsphere	53	TREMFYA	53
testosterone enanthate	11	tretinoin microsphere pump	53	TRESIBA	23
tetrabenazine	82	TRETEN	63	TRESIBA FLEXTOUCH	23
tetracycline hcl	83	TREXALL	33	tretinoin	33, 53
TEXACORT	53	triamicinolone acetonide	53, 71, 72	tretinoin microsphere	53
THALOMID	71	triamterene	54	tretinoin microsphere pump	53
THEO-24	15	TRETEN	63	TREXALL	33
theophylline	15	triamicinolone acetonide	53, 71, 72	triamicinolone acetonide	53, 71, 72
theophylline er	15	triamterene	54	triamterene	54
THERMAZENE	53	triamicinolone acetonide-hctz	54	triamterene-hctz	54
THIOLA EC	60	triazolam	66	triamterene-hctz	54
thioridazine hcl	36	trientine hcl	71	triazolam	66
thiothixene	36			trientine hcl	71
THYQUIDITY	83				
tiagabine hcl	18				
TIBSOVO	33				

valsartan.....	27	VUMERTY	82	XPOVIO (60 MG TWICE
valsartan-hydrochlorothiazide....	27	VYEPTI.....	69	WEEKLY).....
VALTOCO 10 MG DOSE.....	18	VYLEESI.....	82	XPOVIO (80 MG ONCE
VALTOCO 15 MG DOSE.....	18	VYNDAMAX.....	42	WEEKLY).....
VALTOCO 20 MG DOSE.....	18	VYNDAQEL.....	42	XPOVIO (80 MG TWICE
VALTOCO 5 MG DOSE.....	18	VYONDYS 53.....	73	WEEKLY).....
vancomycin hcl.....	28	VYVANSE.....	5	XTANDI.....
VANDAZOLE.....	86	VYZULTA	76	XURIDEN
vardenafil hcl.....	42	WAKIX.....	5	XYNTHA.....
VASCEPA	26	warfarin sodium.....	16	XYNTHA SOLOFUSE.....
VECAMYL.....	27	WEGOVY	5	XYREM.....
VELETRI.....	42	WELIREG.....	33	XYWAV.....
VELIVET.....	45	WILATE.....	63	YASMIN 28.....
VELTASSA.....	71	WINLEVI.....	53	YAZ.....
VEMLIDY.....	39	WIXELA INHUB.....	15	zaflukast.....
VENCLEXTA.....	33	WYMZYA FE.....	45	zaleplon.....
VENCLEXTA STARTING PACK.....	33	XADAGO.....	35	ZARXIO.....
venlafaxine hcl.....	20	XALKORI.....	33	ZEGERID.....
venlafaxine hcl er.....	20	XARELTO	16	ZEJULA.....
VENTAVIS.....	42	XARELTO STARTER PACK 16	16	ZELBORAF.....
verapamil hcl.....	41	XATMEP.....	33	ZENPEP
verapamil hcl er.....	40, 41	XCOPRI	18	ZEPOSIA.....
VERQUVO	42	XCOPRI (250 MG DAILY DOSE)	18	ZEPOSIA 7-DAY STARTER PACK.....
VERSACLOZ.....	36	XCOPRI (350 MG DAILY DOSE)	18	ZEPOSIA STARTER KIT.....
VERZENIO.....	33	XELJANZ.....	8	zidovudine.....
VESICARE LS.....	86	XELJANZ XR.....	8	ZIEXTENZO.....
VIBERZI	60	XELPROS.....	76	zileuton er.....
VIBRAMYCIN.....	83	XEMBIFY.....	78	ZIOPTAN.....
VICTOZA	23	XENICAL.....	5	ziprasidone hcl.....
vigabatrin.....	18	XENLETA.....	28	ZIRGAN.....
VIIBRYD.....	20	XEOMIN.....	73	ZOKINVY.....
VIIBRYD STARTER PACK.....	20	XEPI.....	53	ZOLINZA.....
VIMIZIM.....	57	XERMELO.....	60	zolmitriptan.....
VIMPAT	18	XGEVA.....	57	zolpidem tartrate.....
VIOKACE.....	54	XIAFLEX.....	71	zolpidem tartrate er.....
VIRACEPT	39	XIFAXAN	28	ZOLPIMIST.....
VIREAD	39	XIGDUO XR	23	zonisamide.....
virtussin dac.....	46	XIIDRA	76	ZONTIVITY.....
VISTOGARD	23	XOFLUZA (40 MG DOSE).....	39	ZORBTIVE.....
VITAFOL-OB+DHA.....	72	XOFLUZA (80 MG DOSE).....	39	ZOVIA 1/35E (28).....
vitamin d (ergocalciferol).....	86	XOLAIR.....	15	ZUBSOLV.....
vitamin d3.....	86	XOSPATA.....	33	ZULRESSO.....
VITRAKVI.....	33	XPOVIO (100 MG ONCE WEEKLY).....	34	ZUPLENZ.....
VIVITROL.....	23	XPOVIO (40 MG ONCE WEEKLY).....	34	ZYDELIG.....
VIZIMPRO.....	33	XPOVIO (40 MG TWICE WEEKLY).....	34	ZYFLO.....
VONVENDI.....	63	XPOVIO (60 MG ONCE WEEKLY).....	34	ZYKADIA.....
voriconazole.....	24			ZYLET.....
VOSEVI	39			
VOTRIENT.....	33			
VPRIIV.....	65			
VRAYLAR.....	36			